

**Central Vermont Medical Center
Quality Council Board Scorecard**

Indicator	Responsible	FY 2010 CVMC Result	CVMC Goal	Oct-Dec 2010	n=	Jan-Mar 2011	n=	Apr-Jun 2011	n=	Jul-Sep 2011	n=	Overall 2011
Patient Satisfaction												
Inpatient	Lang	89.4%	90	89.7%	91	89.9%	99	88.4%	154			89.3%
Outpatient	Lang	91.1%	91	93.5%	233	91.9%	205	93.7%	167			93.0%
Emergency Department	Lang	86.0%	85	79.1%	84	85.2%	96	84.8%	66			83.0%
Ambulatory Surgery	Lang	94.4%	90	93.8%	68	94.5%	72	96.2%	43			94.8%
Medical Group Practices	Lang	93%	90	93.6%	738	94.1%	869	94.8%	670			94.2%
Pain Score (<i>Inpatients</i>)	Lang	89%	90	88.7%	91	77.5%	96	73.6%	112			79.9%
Clinical Processes												
Medication Errors (An event that reached the patient)	Foti	175	<58/qtr	45		34		36*				115.0
Unadjusted Inpatient Deaths/Discharge Days	White	2.1%	2.1%	3.06%	27	3.51%	28	2.66%	23			3.07%
Timely Referrals of Deaths to New England Organ Bank (within 60 minutes of death)	Sharp	86.9%	95.0%	69.0%	22	82.1%	22	79.6%	21			65.0%
Readmission Rates - 30 day all cause (excl newborn and IPP)	Sharp	7.7%	<10%	11.06%		8.69%		9.62%				9.79%
Rapid Response Team (# of RRT called)	White	44 Responses	> 11 per quarter	17		7		10				34
Wait Times												
ER - Greet to Triage	Heffernan	No data	< 20 minutes	11 minutes		12 minutes		12 minutes				11.7 minutes
ER - Greet to Doctor	Heffernan	29.3 minutes	<30 minutes	29 minutes		28 minutes		27 minutes				28 minutes
STEMI: Average Door to Balloon Time (Minutes)	Heffernan	93.8 minutes	<90 minutes	83.5 minutes	8	100.3 minutes	3	88.1 minutes	9			90.6 minutes
STEMI: Time from admission to time transferred from ED	Heffernan	21.7 minutes	< 30 minutes	20.5 minutes	8	47 minutes	6	22.2 minutes	9			33.8 minutes
CVMGP: Days to 1st Available Acute Visit - (H-2009-03)	Heezen	same day	24 hours	same day	13 of 15 practices	Same Day	15 of 17 practices	same day for	14 of 17 practices			same day for 14 practices
CVMGP: Days to 1st Available Follow up, (H-2009-03)	Heezen	2.64 days	within 7 days	2.5 days		1.8 days for 11 primary care practices		2.2 days for 11 primary care practices				2.16 days
CVMGP: Days to 1st Physical/well child, (H-2009-03)	Heezen	7.09 days	within 90 days	10.6 days		11.6 days for 11 primary care practices		6.6 days for 11 primary care practice				9.6 days

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Adverse Events (Never Events)												
Falls with harm (# of Falls with moderate to severe harm / per 1000 patient days)	Holland	0.22	< 1 /1000 patient days	0.23		0.20		zero				0.22
Pressure Ulcers (# of Stage 3 or 4 ulcers) that developed after admission	Kimberley	0.25	0	1		zero		zero				1
Woodridge Nursing Home Quality Indicators												
Incidents of New Fractures	Bertrand	1.3%	tbd	5		0		4				9
Prevalence of Dehydration	Bertrand	0.0%		zero		zero		zero				zero
Post Acute Residents with Moderate to Severe Pain	Bertrand	21.7%		24.0%		No data available		No data available				24.0%
Post Acute Residents with Pressure Ulcers	Bertrand	12.1%		9.0%		1 patient		1 patient				9.0%
Low Risk Residents with Pressure Ulcers	Bertrand	2.1%		9.0%		zero		zero				4.5%
High Risk Residents with Pressure Ulcers	Bertrand	10.4%		15		9		7 patients				12
Appropriate Care Measures (retrospective record abstractions) Composite Score												
Acute Myocardial Infarction	Melville/Herring	100%	95%	100%	0	100%	2	100.0%	3			100%
Heart Failure	Melville/Herring	91%	95%	100%	34	91.2%	34	100.0%	6			97.0%
Pneumonia	Melville/Herring	96%	95%	95.1%	69	92.8%	69	98.2%	53			95.4%
Surgical Care Improvement Project	Plourde/Natvig	90%	95%	91.9%	54	86.8%	53	93.6%	48			90.7%
Chest Pain- Outpatient	Plourde/Natvig	87%	95%	100%	18	100.0%	21	100.0%	22			100.0%
Surgical Care Improvement Project-Outpatient	Plourde/Natvig	88%	95%	93.1%	25	93.9%	25	88.3%	21			91.8%
Infection Prevention and Surveillance (Nosocomial Infections)												
Urinary Catheter Infections (# per 1000 device days)	Dages/Baker	6.2	5.5	0	0	9.2	5	4.6	3			4.6
Central Line infection rate (# per 1000 patients days)	Dages/Baker	0.0	2	0	0	0	0	0	0			0

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Ventilator associated pneumonia (# per 1000 device days)	Dages/Baker	0.0	4.8	0	0	0.0	0.0	0	0			0
Post Operative Pneumonia (# cases per 100 procedures)	Dages/Baker	0.1	0.93	0.8	3	0.4	3	0.01	1			0.4
Surgical Site Infection Rate (# of infections Per 100 procedures)	Dages/Baker	0.5	0.75	0.2	2	0.6	8	not available				0.4
Clostridium difficile (# of cases per 1000 pt. days)	Dages/Baker	1.1	13/1000 days	1.6	2	1.4	1	0.3	1			1.1
Methacillin Resistant Staph Aureus (# of cases per 1000 pt. Days)	Dages/Baker	0.2	0.43	0	0	0	0	0.0	0			0.0
Vancomycin Resistant Enterococcus (# of cases per 1000 pt. Days)	Dages/Baker	1.1	13/1000 days	0	0	0	0	0.0	0			0.0
Extended Spectrum Beta Lactamase (# of cases per 1000 pt. Days)	Dages/Baker	0.2	0.43	0	0	0	0	0.0	0			0.0
Patient Safety Initiatives (data from monthly surveillance)												
Improve the Accuracy of Patient Identification	Sharp	96.7%	95.0%	97.3%		96.7%		96.6%				96.9%
Improve the Timeliness of Critical Tests and Reporting of Results	Sharp	96.6%	95.0%	95.3%		97.3%		98.0%				96.7%
Label All Medications When Removed From the Original Container	Sharp	93.8%	95.0%	93.3%		98.3%		97.0%				96.2%
Hand Hygiene	Sharp	95.5%	95.0%	100.0%		92.3%		90.6%				94.3%
Mark the Procedure Site	Sharp	95.7%	95.0%	98.7%		100.0%		97.5%				98.7%
Perform a Time Out Immediately Prior to Beginning the Procedure	Sharp	96.7%	95.0%	100.0%		98.0%		94.3%				97.4%
Medical Record Completion												
Eliminate the Use of Unapproved Abbreviations	Ryan	94.5%	95.0%	97.7%		100.0%		98.4%				98.70%
Chart Deficiency (Incomplete Inpatient Medical Records >30 days)	Ryan	0.96%	No data available	0.04%		1.0%		0.1%				0.38%

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Environment of Care												
Electronic statement of conditions	Morley	Current	Current	Current		Current		Current				Current
Life safety	Morley	In Compliance	In Compliance	In compliance- Interim Life Safety Measures in place in ED		In compliance- Interim Life Safety Measures in place in ED		In compliance- Interim Life Safety Measures in place in ED				In Compliance
Worker's Compensation												
# of claims with lost time	Holland	16	4	1		2		4				7
# of days of lost time	Holland	395	84	20 days		20 days		21 days				61 days
# of claims with restricted time	Holland	89	15	4		6		5				15
# of days of restricted time	Holland	632	134	72 days		110 days		67 days				249 days
# of medical only claims	Holland	188	40	41		57		41				139
<p>Green = at or above the target</p> <p>Yellow = minus 5% of target</p> <p>Red = below 5% of target or may not meet target this year</p> <p>Pass = Green</p> <p>Fail = Red (correction plan required)</p> <p>PG = Peer Group Data Base Mean Score</p>												