Stroger Hospital Quality Improvement & Patient Safety (HQuIPS) Committee
Summary Report to the Executive Medical Staff (EMS) Committee and Quality and Patient Safety (QPS) Committee
August 2021

Chair: Dr. Pierko
Meeting Date: June 22nd, 2021, 12-1:30PM via WebEx
Regular or Special Meeting: Regular
Minutes/Attendance: Minutes are **a**ttached for review at EMS, summary only for QPS

May Reports:

>Quality Update
>Quality HRO Dashboard
>Patient Safety
>ACHN
>Utilization Management
>Process of care

HRO Dyad Reports

>Readmissions

Summary: Majority of indicators favorable to goal. Topics of discussion/follow-up included:

>Quality Update: The HQIC (Hospital Quality Initiative Contractors) initiative is moving forward and will be developing goals for opioid stewardship, CLABSI, CAUTI, and sepsis.
>Quality HRO Dashboard: The Patient Experience Press Ganey scores that are showing improvement are care transition, response of hospital staff, and communication about medicine in Q12021.
>Patient Safety: The total number of serious safety events has been decreasing at Stroger for March, April, and May 2021.
>ACHN: The overall Hba1C screening rates has increased every month for 3 months in a row for March, April, and May 2021.
>Process of Care: The C-Difficile SIR decreased to 0.88 with a benchmark of 1.0. The number of compliant hand hygiene observations increased to compliance in May and the overall number of observations met 100% of the target of 200 observations per unit.

There are no action items for the EMS Committee.
There are no actions for the QPS Committee.

Provident Hospital Quality & Performance Improvement Committee
Summary Report to the Executive Medical Staff (EMS) Committee and Quality and Patient Safety (QPS) Committee
August 2021

Chair: Dr. Arnold Turner
Meeting Date: July 1, 2021 (June meeting) 9:00am to 10:30am via WebEx
Regular or Special Meeting: Regular
Minutes/Attendance: Minutes are **a**ttached for review at EMS, summary only for QPS

June Reports:

>Patient Safety
>HIM
>Core Measures
>ACHN Primary Care and Specialty Care
>EMERS report

Summary: Majority of indicators favorable to goal. Topics of discussion/follow-up included:

>Patient Safety -Total number of events reported showing a decrease from Jan-May 2021
>HIM - March and April was 100% compliant with completing records within 24 hours.
>Core Measures- VTE 1 eCQM, (electronically submitted core measures) Performed well with an average of 99% for Jan-Mar 2021. The benchmark is 99%.
>EMERS Report- There were no medication scanning issues or patient falls with injuries in May, 2021.

There are no action items for the EMS Committee.
There are no actions for the QPS Committee.