Ballad Health

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.18	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.01	0.07
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.16	0.14
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.49	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.44	4.05
PSI 11 Postoperative Respiratory Failure Rate	9.43	4.24	4.34
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.62	0.75
PSI 13 Postoperative Sepsis Rate	4.36	2.82	1.47
SMB: Sepsis Management Bundle	58.40%	61.70%	68.67%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.92	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.08	0.00
CLABSI	0.882	0.990	0.636
CAUTI	0.888	0.717	0.755
SSI COLON Surgical Site Infection	3.08	3.17	5.41
SSI HYST Surgical Site Infection	2.27	2.02	3.70
MRSA	0.105	0.059	0.071
CDIFF	0.205	0.179	0.090
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	77.52%	80.01%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	67.20%	72.32%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.91%	85.53%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	292.00
Mortality O/E	1.13	0.97	0.93
All-Cause Mortality Rate	3.82%	2.26%	2.19%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.07%	15.62%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	144.24	146.79
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.78	0.99
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	77.17%	77.38%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	59.45%	63.22%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.98%	61.58%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	62.35%	65.10%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.47%	65.07%
READM30HF Heart Failure 30-day readmissions rate	25.48%	24.16%	31.30%
READM30PN Pneumonia 30-day readmission rate	18.10%	18.27%	19.31%
MORT30HF Heart Failure 30-day mortality rate	4.74%	2.67%	2.53%
MORT30PN Pneumonia 30-day mortality rate	6.12%	4.11%	4.04%
Sepsis In-House Mortality Rate	10.85%	8.96%	9.49%
OP22 Left without being seen	1.85%	0.55%	0.41%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	148.00	149.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	125.00	68.00

Johnson City Medical Center

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.47	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.04	0.25
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.18	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.38	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.19	4.46
PSI 11 Postoperative Respiratory Failure Rate	9.43	6.30	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.84	1.10
PSI 13 Postoperative Sepsis Rate	4.36	3.60	0.00
SMB: Sepsis Management Bundle	58.40%	38.89%	60.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	1.11	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	1.164	0.000
CAUTI	0.888	0.936	1.303
SSI COLON Surgical Site Infection	3.08	7.69	0.00
SSI HYST Surgical Site Infection	2.27	3.92	0.00
MRSA	0.105	0.075	0.165
CDIFF	0.205	0.208	0.092
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	73.73%	76.46%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	61.45%	70.08%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.33%	85.30%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	448.00	370.50
Mortality O/E	1.13	1.11	1.07
All-Cause Mortality Rate	3.82%	2.81%	2.64%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.89%	16.18%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	179.33	125.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.02	0.94
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	73.06%	74.61%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	36.69%	60.77%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	56.83%	57.81%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	53.73%	61.12%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	51.84%	61.15%
READM30HF Heart Failure 30-day readmissions rate	25.48%	27.92%	36.21%
READM30PN Pneumonia 30-day readmission rate	18.10%	18.22%	28.57%
MORT30HF Heart Failure 30-day mortality rate	4.74%	3.90%	3.15%
MORT30PN Pneumonia 30-day mortality rate	6.12%	7.28%	3.13%
Sepsis In-House Mortality Rate	10.85%	16.41%	14.06%
OP22 Left without being seen	1.85%	0.55%	0.45%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	208.50	214.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	198.00	175.00

Holston Valley Medical Center

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.14	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.65	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	2.97	8.81
PSI 11 Postoperative Respiratory Failure Rate	9.43	4.59	13.45
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.40	0.00
PSI 13 Postoperative Sepsis Rate	4.36	1.55	4.69
SMB: Sepsis Management Bundle	58.40%	51.89%	50.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	2.33	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.798	1.216
CAUTI	0.888	0.752	0.436
SSI COLON Surgical Site Infection	3.08	0.00	0.00
SSI HYST Surgical Site Infection	2.27	0.00	
MRSA	0.105	0.064	0.000
CDIFF	0.205	0.245	0.151
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	74.92%	79.08%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	71.46%	72.51%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.99%	82.36%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	488.00	377.50
Mortality O/E	1.13	0.95	0.78
All-Cause Mortality Rate	3.82%	3.53%	3.20%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.37%	15.44%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	136.36	90.91
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.80	1.06
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	76.34%	76.35%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	53.83%	56.89%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	57.67%	57.46%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	58.40%	62.98%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	55.32%	61.94%
READM30HF Heart Failure 30-day readmissions rate	25.48%	22.16%	39.62%
READM30PN Pneumonia 30-day readmission rate	18.10%	18.70%	14.29%
MORT30HF Heart Failure 30-day mortality rate	4.74%	3.70%	3.25%
MORT30PN Pneumonia 30-day mortality rate	6.12%	5.21%	5.63%
Sepsis In-House Mortality Rate	10.85%	11.07%	12.02%
OP22 Left without being seen	1.85%	0.38%	0.41%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	207.00	201.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	179.50	92.00

Bristol Regional Medical Center

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.14	0.43
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.92	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	1.96	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.36	0.00
PSI 13 Postoperative Sepsis Rate	4.36	2.21	0.00
SMB: Sepsis Management Bundle	58.40%	53.28%	66.67%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.40	0.00
CLABSI	0.882	1.311	1.352
CAUTI	0.888	0.559	0.574
SSI COLON Surgical Site Infection	3.08	1.94	15.79
SSI HYST Surgical Site Infection	2.27	3.13	0.00
MRSA	0.105	0.064	0.077
CDIFF	0.205	0.194	0.080
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.07%	77.48%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	62.86%	63.53%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.90%	86.13%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	354.50	317.50
Mortality O/E	1.13	0.91	0.98
All-Cause Mortality Rate	3.82%	1.99%	2.06%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.68%	16.08%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	94.74	214.29
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.86	0.95
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	74.03%	75.45%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	55.64%	58.93%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.13%	61.65%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	59.34%	58.58%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	56.19%	59.10%
READM30HF Heart Failure 30-day readmissions rate	25.48%	24.69%	27.42%
READM30PN Pneumonia 30-day readmission rate	18.10%	20.36%	17.57%
MORT30HF Heart Failure 30-day mortality rate	4.74%	1.83%	0.87%
MORT30PN Pneumonia 30-day mortality rate	6.12%	4.17%	4.32%
Sepsis In-House Mortality Rate	10.85%	9.18%	9.30%
OP22 Left without being seen	1.85%	0.93%	0.79%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	191.00	227.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	104.50	97.00

Johnston Memorial Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	5.03	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	3.09	0.00
PSI 13 Postoperative Sepsis Rate	4.36	6.17	0.00
SMB: Sepsis Management Bundle	58.40%	72.82%	75.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	1.279	0.000
CAUTI	0.888	1.111	0.000
SSI COLON Surgical Site Infection	3.08	2.30	0.00
SSI HYST Surgical Site Infection	2.27	0.00	
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.142	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	78.49%	79.74%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	78.89%	74.19%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.33%	88.76%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.50	285.00
Mortality O/E	1.13	1.04	1.21
All-Cause Mortality Rate	3.82%	2.78%	2.61%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.24%	14.66%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	172.41	500.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.89	0.98
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	79.66%	80.07%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	58.87%	60.72%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	61.68%	65.25%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.67%	64.67%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	63.79%	67.05%
READM30HF Heart Failure 30-day readmissions rate	25.48%	24.79%	11.76%
READM30PN Pneumonia 30-day readmission rate	18.10%	19.46%	11.11%
MORT30HF Heart Failure 30-day mortality rate	4.74%	2.90%	2.94%
MORT30PN Pneumonia 30-day mortality rate	6.12%	3.98%	7.06%
Sepsis In-House Mortality Rate	10.85%	10.33%	14.19%
OP22 Left without being seen	1.85%	0.75%	0.38%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	186.00	156.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	128.50	65.00

Greeneville Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.66	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.21	1.16
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	1.32	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	3.66	0.00
PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
SMB: Sepsis Management Bundle	58.40%	52.21%	62.50%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.922	0.000
CAUTI	0.888	0.654	2.155
SSI COLON Surgical Site Infection	3.08	0.00	0.00
SSI HYST Surgical Site Infection	2.27	0.00	0.00
MRSA	0.105	0.088	0.000
CDIFF	0.205	0.045	0.285
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.13%	80.99%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.89%	77.27%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.54%	81.39%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	474.50	284.00
Mortality O/E	1.13	1.00	1.31
All-Cause Mortality Rate	3.82%	1.62%	2.16%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.34%	16.11%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	68.97	250.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.12	0.99
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	78.93%	74.56%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	61.41%	69.63%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.18%	61.79%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	63.30%	68.13%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.22%	62.92%
READM30HF Heart Failure 30-day readmissions rate	25.48%	16.37%	21.05%
READM30PN Pneumonia 30-day readmission rate	18.10%	21.94%	33.33%
MORT30HF Heart Failure 30-day mortality rate	4.74%	2.59%	2.50%
MORT30PN Pneumonia 30-day mortality rate	6.12%	2.11%	7.35%
Sepsis In-House Mortality Rate	10.85%	4.55%	9.68%
OP22 Left without being seen	1.85%	0.56%	0.29%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	159.00	154.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	207.50	76.00

Franklin Woods Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	1.82	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	3.84	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.85	5.29
PSI 13 Postoperative Sepsis Rate	4.36	5.98	0.00
SMB: Sepsis Management Bundle	58.40%	70.67%	75.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	2.12	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.000	0.000
CAUTI	0.888	0.000	2.660
SSI COLON Surgical Site Infection	3.08	3.02	0.00
SSI HYST Surgical Site Infection	2.27	0.00	0.00
MRSA	0.105	0.035	0.000
CDIFF	0.205	0.080	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	83.56%	87.96%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	64.92%	78.48%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.75%	89.08%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	649.00	258.50
Mortality O/E	1.13	0.75	0.84
All-Cause Mortality Rate	3.82%	0.54%	0.42%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	11.94%	8.84%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	119.05	200.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.88	0.97
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	82.96%	84.84%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	67.46%	74.10%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	65.59%	68.75%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	75.14%	80.62%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	81.36%	84.88%
READM30HF Heart Failure 30-day readmissions rate	25.48%	16.35%	11.11%
READM30PN Pneumonia 30-day readmission rate	18.10%	17.70%	13.04%
MORT30HF Heart Failure 30-day mortality rate	4.74%		9.09%
MORT30PN Pneumonia 30-day mortality rate	6.12%	3.00%	0.00%
Sepsis In-House Mortality Rate	10.85%	2.86%	0.83%
OP22 Left without being seen	1.85%	0.74%	0.38%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	176.00	153.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	441.50	76.00

Indian Path Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	0.00
PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
SMB: Sepsis Management Bundle	58.40%	75.95%	83.33%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.000	0.000
CAUTI	0.888	1.616	0.000
SSI COLON Surgical Site Infection	3.08	7.50	0.00
SSI HYST Surgical Site Infection	2.27	0.00	0.00
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.000	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	84.42%	87.36%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	73.09%	86.21%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.40%	91.43%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	335.00
Mortality O/E	1.13	0.00	0.00
All-Cause Mortality Rate	3.82%	0.00%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.43%	11.93%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	0.00	0.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.98	1.00
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	85.44%	83.12%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	69.65%	71.84%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	64.58%	65.77%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	73.33%	73.45%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.56%	74.29%
READM30HF Heart Failure 30-day readmissions rate	25.48%	23.53%	
READM30PN Pneumonia 30-day readmission rate	18.10%	14.36%	0.00%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%		0.00%
Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
OP22 Left without being seen	1.85%	0.36%	0.17%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	147.00	122.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	84.00	35.00

Norton Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.62	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	0.00
PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
SMB: Sepsis Management Bundle	58.40%	70.18%	85.71%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.000	0.000
CAUTI	0.888	0.000	0.000
SSI COLON Surgical Site Infection	3.08	2.56	20.00
SSI HYST Surgical Site Infection	2.27	0.00	
MRSA	0.105	0.079	0.000
CDIFF	0.205	0.000	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.73%	81.60%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.33%	74.74%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.66%	84.21%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	359.00	319.00
Mortality O/E	1.13	0.55	0.46
All-Cause Mortality Rate	3.82%	1.70%	1.28%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	18.52%	20.83%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	71.43	0.00
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.96	1.00
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	77.40%	75.84%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	65.44%	68.22%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	60.67%	63.90%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	64.08%	63.61%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.88%	53.91%
READM30HF Heart Failure 30-day readmissions rate	25.48%	30.10%	40.00%
READM30PN Pneumonia 30-day readmission rate	18.10%	17.75%	33.33%
MORT30HF Heart Failure 30-day mortality rate	4.74%	2.00%	0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%	2.98%	2.70%
Sepsis In-House Mortality Rate	10.85%	5.09%	4.67%
OP22 Left without being seen	1.85%	0.20%	0.14%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	141.00	108.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	108.00	70.50

Sycamore Shoals Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.63	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	9.43	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	0.00
PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
SMB: Sepsis Management Bundle	58.40%	66.00%	40.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.000	0.000
CAUTI	0.888	1.473	0.000
SSI COLON Surgical Site Infection	3.08	9.68	0.00
SSI HYST Surgical Site Infection	2.27	0.00	100.00
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.234	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.61%	86.16%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	64.20%	75.00%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	88.29%	85.22%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	446.00	242.00
Mortality O/E	1.13	0.74	0.52
All-Cause Mortality Rate	3.82%	1.30%	1.25%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.02%	16.59%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	0.00	
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.96	0.99
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	80.16%	85.20%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	60.98%	71.81%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.30%	66.71%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.86%	71.76%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	66.34%	79.11%
READM30HF Heart Failure 30-day readmissions rate	25.48%	21.50%	22.22%
READM30PN Pneumonia 30-day readmission rate	18.10%	13.44%	5.56%
MORT30HF Heart Failure 30-day mortality rate	4.74%	0.93%	6.25%
MORT30PN Pneumonia 30-day mortality rate	6.12%	3.17%	2.63%
Sepsis In-House Mortality Rate	10.85%	2.54%	1.54%
OP22 Left without being seen	1.85%	0.33%	0.09%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	154.00	165.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	223.00	53.00

Smyth County Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.00	
PSI 11 Postoperative Respiratory Failure Rate	9.43	0.00	
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	0.00
PSI 13 Postoperative Sepsis Rate	4.36	0.00	
SMB: Sepsis Management Bundle	58.40%	72.13%	100.00 %
PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
CLABSI	0.882	0.000	0.000
CAUTI	0.888	0.000	0.000
SSI COLON Surgical Site Infection	3.08	0.00	
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.000	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	80.96%	66.67%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	73.68%	59.09%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.88%	78.79%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	328.50	345.00
Mortality O/E	1.13	0.52	0.34
All-Cause Mortality Rate	3.82%	0.98%	0.60%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.51%	18.52%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	0.00	
PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.98	
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	83.38%	68.63%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	69.24%	51.74%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.19%	53.87%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.07%	45.28%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	67.76%	41.03%
READM30HF Heart Failure 30-day readmissions rate	25.48%	18.87%	100.00%
READM30PN Pneumonia 30-day readmission rate	18.10%	12.74%	33.33%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%	1.26%	0.00%
Sepsis In-House Mortality Rate	10.85%	0.53%	5.00%
OP22 Left without being seen	1.85%	0.37%	0.57%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	143.00	139.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	100.00	99.00

Lonesome Pine Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	57.14%	50.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882	0.000	0.000
CAUTI	0.888	0.000	0.000
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.000	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	87.07%	97.44%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	77.08%	84.62%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.98%	94.12%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	271.00	285.00
Mortality O/E	1.13	0.66	0.00
All-Cause Mortality Rate	3.82%	1.07%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.47%	15.00%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	83.60%	83.09%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	78.12%	83.69%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	65.95%	73.35%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.92%	92.05%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	68.09%	92.48%
READM30HF Heart Failure 30-day readmissions rate	25.48%	21.05%	
READM30PN Pneumonia 30-day readmission rate	18.10%	18.37%	0.00%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%	2.00%	0.00%
Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
OP22 Left without being seen	1.85%	0.17%	0.00%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	125.00	134.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	73.00

Hawkins County Memorial Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	76.92%	100.00 %
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882	0.000	
CAUTI	0.888	0.000	0.000
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.734	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	82.81%	82.05%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	74.65%	85.71%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.94%	95.65%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	253.00	190.00
Mortality O/E	1.13	1.47	0.00
All-Cause Mortality Rate	3.82%	2.08%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	9.80%	9.09%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	76.39%	83.37%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	72.26%	83.02%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	73.67%	92.98%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.66%	85.52%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	73.24%	85.84%
READM30HF Heart Failure 30-day readmissions rate	25.48%	5.71%	0.00%
READM30PN Pneumonia 30-day readmission rate	18.10%	8.51%	0.00%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%	4.08%	0.00%
Sepsis In-House Mortality Rate	10.85%	2.17%	0.00%
OP22 Left without being seen	1.85%	0.17%	0.05%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	124.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	29.00

Russell County Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	68.12%	87.50%
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	
CLABSI	0.882	0.000	0.000
CAUTI	0.888	0.000	0.000
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105	0.000	0.000
CDIFF	0.205	0.000	0.000
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	81.89%	80.95%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.71%	89.29%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.69%	82.93%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	213.50	212.00
Mortality O/E	1.13	0.89	0.83
All-Cause Mortality Rate	3.82%	1.21%	1.20%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.42%	20.29%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	80.00%	72.59%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	70.92%	67.70%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.07%	62.87%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.54%	64.08%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	65.91%	60.85%
READM30HF Heart Failure 30-day readmissions rate	25.48%	38.89%	60.00%
READM30PN Pneumonia 30-day readmission rate	18.10%	18.67%	16.67%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%	1.78%	0.00%
Sepsis In-House Mortality Rate	10.85%	4.04%	2.63%
OP22 Left without being seen	1.85%	0.77%	0.62%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	117.00	141.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	27.00	24.00

Lee County Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	72.34%	60.00%
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882		
CAUTI	0.888		
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105		
CDIFF	0.205		
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	89.29%	100.00 %
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	78.05%	87.50%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	89.43%	92.86%
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	231.00	233.00
Mortality O/E	1.13	0.57	1.14
All-Cause Mortality Rate	3.82%	0.96%	1.32%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.32%	21.05%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	88.10%	99.10%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	85.13%	81.75%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	76.98%	89.12%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	84.55%	99.85%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	82.50%	87.60%
READM30HF Heart Failure 30-day readmissions rate	25.48%	12.00%	0.00%
READM30PN Pneumonia 30-day readmission rate	18.10%	12.22%	0.00%
MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
MORT30PN Pneumonia 30-day mortality rate	6.12%		0.00%
Sepsis In-House Mortality Rate	10.85%	1.37%	0.00%
OP22 Left without being seen	1.85%	0.47%	0.20%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	111.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	49.00	58.50

Dickenson Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	40.00%	
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882		
CAUTI	0.888		
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105		
CDIFF	0.205		
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	72.22%	
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	66.67%	
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	85.00%	
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	188.00	
Mortality O/E	1.13	0.00	0.00
All-Cause Mortality Rate	3.82%	0.00%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	12.50%	0.00%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	67.68%	
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	95.83%	
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	50.00%	
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	50.00%	
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	50.00%	
READM30HF Heart Failure 30-day readmissions rate	25.48%		
READM30PN Pneumonia 30-day readmission rate	18.10%	50.00%	
MORT30HF Heart Failure 30-day mortality rate	4.74%		
MORT30PN Pneumonia 30-day mortality rate	6.12%		
Sepsis In-House Mortality Rate	10.85%	0.00%	
OP22 Left without being seen	1.85%	0.67%	0.17%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	109.00	123.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	22.00	

Hancock County Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14		
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20		
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	75.00%	100.00 %
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882		
CAUTI	0.888		
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105		
CDIFF	0.205		
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	96.83%	75.00%
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	89.47%	50.00%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	94.12%	100.00 %
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	180.00	195.00
Mortality O/E	1.13	0.54	0.00
All-Cause Mortality Rate	3.82%	1.16%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	9.46%	28.57%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	89.82%	74.55%
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	100.00%	87.79%
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	95.83%	97.80%
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	85.00%	49.93%
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.00%	75.05%
READM30HF Heart Failure 30-day readmissions rate	25.48%	0.00%	
READM30PN Pneumonia 30-day readmission rate	18.10%	10.53%	
MORT30HF Heart Failure 30-day mortality rate	4.74%		
MORT30PN Pneumonia 30-day mortality rate	6.12%		0.00%
Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
OP22 Left without being seen	1.85%	0.06%	0.00%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	106.00	138.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	27.00	38.00

Johnson County Community Hospital

Metric	Baseline	FY25	FY26
PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.00
PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90		
PSI 11 Postoperative Respiratory Failure Rate	9.43		
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	
PSI 13 Postoperative Sepsis Rate	4.36		
SMB: Sepsis Management Bundle	58.40%	100.00%	
PSI 14 Postoperative Wound Dehiscence Rate	1.01		
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
CLABSI	0.882		
CAUTI	0.888		
SSI COLON Surgical Site Infection	3.08		
SSI HYST Surgical Site Infection	2.27		
MRSA	0.105		
CDIFF	0.205		
HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	80.00%	
HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	80.00%	
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.50%	
Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00		
Mortality O/E	1.13	1.78	0.00
All-Cause Mortality Rate	3.82%	2.38%	0.00%
READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	5.13%	0.00%

Metric	Baseline	FY25	FY26
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		
PSI90 Complications / Patient Safety for Selected Indicators	0.79		
HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	76.67%	
HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	75.00%	
HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	87.50%	
H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	70.00%	
HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.00%	
READM30HF Heart Failure 30-day readmissions rate	25.48%		
READM30PN Pneumonia 30-day readmission rate	18.10%	0.00%	
MORT30HF Heart Failure 30-day mortality rate	4.74%		
MORT30PN Pneumonia 30-day mortality rate	6.12%		0.00%
Sepsis In-House Mortality Rate	10.85%	12.50%	
OP22 Left without being seen	1.85%	0.85%	1.43%
Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	126.00	152.00
Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30		