

Ballad Health

Desired Performance	Metric	Baseline	FY26	FY27
↓	PSI 3 Pressure Ulcer Rate	0.26	0.16	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.05	0.14
↓	PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.17	0.28
↓	PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.45	0.56
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.93	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.43	2.42	1.53
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.59	2.57
↓	PSI 13 Postoperative Sepsis Rate	4.36	1.23	4.73
↑	SMB: Sepsis Management Bundle	58.40%	67.33%	70.33%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.28	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.08	0.00
↓	CLABSI	0.882	0.679	0.450
↓	CAUTI	0.888	0.836	0.548
↓	SSI COLON Surgical Site Infection	3.08	2.97	5.05
↓	SSI HYST Surgical Site Infection	2.27	2.79	4.55
↓	MRSA	0.105	0.073	0.065
↓	CDIFF	0.205	0.113	0.110
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	77.82%	78.78%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	72.54%	70.73%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	85.69%	84.70%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	313.00	322.00
↓	Mortality O/E	1.13	0.89	0.80
↓	All-Cause Mortality Rate	3.82%	2.27%	2.05%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.52%	15.96%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	1.37%
↓	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%	76.52%	75.66%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	60.19%	60.55%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.67%	56.98%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	64.76%	64.28%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	63.80%	62.42%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	24.96%	26.99%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	18.57%	19.69%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	2.62%	3.87%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	4.08%	4.86%
↓	Sepsis In-House Mortality Rate	10.85%	9.38%	9.15%
↓	OP22 Left without being seen	1.85%	0.39%	0.53%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	144.00	158.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	81.00	90.00

Johnson City Medical Center

Desired Performance	Metric	Baseline	FY26	FY27
↓	PSI 3 Pressure Ulcer Rate	0.26	0.37	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.08	0.23
↓	PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.12	0.23
↓	PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.78	1.58
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	0.70	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	1.26	4.23
↓	PSI 13 Postoperative Sepsis Rate	4.36	1.43	3.79
↑	SMB: Sepsis Management Bundle	58.40%	58.25%	80.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.99	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.587	0.548
↓	CAUTI	0.888	1.113	0.643
↓	SSI COLON Surgical Site Infection	3.08	4.27	14.29
↓	SSI HYST Surgical Site Infection	2.27	4.00	7.69
↓	MRSA	0.105	0.087	0.113
↓	CDIFF	0.205	0.127	0.042
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	73.91%	76.84%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	67.76%	68.53%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.82%	82.88%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	383.50	359.00
↓	Mortality O/E	1.13	0.99	0.85
↓	All-Cause Mortality Rate	3.82%	2.72%	2.38%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	16.04%	16.95%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	3.85%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.87	0.94
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	72.74%	72.27%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	56.48%	60.32%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	55.96%	56.67%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	57.15%	56.73%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	56.11%	57.84%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	24.70%	30.26%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	21.58%	16.44%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	3.09%	2.90%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	6.49%	5.33%
↓	Sepsis In-House Mortality Rate	10.85%	13.40%	11.76%
↓	OP22 Left without being seen	1.85%	0.42%	0.31%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	213.00	220.50
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	145.50	144.00

Holston Valley Medical Center

Desired Performance	Metric	Baseline	FY26	FY27
↓	PSI 3 Pressure Ulcer Rate	0.26	0.10	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.07	0.44
↓	PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.33	0.82
↓	PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	2.90	2.16	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	9.43	7.48	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	1.72	1.54
↓	PSI 13 Postoperative Sepsis Rate	4.36	1.48	0.00
↑	SMB: Sepsis Management Bundle	58.40%	62.39%	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	0.897	0.499
↓	CAUTI	0.888	0.841	0.518
↓	SSI COLON Surgical Site Infection	3.08	2.42	10.00
↓	SSI HYST Surgical Site Infection	2.27	0.00	
↓	MRSA	0.105	0.095	0.000
↓	CDIFF	0.205	0.178	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.69%	78.02%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	71.62%	68.55%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.52%	84.60%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	415.00	587.50
↓	Mortality O/E	1.13	0.90	0.87
↓	All-Cause Mortality Rate	3.82%	3.55%	3.60%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.81%	14.86%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	0.00%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.10	0.94
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	75.95%	77.33%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	55.17%	56.41%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	57.25%	53.48%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	62.75%	63.14%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	60.51%	60.71%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	24.56%	19.70%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	20.57%	18.46%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	4.29%	6.30%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	5.23%	9.38%
↓	Sepsis In-House Mortality Rate	10.85%	13.61%	13.39%
↓	OP22 Left without being seen	1.85%	0.27%	0.48%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	229.00	301.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	129.00	349.50

Bristol Regional Medical Center

Desired Performance	Metric	Baseline	FY26	FY27
↓	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	0.00	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	2.91	0.00
↓	PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
↑	SMB: Sepsis Management Bundle	58.40%	60.48%	72.73%
↓	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	0.769	0.621
↓	CAUTI	0.888	0.921	0.636
↓	SSI COLON Surgical Site Infection	3.08	4.71	0.00
↓	SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓	MRSA	0.105	0.049	0.144
↓	CDIFF	0.205	0.115	0.225
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.73%	73.35%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	66.90%	66.26%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.93%	82.46%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	356.50	368.00
↓	Mortality O/E	1.13	0.88	0.73
↓	All-Cause Mortality Rate	3.82%	2.23%	1.67%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	16.30%	14.70%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	0.00%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.84	0.96
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	75.02%	70.58%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	56.99%	52.25%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	58.60%	54.96%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	59.92%	57.72%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	59.11%	53.42%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	24.93%	30.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	17.81%	22.39%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	1.88%	4.24%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	4.66%	4.03%
↓	Sepsis In-House Mortality Rate	10.85%	9.41%	7.64%
↓	OP22 Left without being seen	1.85%	0.77%	1.10%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	213.00	213.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	100.50	175.50

Johnston Memorial Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	PSI 3 Pressure Ulcer Rate	0.26	0.21	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.00	0.00
↓	PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.15	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	2.00	10.70
↓	PSI 13 Postoperative Sepsis Rate	4.36	10.64	62.50
↑	SMB: Sepsis Management Bundle	58.40%	76.09%	62.50%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.665	0.000
↓	CAUTI	0.888	0.667	1.592
↓	SSI COLON Surgical Site Infection	3.08	2.08	0.00
↓	SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓	MRSA	0.105	0.097	0.000
↓	CDIFF	0.205	0.033	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.73%	81.34%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	76.08%	72.73%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.35%	85.57%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	325.00	344.00
↓	Mortality O/E	1.13	0.93	0.83
↓	All-Cause Mortality Rate	3.82%	2.36%	2.34%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.36%	17.42%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	0.00%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	1.09	1.00
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	78.61%	73.52%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	57.25%	53.28%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	58.68%	58.47%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	65.06%	64.71%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	64.35%	60.51%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	23.95%	33.33%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	18.62%	21.74%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	3.24%	2.78%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	4.29%	7.69%
↓	Sepsis In-House Mortality Rate	10.85%	9.47%	12.95%
↓	OP22 Left without being seen	1.85%	0.64%	1.40%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	184.00	210.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	105.00	106.00

Greeneville Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.18	0.20	0.00
↓	PSI-8 In-Hospital Fall-Associated Fracture Rate	0.27	0.40	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	47.62
↓	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	47.62
↑	SMB: Sepsis Management Bundle	58.40%	63.55%	33.33%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	1.369	0.000
↓	SSI COLON Surgical Site Infection	3.08	3.79	9.52
↓	SSI HYST Surgical Site Infection	2.27	0.00	
↓	MRSA	0.105	0.000	0.000
↓	CDIFF	0.205	0.089	0.248
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	77.66%	85.21%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	76.50%	71.90%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	85.57%	84.95%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	339.00	350.50
↓	Mortality O/E	1.13	0.81	0.92
↓	All-Cause Mortality Rate	3.82%	1.69%	1.63%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.80%	16.88%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	0.00%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.93	0.98
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	75.97%	82.59%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	63.49%	67.53%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	59.45%	65.54%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	62.89%	67.54%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	58.68%	60.15%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	31.09%	42.86%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	17.55%	25.00%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	1.11%	4.76%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	2.70%	1.85%
↓	Sepsis In-House Mortality Rate	10.85%	5.93%	4.04%
↓	OP22 Left without being seen	1.85%	0.36%	0.52%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	154.00	190.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	71.00	58.50

Franklin Woods Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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	0.96
↓	PSI 9 Postoperative Hemorrhage or Hematoma Rate	2.14	1.92	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	2.37	0.00
↓	PSI 13 Postoperative Sepsis Rate	4.36	0.00	0.00
↑	SMB: Sepsis Management Bundle	58.40%	72.00%	83.33%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.55	0.00
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	0.383	0.000
↓	SSI COLON Surgical Site Infection	3.08	1.28	0.00
↓	SSI HYST Surgical Site Infection	2.27	0.00	0.00
↓	MRSA	0.105	0.033	0.000
↓	CDIFF	0.205	0.074	0.606
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	84.58%	84.32%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	81.91%	78.81%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	88.74%	89.24%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	309.00	358.00
↓	Mortality O/E	1.13	0.70	0.48
↓	All-Cause Mortality Rate	3.82%	0.48%	0.25%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	10.62%	13.60%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	0.00%
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.88	0.98
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	81.86%	83.25%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	70.46%	69.02%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	67.66%	63.59%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	80.66%	80.25%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	83.99%	82.72%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	23.81%	18.18%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	11.17%	17.14%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	3.82%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	1.61%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	2.24%	1.72%
↓	OP22 Left without being seen	1.85%	0.33%	0.42%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	170.00	185.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	92.00	125.50

Indian Path Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	81.69%	85.71%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	0.000	0.000
↓	SSI COLON Surgical Site Infection	3.08	0.00	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%	78.79%	81.09%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	79.40%	77.61%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	88.81%	89.26%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	356.00	389.00
↓	Mortality O/E	1.13	0.35	0.59
↓	All-Cause Mortality Rate	3.82%	0.13%	0.26%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	12.21%	9.52%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.99	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	78.52%	81.55%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	66.03%	75.97%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	56.06%	60.40%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	68.65%	76.28%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	69.38%	72.92%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	32.00%	0.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	15.00%	20.00%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	25.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	0.47%	0.00%
↓	OP22 Left without being seen	1.85%	0.20%	0.38%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	142.00	165.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	68.00	105.00

Norton Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	62.20%	50.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	0.000	0.000
↓	SSI COLON Surgical Site Infection	3.08	3.85	
↓	SSI HYST Surgical Site Infection	2.27	0.00	
↓	MRSA	0.105	0.075	0.000
↓	CDIFF	0.205	0.000	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	81.30%	85.29%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	73.71%	71.93%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	85.18%	79.59%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	290.00	234.00
↓	Mortality O/E	1.13	0.64	0.66
↓	All-Cause Mortality Rate	3.82%	1.91%	2.32%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	18.24%	22.27%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.97	1.00
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	75.49%	74.37%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	66.55%	65.49%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	64.52%	61.55%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	67.08%	64.61%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	63.83%	58.63%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	26.61%	15.38%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	21.61%	21.05%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	1.69%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	3.43%	5.00%
↓	Sepsis In-House Mortality Rate	10.85%	5.31%	12.12%
↓	OP22 Left without being seen	1.85%	0.05%	0.00%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	117.00	102.50
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	80.00	56.00

Sycamore Shoals Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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	0.32	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%	68.00%	60.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	0.000	0.000
↓	SSI COLON Surgical Site Infection	3.08	4.17	0.00
↓	SSI HYST Surgical Site Infection	2.27	50.00	
↓	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%	78.88%	79.37%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	72.48%	72.58%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.89%	89.22%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	279.00	385.00
↓	Mortality O/E	1.13	0.46	0.49
↓	All-Cause Mortality Rate	3.82%	1.02%	1.40%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	14.12%	17.47%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	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%	82.42%	81.47%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	62.29%	67.16%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	62.04%	37.77%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	73.76%	78.08%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	72.39%	75.58%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	16.07%	27.27%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	14.34%	11.76%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	4.35%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	2.05%	6.45%
↓	Sepsis In-House Mortality Rate	10.85%	3.11%	0.00%
↓	OP22 Left without being seen	1.85%	0.17%	0.49%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	126.00	157.50
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	88.00	179.00

Smyth County Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	75.00%	75.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	0.00
↓	CLABSI	0.882	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	0.275	0.000
↓	CDIFF	0.205	0.000	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	76.17%	79.09%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	69.20%	65.79%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	84.21%	85.19%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	271.00	228.00
↓	Mortality O/E	1.13	0.31	0.43
↓	All-Cause Mortality Rate	3.82%	0.60%	1.04%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	16.58%	17.05%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	0.99	1.00
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	72.17%	74.47%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	65.07%	70.12%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	56.95%	56.13%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	63.38%	67.38%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	59.70%	64.99%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	18.60%	20.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	23.13%	42.86%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.68%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	2.56%	0.00%
↓	OP22 Left without being seen	1.85%	0.21%	0.07%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	128.50	132.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	62.00	59.00

Lonesome Pine Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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		
↓	PSI 11 Postoperative Respiratory Failure Rate	9.43		
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.20	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	4.36		
↑	SMB: Sepsis Management Bundle	58.40%	63.89%	100.00%
↓	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	12.987	0.000
↓	CAUTI	0.888	0.000	0.000
↓	SSI COLON Surgical Site Infection	3.08		
↓	SSI HYST Surgical Site Infection	2.27		
↓	MRSA	0.105	0.000	0.000
↓	CDIFF	0.205	0.000	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	89.75%	66.67%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	77.56%	75.00%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	86.99%	75.00%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	270.00	202.00
↓	Mortality O/E	1.13	0.50	0.00
↓	All-Cause Mortality Rate	3.82%	0.71%	0.00%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.79%	14.81%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	80.61%	65.32%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	70.82%	42.50%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	76.92%	81.13%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	74.42%	74.78%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	79.24%	50.15%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	27.27%	0.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	13.64%	0.00%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	5.13%	0.00%
↓	OP22 Left without being seen	1.85%	0.32%	0.46%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	125.00	126.50
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	50.50	74.00

Hawkins County Memorial Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	88.00%	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
↓	CDIFF	0.205	0.000	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	83.97%	76.67%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	87.51%	90.00%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	90.83%	100.00%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	220.00	337.00
↓	Mortality O/E	1.13	0.63	3.57
↓	All-Cause Mortality Rate	3.82%	0.99%	2.13%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	15.22%	11.11%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	78.26%	69.28%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	73.42%	44.02%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	75.20%	70.80%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	74.43%	49.88%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	75.14%	40.08%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	20.69%	0.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	14.58%	0.00%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
↓	OP22 Left without being seen	1.85%	0.21%	0.23%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	117.00	136.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	47.00	72.00

Russell County Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	74.24%	83.33%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56	0.00	
↓	CLABSI	0.882	0.000	0.000
↓	CAUTI	0.888	0.000	0.000
↓	SSI COLON Surgical Site Infection	3.08		
↓	SSI HYST Surgical Site Infection	2.27		
↓	MRSA	0.105	0.282	0.000
↓	CDIFF	0.205	0.282	0.000
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	82.83%	76.32%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	76.09%	69.23%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	83.83%	72.73%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	208.00	203.00
↓	Mortality O/E	1.13	0.95	0.00
↓	All-Cause Mortality Rate	3.82%	1.24%	0.00%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	18.81%	15.69%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	80.20%	61.38%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	68.23%	72.77%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	68.65%	48.11%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	70.35%	53.57%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	64.21%	61.72%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	32.65%	0.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	17.36%	14.29%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	2.04%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	5.30%	0.00%
↓	OP22 Left without being seen	1.85%	0.75%	0.77%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	130.00	119.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	26.00	19.00

Lee County Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	65.08%	40.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
↓	CLABSI	0.882		
↓	CAUTI	0.888		
↓	SSI COLON Surgical Site Infection	3.08		
↓	SSI HYST Surgical Site Infection	2.27		
↓	MRSA	0.105		
↓	CDIFF	0.205		
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	90.26%	79.49%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	85.76%	84.62%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	81.06%	86.96%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	254.00	200.50
↓	Mortality O/E	1.13	0.21	0.00
↓	All-Cause Mortality Rate	3.82%	0.40%	0.00%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	16.28%	16.22%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	86.96%	73.95%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	83.76%	71.23%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	76.31%	43.52%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	89.29%	84.45%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	82.73%	77.03%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	16.67%	40.00%
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	15.56%	33.33%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	0.00%	0.00%
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
↓	OP22 Left without being seen	1.85%	0.18%	0.36%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	161.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	63.50	56.00

Dickenson Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	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		
↓	CDIFF	0.205		
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	98.75%	
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	67.58%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	100.00%	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	132.50	
↓	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%	0.00%	100.00%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	98.50%	
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	100.00%	
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	97.80%	
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	66.42%	
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	100.00%	
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	--	
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	0.00%	
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	--	
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	
↓	Sepsis In-House Mortality Rate	10.85%	0.00%	
↓	OP22 Left without being seen	1.85%	0.30%	0.09%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	105.00	95.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	48.00	

Hancock County Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	72.73%	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%	81.97%	100.00%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	80.39%	100.00%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	87.58%	75.00%
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	197.50	210.00
↓	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%	8.45%	20.00%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	82.92%	49.10%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	74.54%	100.00%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	99.12%	48.90%
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	79.88%	49.85%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	71.50%	50.10%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	0.00%	
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	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%	0.10%	0.00%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	112.00	55.00
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	34.50	36.00

Johnson County Community Hospital

Desired Performance	Metric	Baseline	FY26	FY27
↓	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%	0.00%	100.00%
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.01		
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.56		
↓	CLABSI	0.882		
↓	CAUTI	0.888		
↓	SSI COLON Surgical Site Infection	3.08		
↓	SSI HYST Surgical Site Infection	2.27		
↓	MRSA	0.105		
↓	CDIFF	0.205		
↑	HCOMP1A P Patients who reported that their nurses “Always” communicated well	75.29%	99.07%	100.00%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	62.06%	67.40%	100.00%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.85%	72.39%	
↓	Median Time from ED Arrival to Transport for Admitted Patients (ED-1)	643.00	158.00	
↓	Mortality O/E	1.13	0.92	0.00
↓	All-Cause Mortality Rate	3.82%	2.70%	0.00%
↓	READM-30-Hospital-Wide-All Cause Unplanned Readmissions	14.34%	8.82%	0.00%

Desired Performance	Metric	Baseline	FY26	FY27
↓	30-Day Death Rate among Surgical Inpatients with Complications (Failure to Rescue) Rate	--	--	
↓	PSI90 Complications / Patient Safety for Selected Indicators	0.79	--	
↑	HCOMP2A P Patients who reported that their doctors “Always” communicated well	76.51%	95.25%	98.20%
↑	HCOMP3A P Patients who reported that they “Always” received help as soon as they wanted	58.62%	66.73%	100.00%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	57.84%	98.17%	
↑	H-HSP-Rating 9-10-Overall Rating of hospital	60.78%	49.82%	99.70%
↑	HRECMND_DY Patients who reported YES, they would recommend the hospital	61.35%	70.12%	100.00%
↓	READM30HF Heart Failure 30-day readmissions rate	25.48%	--	
↓	READM30PN Pneumonia 30-day readmission rate	18.10%	11.11%	0.00%
↓	MORT30HF Heart Failure 30-day mortality rate	4.74%	--	
↓	MORT30PN Pneumonia 30-day mortality rate	6.12%	0.00%	0.00%
↓	Sepsis In-House Mortality Rate	10.85%	0.00%	0.00%
↓	OP22 Left without being seen	1.85%	0.61%	0.34%
↓	Median Time from ED Arrival to Departure for Outpatients (OP-18b)	161.14	139.00	104.50
↓	Median Time from Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	318.30	37.00	