**FY2015 Annual Quality & Performance Improvement Appraisal Executive Summary**

Consistent with the Clinical Affairs Committee’s central engagement on quality and safety issues at UTMC, and in compliance with requirements of the TJC, management provides ongoing status updates on our efforts to deliver excellent clinical programs to the board.

Annually the CAC approves the performance improvement plan. Summarized below are the accomplishments against theFY2015 plan as well as ongoing opportunities for improvement.

**Accomplishments:**

* Reduced hospital acquired infections by 51%, including urinary tract infections, blood stream infections, and surgical site infections.
* Added additional staff in key areas such as Patient Care Technicians and Operating Room. - Staffing which reflects appropriate number and skill mix
* Improved patient throughput, resulting in decreased times to admission and patients being held in the Emergency Department
* Reduced overall hospital readmissions
* Improvement in patient satisfaction with increased percentile ranking in acute care (14th percentile), ED (24nd percentile), and ambulatory outpatient surgery (50th percentile)
* Sustained improvements made in SCIP, Acute MI, VTE, Immunizations, and CHF Core measures
* Maintained 100% compliance with sedation monitoring
* Increased medication error reporting while decreasing harm scores associated with errors
* Improved reporting of adverse drug reactions
* 74% of employee respondents rated the organization as excellent or very good in the annual Culture of Safety Survey
* Minimal use of restraints in Medical Surgical units and Behavioral Health consistent with national guidelines
* Improved mortality review process through the implementation of a timely electronic mortality module and pre-screening by Quality staff.
* Maintained 0% medical record delinquency rate

**Opportunities:**

* Continue to monitor Infection control opportunities especially in the area of surgical site infections.
* Reduce patient falls with injury to zero.
* Continued reductions in readmissions
* Improve percentile ranking for patient satisfaction in acute care to 25th percentile and 50th percentile for ED.
* Reduction in sepsis mortality and length of stay – New Core Measure beginning in October, 2015.
* Reduce the number of medication errors reaching the patient.
* Reduce safety events related to 2 patient identifiers. (wrong patient registration, wrong x-ray)