

Ballad Health

Metric ▲	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.18	0.27
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.01	0.07
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.16	0.16
↓ PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.49	0.67
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.44	1.35
↓ PSI 11 Postoperative Respiratory Failure Rate	9.43	4.24	3.17
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.62	1.47
↓ PSI 13 Postoperative Sepsis Rate	4.36	2.82	1.44
↑ 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	0.12
↓ CLABSI	0.882	0.990	0.782
↓ CAUTI	0.888	0.717	0.705
↓ SSI COLON Surgical Site Infection	3.08	3.17	3.33
↓ SSI HYST Surgical Site Infection	2.27	2.02	2.54
↓ MRSA	0.105	0.059	0.089
↓ CDIFF	0.205	0.179	0.098
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	77.52%	78.74%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	67.20%	71.32%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.91%	85.63%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	307.00
↓ Mortality O/E	1.13	0.97	0.87
↓ All-Cause Mortality Rate	3.82%	2.26%	2.27%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.07%	15.51%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	144.24	199.06
↓ 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%	76.64%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	59.45%	60.11%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	59.98%	59.58%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	62.35%	65.26%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.47%	64.05%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.16%	25.35%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.27%	18.48%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.67%	2.54%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	4.11%	4.19%
↓ Sepsis In-House Mortality Rate	10.85%	8.96%	9.27%
↓ OP22 Left without being seen	1.85%	0.55%	0.35%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	148.00	142.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	125.00	77.00

Johnson City Medical Center

Metric ▲	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.47	0.57
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.04	0.12
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.18	0.12
↓ PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.38	1.17
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	1.19	1.03
↓ 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	1.08
↓ PSI 13 Postoperative Sepsis Rate	4.36	3.60	0.00
↑ SMB: Sepsis Management Bundle	58.40%	38.89%	52.94%
↓ 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	0.574
↓ CAUTI	0.888	0.936	1.338
↓ SSI COLON Surgical Site Infection	3.08	7.69	3.49
↓ SSI HYST Surgical Site Infection	2.27	3.92	3.13
↓ MRSA	0.105	0.075	0.131
↓ CDIFF	0.205	0.208	0.079
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	73.73%	74.39%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	61.45%	67.02%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.33%	84.46%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	448.00	390.00
↓ Mortality O/E	1.13	1.11	0.99
↓ All-Cause Mortality Rate	3.82%	2.81%	2.74%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.89%	16.11%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	179.33	201.79
↓ 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%	72.33%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	36.69%	56.37%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	56.83%	55.33%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	53.73%	56.83%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	51.84%	56.38%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	27.92%	26.00%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.22%	21.24%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	3.90%	3.16%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	7.28%	6.50%
↓ Sepsis In-House Mortality Rate	10.85%	16.41%	13.30%
↓ OP22 Left without being seen	1.85%	0.55%	0.43%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	208.50	208.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	198.00	166.00

Holston Valley Medical Center

Metric ▲	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.00	0.15
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.10
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.14	0.20
↓ 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	3.22
↓ PSI 11 Postoperative Respiratory Failure Rate	9.43	4.59	9.86
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.40	1.49
↓ PSI 13 Postoperative Sepsis Rate	4.36	1.55	2.20
↑ SMB: Sepsis Management Bundle	58.40%	51.89%	60.00%
↓ 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	1.253
↓ CAUTI	0.888	0.752	0.446
↓ SSI COLON Surgical Site Infection	3.08	0.00	2.99
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.064	0.055
↓ CDIFF	0.205	0.245	0.164
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	74.92%	77.81%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	71.46%	72.43%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.99%	84.81%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	488.00	393.00
↓ Mortality O/E	1.13	0.95	0.82
↓ All-Cause Mortality Rate	3.82%	3.53%	3.52%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.37%	15.52%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	136.36	104.35
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.80	1.13
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	76.34%	75.82%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	53.83%	55.06%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	57.67%	57.06%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	58.40%	63.24%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	55.32%	61.61%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	22.16%	25.23%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.70%	19.30%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	3.70%	4.31%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	5.21%	5.66%
↓ Sepsis In-House Mortality Rate	10.85%	11.07%	13.87%
↓ OP22 Left without being seen	1.85%	0.38%	0.25%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	207.00	212.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	179.50	108.00

Bristol Regional Medical Center

Metric ▲	Baseline	FY25	FY26
↓ PSI 3 Pressure Ulcer Rate	0.26	0.00	0.16
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.14	0.11
↓ 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	3.04
↓ PSI 13 Postoperative Sepsis Rate	4.36	2.21	0.00
↑ SMB: Sepsis Management Bundle	58.40%	53.28%	59.70%
↓ 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	0.805
↓ CAUTI	0.888	0.559	0.679
↓ SSI COLON Surgical Site Infection	3.08	1.94	7.07
↓ SSI HYST Surgical Site Infection	2.27	3.13	0.00
↓ MRSA	0.105	0.064	0.075
↓ CDI/F	0.205	0.194	0.116
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	76.07%	78.31%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	62.86%	65.41%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.90%	85.12%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	354.50	352.00
↓ Mortality O/E	1.13	0.91	0.83
↓ All-Cause Mortality Rate	3.82%	1.99%	2.01%
↓ 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	118.42
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.86	0.87
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	74.03%	76.02%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	55.64%	57.18%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	59.13%	59.18%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	59.34%	60.95%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	56.19%	59.84%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.69%	25.12%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	20.36%	17.68%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	1.83%	1.68%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	4.17%	3.97%
↓ Sepsis In-House Mortality Rate	10.85%	9.18%	8.75%
↓ OP22 Left without being seen	1.85%	0.93%	0.70%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	191.00	220.00
↓ 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	0.32
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.00	0.22
↓ 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	1.59
↓ PSI 13 Postoperative Sepsis Rate	4.36	6.17	14.49
↑ SMB: Sepsis Management Bundle	58.40%	72.82%	80.77%
↓ 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	0.491
↓ CAUTI	0.888	1.111	0.647
↓ SSI COLON Surgical Site Infection	3.08	2.30	2.50
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.000	0.149
↓ CDIFF	0.205	0.142	0.000
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	78.49%	78.84%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	78.89%	76.52%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.33%	88.18%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.50	298.00
↓ Mortality O/E	1.13	1.04	0.94
↓ All-Cause Mortality Rate	3.82%	2.78%	2.56%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.24%	15.44%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	172.41	192.31
↓ PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.89	1.13
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	79.66%	80.26%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	58.87%	58.51%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	61.68%	60.58%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.67%	67.29%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	63.79%	65.97%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	24.79%	23.77%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	19.46%	18.81%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.90%	2.03%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.98%	4.53%
↓ Sepsis In-House Mortality Rate	10.85%	10.33%	9.83%
↓ OP22 Left without being seen	1.85%	0.75%	0.39%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	186.00	178.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	128.50	84.00

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	0.30
↓ PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.21	0.60
↓ 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%	63.08%
↓ 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	1.025
↓ SSI COLON Surgical Site Infection	3.08	0.00	3.70
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.088	0.000
↓ CDIFF	0.205	0.045	0.137
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	79.13%	78.65%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	69.89%	74.71%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.54%	84.93%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	474.50	329.00
↓ Mortality O/E	1.13	1.00	0.84
↓ All-Cause Mortality Rate	3.82%	1.62%	1.72%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.34%	15.58%

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	0.95
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	78.93%	76.37%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	61.41%	66.41%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	59.18%	58.87%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	63.30%	64.53%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.22%	59.29%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	16.37%	29.50%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	21.94%	20.24%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.59%	1.18%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	2.11%	3.06%
↓ Sepsis In-House Mortality Rate	10.85%	4.55%	6.01%
↓ OP22 Left without being seen	1.85%	0.56%	0.33%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	159.00	146.00
↓ 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	2.89
↓ 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	2.38
↓ PSI 13 Postoperative Sepsis Rate	4.36	5.98	4.03
↑ SMB: Sepsis Management Bundle	58.40%	70.67%	76.67%
↓ PSI 14 Postoperative Wound Dehiscence Rate	1.01	2.12	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.87
↓ CLABSI	0.882	0.000	0.000
↓ CAUTI	0.888	0.000	0.631
↓ SSI COLON Surgical Site Infection	3.08	3.02	1.35
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.035	0.000
↓ CDIFF	0.205	0.080	0.113
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	83.56%	84.94%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	64.92%	76.09%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.75%	88.43%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	649.00	352.50
↓ Mortality O/E	1.13	0.75	0.73
↓ All-Cause Mortality Rate	3.82%	0.54%	0.55%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	11.94%	10.38%

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	0.93
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	82.96%	82.19%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	67.46%	69.06%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	65.59%	67.90%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	75.14%	79.85%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	81.36%	82.95%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	16.35%	17.74%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	17.70%	13.57%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%		4.94%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.00%	1.56%
↓ Sepsis In-House Mortality Rate	10.85%	2.86%	2.34%
↓ OP22 Left without being seen	1.85%	0.74%	0.34%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	176.00	160.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	441.50	136.00

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%	65.22%
↓ 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	6.67
↓ SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓ MRSA	0.105	0.079	0.111
↓ CDIFF	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	79.73%	82.24%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	69.33%	74.93%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.66%	83.58%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	359.00	325.00
↓ Mortality O/E	1.13	0.55	0.68
↓ All-Cause Mortality Rate	3.82%	1.70%	2.10%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	18.52%	19.29%

Metric ▲	Baseline	FY25	FY26
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	172.32	71.43	100.00
↓ 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%	77.40%	75.15%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	65.44%	66.29%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	60.67%	65.60%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	64.08%	69.08%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	57.88%	62.32%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	30.10%	28.77%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	17.75%	22.50%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	2.00%	1.21%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	2.98%	4.64%
↓ Sepsis In-House Mortality Rate	10.85%	5.09%	5.57%
↓ OP22 Left without being seen	1.85%	0.20%	0.07%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	141.00	119.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	108.00	86.50

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	0.48
↓ 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%	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	1.473	0.000
↓ SSI COLON Surgical Site Infection	3.08	9.68	0.00
↓ SSI HYST Surgical Site Infection	2.27	0.00	50.00
↓ 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%	80.72%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	64.20%	73.02%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	88.29%	88.15%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	446.00	262.00
↓ Mortality O/E	1.13	0.74	0.45
↓ All-Cause Mortality Rate	3.82%	1.30%	0.98%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.02%	14.99%

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	0.97
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	80.16%	81.23%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	60.98%	61.33%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	62.30%	61.58%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.86%	73.88%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	66.34%	72.46%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	21.50%	17.39%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	13.44%	12.57%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%	0.93%	0.00%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	3.17%	2.51%
↓ Sepsis In-House Mortality Rate	10.85%	2.54%	2.82%
↓ 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	124.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	223.00	81.50

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	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%	72.13%	67.57%
↓ 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	0.418
↓ CDI/F	0.205	0.000	0.000
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	80.96%	74.31%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	73.68%	67.50%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.88%	82.80%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	328.50	278.00
↓ Mortality O/E	1.13	0.52	0.35
↓ All-Cause Mortality Rate	3.82%	0.98%	0.62%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.51%	16.82%

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	0.99
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	83.38%	73.55%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	69.24%	62.12%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	62.19%	57.81%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.07%	62.94%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	67.76%	57.29%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	18.87%	22.22%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	12.74%	24.05%
↓ 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%	2.15%
↓ OP22 Left without being seen	1.85%	0.37%	0.26%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	143.00	135.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	100.00	64.00

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		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%	57.14%	50.00%
↓ 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	17.241
↓ 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%	92.31%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	77.08%	72.92%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.98%	87.67%
↓ 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	0.68
↓ All-Cause Mortality Rate	3.82%	1.07%	1.06%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.47%	13.82%

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%	81.74%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	78.12%	75.67%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	65.95%	77.79%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	72.92%	80.63%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	68.09%	83.13%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	21.05%	37.50%
↓ 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%	9.09%
↓ OP22 Left without being seen	1.85%	0.17%	0.20%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	125.00	127.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	47.00

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%	81.40%
↓ 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	0.417
↓ CDI/F	0.205	0.000	0.417
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	75.29%	81.89%	84.05%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	69.71%	75.47%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.69%	78.24%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	213.50	198.50
↓ Mortality O/E	1.13	0.89	1.01
↓ All-Cause Mortality Rate	3.82%	1.21%	1.22%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	17.42%	18.56%

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%	78.90%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	70.92%	66.75%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	62.07%	66.75%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	69.54%	68.97%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	65.91%	62.39%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	38.89%	23.33%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	18.67%	16.28%
↓ MORT30HF Heart Failure 30-day mortality rate	4.74%		0.00%
↓ MORT30PN Pneumonia 30-day mortality rate	6.12%	1.78%	2.80%
↓ Sepsis In-House Mortality Rate	10.85%	4.04%	5.60%
↓ OP22 Left without being seen	1.85%	0.77%	0.68%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	117.00	130.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	27.00	26.00

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%	60.98%
↓ 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%	89.29%	89.76%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	78.05%	83.64%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	89.43%	81.32%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	231.00	263.50
↓ Mortality O/E	1.13	0.57	0.34
↓ All-Cause Mortality Rate	3.82%	0.96%	0.59%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.32%	19.64%

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%	84.58%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	85.13%	79.11%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	76.98%	67.75%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	84.55%	92.68%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	82.50%	81.60%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	12.00%	26.32%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	12.22%	16.00%
↓ 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%	0.17%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	111.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	49.00	64.50

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%	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%	60.00%
↑ 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	149.00
↓ 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%	59.70%
↑ 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%	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%	0.67%	0.32%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	109.00	105.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	22.00	34.00

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%	83.33%
↓ 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%	84.31%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	89.47%	75.00%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	94.12%	96.15%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	180.00	196.00
↓ 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%	8.00%

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%	89.82%	84.96%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	100.00%	70.56%
↑ 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%	76.35%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.00%	70.67%
↓ 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%		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%	0.06%	0.10%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	106.00	116.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	27.00	33.50

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%	100.00%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	80.00%	57.14%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.50%	64.29%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00		
↓ Mortality O/E	1.13	1.78	0.92
↓ All-Cause Mortality Rate	3.82%	2.38%	3.85%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	5.13%	4.55%

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%	94.15%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	75.00%	80.80%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	87.50%	98.17%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	70.00%	49.81%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.00%	62.63%
↓ 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%	0.72%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	126.00	139.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30		

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%	92.31%
↓ 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%	86.11%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	74.65%	83.78%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.94%	90.20%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	253.00	220.00
↓ Mortality O/E	1.13	1.47	0.80
↓ All-Cause Mortality Rate	3.82%	2.08%	1.01%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	9.80%	13.58%

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%	78.71%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	72.26%	72.26%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	73.67%	72.00%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.66%	79.79%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	73.24%	77.92%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	5.71%	18.18%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	8.51%	13.33%
↓ 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%	0.16%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	113.00
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	57.00	45.00

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%	75.61%
↓ 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%	79.73%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	62.06%	73.09%	80.27%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.40%	89.59%
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	377.00	327.00
↓ Mortality O/E	1.13	0.00	0.43
↓ All-Cause Mortality Rate	3.82%	0.00%	0.20%
↓ READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.43%	12.34%

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	0.99
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.51%	85.44%	77.16%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	58.62%	69.65%	66.22%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.84%	64.58%	52.68%
↑ H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	73.33%	71.79%
↑ HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.56%	70.15%
↓ READM30HF Heart Failure 30-day readmissions rate	25.48%	23.53%	33.33%
↓ READM30PN Pneumonia 30-day readmission rate	18.10%	14.36%	17.81%
↓ 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%	0.67%
↓ OP22 Left without being seen	1.85%	0.36%	0.12%
↓ Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	147.00	138.50
↓ Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	84.00	57.50