

# Clark Fork Valley Hospital Dashboard Report

INDICATOR	YTD 2020	Bench Mark 2020	4th Qtr 2021												YTD 2021	Bench Mark 2021	Legend	
			Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21				
<b>Satisfaction Indicators</b>																		
CG-CAHPS: Overall Provider	80/89		84.7	79.8	78.3										79.8	>80.6	LEM	
HCAHPS: Percentile Overall	75/73		93	91	72.7										76.7	>56	LEM	
ER: Overall Score	77/68	NRC Picker Quarterly Positive Response Average CFVH / NRC ***Rolling 12 mth average	1st Qtr 79/69	2nd Qtr 74/69	3rd Qtr 68/68										72/68			
Outpatient Surgery: Overall Score	78/87		1st Qtr 82/87	2nd Qtr 100/87	3rd Qtr 94/88										86/88			
Outpatient Rehab: Overall Score	90/87		1st Qtr 83/87	Insufficient data	Insufficient data										84/87			
Lab: Overall Score	77/85		1st Qtr 79/85	2nd Qtr 78/85	3rd Qtr 83/85										82/85			
Radiology: Overall Score	86/85		1st Qtr 80/85	2nd Qtr 83/85	3rd Qtr 92/85										81/85			
<b>Safety Indicators</b>																		
Total Number Med Error Events	6.6	13.0	1.03	2.35	0.00	5.77	0.00	2.20	1.02	0.00	1.37	3.37	6.31		2.15	<4.87	AJHSP	
# NH Falls/1000 Patient Days	1.6	<8.2	3.8	4.3	3.9	4.3	2.7	2.8	6.6	2.6	1.4	9.3	1.4		3.9	<3.4	PIN	
# SWB Falls/1000 Patient Days			0.0	14.5	0.0	25.0	9.7	0.0	0.0	47.6	0.0	0.0	47.6		10.2	<3.4	PIN	
# Hospital Falls/1000 Patient Days	3.5	<8.2	22.5	6.3	5.0	5.9	7.3	10.6	4.5	7.2	7.9	18.5	3.8		9.0	<3.4	PIN	
Total # falls w/Moderate/Severe Injury	0.3	0.0	0	0	1	0	0	0	0	0	0	0	0		0.0	0.0	CFVA	
Total # falls with Minimal Injury	0.3	<0.8	2	1	0	3	0	0	2	0	1	1	0	0.8	0.9	<0.7	CFV3A	
# Work Comp OSHA Recordable	0.3	1.4	0	0	0	1	0	1	1	0	2	0	1		6	monitor	LEM	
OSHA TRIR (YTD)	0.0		YTD adjusted Qtrly												3.58	<4.61	LEM	
# Work Related Violence			0	0	0	0	0	0	0	0	0	0	0		0	monitor	CFVA	
# Harm Due to Patient Handling			0	1	1	0	1	1	1	1	1	0	0		5	monitor	CFVA	
<b>Volume Indicators</b>																		
Acute Care ALOS/Hrs	75	< 96	90	81	96	74	79	85	79	92	100	99	99		94	89	< 96	CAH
Acute care ADC	3.9	4.1	5.2	5.1	6.0	5.0	3.6	5.4	6.6	3.9	7.8	6.2	7.9		6.50	5.8	4.1	CFVB
# Observation hours	468	659	402	521	408	429	626	583	429	383	403	576	554		469	498	659	CFVB
# ER visits	290	333	306	247	307	325	371	380	415	372	362	335	401		377	370	333	CFVB
ED Transfer Rates %	4.95	<4.65	7.52	5.67	5.54	4.00	5.12	6.05	4.58	2.15	2.49	4.78	4.24		4.66	<5.82	CFV3A	
LTC ADC	26.4	27.0	25.5	24.7	24.8	23.3	23.5	24.0	24.3	25.0	24.4	24.4	23.3		24.3	24.0	27.0	CFVB
Swing Bed ADC	2.1	3.1	2.3	2.5	2.1	2.7	3.3	2.6	1.3	0.7	2.0	0.6	0.7		1.1	1.1	3.1	CFVB
Home Health Episodes			6	12	8	6	9	10	36	36	5	7	10		19	15	11	CFVB
Hospice Days			242	163	138	152	159	174	287	302	206	199	194		238	209	180	CFVB
# Total OP Visits	2720	2713	2600	2927	3361	3071	3034	3421	3092	3538	4125	3649	3703		3621	3454	2588	CFVB
Surgery Minutes	3359	4053	3512	3903	3161	4655	3202	2857	3509	3521	2262	735	693		2144	2679	4053	CFVB
Family Medicine Network - Visits	1692	1946	1384	1603	1780	1781	1572	1665	1621	1626	1562	1513	1519		1568	1607	1926	CFVB
<b>Financial Indicators</b>																		
Days Cash On Hand		>93	238	230	234	242	254	265	268	277	272	294	309				>122.4	CFVS
EBITDA		205714															212647	CFVB
% S & B /NR	65	<61	59	54	59	58	63	58	53	62	61	64	62		60	<61	CFVS	
Days in AP		<35.0	42	41	53	33	28	26	31	27	26	24	23				<30.7	CFVS
Days in AR		<40	46	45	42	40	42	41	44	39	43	44	43				<40	CFVS
n/a = no or low data      Legend <span style="color: red;">Alert</span> (> 19% off target) <span style="color: orange;">Caution</span> (10 - 19% off target) <span style="color: yellow;">(1 - 9% off Target)</span> <span style="color: green;">At Goal or Above</span>																		
<b>LEGEND:</b> CFVA = Prior Year Average/CFV3A = Prior 3 Year Average/CFVB= Budget/CFVS = Strategic Plan/VHA = Volunteer Hospitals of America/CAH = Critical Access Hospital																		
Nat = National/NCQA = National Committee for Quality Assurance/CMS = Centers for Medicare and Medicaid Services/MBQIP = Medicare Beneficiary Quality Improvement Project																		
HQIO = Hospital Quality Improvement Organization/LEM = Leadership Evaluation Management/NHSN = National Healthcare Safety Network/SSI = Surgical Site Infection Event																		
AJHSP = American Journal Health System Pharmacy/PIN = Performance Improvement Network/FMN - Family Medicine Network																		



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QUALITY INDICATORS	YTD 2020	Bench Mark 2020	2021												4th Qtr 2021	YTD 2021	Bench Mark 2021	Legend		
			Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21						
<b>Serious Reportable Events</b>	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0	0.0	CFVS
<b>Hospital Quality Measures</b>																				
HAI Acute Care/1000 Patient Days	0.00	<4.00	0.0	0.0	0.0	0.0	0.0	0.0	6.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.53	<3.00	NHSN	
HAI Swing Bed/1000 Patient Days	2.57	<4.00	0.0	0.0	0.0	0.0	0.0	0.0	12.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.70	<3.00	NHSN	
IP Surviving Sepsis measures - 3hr %			100	100	n/a	n/a	n/a	100	100	100	0	n/a	n/a							
Unplanned readmission w/in 30 days %	3.4	<10.0	4.4	2.5	11.5	2.0	0.5	0.0	4.8	0.0	1.8	2.0	0.0		Y-AVG	2.9	<10.0	HQIO		
Inpatient AMA (%)	0.6	<2.2	0.0	0.0	0.0	1.8	2.7	0.0	0.0	0.0	0.0	0.0	1.6		Y-AVG	0.6	<2.2	Nat		
<b>ER Quality Measures</b>																				
ER Surviving Sepsis measures - 3hr %			100	100	100	100	n/a	100	100	100	0	100	100							
Acute MI Core Measures (ER)- % Met	96	>97%	100	100	100	100	100	100	100	100	n/a	n/a	n/a			100	>97%	CFVS		
Unplanned Return to ER w/in 72 Hrs	1.1	<3.51	1.6	0.0	1.0	0.0	0.0	0.0	0.7	0.5	1.4	0.0	1.0		Y-AVG	0.8	<2.04	CFV3A		
ED Transfer Communication Composite	93	100	91	100	93	100	96	89	93	100	93	100	95			96	100	MBQIP		
<b>Surgery Quality Measures</b>																				
Surgical Core Measures - % Met	100	>97%	100	100	100	100	100	100	100	100	100	100	100			100	>97%	CFVS		
Unplanned return to surgery	0.0	<2.57	0	0	0	0	0	0	1	0	0	0	1		0.4	0.3	<2.57	VHA		
Unplanned adm after OP Surg	0.1	0.0	0	0	0	0	0	0	0	0	0	0	1		0.2	0.1	0.0	CFVA		
HAI Surgical	0.73	<2.00	0.0	0.0	0.0	2.9	0.0	2.3	0.0	0.0	0.0	0.0	0.0			0.60	<2.00	SSI		
<b>Long Term Care Quality Measures</b>																				
HAI LTC/1000 Patient Days			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.3			0.4	<3.00	NHSN		
<b>Promoting Interoperability</b>																				
Stroke:Antithrombotic A Fib/Aflutter			2021 Q1			2021 Q2			2021 Q3			2021 Q4								
Stroke:Antithrombotic if by hosp day 2			n/a			100.00%			50.00%											
Stroke:Antithrombotic at discharge			n/a			100.00%			100.00%											
Stroke: Discharged on statin			n/a			100.00%			100.00%											
VTE Prophylaxis			92.60%			89.40%			93.80%											
ED time from admit decision to ED departure Not mental health			16m			24m			23m											
ED time from admit decision to ED departure mental health			33m			0m			7m											
<b>ACO All Clinics</b>																				
Depression Screening & FU CMS 2			55.48%			76.38%			80.21%								≥70%	FMN		
Hemoglobin A1C>9 CMS 122			35.36%			28.98%			18.32%								≤25%	FMN		
Breast Cancer Screening CMS 125			52.02%			54.13%			55.43%								≥65%	FMN		
Colorectal Cancer Screening CMS 130			53.82%			53.85%			58.22%								≥65%	FMN		
Tobacco Use and cessation CMS 138			82.68%			84.97%			89.56%								≥94%	FMN		
Falls:Screening for further fall risk CMS 139			41.36%			49.52%			64.23%								≥50%	FMN		
Controlling High BP CMS 165			68.40%			69.09%			75.50%								≥75%	FMN		
Influenza Vaccination CMS 147			33.48%			48.37%			43.11%								≥45%	FMN		
Pneumonia Vaccination CMS 127			70.36%			55.55%			71.97%								≥65%	FMN		
Childhood Immunization CMS 117																				
Current medications documented in record CMS 68			81.58%			95.93%			96.22%								≥88%	FMN		
<b>Diabetes Recognition Program (DRP) All Clinics</b>																				
% Pt with HBA1C > 9.0%			8.58%			10.19%			8.89%								≤ 15%	NCQA		
% Pt with HBA1C < 8.0%			81.07%			80.19%			83.39%								≥65%	NCQA		
% Pt with HBA1C < 7.0%			54.53%			51.13%			55.20%								≥40%	NCQA		
BP Control ≥140/90 mm Hg			33.21%			35.42%			32.84%								≤ 35%	NCQA		
Eye Examination			37.04%			35.84%			34.32%								≥60%	NCQA		
Smoking & Tobacco Use			99.29%			99.08%			98.74%								≥85%	NCQA		
Nephropathy Evidence			82.73%			76.05%			63.84%								≥85%	NCQA		
Foot Examination			55.78%			58.81%			61.35%								≥80%	NCQA		
n/a = no or low data		Legend		Alert (> 19% off target)			Caution (10 - 19% off target)			(1 - 9% off Target)			At Goal or Above							
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