

Desired Performance	Quality Target Measures	Baseline	Ballad Health	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.24	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.21	0.32
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.08	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	2.24	0.87
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	2.18	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	7.98	9.62
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	4.18	3.19
↓	PSI 13 Postoperative Sepsis Rate	3.58	6.48	2.54
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	1.14	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.45	0.97
↓	CLABSI	0.711	1.058	0.962
↓	CAUTI	0.558	0.785	1.072
↓	SSI COLON Surgical Site Infection	2.13	2.21	
↓	SSI HYST Surgical Site Infection	0.71	0.73	
↓	MRSA	0.047	0.096	0.120
↓	CDIFF	0.671	0.182	0.062
↑	SMB: Sepsis Management Bundle	56.9%	52.8%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	75.8%	76.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	76.8%	78.7%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	59.5%	63.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.9%	83.8%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	47.6%	46.7%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	24.6%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	18.5%	
↓	Sepsis In House Mortality	10.7%	11.9%	8.5%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	4.15%	3.72%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	7.93%	5.81%
↓	Left without being seen	0.83%	1.73%	2.76%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	151.9	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	365.9	

Desired Performance	Quality Target Measures	Baseline	Johnson City Medical Center	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.53	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.19	0.60
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	1.32	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	1.99	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	6.52	12.20
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	5.81	2.34
↓	PSI 13 Postoperative Sepsis Rate	3.58	6.17	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	1.90	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	2.053	1.553
↓	CAUTI	0.558	1.393	2.401
↓	SSI COLON Surgical Site Infection	2.13	1.23	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.135	0.195
↓	CDIFF	0.671	0.280	0.000
↑	SMB: Sepsis Management Bundle	56.9%	41.1%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	73.8%	72.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	73.8%	70.9%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	55.2%	52.9%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.3%	85.8%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	45.9%	41.0%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	26.6%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	21.3%	
↓	Sepsis In House Mortality	10.7%	17.7%	12.5%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	3.55%	5.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	10.22%	10.00%
↓	Left without being seen	0.83%	1.19%	1.88%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	186.3	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	359.0	

Desired Performance	Quality Target Measures	Baseline	Holston Valley Medical Center	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.38	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	1.31	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	1.62	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	11.82	10.42
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	3.12	3.09
↓	PSI 13 Postoperative Sepsis Rate	3.58	5.72	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.96	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.82	0.00
↓	CLABSI	0.711	0.584	1.078
↓	CAUTI	0.558	0.777	0.864
↓	SSI COLON Surgical Site Infection	2.13	2.00	
↓	SSI HYST Surgical Site Infection	0.71	1.31	
↓	MRSA	0.047	0.091	0.136
↓	CDIFF	0.671	0.216	0.136
↑	SMB: Sepsis Management Bundle	56.9%	52.6%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	72.0%	75.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	76.0%	83.4%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	60.0%	77.1%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.2%	82.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	46.6%	45.9%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	20.3%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	16.5%	
↓	Sepsis In House Mortality	10.7%	15.6%	11.7%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	4.22%	1.30%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	8.28%	2.78%
↓	Left without being seen	0.83%	1.38%	2.67%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	212.0	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	794.7	

Desired Performance	Quality Target Measures	Baseline	Bristol Regional Medical Center	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.33	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.08	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	3.96	5.05
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	4.65	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	4.77	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	2.97	9.52
↓	PSI 13 Postoperative Sepsis Rate	3.58	8.24	18.18
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.43	0.00
↓	CLABSI	0.711	1.303	1.333
↓	CAUTI	0.558	1.282	1.661
↓	SSI COLON Surgical Site Infection	2.13	1.30	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.153	0.168
↓	CDIFF	0.671	0.083	0.168
↑	SMB: Sepsis Management Bundle	56.9%	50.4%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	71.9%	66.1%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	73.7%	70.6%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	58.3%	51.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.4%	83.2%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	44.9%	43.3%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	26.7%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	19.7%	
↓	Sepsis In House Mortality	10.7%	12.9%	11.7%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	4.94%	4.17%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	10.30%	8.45%
↓	Left without being seen	0.83%	2.32%	3.06%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	183.8	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	390.9	

Desired Performance	Quality Target Measures	Baseline	Johnston Memorial Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.32	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	1.38	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	7.75	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	8.93	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	2.50	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	17.86	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	1.416	0.000
↓	CAUTI	0.558	0.217	0.000
↓	SSI COLON Surgical Site Infection	2.13	2.90	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.071	0.000
↓	CDIFF	0.671	0.074	0.000
↑	SMB: Sepsis Management Bundle	56.9%	54.9%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	77.2%	77.4%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	76.2%	81.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	57.3%	52.1%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	86.6%	84.0%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	46.6%	40.7%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	27.7%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	18.2%	
↓	Sepsis In House Mortality	10.7%	10.0%	8.6%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	3.35%	14.29%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	9.38%	7.50%
↓	Left without being seen	0.83%	3.19%	5.26%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	212.2	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	444.1	

Desired Performance	Quality Target Measures	Baseline	Greenville Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.28	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.62	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	8.40	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	4.82	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	7.58	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	3.56	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	1.32	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.197	0.000
↓	SSI COLON Surgical Site Infection	2.13	0.00	
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.111	0.000
↑	SMB: Sepsis Management Bundle	56.9%	22.8%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	73.9%	76.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	76.7%	77.2%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	61.3%	65.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	83.2%	86.7%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	45.3%	47.4%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	21.9%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	14.7%	
↓	Sepsis In House Mortality	10.7%	9.8%	7.1%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	5.67%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	7.61%	11.54%
↓	Left without being seen	0.83%	3.16%	4.03%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	191.9	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	431.5	

Desired Performance	Quality Target Measures	Baseline	Norton Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.41	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	21.28	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13	5.00	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.000	0.000
↑	SMB: Sepsis Management Bundle	56.9%	37.3%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	80.1%	77.1%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	81.8%	83.3%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	65.6%	73.3%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	86.1%	71.9%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	44.3%	47.9%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	24.6%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	21.7%	
↓	Sepsis In House Mortality	10.7%	3.3%	3.8%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	3.72%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	2.63%	7.69%
↓	Left without being seen	0.83%	1.59%	1.33%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	185.4	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	314.4	

Desired Performance	Quality Target Measures	Baseline	Sycamore Shoals Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	4.99	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	0.00	62.50
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	3.19	27.78
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.607	0.000
↓	SSI COLON Surgical Site Infection	2.13	3.23	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.139	0.000
↑	SMB: Sepsis Management Bundle	56.9%	69.2%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	78.8%	87.2%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	75.7%	69.3%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	60.2%	70.6%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.9%	86.4%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	47.2%	45.2%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	27.8%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	18.0%	
↓	Sepsis In House Mortality	10.7%	5.8%	2.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	5.03%	5.26%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	5.10%	3.57%
↓	Left without being seen	0.83%	1.37%	4.22%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	160.5	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	342.3	

Desired Performance	Quality Target Measures	Baseline	Franklin Woods Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.52	2.58
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	15.34	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	8.17	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	9.87	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	2.31	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13	3.82	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.136	0.000
↑	SMB: Sepsis Management Bundle	56.9%	56.8%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	82.5%	79.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	81.7%	83.9%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	63.3%	62.5%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	86.7%	83.7%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	56.4%	45.0%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	25.3%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	13.7%	
↓	Sepsis In House Mortality	10.7%	4.2%	1.3%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	3.54%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	8.00%	0.00%
↓	Left without being seen	0.83%	3.10%	4.04%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	182.2	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	378.8	

Desired Performance	Quality Target Measures	Baseline	Indian Path Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	9.13	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	4.41	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13	3.23	
↓	SSI HYST Surgical Site Infection	0.71	0.00	
↓	MRSA	0.047	0.000	
↓	CDIFF	0.671	0.602	0.000
↑	SMB: Sepsis Management Bundle	56.9%	69.4%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	81.7%	82.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	86.4%	86.7%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	64.8%	66.7%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	83.8%	90.0%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	52.7%	37.0%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	21.2%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	25.8%	
↓	Sepsis In House Mortality	10.7%	0.9%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	5.41%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.89%	0.00%
↓	Left without being seen	0.83%	2.22%	5.54%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	147.3	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	468.7	

Desired Performance	Quality Target Measures	Baseline	Smyth County Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	10.87	0.00
↓	PSI 13 Postoperative Sepsis Rate	3.58	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13	0.00	
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.000	0.000
↑	SMB: Sepsis Management Bundle	56.9%	68.9%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	82.9%	100.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	82.4%	100.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	64.8%	90.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	88.1%	81.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	54.6%	83.8%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	22.0%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	14.3%	
↓	Sepsis In House Mortality	10.7%	5.9%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	3.57%	20.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	1.19%	0.00%
↓	Left without being seen	0.83%	0.86%	0.46%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	110.2	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	200.9	

Desired Performance	Quality Target Measures	Baseline	Lonesome Pine Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	2.74	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	0.00	
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	0.00	
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.287	0.000
↑	SMB: Sepsis Management Bundle	56.9%	51.2%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	75.7%	84.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	75.2%	97.2%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	64.1%	98.3%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	82.3%	98.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	47.3%	64.4%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	11.1%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	14.9%	
↓	Sepsis In House Mortality	10.7%	9.3%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	2.56%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	2.25%	0.00%
↓	Left without being seen	0.83%	0.77%	0.28%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	134.5	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	295.3	

Desired Performance	Quality Target Measures	Baseline	Hawkins County Memorial Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59		
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31		
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.000	0.000
↑	SMB: Sepsis Management Bundle	56.9%	76.5%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	81.3%	95.8%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	82.3%	97.2%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	48.3%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	88.3%	98.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	49.5%	16.1%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	45.5%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	9.1%	
↓	Sepsis In House Mortality	10.7%	5.0%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	0.00%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.00%	0.00%
↓	Left without being seen	0.83%	0.24%	0.09%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	97.3	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	195.6	

Desired Performance	Quality Target Measures	Baseline	Russell County Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	0.00	
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76	0.00	
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24	0.00	
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	0.00	
↓	PSI 13 Postoperative Sepsis Rate	3.58	0.00	
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	
↓	CLABSI	0.711	0.000	
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.171	0.000
↓	CDIFF	0.671	0.000	0.000
↑	SMB: Sepsis Management Bundle	56.9%	64.8%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	80.2%	100.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	84.5%	100.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	64.8%	100.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	84.2%	100.0%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	46.1%	77.8%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	34.4%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	18.5%	
↓	Sepsis In House Mortality	10.7%	5.2%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	5.26%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	2.97%	0.00%
↓	Left without being seen	0.83%	0.63%	0.65%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	117.5	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	197.9	

Desired Performance	Quality Target Measures	Baseline	Unicoi County Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59		
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31		
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	0.00
↓	CLABSI	0.711	0.000	0.000
↓	CAUTI	0.558	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047	0.000	0.000
↓	CDIFF	0.671	0.000	0.000
↑	SMB: Sepsis Management Bundle	56.9%	69.2%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	80.9%	100.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	81.6%	100.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	76.8%	75.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	74.6%	83.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	46.9%	61.1%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	0.0%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	13.8%	
↓	Sepsis In House Mortality	10.7%	2.2%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	0.00%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.00%	0.00%
↓	Left without being seen	0.83%	0.50%	0.33%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	126.4	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	275.0	

Desired Performance	Quality Target Measures	Baseline	Dickenson Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59		
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31		
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83	0.00	
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	
↓	CLABSI	0.711		
↓	CAUTI	0.558		
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047		
↓	CDIFF	0.671		
↑	SMB: Sepsis Management Bundle	56.9%	66.7%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	73.3%	
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	75.0%	
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	100.0%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	87.5%	
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	35.0%	
↓	READM30HF Heart Failure 30day readmissions rate	27.7%		
↓	READM30PN Pneumonia 30day readmission rate	17.9%	100.0%	
↓	Sepsis In House Mortality	10.7%	0.0%	
↓	MORT30HF Heart failure 30day mortality rate	3.0%		
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.00%	
↓	Left without being seen	0.83%	1.03%	0.39%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	114.8	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	133.0	

Desired Performance	Quality Target Measures	Baseline	Hancock County Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59		
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31		
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18		
↓	CLABSI	0.711		
↓	CAUTI	0.558		
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047		
↓	CDIFF	0.671		
↑	SMB: Sepsis Management Bundle	56.9%	57.1%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	83.0%	29.1%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	84.4%	47.2%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	78.3%	0.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	85.4%	48.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	61.6%	0.0%
↓	READM30HF Heart Failure 30day readmissions rate	27.7%	0.0%	
↓	READM30PN Pneumonia 30day readmission rate	17.9%	14.3%	
↓	Sepsis In House Mortality	10.7%	8.3%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.0%	0.00%	0.00%
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.00%	0.00%
↓	Left without being seen	0.83%	0.43%	0.35%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	123.7	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	179.4	

Desired Performance	Quality Target Measures	Baseline	Johnson County Community Hospital	
			FY21	FYTD22
↓	PSI 3 Pressure Ulcer Rate	1.07	0.00	
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.25	0.00	
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59		
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.76		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.24		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31		
↓	PSI 13 Postoperative Sepsis Rate	3.58		
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.83		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.18	0.00	
↓	CLABSI	0.711		
↓	CAUTI	0.558		
↓	SSI COLON Surgical Site Infection	2.13		
↓	SSI HYST Surgical Site Infection	0.71		
↓	MRSA	0.047		
↓	CDIFF	0.671		
↑	SMB: Sepsis Management Bundle	56.9%	100.0%	
Desired Performance	Quality Priority Measures	Baseline	FY21	FYTD22
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.6%	100.0%	
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	83.3%	100.0%	
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	71.0%	100.0%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.7%	100.0%	
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.6%	77.8%	
↓	READM30HF Heart Failure 30day readmissions rate	27.7%		
↓	READM30PN Pneumonia 30day readmission rate	17.9%	66.7%	
↓	Sepsis In House Mortality	10.7%	0.0%	
↓	MORT30HF Heart failure 30day mortality rate	3.0%		
↓	MORT30PN Pneumonia 30day mortality rate	5.0%	0.00%	
↓	Left without being seen	0.83%	0.71%	1.10%
↓	Median Time from ED Arrival to Departure for Outpatients (18b)	126.0	95.8	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	223.0	652.6	