

# MBOIP Patient Safety & Outpatient Measures - 2Q 2018

## MONTANA AGGREGATE

Performance Snapshot	PEER 1	PEER 2	PEER 3	PEER 4	PEER 5	MT	U.S.
<b>PATIENT SAFETY/INPATIENT</b>							
IMM-2: Inpatient Influenza Immunization Rate (Q4 Q1)							
ED-1: Median time (min.) from ED Arr.to Dep. for Admitted ED Patients	163	149	129	120	94	131	187
ED-2: Median Admit decision time (min) to ED Dep. for Admitted ED patients	46	45	8	19	3	15	42
OP-27 Healthcare Worker Influenza Imm. (yearly Q1)	93%	91%	82%	84%	78%	89%	90%
Antibiotic Stewardship Program Criteria (# out of 7 criteria) (Yearly Q4) (MT & US is the % of CAHs with all 7 criteria)	6	7	6	5	6	38%	58%
<b>OUTPATIENT</b>							
<b>AMI &amp; CHEST PAIN</b>							
OP-2 Rate: Fibrinolytic Therapy w/l 30 min. ED arrival	50%	80%	40%	0%	0%	53%	49%
OP-3 Median time to transfer for Acute CI	139	NA	NA	0	171	171	69
OP-5 Median Time to ECG in ED	9	8	7	5	4	7	7
<b>ED THROUGHPUT</b>							
OP-18 Median Time from ED Arrival to Departure	113	115	99	92	74	93	104
OP-22 Patient left without being seen (yearly Q4)	1.2%	0.6%	0.8%	0.2%	0.4%	1.0%	1.0%

NA - Zero cases reported or case reported did not meet eligibility; counts for participation  
 NR - No data reported

### Red Light/Green Light Performance Definitions.

OP-22 is not rated due to consistently positive scores.

#### Rates (percentages)

> 90% - At goal or standard
80-89% - Needs Improvement
< 80% - Needs Attention

#### ED Throughput Median Times

There are many factors out of the control of the hospital and provider that can affect ED throughput times.

Per 2013 Ivantage National Rural Emergency Department Study data indicates that patient satisfaction scores decrease when ED throughput times are less than times within the 90th percentile.

[link to iVantage report](#)

At or better than goal
Within 10% of goal
Below goal

#### Cardiac Care Median Times (AMI/CP)

Per CMS Specification Manual

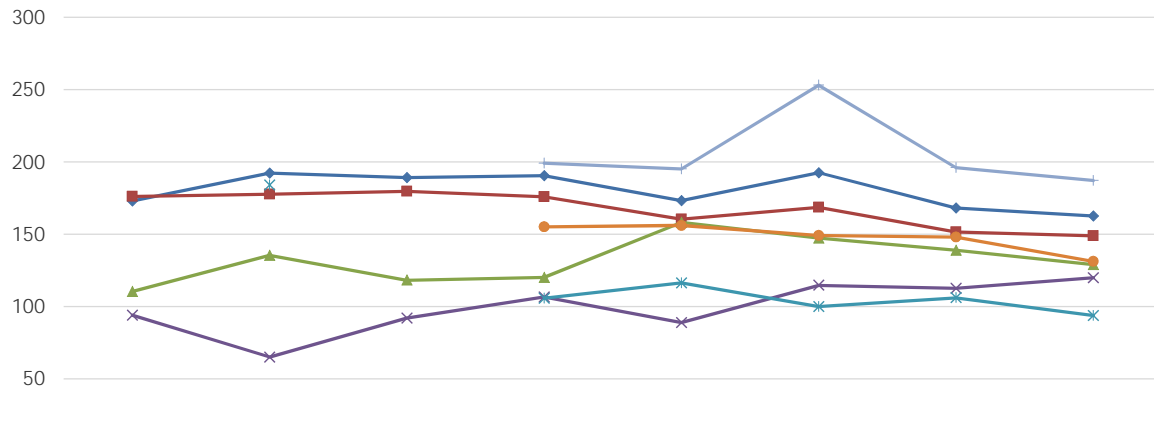
OP-3	OP-5
< 90 minutes - At goal or standard	< 10 minutes - At goal or standard
91-110 minutes - Needs Improvement	11-15 minutes - Needs Improvement
> 100 minutes - Needs Attention	>15 minutes - Needs Attention

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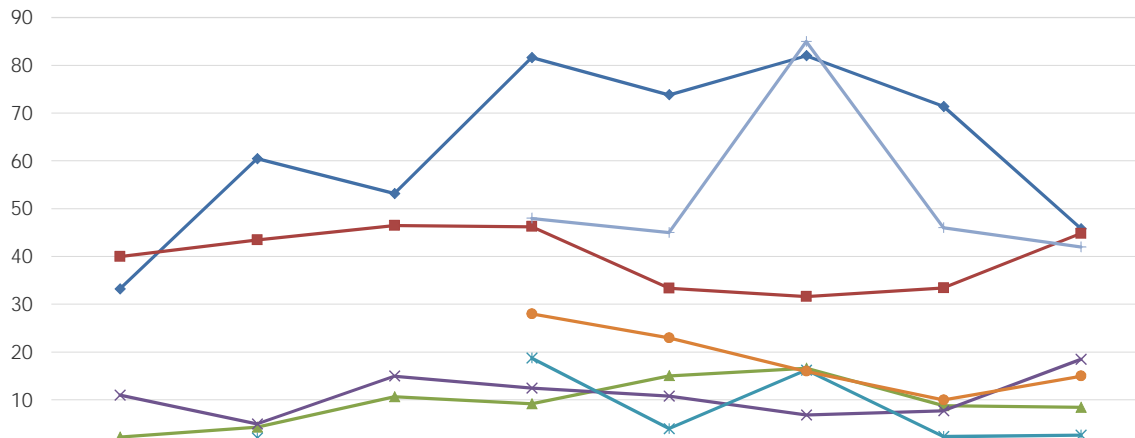
### INPATIENT ED THROUGHPUT

#### ED-1: Median time (min.) from ED Arr.to Dep. for Admitted ED Patients



	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	173	192	189	191	173	193	168	163
Peer Group 2	176	178	180	176	160	168	152	149
Peer Group 3	110	135	118	120	158	147	139	129
Peer Group 4	94	65	92	107	89	115	113	120
Peer Group 5		184		106	116	100	106	94
State Avg.				155	156	149	148	131
National Avg.				199	195	253	196	187

#### ED-2: Median Admit decision time (min) to ED Dep. for Admitted ED patients



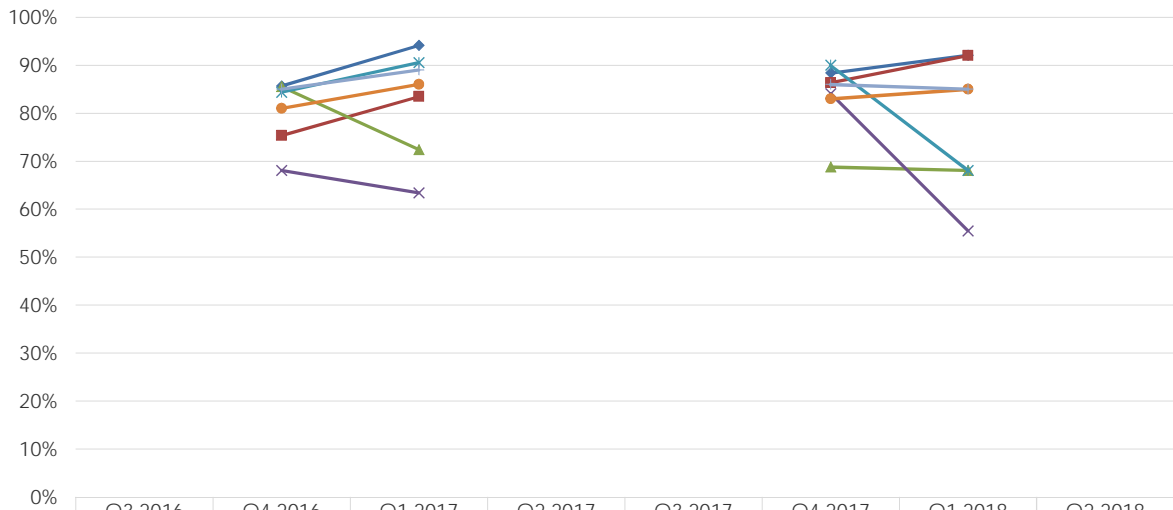
	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	33	61	53	82	74	82	71	46
Peer Group 2	40	44	47	46	33	32	33	45
Peer Group 3	2	4	11	9	15	17	9	8
Peer Group 4	11	5	15	13	11	7	8	19
Peer Group 5		2		19	4	16	2	3
State Avg.				28	23	16	10	15
National Avg.				48	45	85	46	42

# MBQIP Patient Safety & Outpatient Measures - 2Q 2018

## MONTANA AGGREGATE

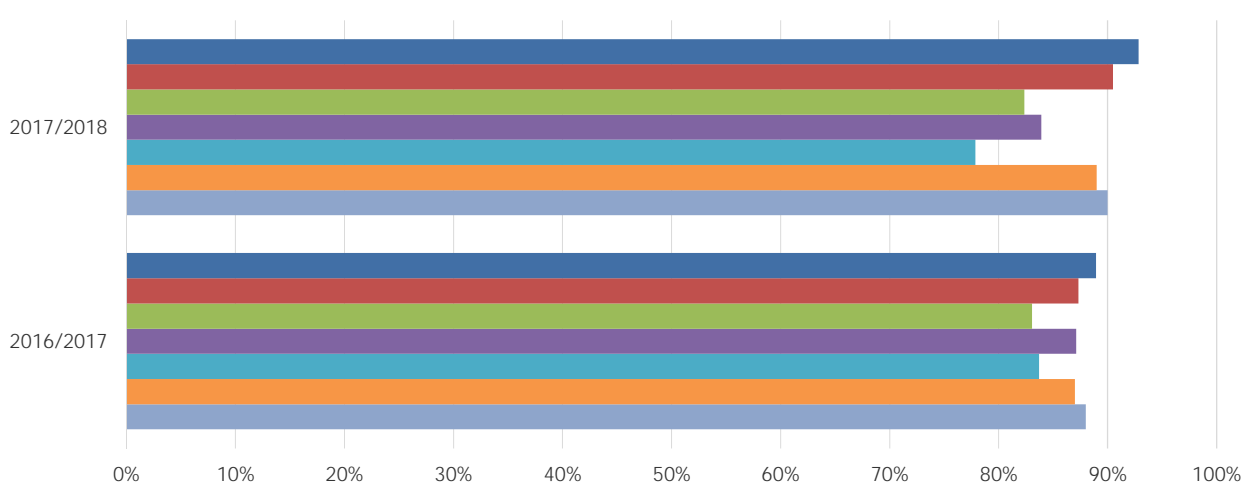
### PATIENT SAFETY

#### Imm-2 : Inpatient Influenza Immunization Rate



	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1			94%				92%	
Peer Group 2		75%	83%			86%	92%	
Peer Group 3		86%	72%			69%	68%	
Peer Group 4		68%	63%			84%	55%	
Peer Group 5		84%	91%			90%	68%	
State Avg.		81%	86%			83%	85%	
National Avg.		85%	89%			86%	85%	

#### OP-27 Healthcare Worker Influenza Immunization

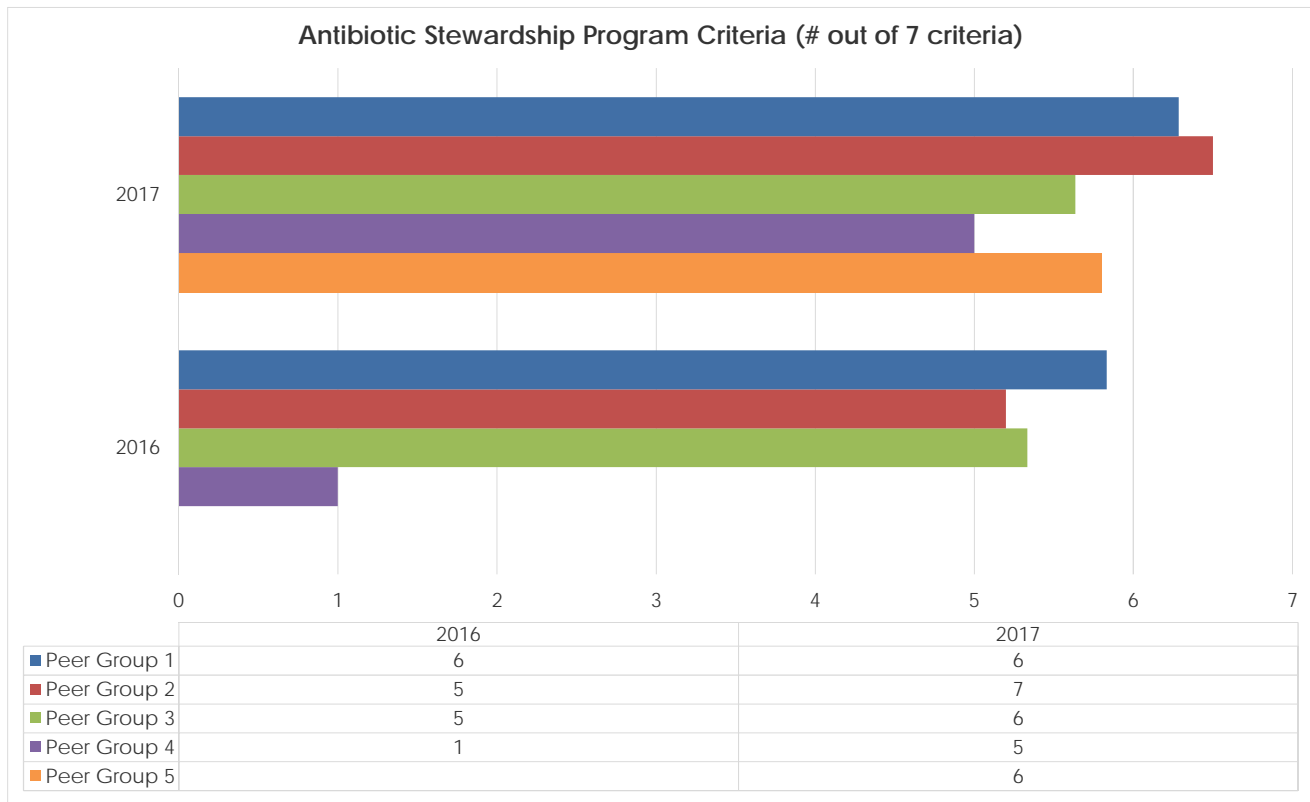


	2016/2017	2017/2018
Peer Group 1	89%	93%
Peer Group 2	87%	91%
Peer Group 3	83%	82%
Peer Group 4	87%	84%
Peer Group 5	84%	78%
State Avg.	87%	89%
National Avg.	88%	90%

# MBQIP Patient Safety & Outpatient Measures - 2Q 2018

## MONTANA AGGREGATE

### PATIENT SAFETY



### Antibiotic Stewardship Program Notes:

There is 7 core elements of an ABS (antibiotic stewardship program) as reported in the NHSN Facility Annual Survey. This graph shows the number out of seven criteria each peer group has attained.

When looking at state and national data, we look at how many CAHs have reached the goal to have 7 out of 7 criteria of the program.

2016 - 13% MT CAHs have 7 of 7 criteria      2016 - No data for US CAHs

2017 - 38% of MT CAHs have 7 of 7 criteria      2017 - 58% of US CAHs have 7 of 7 criteria

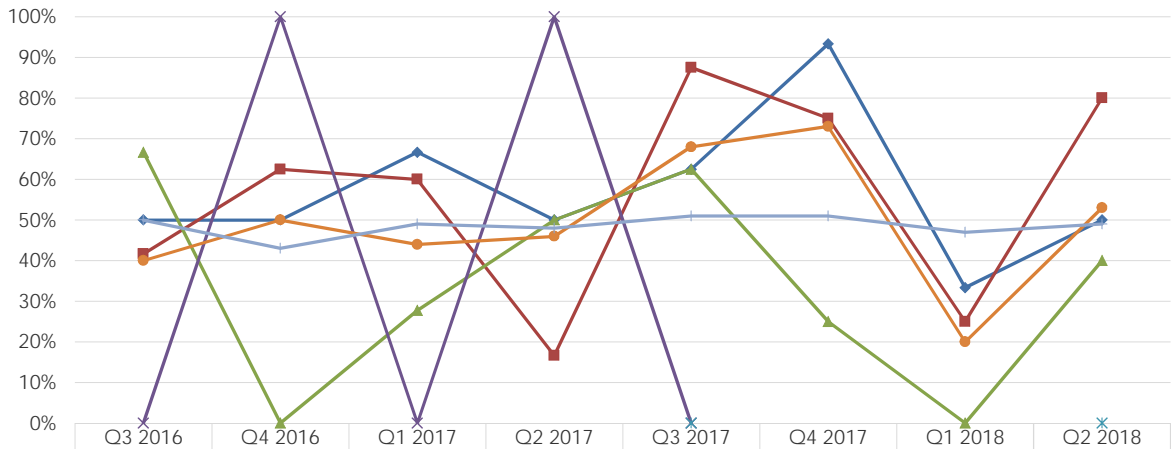
[More information on ABS can be found on the PIN Website at www.mtpin.org/antibiotic-stewardship](http://www.mtpin.org/antibiotic-stewardship)

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## MONTANA AGGREGATE

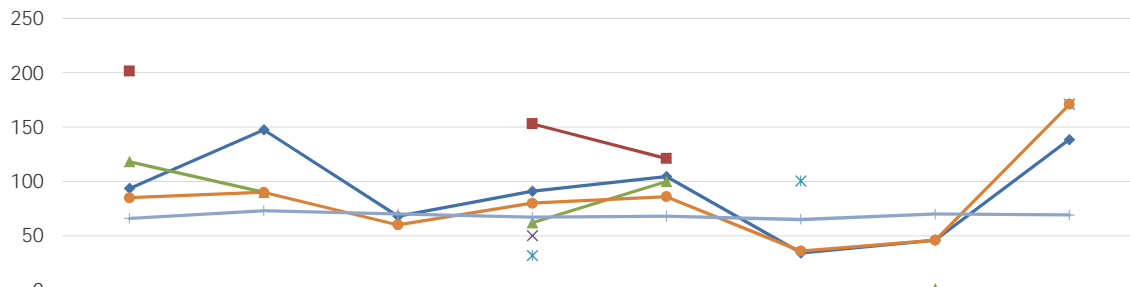
### OUTPATIENT AMI & CHEST PAIN

OP-2: Rate - Fibrinolytic Therapy Received w/i 30 min.



	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	50%	50%	67%	50%	63%	93%	33%	50%
Peer Group 2	42%	63%	60%	17%	88%	75%	25%	80%
Peer Group 3	67%	0%	28%	50%	63%	25%	0%	40%
Peer Group 4	0%	100%	0%	100%	0%			
Peer Group 5					0%			0%
State Avg.	40%	50%	44%	46%	68%	73%	20%	53%
National Avg.	50%	43%	49%	48%	51%	51%	47%	49%

OP-3b: Median Time to Transfer for Acute Coronary Intervention



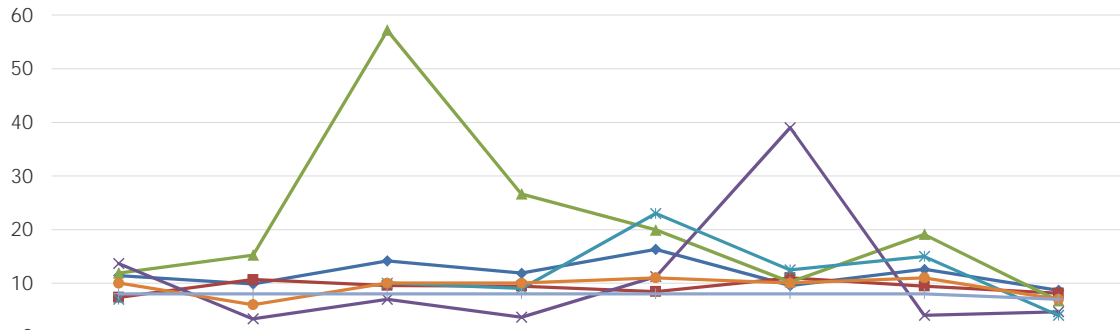
	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	94	148	68	91	105	34	46	139
Peer Group 2	202			153	121			
Peer Group 3	118	90		62	100		1	
Peer Group 4				50				
Peer Group 5				32		101		171
State Avg.	85	90	60	80	86	36	46	171
National Avg.	66	73	70	67	68	65	70	69

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## MONTANA AGGREGATE

### OUTPATIENT CHEST PAIN

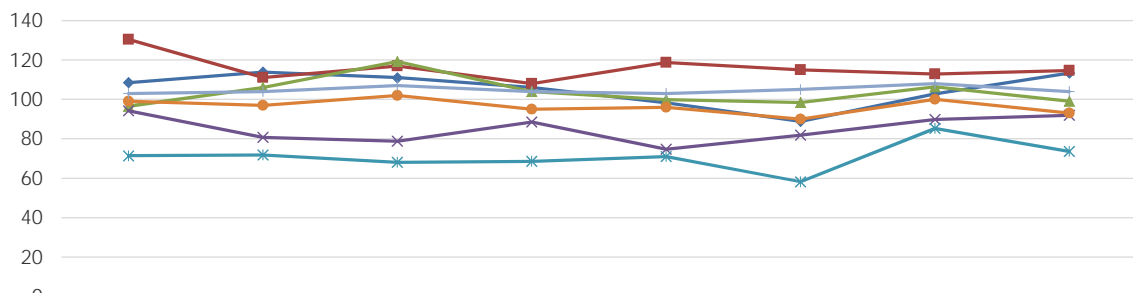
#### OP-5: Median Time to ECG



	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	11	10	14	12	16	10	13	9
Peer Group 2	7	11	10	9	8	11	9	8
Peer Group 3	12	15	57	27	20	10	19	7
Peer Group 4	14	3	7	4	11	39	4	5
Peer Group 5	7		10	9	23	13	15	4
State Avg.	10	6	10	10	11	10	11	7
National Avg.	8	8	8	8	8	8	8	7

### OUTPATIENT ED THROUGHPUT

#### OP-18b: Median Time from ED Arrival to ED Departure for *Discharged* ED Patients



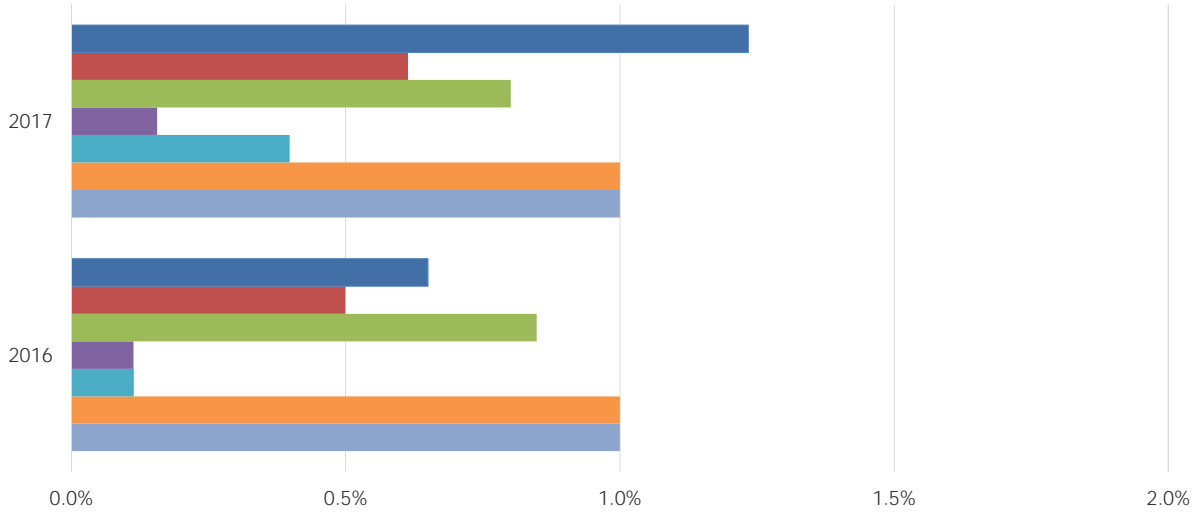
	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Peer Group 1	109	114	111	106	98	89	103	113
Peer Group 2	130	111	117	108	119	115	113	115
Peer Group 3	97	106	119	104	100	98	106	99
Peer Group 4	94	81	79	89	75	82	90	92
Peer Group 5	71	72	68	69	71	58	85	74
State Avg.	99	97	102	95	96	90	100	93
National Avg.	103	104	107	104	103	105	108	104

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### OUTPATIENT ED THROUGHPUT

OP-22 Patient Left Without Being Seen (Yearly)



	2016	2017
Peer Group 1	0.7%	1.2%
Peer Group 2	0.5%	0.6%
Peer Group 3	0.8%	0.8%
Peer Group 4	0.1%	0.2%
Peer Group 5	0.1%	0.4%
State Avg.	1.0%	1.0%
National Avg.	1.0%	1.0%