

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.70	0.00	0.00	0.00	
	NDNQI	0.14	0.19	0.25	0.13	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.03	0.06	0.08	0.05	
<b>RN Education</b>						
RNs w BSN or Higher		50.00%	50.00%	60.00%	60.00%	
	NDNQI	64.98%	64.50%	62.80%	64.27%	
	Unit Goal					
RNs w Professional Certification		0.00%	0.00%	0.00%	0.00%	
	NDNQI	27.66%	28.15%	27.82%	28.17%	
	Unit Goal					
<b>Patient Satisfaction - CardRh</b>						
Likelihood recommending	Top Box%	NA	NA	75.0	85.7	
	Press Ganey			83.0	83.2	
Staff worked together to provide care	Top Box%	NA	NA	75.0	100.0	TeamSTEPPS program 1st Q '19
	Press Ganey			82.1	82.3	
Response to concerns/complaints	Top Box%	NA	NA	50.0	85.7	Humanism Class in 2019.
	Press Ganey			78.8	79.2	

NDNQI -

National Database of Nursing Quality Indicators

NA-Not Available; ND-No Data

NDNQI Benchmark - All Hospitals Mean

Key:

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		1.56	0.00	1.66	0.00	Emphasize and continue identification of high risk fall pts.
	NDNQI	1.17	1.12	1.08	1.08	
Falls with Injury Per 1,000 Patient Days		0.00	0.00	0.00	0.00	
	NDNQI	0.21	0.19	0.21	0.18	
Hospital Acquired Pressure Injury (Stage II & Above)	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	5.05	4.04	4.15	4.28	
Restraints	Prevalence	0.00	0.00	14.29	0.00	Review necessity for clinical decisions w restraint usage. Limit duration of time.
	NDNQI	14.95	13.80	13.93	13.57	
Hospital Acquired Pressure Injury (Stage II & Above)	Incidence	0.00	0.18	0.66	0.00	Emphasize all prophylactic interventions/strategies early Consult w WOCN RNs and/or Skin Champions suspected injury.
	Northwell Goal	<.45				
Central Line-associated Bloodstream Infection (CLABSI)		0.00	0.00	0.00	0.00	2Q - Biopatch added to the central line bundle kit.
	NDNQI	0.83	0.78	0.82	0.78	
Catheter-associated Urinary Tract Infections (CAUTI)		0.00	0.00	0.00	0.00	
	NDNQI	1.00	0.98	1.18	1.02	
Ventilator-associated Event (VAE)		0.00	0.00	0.00	0.00	
	NDNQI	0.59	0.36	0.71	0.55	
Hospital Onset CDIFF per 1,000 Patient Days		ND	5.26	0.00	0.00	2Q - Xenex Robot and several infection prevention initiatives
	NDNQI		1.03	1.05	0.94	
Hospital Onset MRSA per 1,000 Patient Days		ND	0.00	0.00	0.00	
	NDNQI		0.17	0.14	0.14	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>RN Education</b>						
RN's w BSN or Higher		76.67%	75.86%	75.86%	76.67%	
	NDNQI	68.61%	68.98%	69.40%	70.35%	
RN's w Professional Certification		40.00%	37.93%	37.93%	40.00%	
	NDNQI	24.12%	24.63%	24.50%	25.35%	
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	100.0	85.7	91.7	75.0	
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	97.5	85.7	99.0	93.8	
	Press Ganey	90.9	91.2	91.1	91.1	
Nurses treat you with courtesy/respect	Top Box%	100.0	81.0	95.8	83.3	Raise awareness among clinical
	Press Ganey	86.3	86.8	86.8	86.8	staff. 2019 - Humanism Class
Nurses listened carefully to you	Top Box%	95.0	81.0	83.3	83.3	
	Press Ganey	77.0	77.7	77.8	77.6	

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		2.62	2.95	2.32	1.43	3Q - Post fall huddle form/
	NDNQI	2.58	2.56	2.53	2.58	3Q - Pt Education Fall Video
Falls with Injury Per 1,000 Patient Days		1.31	0.00	0.77	0.00	
	NDNQI	0.48	0.52	0.51	0.52	
Hospital Acquired Pressure Injury (Stage II & Above)	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	1.97	1.81	1.86	1.84	
Restraints	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	1.41	1.45	1.24	1.32	
Hospital Acquired Pressure Injury (Stage II & Above)	Incidence	0.00	0.00	0.00	0.07	
	Northwell Goal <.45					
Central Line-associated Bloodstream Infection (CLABSI)		0.00	0.00	0.00	0.00	2Q - Biopatch added to the central line bundle kit.
	NDNQI	0.61	0.81	0.82	0.66	
Catheter-associated Urinary Tract Infections (CAUTI)		0.00	0.00	0.00	0.00	
	NDNQI	1.23	1.13	1.35	1.19	
Hospital Onset CDI per 1,000 Patient Days		ND	0.74	0.00	0.71	2Q - Xenex Robot and several infection prevention initiatives
	NDNQI		0.59	0.63	0.5	
Hospital Onset MRSA per 1,000 Patient Days		ND	0.00	0.00	0.00	
	NDNQI		0.06	0.08	0.07	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>RN Education</b>						
RNs w BSN or Higher		82.14%	82.14%	84.62%	82.76%	
	NDNQI	60.06%	60.44%	61.38%	63.01%	
RNs w Professional Certification		7.14%	7.14%	7.69%	6.90%	Unit Focus in 2019
	NDNQI	13.70%	13.73%	13.40%	14.24%	
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	77.8	85.4	67.6	81.4	
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	92.4	94.2	90.0	89.9	TeamSTEPPS training in 1st Q 2019
	Press Ganey	90.9	91.2	91.1	91.1	
Nurses treat you with courtesy/respect	Top Box%	90.9	87.8	80.6	84.1	TeamSTEPPS training in 1st Q 2019
	Press Ganey	86.3	86.8	86.8	86.8	
Nurses listened carefully to you	Top Box%	68.9	90.2	71.4	75.0	TeamSTEPPS training in 1st Q 2019
	Press Ganey	77.0	77.7	77.8	77.6	
<b>Responsiveness:</b>						
Help Toileting soon as you wanted	Top Box%	67.9	71.4	66.7	70.0	7/5/18 - Integrated call bell system
	Press Ganey	68.5	69.9	70.1	69.9	with vocera
Call button help soon as wanted it	Top Box%	68.3	64.5	66.7	55.0	7/5/18 - Integrated call bell system
	Press Ganey	64.2	65.8	65.7	65.5	with vocera
Check on you hourly during the day	"Yes"	74%	82%	82%	73%	Hourly Rounding/Cypher Health Tool
Visited by nursing mngt. Team	"Yes"	75%	82%	83%	73%	Hourly Rounding/Cypher Health Tool
<b>Pain:</b>						
Staff talk to you about how much pain	Top Box%	76.92	53.85	75.00	71.43	
	Press Ganey	67.01	67.36	67.80	67.66	
How often staff talk pain treatment	Top Box%	69.23	46.15	62.50	50.00	Purposeful Rounding - Video 4th Q'18
	Press Ganey	63.87	64.48	64.72	64.49	

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<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		1.44	4.48	1.05	2.58	3Q - Post fall huddle form/
	NDNQI	3.17	3.01	3.09	3.18	3Q - Pt Education Fall Video
Falls with Injury Per 1,000 Patient Days		0.00	1.12	0.53	1.55	3Q - Post fall huddle form/
	NDNQI	0.66	0.64	0.66	0.69	3Q - Pt Education Fall Video
Hospital Acquired Pressure Injury (Stage II & Above)	Prevalence	4.17	0.00	0.00	0.00	1Q - Device related/Nasal Cannula,
	NDNQI	1.37	1.17	1.12	1.22	2Q - New tubing purchased
Restraints	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	0.56	0.46	0.47	0.45	
Hospital Acquired Pressure Injury (Stage II & Above)	Incidence	0.10	0.06	0.05	0.11	1Q - 3 Injuries related to tubing
	Northwell Goal <.45					around ear. 2Q - Softer tubing
						evaluated and purchased throughout.
Central Line-associated Bloodstream Infection (CLABSI)		0.00	7.52	0.00	4.65	2Q - Biopatch added to the
	NDNQI	0.72	0.65	0.79	0.82	central line bundle kit.
Catheter-associated Urinary Tract Infections (CAUTI)		0.00	0.00	0.00	0.00	
	NDNQI	1.17	1.13	1.16	1.11	
Hospital Onset CDIFF		ND	0.56	0.53	1.03	2Q - Xenex Robot, Infection
	NDNQI		0.50	0.58	0.47	Prevention Interventions
Hospital Onset MRSA		ND	0.00	0.00	0.00	
	NDNQI		0.06	0.07	0.07	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>RN Education</b>						
RNs w BSN or Higher		78.26%	88.46%	89.66%	90.00%	
	NDNQI	59.45%	59.13%	61.07%	61.45%	
RNs w Professional Certification		34.78%	19.23%	17.24%	16.67%	
	NDNQI	15.31%	14.89%	15.45%	16.01%	
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	56.0	71.7	82.2	74.4	
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	85.1	91.7	94.3	91.9	
	Press Ganey	90.9	91.2	91.1	91.1	
Nurses treat you with courtesy/respect	Top Box%	74.0	88.7	87.0	87.2	
	Press Ganey	86.3	86.8	86.8	86.8	
Nurses listened carefully to you	Top Box%	64.0	74.1	84.4	80.9	
	Press Ganey	77.0	77.7	77.8	77.6	
Quietness of hospital environment	Top Box%	38.0	40.0	55.6	30.2	2Q - Quiet Time est. 1530-1630,
	Press Ganey	58.7	59.8	60.7	59.9	Staff Education, Whisper Unit Signs,
						Volumes adjusted at night, No call
<b>Responsiveness:</b>						
Help Toileting soon as you wanted	Top Box%	65.4	57.14	75.0	75.0	7/5/18 - Integrated call bell system
	Press Ganey	68.5	69.9	70.1	69.9	with vocera
Call button help soon as wanted it	Top Box%	54.4	60.5	65.7	63.4	7/5/18 - Integrated call bell system
	Press Ganey	64.3	65.8	65.7	65.5	with vocera

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<b>Patient Satisfaction</b>						
<b>Rounding:</b>						
Check on you hourly during the day	"Yes"	56%	71%	86%	77%	Hourly Rounding/Cypher Health Tool
Phelps Goal						
Visited by nursing mngt. Team	"Yes"	80%	74%	85%	80%	Hourly Rounding/Cypher Health Tool
Phelps Goal						
<b>Pain:</b>						
How often staff talk to you about pain	Top Box%	25.00	50.00	64.00	87.50	
	Press Ganey	67.01	67.36	67.80	67.66	
How often staff talk pain treatment	Top Box%	25.00	46.15	69.23	75.00	
	Press Ganey	63.87	64.48	64.72	64.49	



Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		0.00	1.57	2.33	2.84	3Q - Post fall huddle form/
	NDNQI	2.48	2.38	2.33	2.41	3Q - Pt Education Fall Video
Falls with Injury Per 1,000 Patient Days		0.00	0.00	0.00	0.00	
	NDNQI	0.49	0.47	0.44	0.46	
Hospital Acquired Pressure Injury (Stage II & Above)	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	0.98	0.78	0.81	0.86	
Restraints	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	0.27	0.24	0.28	0.21	
Hospital Acquired Pressure Injury	Incidence - Rehab	0.00	0.00	0.00	0.09	
Hospital Acquired Pressure Injury	Incidence - Ortho	0.13	0.00	0.00	0.15	
(Stage II & Above)	Northwell Goal	<.45				
Central Line-associated Bloodstream Infection (CLABSI)		0.00	0.00	0.00	0.00	2Q - Biopatch added to the central line bundle kit.
	NDNQI	0.52	0.45	0.46	0.36	
Catheter-associated Urinary Tract Infections (CAUTI)		0.00	0.00	ND	0.00	
	NDNQI	0.74	0.79	1.14	0.80	
Hospital Onset CDIFF per 1,000 Patient Days		ND	0.00	0.00	0.00	
	NDNQI		0.45	0.46	0.44	
Hospital Onset MRSA per 1,000 Patient Days		ND	0.00	0.00	0.00	
	NDNQI		0.03	0.03	0.03	
<b>RN Education</b>						
RNs w BSN or Higher		92.65%	89.47%	89.47%	90.00%	
	NDNQI	59.91%	59.99%	62.07%	62.77%	
RNs w Professional Certification		27.74%	31.58%	31.58%	30.00%	
	NDNQI	17.72%	18.20%	17.83%	18.88%	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	84.5	91.0	77.8	87.1	
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	93.7	95.6	95.5	93.5	
	Press Ganey	90.9	91.2	91.1	91.1	
Nurses treat you with courtesy/respect	Top Box%	94.7	94.9	91.3	95.2	
	Press Ganey	86.3	86.8	86.8	86.8	
Nurses listened carefully to you	Top Box%	73.3	81.0	84.8	84.3	
	Press Ganey	77.0	77.7	77.8	77.6	
Quietness of hospital environment	Top Box%	62.2	62.3	63.6	58.3	
	Press Ganey	58.7	59.8	60.7	59.9	
<b>Responsiveness:</b>						
Help Toileting soon as you wanted	Top Box%	77.4	78.3	76.9	70.1	6/12/18 - Integrated call bell system with vocera
	Press Ganey	68.5	69.9	70.1	69.9	
Call button help soon as wanted it	Top Box%	76.5	79.7	77.3	59.0	6/12/18 - Integrated call bell system with vocera
	Press Ganey	64.2	65.8	65.7	65.5	
Check on you hourly during the day	"Yes"	88%	75%	82%	76%	Hourly Rounding/Cypher Health Tool
Visited by nursing mngt. Team	"Yes"	97%	96%	93%	86%	Hourly Rounding/Cypher Health Tool
<b>Pain:</b>						
How often staff talk to you about pain	Top Box%	74.29	75.36	88.10	70.69	
Press Ganey Benchmark	Press Ganey	67.01	67.36	67.80	67.66	
How often staff talk pain treatment	Top Box%	62.86	71.43	75.00	57.63	Pain reassessment a focus.
Press Ganey Benchmark	Press Ganey	63.87	64.48	64.72	64.03	

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<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		0.78	2.61	3.15	3.18	3Q - Post fall huddle form/
	NDNQI	2.48	2.38	2.33	2.41	3Q - Pt Education Fall Video
Falls with Injury Per 1,000 Patient Days		0.00	0.00	0.63	1.27	
	NDNQI	0.49	0.47	0.44	0.46	
Hospital Acquired Pressure Injury (Stage II & Above)	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	0.98	0.78	0.81	0.86	
Restraints	Prevalence	0.00	0.00	0.00	0.00	
	NDNQI	0.27	0.24	0.28	0.21	
Hospital Acquired Pressure Injury (Stage II & Above)	Incidence	0.08	0.00	0.06	0.07	
	Northwell Goal <.45					
Central Line-associated Bloodstream Infection (CLABSI)		0.00	0.00	0.00	0.00	2Q - Biopatch added to the
	NDNQI	0.52	0.45	0.46	0.36	central line bundle kit.
Catheter-associated Urinary Tract Infections (CAUTI)		0.00	0.00	0.00	0.00	
	NDNQI	0.74	0.79	1.14	0.80	
Hospital Onset CDIFF per 1,000 Patient Days		ND	0.87	0.00	1.91	2Q - Xenex Robot and several
	NDNQI		0.45	0.46	0.44	infection prevention initiatives
Hospital Onset MRSA per 1,000 Patient Days		ND	0.00	0.00	0.00	
	NDNQI		0.03	0.03	0.03	

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<b><i>RN Education</i></b>						
RNs w BSN or Higher		95.83%	92.00%	88.46%	88.89%	
	NDNQI	59.91%	59.99%	62.07%	62.77%	
RNs w Professional Certification		29.17%	28.00%	26.92%	29.63%	
	NDNQI	17.72%	18.20%	17.83%	18.88%	
<b><i>Patient Satisfaction</i></b>						
Likelihood recommending hospital	Top Box%	71.7	76.3	81.0	65.1	TeamSTEPPS training in 1st Q 2019
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	96.6	89.2	93.8	91.5	
	Press Ganey	90.9	91.2	91.1	91.1	
Nurses treat you with courtesy/respect	Top Box%	91.3	80.0	80.7	84.1	TeamSTEPPS training in 1st Q 2019
	Press Ganey	86.3	86.8	86.8	86.8	
Nurses listened carefully to you	Top Box%	69.6	73.3	68.4	71.4	TeamSTEPPS training in 1st Q 2019
	Press Ganey	77.0	77.7	77.8	77.6	
Quietness of hospital environment	Top Box%	50.0	33.9	45.6	43.2	4Q - Hospital wide focus on quiet
	Press Ganey	58.7	59.8	60.7	59.9	time at night.

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<b>Patient Satisfaction</b>						
<b>Responsiveness:</b>						
Help Toileting soon as you wanted	Top Box%	65.4	84.8	56.0	68.2	5/3/18 - Integrated call bell system with vocera
	Press Ganey	68.5	69.9	70.1	69.9	
Call button help soon as wanted it	Top Box%	61.9	68.0	58.8	65.9	5/3/18 - Integrated call bell system with vocera
	Press Ganey	64.2	65.8	65.7	65.5	
Check on you hourly during the day	"Yes"	82%	77%	72%	71%	Hourly Rounding/Cypher Health Tool
Visited by nursing mngt. Team	"Yes"	91%	90%	92%	85%	Hourly Rounding/Cypher Health Tool
<b>Medication Communication:</b>						
Communication about meds	Top Box%	59.5	57.0	68.8	66.9	2Q-'18 - Implementation of using the Allen TV to improve Patient Education on Medication
	Press Ganey	63.8	64.4	64.7	64.6	
Tell you what new medicine was for	Top Box%	78.4	71.8	87.5	76.7	
	Press Ganey	77.4	77.9	78.1	78.1	
Staff describe medication side effect	Top Box%	40.5	42.1	50.0	57.1	
	Press Ganey	50.1	50.9	51.2	51.1	
<b>Pain:</b>						
Staff talk about how much pain you had?	Top Box%	70.83	71.43	75.68	75.68	
	Press Ganey	67.01	67.36	67.80	67.66	
How often staff talk pain treatment?	Top Box%	70.83	56.82	75.00	72.97	
	Press Ganey	63.87	64.48	64.72	64.49	

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<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		3.74	3.28	3.82	7.27	Due to weighted chairs, chairs are examined and new sliders applied quarterly by engineering.
	NDNQI	3.38	3.48	3.47	3.52	
Falls with Injury Per 1,000 Patient Days		1.25	0.00	0.64	1.32	
	NDNQI	0.72	0.71	0.66	0.68	
Hospital Onset CDIFF per 1,000 Patient Days		ND	ND	0.00	ND	
	NDNQI		0.02	0.01	0.08	
Hospital Onset MRSA per 1,000 Patient Days		ND	ND	0.00	ND	
	NDNQI		0.00	0.01	0.00	
<b>RN Education</b>						
RNs w BSN or Higher		66.67%	65.00%	65.00%	63.16%	
	NDNQI	52.05%	53.38%	54.87%	55.61%	
RNs w Professional Certification		23.81%	20.00%	20.00%	26.32%	
	NDNQI	13.81%	14.12%	14.62%	15.11%	

NDNQI -  
National Database of Nursing Quality Indicators

NA-Not Available; ND-No Data  
NDNQI Benchmark - All Hospitals Mean

	Outperforms benchmark
	At benchmark
Key:	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	NA	NA	61.5	36.4	Therapeutic focus highlighting experience of gratitude. Encourage patient to focus on what was good about experience and themselves.
	Press Ganey			63.9	62.9	
Staff worked together to care for you	Mean	NA	NA	86.5	70.5	
	Press Ganey			87.8	87.3	
Friendliness/courtesy of the nurses	Top Box%	NA	NA	53.8	54.5	Patient complaints are addressed real time if possible.
	Press Ganey			68.4	67.7	
<b>Pain:</b>						
Degree staff asked if you physical pain	Top Box%	NA	NA	82.14	62.50	Focus on pain reassessment tracked by log.
	Press Ganey			85.76	85.12	
How well physical pain taken care of	Top Box%	NA	NA	75.00	63.46	Focus on pain reassessment tracked by log.
	Press Ganey			84.44	84.07	

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators - 2South and 4North Combined</b>						
Falls Per 1,000 Patient Days		0.58	1.16	2.96	2.72	3Q - Post fall huddle form
	NDNQI	3.43	3.10	3.12	2.46	
Falls with Injury Per 1,000 Patient Days		0.29	0.00	0.66	0.34	
	NDNQI	0.73	0.83	0.77	0.54	
Hospital Onset CDIFF per 1,000 Patient Days		ND	ND	0.00	ND	
	NDNQI		0.04	0.00	0.00	
Hospital Onset MRSA per 1,000 Patient Days		ND	ND	0.00	ND	
	NDNQI		0.00	0.00	0.00	

NDNQI -  
National Database of Nursing Quality Indicators

NA-Not Available; ND-No Data  
NDNQI Benchmark - All Hospitals Mean

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Key:



Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b><i>RN Education - 2South and 4North Combined</i></b>						
RNs w BSN or Higher		58.82%	58.82%	58.82%	57.89%	
	NDNQI	55.06%	57.21%	60.07%	57.45%	
RNs w Professional Certification		0.00%	5.88%	5.88%	5.26%	
	NDNQI	15.26%	14.67%	14.58%	15.46%	
<b><i>Patient Satisfaction - Unique to 2 South</i></b>						
Likelihood recommending hospital	Top Box%	NA	NA	80.0	79.2	Press Ganey Survey started in 3Q
	Press Ganey			63.9	62.9	
Staff worked together to care for you	Top Box%	NA	NA	50.0	75.0	
	Press Ganey			65.1	64.4	
Friendliness/courtesy of the nurses	Top Box%	NA	NA	60.7	75.0	
	Press Ganey			68.4	67.7	
<b><i>Pain:</i></b>						
Degree staff asked if you physical pain	Top Box%	NA	NA	87.50	93.52	
	Press Ganey			85.76	85.12	
How well physical pain taken care of	Top Box%	NA	NA	83.38	90.74	
	Press Ganey			84.44	84.07	

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 NDNQI Benchmark - All Hospitals Mean

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Key:

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b><i>Clinical Indicators - 2South and 4North Combined</i></b>						
Falls Per 1,000 Patient Days		0.58	1.16	2.96	2.72	3Q - Post fall huddle form
NDNQI		3.43	3.10	3.12	2.46	
Falls with Injury Per 1,000 Patient Days		0.29	0.00	0.66	0.34	
NDNQI		0.73	0.83	0.77	0.54	
Hospital Onset CDI per 1,000 Patient Days		ND	ND	0.00	ND	
NDNQI			0.04	0.00	0.00	
Hospital Onset MRSA per 1,000 Patient Days		ND	ND	0.00	ND	
NDNQI			0.00	0.00	0.00	

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NDNQI Benchmark - All Hospitals Mean

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Key:

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b><i>RN Education - 2South and 4North Combined</i></b>						
RNs w BSN or Higher		58.82%	58.82%	58.82%	57.89%	
	NDNQI	55.06%	57.21%	60.07%	57.45%	
RNs w Professional Certification		0.00%	5.88%	5.88%	5.26%	
	NDNQI	15.26%	14.67%	14.58%	15.46%	
<b><i>Patient Satisfaction - Unique to 4North</i></b>						
Likelihood recommending hospital	Top Box%	NA	NA	80.0	84.6	Press Ganey Survey started in 3Q Survey results unique to 4North
	Press Ganey			63.9	62.9	
Staff worked together to care for you	Top Box%	NA	NA	60.0	76.9	
	Press Ganey			65.1	64.4	
Friendliness/courtesy of the nurses	Top Box%	NA	NA	40.0	71.4	
	Press Ganey			68.4	67.7	
<b><i>Pain:</i></b>						
Degree staff asked if you physical pain	Top Box%	NA	NA	95.00	93.75	
	Press Ganey			85.76	85.12	
How well physical pain taken care of	Top Box%	NA	NA	90.00	89.06	
	Press Ganey			84.44	84.07	

NDNQI -

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NDNQI Benchmark - All Hospitals Mean

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Key:

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Days		0.00	0.00	0.00	0.00	
	NDNQI	0.44	0.34	0.38	0.34	
Falls with Injury Per 1,000 Patient Days		0.00	0.00	0.00	0.00	
	NDNQI	0.06	0.06	0.06	0.06	
Total Baby Drops Per 1,000 Newborn Days		0.00	0.00	0.00	0.00	
	NDNQI	0.24	0.17	0.19	0.18	
Hospital Onset CDIFF per 1,000 Patient Days		ND	ND	0.00	0.00	
	NDNQI		0.08	0.01	0.02	
Hospital Onset MRSA per 1,000 Patient Days		ND	ND	0.00	0.00	
	NDNQI		0.00	0.01	0.00	
<b>RN Education</b>						
RNs w BSN or Higher		79.49%	83.78%	84.38%	84.38%	
	NDNQI	63.23%	64.02%	65.86%	67.00%	
RNs w Professional Certification		56.76%	56.76%	68.75%	75.00%	
	NDNQI	25.33%	26.68%	27.64%	28.05%	

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	Underperforms benchmark

Key:

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	78.8	77.8	90	90.2	
	Press Ganey	72.2	72.6	72.3	71.9	
Staff worked together to care for you	Mean	92.4	93.2	96.7	95.2	
	Press Ganey	88.2	88.7	88.9	88.9	
Nurses treat you with courtesy/respect	Top Box%	88.2	91.7	93.3	88.1	
	Press Ganey	86.3	86.8	86.8	86.8	
Nurses listened carefully to you	Top Box%	76.5	77.8	83.3	76.2	TeamSTEPPS training in 1st Q 2019
	Press Ganey	77.0	77.7	77.8	77.6	
Quietness of hospital environment	Top Box%	70.6	70.3	76.7	70.7	
	Press Ganey	58.7	59.8	60.7	59.9	
<b>Responsiveness:</b>						
Help Toileting soon as you wanted	Top Box%	87.5	86.4	84.2	75.0	7/23/18 - Integrated call bell system with vocera
	Press Ganey	68.5	69.9	70.1	59.9	
Call button help soon as wanted it	Top Box%	87.9	87.1	86.7	84.6	7/23/18 - Integrated call bell system with vocera
	Press Ganey	64.2	65.8	65.7	65.5	
Check on you hourly during the day	"Yes"	94%	79%	86%	60%	Hourly Rounding/Cypher Health Tool
Visited by nursing mngt. Team	"Yes"	73%	61%	69%	66%	Hourly Rounding/Cypher Health Tool
<b>Pain:</b>						
Staff talk about how much pain you had?	Top Box%	87.50	80.65	78.13	86.11	
	Press Ganey	67.01	67.36	67.80	67.66	
How often staff talk pain treatment?	Top Box%	87.50	80.65	69.70	83.33	
	Press Ganey	63.87	64.48	64.72	64.49	

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.33	0.50	0.17	0.00	
	NDNQI	0.24	0.25	0.21	0.22	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.17	0.00	
	NDNQI	0.06	0.05	0.06	0.06	
<b>Structure Indicators</b>						
Percent of Patients who Left without Being Seen		0.29	0.40	0.41	0.52	
	NDNQI	0.95	0.80	0.83	0.87	
Percent of Patients who Left Before Treatment		0.34	0.33	0.28	0.36	
	NDNQI	0.40	0.34	0.34	0.33	
Percent of Patients who Left Against Medical Advice		1.26	1.81	1.78	0.97	
	NDNQI	0.60	0.65	0.67	0.61	
Median Minutes from ED arrival to Departure (Adm. Pts)		356.03	328.73	324.55	327.46	Trending down - Team approach in ED having a positive impact.
	NDNQI	292.75	265.50	265.75	264.56	
Median Minutes Admit Decision to ED Departure		187.19	156.79	163.72	122.99	4th Q '18 - 60 min rule
	NDNQI	103.85	90.70	94.71	93.87	
Median Minutes Time from ED Arrival to ED Departure for Discharged Pts.		172.09	166.26	167.19	176.37	
	NDNQI	144.67	135.33	134.31	140.24	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Process Indicators</b>						
Avg. Blood Culture Volume (ml)		8.2	8.8	7.7		Marking of the bottles by Volunteers
Northwell Goal	8.0					
<b>RN Education</b>						
RNs w BSN or Higher		82.50%	83.33%	83.72%	79.55%	
NDNQI		58.00%	58.56%	58.18%	58.03%	
Unit Goal						
RNs w Professional Certification		12.50%	9.52%	9.30%	13.64%	
NDNQI		21.03%	20.45%	20.42%	20.80%	
Unit Goal						
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	72.2	76.9	77.9	68.4	TeamSTEPPS training in 1st Q 2019
	Press Ganey	66.5	68.2	68.1	68.5	
Degree hosp. staff worked as a team	Mean	88.0	89.0	90.0	86.3	TeamSTEPPS training in 1st Q 2019
	Press Ganey	86.4	87.1	86.9	87.1	
Nurses treat with courtesy/respect	Top Box%	88.5	87.3	91.6	84.2	TeamSTEPPS training in 1st Q 2019
	Press Ganey	83.2	84.3	84.3	84.4	
Nurses listen carefully to you	Top Box%	82.9	78.8	81.4	76.8	TeamSTEPPS training in 1st Q 2019
	Press Ganey	75.9	77.1	77.5	77.5	
<b>Pain</b>						
Doctors/Nurses try to reduce pain	Top Box%	60.5	60.5	53.9	54.3	Pain reassessment a focus.
	Press Ganey	54.0	55.1	54.7	55.0	

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.12	0.11	0.12	0.14	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.03	0.03	0.04	0.04	
<b>RN Education</b>						
RNs w BSN or Higher		92.31%	92.86%	92.86%	91.67%	
	NDNQI	63.02%	64.94%	66.13%	67.37%	
RNs w Professional Certification		38.46%	35.71%	35.71%	41.67%	Many of the RNs do not meet eligibilty criteria (employeeed < 2 years).
	NDNQI	43.13%	44.91%	44.49%	44.01%	
<b>Patient Satisfaction - INF</b>						
Likelihood recommending services	Top Box%	80.0	86.8	84.4	81.0	
	Press Ganey	86.3	86.5	85.9	85.8	
Care coordinated among Drs/caregvr	Top Box%	75.0	86.8	81.8	83.1	
	Press Ganey	79.9	80.1	79.7	79.5	
Quality of care recvd from nurse	Top Box%	88.7	92.2	83.0	87.9	
	Press Ganey	86.8	87.0	86.8	86.8	
<b>Pain:</b>						
How well was pain controlled - INF	Top Box%	76.5	78.9	76.3	75.0	
	Press Ganey	73.2	72.9	73.2	73.6	
<b>Patient Satisfaction - ONC</b>						
Likelihood recommending services	Top Box%	89.1	87.0	92.3	93.0	
	Press Ganey	86.3	86.5	85.9	85.8	
Care coordinated among Drs/caregvr	Top Box%	90.6	81.2	92.4	84.9	
	Press Ganey	79.9	80.1	79.7	79.5	
Quality of care recvd from nurse	Top Box%	94.7	91.5	96.2	93.7	
	Press Ganey	86.8	87.0	86.8	86.8	
<b>Pain:</b>						
How well was pain controlled - ONC	Top Box%	87.7	85.7	91.8	89.7	
	Press Ganey	73.2	72.9	73.2	73.6	

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NDNQI Benchmark - All Hospitals Mean

Key:

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Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.12	0.13	0.13	0.15	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.05	0.04	0.06	0.04	
Patient Burns Per 1,000 Patient Visits		NA	NA	ND	0.00	
	NDNQI				0.00	
<b>RN Education</b>						
RNs w BSN or Higher		50.00%	75.00%	75.00%	75.00%	
	NDNQI	62.17%	63.07%	62.92%	64.55%	
RNs w Professional Certification		100.00%	75.00%	75.00%	75.00%	
	NDNQI	24.00%	25.51%	24.10%	26.71%	
<b>Patient Satisfaction</b>						
Likelihood recommending facility	Top Box%	90.5	81.5	72.7	72.0	
	Press Ganey	83.1	83.2	83.0	83.1	
Degree staff worked together	Mean	85.0	87.7	90.5	72.0	TeamSTEPPS training in 1st Q 2019
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	100.0	100.0	95.5	100.0	
	Press Ganey	97.8	97.8	97.8	97.8	
Staff ID patient/proc before surgery	Top Box%	88.9	86.4	85.7	69.6	
	Press Ganey	88.7	89.0	88.6	88.4	
<b>Pain:</b>						
Doctors/Nurses make sure comfortable	Top Box%	100.00	100.00	96.00	95.65	Pain reassessment area of focus
	Press Ganey	96.55	96.60	96.48	96.54	
Information about what to do if have pain	Top Box%	100.00	95.24	95.45	90.48	
	Press Ganey	95.14	95.02	94.89	94.96	

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NDNQI Benchmark - All Hospitals Mean

Key:

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.16	0.14	0.17	0.21	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.05	0.03	0.06	0.05	
<b>RN Education</b>						
RNs w BSN or Higher		81.25%	100.00%	100.00%	100.00%	
	NDNQI	61.49%	61.75%	63.68%	63.49%	
RNs w Professional Certification		6.25%	0.00%	0.00%	33.33%	Many of the RN not eligible yet.
	NDNQI	31.95%	30.33%	31.32%	32.41%	
<b>Patient Satisfaction</b>						
Likelihood recommending hospital	Top Box%	79.2	87.5	85.7	82.9	TeamSTEPPS program 1st Q '19
	Press Ganey	83.1	83.2	83	83.1	
Degree staff worked together	Mean	95.8	90.9	88.9	82.4	TeamSTEPPS program 1st Q '19
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	100.0	100.0	100.0	100.0	
	Press Ganey	97.8	97.8	97.8	97.8	
Staff ID patient/proc before surgery	Top Box%	95.5	89.3	95.8	81.5	Staff re-education
	Press Ganey	88.7	89.0	88.6	88.4	
<b>Pain:</b>						
Doctors/Nurses make sure comfortable	Top Box%	100.00	93.94	95.83	100.00	
	Press Ganey	96.55	96.60	96.48	96.54	
Information about what to do if have pain	Top Box%	87.50	96.43	100.00	83.33	
	Press Ganey	95.14	95.02	94.89	94.96	

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NDNQI Benchmark - All Hospitals Mean

Key:

	Outperforms benchmark
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	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.87	0.00	
	NDNQI	0.11	0.12	0.09	0.10	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.87	0.00	
	NDNQI	0.02	0.03	0.04	0.02	
Patient Burns Per 1,000 Patient Visits		NA	NA	0.00	0.00	
	NDNQI			0.00	0.00	
<b>RN Education</b>						
RNs w BSN or Higher		78.57%	78.57%	85.71%	86.67%	
	NDNQI	55.75%	56.06%	56.58%	58.66%	
RNs w Professional Certification		42.86%	42.86%	42.86%	40.00%	
	NDNQI	21.39%	20.86%	21.42%	23.30%	

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NDNQI Benchmark - All Hospitals Mean

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Key:

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Patient Satisfaction</b>						
Recommend the facility	Top Box%	86.8	87.6	87.7	88.1	
	Press Ganey	83.1	83.2	83.0	83.1	
Degree staff worked together	Top Box%	92.4	90.6	92.8	91.5	
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	100.0	99.4	98.7	98.2	
	Press Ganey	97.8	97.8	97.8	97.8	
Staff ID patient/proc before surgery	Top Box%	95.3	95.9	95.2	92.5	
	Press Ganey	88.7	89.0	88.6	88.4	
Instructions good re preparation	Top Box%	95.6	91.6	95.4	94.6	New educational brochures for pt. pre-procedure created in 2019
	Press Ganey	94.0	94.1	93.9	94.1	
Procedure info easy to understand	Top Box%	97.8	93.5	98.1	95.8	
	Press Ganey	93.0	93.0	93.0	93.1	
<b>Pain:</b>						
Doctors/Nurses make sure comfortable	Top Box%	97.46	97.84	97.16	99.39	
	Press Ganey	96.55	96.60	96.48	96.54	
Information about what to do if have pain	Top Box%	97.50	97.30	98.13	97.14	
	Press Ganey	95.14	95.02	94.89	94.96	

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Patient Burns Per 1,000 Patient Visits		NA	NA	0.78	0.00	
	NDNQI			0.06	0.07	
Surgical Site Infections		0.00	0.00	0.00	0.00	
	Phelps Goal 0.00%					
<b>Structure Indicators</b>						
On-Time OR Start/First Case		37.67%	39.87%	37.67%	41.67%	
	Phelps Goal 50.00%					
Same Day Surgery Cancellation		0.07%	0.33%	0.44%	0.09%	
	Phelps Goal 0.00%					
Immediate Use Steam Sterilization (IUSS) Rate		0.00%	0.27%	0.01%	0.09%	
	Northwell Goal < 2%					
<b>RN Education</b>						
RNs w BSN or Higher		70.59%	66.67%	70.59%	68.42%	
	NDNQI	55.20%	56.78%	56.64%	57.09%	
RNs w Professional Certification		52.94%	50.00%	47.06%	57.89%	
	NDNQI	28.78%	29.75%	29.41%	29.86%	

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	At benchmark
	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.00	0.59	
	NDNQI	0.05	0.03	0.06	0.05	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.01	0.00	0.02	0.01	
<b>RN Education</b>						
RNs w BSN or Higher		75.00%	75.00%	75.00%	83.33%	
	NDNQI	61.90%	62.89%	64.68%	64.56%	
Unit Goal	80.00%					
RNs w Professional Certification		66.67%	75.00%	75.00%	83.33%	
	NDNQI	24.97%	25.86%	26.84%	27.39%	
Unit Goal	75.00%					
<b>Patient Satisfaction</b>						
Likelihood recommending facility	Top Box%	83.3	85.3	88.8	89.8	
Press Ganey Benchmark	Press Ganey	83.1	83.2	83.0	83.1	
Degree staff worked together	Top Box%	88.5	86.7	83.3	89.7	TeamSTEPPS program 1st Q '19
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	98.3	97.0	97.2	96.9	Humanism Class in 2019.
	Press Ganey	97.8	97.8	97.8	97.8	
Staff effort: include you in treatment	Top Box%	81.6	83.7	81.4	84.7	
	Press Ganey	78.3	79.1	79.1	79.4	
Staff ID patient/proc before surgery	Top Box%	93.8	90.8	90.3	96.8	
	Press Ganey	88.7	89.0	88.6	88.4	
<b>Pain:</b>						
Information re subsequent pain	Top Box%	97.3	87.5	88.9	93.3	Hospital Wide Pain Committee Formed
	Press Ganey	95.1	95.0	94.9	95.0	4Q '18

NDNQI -

National Database of Nursing Quality Indicators

NA-Not Available; ND-No Data

NDNQI Benchmark - All Hospitals Mean

Key:

	Outperforms benchmark
	At benchmark
	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.70	0.00	
	NDNQI	0.17	0.21	0.21	0.20	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.04	0.07	0.09	0.04	
<b>RN Education</b>						
RNs w BSN or Higher		72.22%	70.59%	68.75%	72.22%	
	NDNQI	55.00%	55.39%	56.25%	57.31%	
RNs w Professional Certification		22.22%	17.65%	18.75%	16.67%	
	NDNQI	20.08%	20.46%	21.92%	21.09%	
<b>Patient Satisfaction - SurgiCtr</b>						
Likelihood recommending facility	Top Box%	83.3	85.3	88.8	89.8	
	Press Ganey	83.1	83.2	83.0	83.1	
Degree staff worked together	Top Box%	88.5	86.7	83.3	89.7	TeamSTEPPS program 1st Q '19
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	98.3	97.0	97.2	96.9	Humanism Class in 2019.
	Press Ganey	97.8	97.8	97.8	97.8	
Staff ID patient/proc before surgery	Top Box%	93.8	90.8	90.3	96.8	
	Press Ganey	88.7	89.0	88.6	88.4	
Staff effort: include you in treatment	Top Box%	81.6	83.7	81.4	84.7	
	Press Ganey	78.3	79.1	79.1	79.4	
Explanations prior to surgery	Top Box%	89.2	90.7	90.2	88.2	
	Press Ganey	83.0	82.8	82.5	82.8	
<b>Pain:</b>						
Information re subsequent pain	Top Box%	97.3	87.5	88.9	93.3	Hospital Wide Pain Committee Formed -
	Press Ganey	95.1	95.0	94.9	95.0	4Q '18

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NDNQI Benchmark - All Hospitals Mean

Key:

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	Underperforms benchmark

Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Patient Satisfaction - EyeSurg</b>						
Likelihood recommending facility	Top Box%	78.6	74.1	90.5	81.8	
	Press Ganey	83.1	83.2	83.0	83.1	
Degree staff worked together	Top Box%	92.6	88.0	95.0	100.0	TeamSTEPPS program 1st Q '19
	Press Ganey	87.0	86.9	87.0	87.3	
Staff treat with courtesy, respect	Top Box%	100.0	96.3	100.0	100.0	Humanism Class in 2019.
	Press Ganey	97.8	97.8	97.8	97.8	
Staff ID patient/proc before surgery	Top Box%	92.3	88.5	100.0	100.0	
	Press Ganey	88.7	89.0	88.6	88.4	
Staff effort: include you in treatment	Top Box%	90.5	76.2	94.1	100.0	
	Press Ganey	78.3	79.1	79.1	79.4	
Explanations prior to surgery	Top Box%	81.5	80.8	84.2	87.5	
	Press Ganey	83.0	82.8	82.5	82.8	
<b>Pain:</b>						
Information re subsequent pain	Top Box%	90.0	87.0	94.1	100.0	Hospital Wide Pain Committee Formed -
	Press Ganey	95.1	95.0	94.9	95.0	4Q '18



Measurement	Benchmark or Goal	1st Q '18	2nd Q '18	3rd Q '18	4th Q '18	Action Plan
<b>Clinical Indicators</b>						
Falls Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.16	0.14	0.17	0.21	
Falls with Injury Per 1,000 Patient Visits		0.00	0.00	0.00	0.00	
	NDNQI	0.05	0.03	0.06	0.05	
<b>RN Education</b>						
RNs w BSN or Higher		62.50%	62.50%	66.67%	66.67%	
	NDNQI	61.49%	61.75%	63.98%	63.49%	
RNs w Professional Certification		12.50%	37.50%	33.33%	22.22%	
	NDNQI	31.95%	30.33%	31.32%	32.41%	
<b>Patient Satisfaction</b>						
Likelihood of recommending	Top Box%	NA	NA	83.6	90.2	
	Press Ganey			83.0	83.2	
Likelihood of returning	Top Box%	NA	NA	85.5	92.9	
	Press Ganey			86.3	86.2	
<b>Pain - Wound</b>						
Staff concern for your comfort	Top Box%	NA	NA	95.00	95.83	
	Press Ganey			94.71	94.75	
<b>Pain - Hyperbaric</b>						
Staff concern for your comfort	Top Box%	NA	NA	100.00	100.00	
	Press Ganey			94.71	94.75	

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