

**Provident Hospital Quality & Performance Improvement Committee
Summary Report to the Medical Executive Committee (MEC)
For June 2024**

Chair: Dr Loafman

Meeting Date: April 27th 11:00am-12:30pm via WebEx

Regular or Special Meeting: Regular

Minutes/Attendance: Minutes are attached for review at MEC, summary only for QPS

April Highlights

Regulatory Report outs for TJC compliance

8 West

PC.01.02.01 EP 1 – Number of Telemetry Strips with RN Analysis every 8 hours / 8-hour Increments while Patient on Telemetry

- **70/70 100% Compliance**

PC.04.01.05 EP 7 – Number of Patients Discharged with Follow up Healthcare Appointment / Number of Patients Discharged

- **76/76 100% Compliance**

RC.01.01.01 EP 5 – Number of Discharge Nursing Notes on Correct Patient / Number of Patients Discharged

- **76/76 100% Compliance**

MS.01.01.01 EP5 – Number of Consults Completed with a Consult Note within 48 hours / Number of Consult Orders

- **52/52 (2 Neurology Consults) 100% Compliance**

ICU

PC.02.01.03 EP 1 – Number of Titrated Medications given by nurse with an order / Number of Titrated Medication Orders

- **1/1 100% Compliance (ICU closed intermittently)**

Pharmacy

- Appropriate use of anticoagulants: Q4 2023 was 100%
- The total # of Rx's dispensed in the Outpatient Pharmacy for the 1st Qtr. of 2024 was 25,559 with an overall medication fill accuracy rate of 99.99%
- The total # of doses dispensed in the Inpatient Pharmacy for the 1st Qtr. of 2024 was 60,817 with an overall medication fill accuracy rate of 99.9% (Goal = 100%)

Inpatient Care coordination

- Patients seen within 48 hours of admit was 91% for Q1/2024
- 2024 Denials upheld went up to 42% in March from a low of 19% in February
- Positive outcomes of denials was 80% for Q1 of 2024.

There are no action items for the MEC Committee.

There are no actions for the QPS Committee.