

Ballad Health

Metric	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.18	0.18
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.01	0.06
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.16	0.15
↓ PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.49	0.79
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.44	2.19
↓ PSI 11 Postoperative Respiratory Failure Rate	9.43	4.24	4.04
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.62	1.19
↓ PSI 13 Postoperative Sepsis Rate	4.36	2.82	1.19
↑ SMB: Sepsis Management Bundle	58.40%	61.70%	66.67%
↓ PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.92	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.08	0.19
↓ CLABSI	0.882	0.990	0.820
↓ CAUTI	0.888	0.717	0.737
↓ SSI COLON Surgical Site Infection	3.08	3.17	3.44
↓ SSI HYST Surgical Site Infection	2.27	2.02	2.41
↓ MRSA	0.105	0.059	0.090
↓ CDI/F	0.205	0.179	0.078
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	77.52%	79.03%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	67.20%	71.47%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.91%	85.41%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	309.00
↓ Mortality O/E	1.13	0.97	0.88
↓ All-Cause Mortality Rate	3.82%	2.26%	2.22%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.07%	15.44%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	144.24	165.58
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.78	1.00
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	77.17%	76.86%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	59.45%	60.59%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.98%	59.95%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	62.35%	64.81%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.47%	64.35%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.16%	26.27%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.27%	19.12%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.67%	2.34%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	4.11%	3.92%
↓ Sepsis In-House Mortality Rate	10.85%	8.96%	9.11%
↓ OP22 Left without being seen	1.85%	0.55%	0.37%
↓ 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	80.00

Johnson City Medical Center

Metric ▲	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.47	0.53
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.04	0.20
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.18	0.10
↓ PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.38	0.90
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.19	1.73
↓ PSI 11 Postoperative Respiratory Failure Rate	9.43	6.30	1.89
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.84	0.44
↓ PSI 13 Postoperative Sepsis Rate	4.36	3.60	0.00
↑ SMB: Sepsis Management Bundle	58.40%	38.89%	45.83%
↓ 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	0.455
↓ CAUTI	0.888	0.936	0.808
↓ SSI COLON Surgical Site Infection	3.08	7.69	2.33
↓ SSI HYST Surgical Site Infection	2.27	3.92	2.08
↓ MRSA	0.105	0.075	0.147
↓ CDI/F	0.205	0.208	0.055
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	73.73%	74.08%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	61.45%	67.22%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.33%	83.83%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	448.00	405.00
↓ Mortality O/E	1.13	1.11	0.99
↓ All-Cause Mortality Rate	3.82%	2.81%	2.64%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.89%	15.57%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	179.33	174.83
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.02	1.15
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	73.06%	72.33%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	36.69%	56.82%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	56.83%	55.58%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	53.73%	56.53%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	51.84%	56.31%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	27.92%	26.84%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.22%	21.59%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	3.90%	2.88%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	7.28%	6.16%
↓ Sepsis In-House Mortality Rate	10.85%	16.41%	12.56%
↓ OP22 Left without being seen	1.85%	0.55%	0.41%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	208.50	213.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	198.00	176.00

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	5.29
↓ PSI 11 Postoperative Respiratory Failure Rate	9.43	4.59	10.83
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.40	1.20
↓ PSI 13 Postoperative Sepsis Rate	4.36	1.55	1.81
↑ SMB: Sepsis Management Bundle	58.40%	51.89%	55.00%
↓ 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	1.393
↓ CAUTI	0.888	0.752	0.177
↓ 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	0.064	0.000
↓ CDIFF	0.205	0.245	0.148
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	74.92%	77.46%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	71.46%	72.26%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.99%	84.01%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	488.00	401.00
↓ Mortality O/E	1.13	0.95	0.83
↓ All-Cause Mortality Rate	3.82%	3.53%	3.49%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.37%	15.75%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	136.36	87.72
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.80	1.05
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	76.34%	75.88%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	53.83%	54.26%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	57.67%	56.23%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	58.40%	63.34%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	55.32%	61.70%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	22.16%	25.10%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.70%	18.57%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	3.70%	4.80%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	5.21%	5.25%
↓ Sepsis In-House Mortality Rate	10.85%	11.07%	13.40%
↓ OP22 Left without being seen	1.85%	0.38%	0.31%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	207.00	213.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	179.50	97.00

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	0.17
↓ PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	1.01
↓ 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	2.89
↓ PSI 13 Postoperative Sepsis Rate	4.36	2.21	0.00
↑ SMB: Sepsis Management Bundle	58.40%	53.28%	54.76%
↓ 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	1.045
↓ CAUTI	0.888	0.559	1.179
↓ SSI COLON Surgical Site Infection	3.08	1.94	8.96
↓ SSI HYST Surgical Site Infection	2.27	3.13	0.00
↓ MRSA	0.105	0.064	0.093
↓ CDI/F	0.205	0.194	0.128
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.07%	79.30%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	62.86%	65.77%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.90%	85.55%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	354.50	339.50
↓ Mortality O/E	1.13	0.91	0.87
↓ All-Cause Mortality Rate	3.82%	1.99%	1.98%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.68%	15.86%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	94.74	183.67
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.86	0.92
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	74.03%	77.11%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	55.64%	58.60%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.13%	62.32%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	59.34%	60.28%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	56.19%	61.38%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.69%	27.63%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	20.36%	18.12%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	1.83%	0.67%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	4.17%	3.03%
↓ Sepsis In-House Mortality Rate	10.85%	9.18%	8.94%
↓ OP22 Left without being seen	1.85%	0.93%	0.73%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	191.00	203.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	104.50	100.00

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	0.34
↓ 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	2.57
↓ PSI 13 Postoperative Sepsis Rate	4.36	6.17	21.28
↑ SMB: Sepsis Management Bundle	58.40%	72.82%	80.65%
↓ 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	1.042
↓ 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	0.171
↓ CDI/F	0.205	0.142	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	78.49%	79.83%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	78.89%	76.49%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.33%	89.62%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.50	294.00
↓ Mortality O/E	1.13	1.04	0.96
↓ All-Cause Mortality Rate	3.82%	2.78%	2.47%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.24%	15.59%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	172.41	157.89
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.89	0.99
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	79.66%	80.73%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	58.87%	59.89%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	61.68%	63.04%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.67%	69.23%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	63.79%	68.36%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.79%	23.61%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	19.46%	16.35%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.90%	1.11%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.98%	4.15%
↓ Sepsis In-House Mortality Rate	10.85%	10.33%	10.08%
↓ OP22 Left without being seen	1.85%	0.75%	0.37%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	186.00	191.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	128.50	75.00

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	0.96
↓ 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%	70.59%
↓ 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	1.775
↓ SSI COLON Surgical Site Infection	3.08	0.00	2.56
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.088	0.000
↓ CDIFF	0.205	0.045	0.115
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.13%	78.94%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.89%	74.44%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.54%	83.33%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	474.50	312.00
↓ Mortality O/E	1.13	1.00	0.98
↓ All-Cause Mortality Rate	3.82%	1.62%	1.97%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.34%	14.91%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	68.97	300.00
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.12	0.97
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	78.93%	75.40%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	61.41%	68.65%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.18%	55.65%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	63.30%	64.83%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.22%	59.95%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	16.37%	24.71%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	21.94%	20.16%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.59%	0.99%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	2.11%	3.49%
↓ Sepsis In-House Mortality Rate	10.85%	4.55%	7.02%
↓ OP22 Left without being seen	1.85%	0.56%	0.26%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	159.00	138.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	207.50	70.00

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	3.99
↓ 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	1.91
↓ 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	1.41
↓ CLABSI	0.882	0.000	0.000
↓ CAUTI	0.888	0.000	1.093
↓ SSI COLON Surgical Site Infection	3.08	3.02	2.17
↓ 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%	85.39%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	64.92%	77.46%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.75%	87.98%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	649.00	473.00
↓ Mortality O/E	1.13	0.75	0.84
↓ All-Cause Mortality Rate	3.82%	0.54%	0.58%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	11.94%	11.31%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	119.05	111.11
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.88	0.95
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	82.96%	83.25%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	67.46%	67.84%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	65.59%	66.55%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	75.14%	78.55%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	81.36%	82.22%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	16.35%	19.35%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	17.70%	17.92%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%		7.69%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.00%	2.84%
↓ Sepsis In-House Mortality Rate	10.85%	2.86%	2.46%
↓ OP22 Left without being seen	1.85%	0.74%	0.41%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	176.00	180.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	441.50	256.00

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%	70.83%
↓ 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
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	84.42%	81.90%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	73.09%	81.08%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.40%	91.15%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	337.00
↓ Mortality O/E	1.13	0.00	0.24
↓ All-Cause Mortality Rate	3.82%	0.00%	0.11%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.43%	11.74%

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%	78.55%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	69.65%	69.30%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	64.58%	58.31%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	73.33%	74.08%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.56%	76.18%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	23.53%	37.50%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	14.36%	17.65%
↓ 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%	0.96%
↓ OP22 Left without being seen	1.85%	0.36%	0.16%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	147.00	139.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	84.00	52.00

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%	66.67%
↓ PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	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	16.67
↓ SSI HYST Surgical Site Infection	2.27	0.00	
↓ MRSA	0.105	0.079	0.000
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.73%	81.37%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.33%	72.02%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.66%	82.77%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	359.00	298.00
↓ Mortality O/E	1.13	0.55	0.63
↓ All-Cause Mortality Rate	3.82%	1.70%	1.82%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	18.52%	18.97%

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	0.99
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	77.40%	75.03%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	65.44%	65.46%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	60.67%	62.25%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	64.08%	68.35%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.88%	62.35%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	30.10%	29.79%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	17.75%	26.32%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.00%	0.89%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	2.98%	3.82%
↓ Sepsis In-House Mortality Rate	10.85%	5.09%	4.76%
↓ OP22 Left without being seen	1.85%	0.20%	0.08%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	141.00	124.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	108.00	87.00

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%	58.82%
↓ 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
↓ CDI/F	0.205	0.234	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	79.61%	83.19%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	64.20%	73.20%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	88.29%	88.89%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	446.00	276.00
↓ Mortality O/E	1.13	0.74	0.47
↓ All-Cause Mortality Rate	3.82%	1.30%	0.93%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.02%	15.82%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	0.00	333.33
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.96	0.98
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	80.16%	81.73%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	60.98%	63.12%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.30%	64.58%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.86%	75.04%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	66.34%	75.68%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	21.50%	19.05%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	13.44%	14.29%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	0.93%	0.00%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.17%	2.73%
↓ Sepsis In-House Mortality Rate	10.85%	2.54%	2.74%
↓ OP22 Left without being seen	1.85%	0.33%	0.10%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	154.00	145.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	223.00	90.00

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%	83.33%
↓ 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	0.705
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	80.96%	71.10%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	73.68%	65.52%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.88%	77.78%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	328.50	294.00
↓ Mortality O/E	1.13	0.52	0.41
↓ All-Cause Mortality Rate	3.82%	0.98%	0.78%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.51%	16.78%

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%	71.11%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	69.24%	64.81%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.19%	58.79%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.07%	54.33%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	67.76%	45.43%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	18.87%	30.00%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	12.74%	28.57%
↓ 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%	3.51%
↓ OP22 Left without being seen	1.85%	0.37%	0.34%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	143.00	136.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	100.00	68.00

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		0.00
↓ PSI 13 Postoperative Sepsis Rate	4.36		
↑ SMB: Sepsis Management Bundle	58.40%	57.14%	55.56%
↓ PSI 14 Postoperative Wound Dehiscence Rate	1.01		0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		0.00
↓ CLABSI	0.882	0.000	22.222
↓ 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
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	87.07%	90.91%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	77.08%	78.79%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.98%	87.23%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	271.00	259.50
↓ Mortality O/E	1.13	0.66	1.15
↓ All-Cause Mortality Rate	3.82%	1.07%	1.68%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.47%	12.22%

Metric	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32		1000.00
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79		
↑ HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	83.60%	80.75%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	78.12%	76.10%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	65.95%	84.40%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.92%	84.16%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	68.09%	87.25%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	21.05%	33.33%
↓ 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%	14.29%
↓ OP22 Left without being seen	1.85%	0.17%	0.17%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	125.00	140.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	44.50

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	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
↓ CDI/F	0.205	0.734	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	82.81%	80.00%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	74.65%	80.77%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.94%	89.74%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	253.00	204.00
↓ Mortality O/E	1.13	1.47	0.57
↓ All-Cause Mortality Rate	3.82%	2.08%	0.83%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	9.80%	14.43%

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%	73.37%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	72.26%	68.53%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	73.67%	76.48%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.66%	75.80%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	73.24%	73.22%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	5.71%	25.00%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	8.51%	25.00%
↓ 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%	0.06%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	114.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	43.00

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%	82.14%
↓ PSI 14 Postoperative Wound Dehiscence Rate	1.01		
↓ 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		
↓ SSI HYST Surgical Site Infection	2.27		
↓ MRSA	0.105	0.000	0.676
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	81.89%	86.70%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.71%	83.58%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.69%	82.69%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	213.50	214.00
↓ Mortality O/E	1.13	0.89	0.70
↓ All-Cause Mortality Rate	3.82%	1.21%	0.84%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.42%	17.71%

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%	77.29%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	70.92%	71.27%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.07%	59.38%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.54%	65.47%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	65.91%	60.74%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	38.89%	35.29%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.67%	13.95%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	1.78%	1.79%
↓ Sepsis In-House Mortality Rate	10.85%	4.04%	3.37%
↓ OP22 Left without being seen	1.85%	0.77%	0.76%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	117.00	144.50
↓ 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%	66.67%
↓ 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%	94.32%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	78.05%	82.76%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	89.43%	85.11%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	231.00	252.00
↓ Mortality O/E	1.13	0.57	0.30
↓ All-Cause Mortality Rate	3.82%	0.96%	0.48%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.32%	23.87%

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%	89.94%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	85.13%	86.91%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	76.98%	76.56%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	84.55%	93.15%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	82.50%	82.26%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	12.00%	37.50%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	12.22%	22.73%
↓ 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	105.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	49.00	79.00

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%	0.00%
↓ 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		
↓ CDI/F	0.205		
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	72.22%	100.00%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	66.67%	50.00%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	85.00%	100.00%
↓ 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%	98.20%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	95.83%	100.00%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	50.00%	97.80%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	50.00%	49.70%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	50.00%	100.00%
↓ 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%		0.00%
↓ Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
↓ OP22 Left without being seen	1.85%	0.67%	0.39%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	109.00	106.00
↓ 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%	66.67%
↓ 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		
↓ CDI/F	0.205		
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	96.83%	82.05%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	89.47%	66.67%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	94.12%	94.44%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	180.00	223.00
↓ 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%	16.67%

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%	80.35%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	100.00%	72.72%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	95.83%	98.90%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	85.00%	69.12%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.00%	61.62%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	0.00%	
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	10.53%	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%	0.00%	0.00%
↓ OP22 Left without being seen	1.85%	0.06%	0.16%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	106.00	126.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	27.00	33.00

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		
↓ CDI/F	0.205		
↑ HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	80.00%	100.00%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	80.00%	60.00%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.50%	37.50%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00		
↓ Mortality O/E	1.13	1.78	1.05
↓ All-Cause Mortality Rate	3.82%	2.38%	5.56%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	5.13%	8.33%

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%	98.65%
↑ HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	75.00%	67.50%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	87.50%	97.80%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	70.00%	59.76%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.00%	60.16%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%		
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	0.00%	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%	0.85%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	126.00	137.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30		