Quality Report

4/22/2009

- Infection Prevention
- HealthGrades Patient Safety Indicators
- Mortality Rates

Board Quality Report Executive Summary

Infection Prevention

On Thursday, April 9th, the Infection Prevention Committee convened for it's quarterly meeting. Highlights included review of our progress on SCIP performance measures (Surgical Care Improvement Project), review of our ICU device related infection rates, and a review of surgical site infections. Regarding SCIP, we are doing well. We continue to have improvement opportunities in the selection of antibiotics for the prophylaxis of colon surgery and for timely discontinuation of prophylactic antibiotics following cardiac surgery. For ICU device related infections, our rolling 12 month average shows our rates to be a fraction of the average rate reported nationally. We continue to perform excellently compared to benchmarks in protecting our ICU patients from acquiring device associated infections. Likewise, our surgical site infection rates remain quite low compared to the ranges reported by the American College of Surgeons.

HealthGrades Patient Safety Indicators

Each April HealthGrades releases it's scoring on patient safety indicators. Our rating improved in two areas and worsened in one. One of the patient safety indicators was not reported this year, thus accounting for why there was no change in our average rating. For the one area where our score worsened (avoidance of excessive bruising or bleeding as a consequence of a procedure or surgery), the number of patients impacted at Kaweah Delta has remained stable. Therefore, the change in rating likely is a result of other institutions modestly improving while our performance remained static for this measure.

Mortality Rates

Our overall Mortality Rate for all adult patients, and for the subset of those patients 65 and older, remains higher than desired. As will be shared and discussed with the Board, we have achieved measureable improvement for several of the diagnoses specifically rated and publically reported by HealthGrades annually each October. We continue our engagement with the consulting arm of HealthGrades for improving care and outcome in our Cardiac Service Line, our Critical Care Service Line and for Stroke. Based upon continuing review of 100% of all inpatients who die at Kaweah Delta, community and regional need to improve end of life discussions and decision making remains imperative. Many patients are transferred to the hospital to die when end of life care in the patient's home or residence with friends and family would be much more medically appropriate, caring and respectful.

KDMC Infection Prevention Report
ICU Device Relation Infection Evaluation - 2009

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
# ICU Patient Days	578	531											1109
ICU VAP analysis													
# VAP	0	0											0
# Ventilator days	350	256											606
KD VAP rate	0	0											0.0
12 mo average	1.9	1.9											
NNIS Med Surg ICU Median	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6
Utilization data													
KDH rate	0.61	0.48											0.55
NNIS Med Surg ICU Median	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35	0.35
ICU CL-BSI analysis													
# KD ICU CL-BSI	2	2											4
KD ICU CL days	487	450											937
KD ICU CL-BSI rate	4.1	4.4											4.3
12 mo average	1.2	1.4											
NNIS MedSurg ICU Median	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3	3.3
Utilization data													
KD ICU utilization rate													
NNIS MedSurg ICU Median	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47	0.47
ICU CA-UTI analysis													
# KD ICU CA-UTI	0	0											0
KD ICU Catheter days	401	448											849
KD ICU CA-UTI rate	0	0											
12 mo average	0.3	0.3											
NNIS MedSurg ICU Median	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5
Utilization data													
KD ICU utilization rate	0.69	0.84											0.77
NNIS MedSurg ICU Median	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76	0.76

Infection rate formula $\frac{\text{\# device infections}}{\text{\# device days}} \times 1000$

Utilization rate formula $\frac{\text{\# device days}}{\text{\# patient days}}$

	Jan – Mar			Apr – Jun			Jul – Sep			Oct - Dec		
	#SSI Actual	#SSI Expected	# procedures	#SSI Actual	#SSI Expected	# procedures	#SSI Actual	#SSI Expected	# procedures	#SSI Actual	#SSI Expected	# procedures
CABG	**1**	**3**	**71**	**0**	**4**	**79**	**0**	**4**	**64**	**1**	**4**	**85**
Risk Index 1	0	1	29	0	1	23	0	1	19	0	1	25
Risk Index 2	1	2	42	0	3	56	0	3	45	1	3	60
Vascular	**The "Vascular" category has been divided in the newly released NHSN report. Carotid Endarterectomy and Peripheral Vascular Bypass Surgery are now separate categories for benchmark. The KDMC surgical report for 4Q08 does not reflect the separation and the Peripheral Vascular Bypass category is used for benchmark representing the majority of cases.**									**1**	**1**	**49**
Risk Index 0										0	0	3
Risk Index 1										0	1	41
Risk Index 2										1	0	5
C-section	**1**	**11**	**344**	**1**	**13**	**394**	**2**	**12**	**370**	**5**	**5**	**284**
Risk Index 0	0	6	219	1	7	240	1	6	213	1	2	157
Risk Index 1	1	5	123	0	6	150	1	6	155	4	3	126
Risk Index 2	0	0	2	0	0	4	0	0	2	0	0	1
Fusion							1	2	**60**			
Risk Index 0							0	0	24			
Risk Index 1							0	1	25			
Risk Index 2							1	1	11			
Hip	**2**	**1**	**37**	**1**	**1**	**40**						
Risk Index 0	0	0	5	0	0	11						
Risk Index 1	1	1	29	1	1	27						
Risk Index 2	1	0	3	0	0	2						
Knee	**0**	**0**	**47**									
Risk Index 0	0	0	13									
Risk Index 1	0	0	28									
Risk Index 2	0	0	6									
	# Inf	**#cases**	**KDH Rate**	**# Inf**	**#cases**	**KDH Rate**	**# Inf**	**#cases**	**KDH Rate**	**# Inf**	**#cases**	**KDH Rate**
Class I	**3**	**778**	**0.3%**	**6**	**877**	**0.7%**	**8**	**894**	**0.9%**	**7**	**913**	**0.8%**
			ACS: 1-5%			ACS: 1-5%			ACS: 1-5%			ACS: 1-5%
Class II	**6**	**613**	**1%**	**7**	**644**	**1.1%**	**1**	**628**	**0.2%**	**1**	**617**	**0.2%**
			ACS: 8-10%			ACS: 8-10%			ACS: 8-10%			ACS: 8-10%

- Class I, II total numbers exclude risk stratified, procedure specific data previously reported
- Expected infection rate for specific procedures calculated using NHSN pooled median multiplied by number of procedures divided by 100.
- Actual infection rate for ClassI/II is compared to wound class rates defined by the American College of Surgeons (ACS).
- Benchmark source: National Healthcare Safety Network (NHSN).
- 4Q08 Expected rates calculated using newly released data published November 2008.

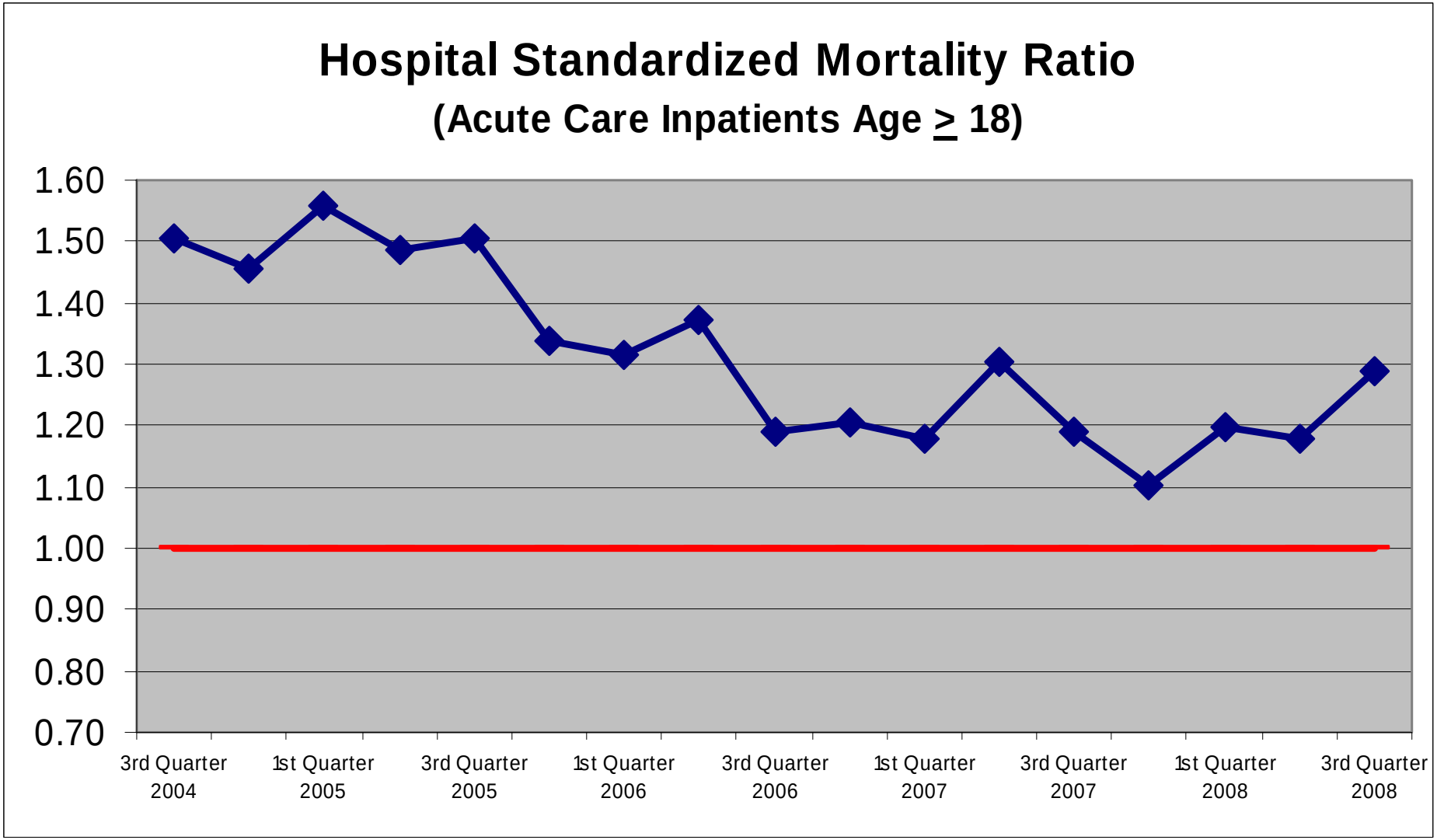
PATIENT SAFETY INDICATORS

Healthgrades Ratings

April 2009 Patient Safety Indicators Report

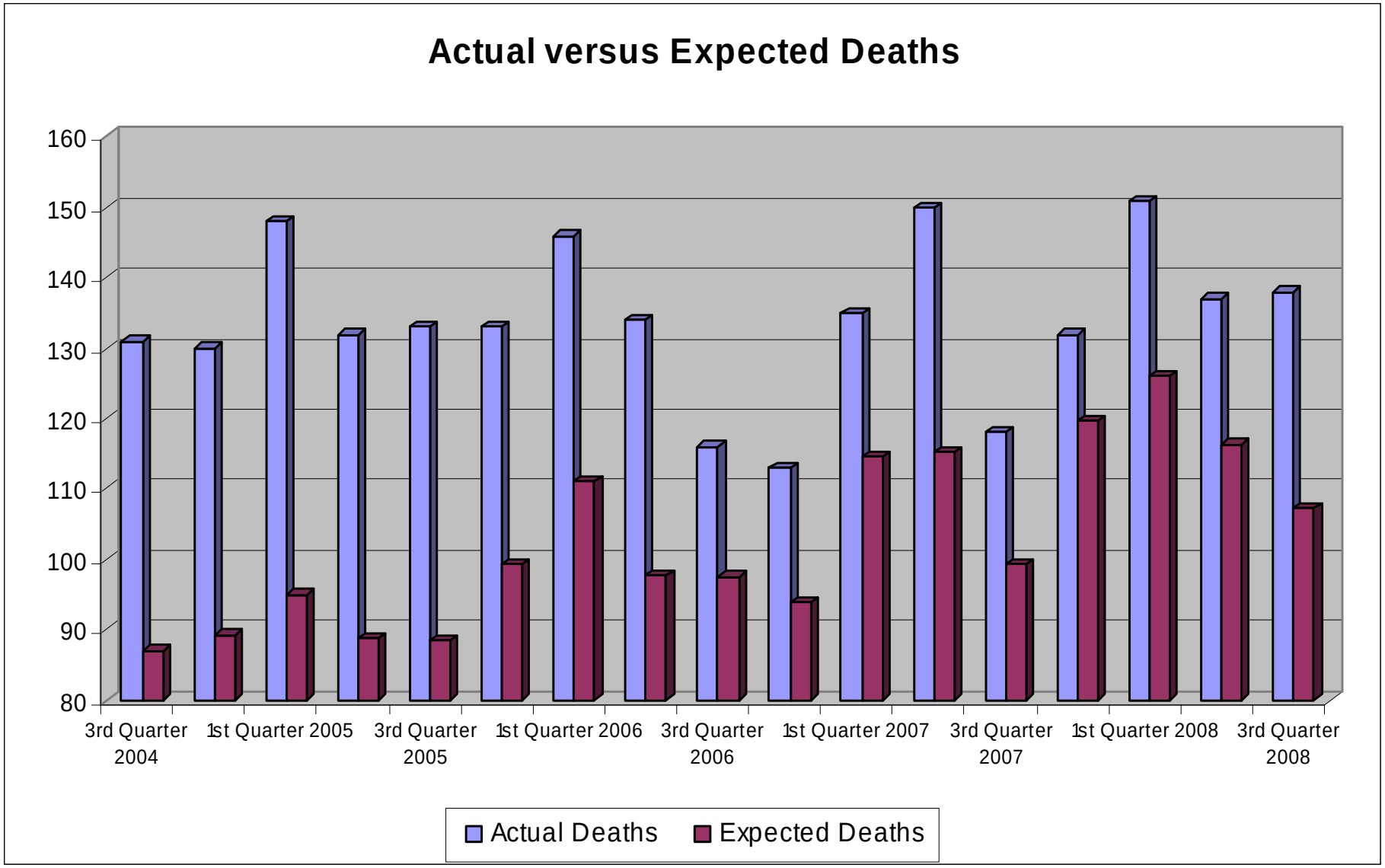
Patient Safety Indicator (average, worse than average, or better than average)	2005 (01-03 data)	2006 (02-04 data)	2007 (03-05 data)	2008 (04-06 data)	2009 (05-07 data)	Description
Prevention of death in procedures where mortality is usually very low	*** (5:1000)	* (4:1000)	*** (2:1000)	*** (2:1000)	*** (2:1000)	Deaths in DRG's with expected mortality rate less than 0.5%
Lack of pressure sores or bed sores acquired in the hospital	***** (27:1000)	***** (28:1000)	*** (32:1000)	*** (28:1000)	*** (31:1000)	
Ability to diagnose and treat in time	*** (189:1000)	* (178:1000)	* (173:1000)	* (177:1000)	*** ▲ (141:1000)	Deaths from acute renal failure, cardiac arrest, shock, DVT/PE, Pneumonia, Sepsis, GI Hemorrhage/Acute Ulcer when these diagnosis not present on sequence line # 1 of UB92.
Absence of foreign body left in during procedure	***** (0)	***** (0)	***** (0)	***** (0)	Not reported this year	
Avoidance of collapsed lung due to a procedure or surgery in or around the chest	* (2:1000)	* (2:1000)	* (1:1000)	* (1:1000)	* (1:1000)	Pneumothorax rates in non-thoracic surgery patients
Lack of infections acquired at hospital	*** (7:1000)	* (6:1000)	*** (2:1000)	*** (3:1000)	*** (3:1000)	Infections diagnosed in the secondary diagnosis field in all medical and surgical discharges
Absence of hip fracture after surgery	*** (1:1000)	* (1:1000)	* (1:1000)	***** (0)	***** < 1	Hip fracture following surgery
Avoidance of excessive bruising or bleeding as a consequence of a procedure or surgery	* (3:1000)	* (3:1000)	* (3:1000)	*** (3:1000)	* ▼ (3:1000)	Patients who require reoperation to control bleeding or drain hematomas
Adequate organ function and electrolyte and fluid balance after surgery	* (4:1000)	* (4:1000)	*** (2:1000)	* (3:1000)	* (3:1000)	A broad category of problems related to diabetes and renal failure occurring in all elective surgical discharges
Avoidance of respiratory failure following surgery	***** (4:1000)	***** (6:1000)	* (17:1000)	* (20:1000)	*** ▲ (19:1000)	Discharges with diagnosis code of acute respiratory failure in any secondary diagnosis field in elective surgery patients.
Lack of deep blood clots in the lungs or legs after surgery	***** (7:1000)	***** (8:1000)	***** (8:1000)	***** (7:1000)	***** (6:1000)	Secondary diagnosis of VTE (venous throb embolism) in any surgical patient
Avoidance of severe infection following surgery	* (29:1000)	* (25:1000)	* (16:1000)	*** (15:1000)	*** (22:1000)	Elective surgery patients with sepsis as a secondary diagnosis.
Lack of surgical wound site breakdown	*** (4:1000)	*** (4:1000)	***** (1:1000)	***** (1:1000)	***** (1:1000)	Discharges with a code for reclosure of the abdominal wall

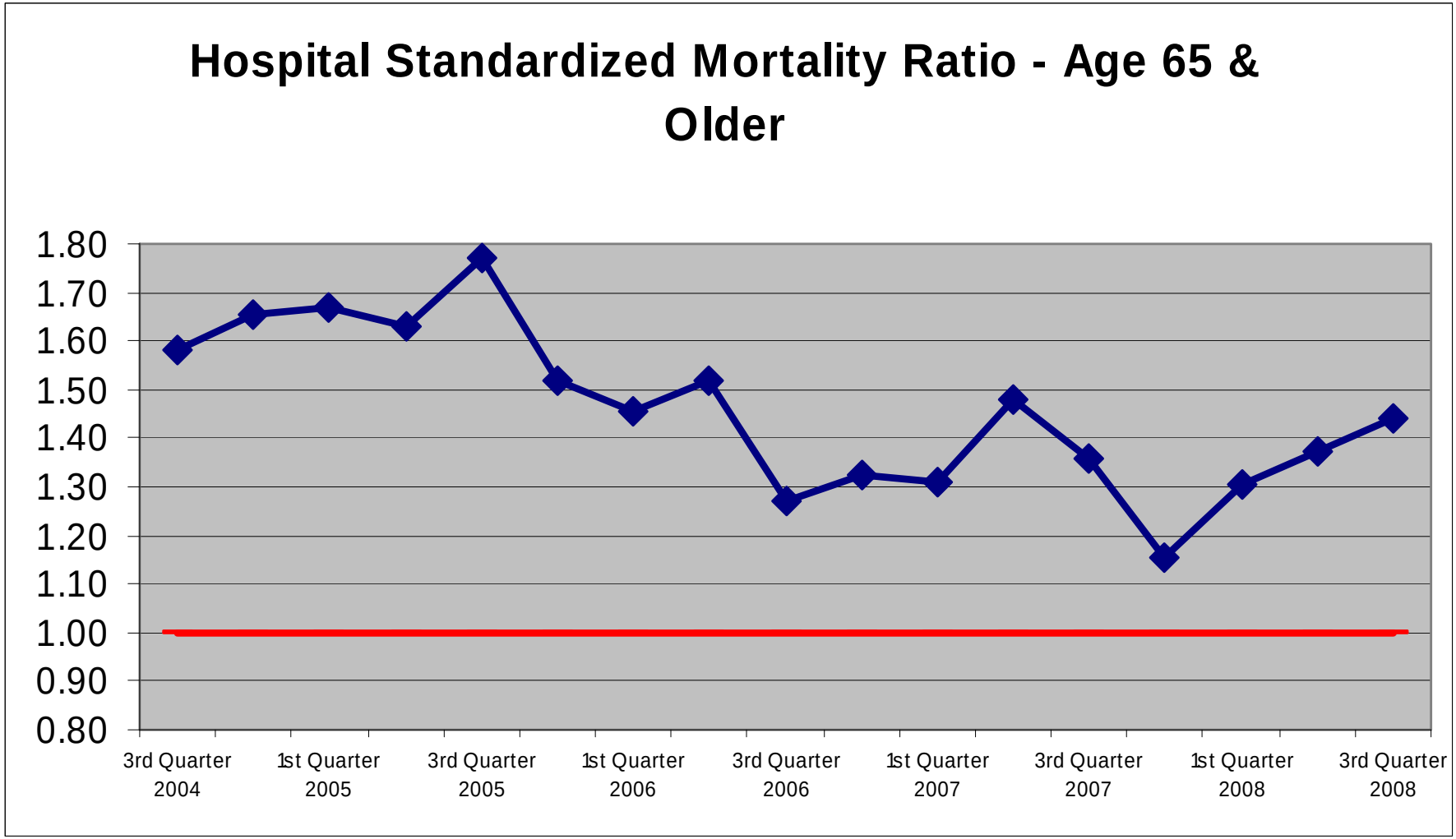
Average Star Rating	**3.0**	**2.4**	**2.6**	**3.0**	**3.0**


Hospital Standardized Mortality Ratio
(Acute Care Inpatients Age ≥ 18)
1.60
1.50
1.40
1.30
1.20
1.10
1.00
0.90
0.80
0.70
3rd Quarter 2004
1st Quarter 2005
3rd Quarter 2005
1st Quarter 2006
3rd Quarter 2006
1st Quarter 2007
3rd Quarter 2007
1st Quarter 2008
3rd Quarter 2008

Acute Care Inpatients Age 18 & Older

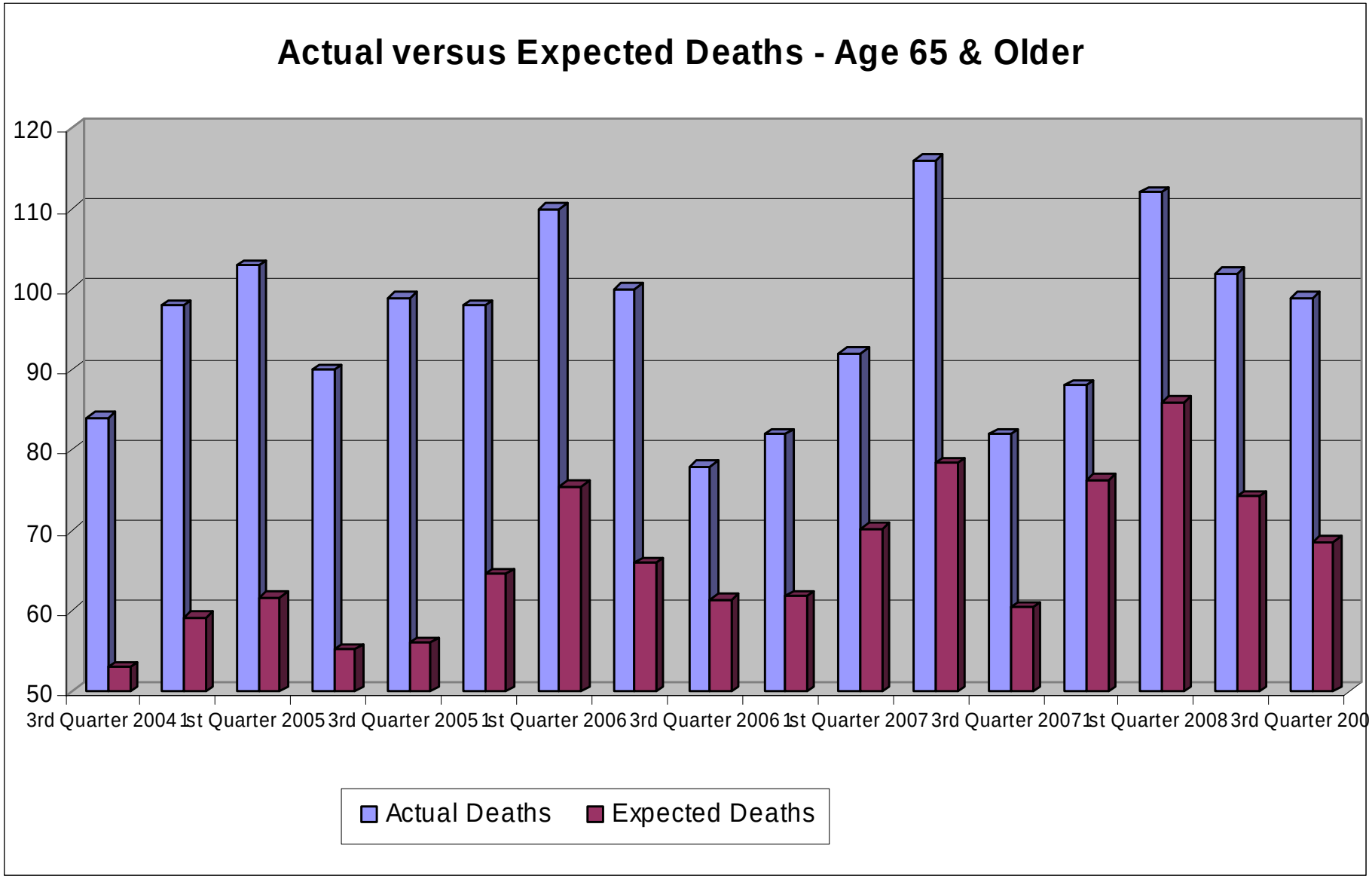
Calendar Quarter	Total Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
3rd Quarter 2004	4,238	131	87.02	3.09%	2.05%	1.51
4th Quarter 2004	4,144	130	89.22	3.14%	2.15%	1.46
1st Quarter 2005	4,270	148	94.96	3.47%	2.22%	1.56
2nd Quarter 2005	4,297	132	88.87	3.07%	2.07%	1.49
3rd Quarter 2005	4,216	133	88.45	3.15%	2.10%	1.50
4th Quarter 2005	3,993	133	99.34	3.33%	2.49%	1.34
1st Quarter 2006	4,038	146	111.06	3.62%	2.75%	1.31
2nd Quarter 2006	4,068	134	97.74	3.29%	2.40%	1.37
3rd Quarter 2006	4,152	116	97.54	2.79%	2.35%	1.19
4th Quarter 2006	3,955	113	93.89	2.86%	2.37%	1.20
1st Quarter 2007	4,216	135	114.57	3.20%	2.72%	1.18
2nd Quarter 2007	4,122	150	115.13	3.64%	2.79%	1.30
3rd Quarter 2007	4,319	118	99.32	2.73%	2.30%	1.19
4th Quarter 2007	4,221	132	119.78	3.13%	2.84%	1.10
1st Quarter 2008	4,416	151	126.05	3.42%	2.85%	1.20
2nd Quarter 2008	4,463	137	116.39	3.07%	2.61%	1.18
3rd Quarter 2008	4,545	138	107.24	3.04%	2.36%	1.29
Grand Total	71,673	2,277	1,746.57	3.18%	2.44%	1.30


Actual versus Expected Deaths
160
150
140
130
120
110
100
90
80
3rd Quarter 2004
1st Quarter 2005
3rd Quarter 2005
1st Quarter 2006
3rd Quarter 2006
1st Quarter 2007
3rd Quarter 2007
1st Quarter 2008
3rd Quarter 2008
Actual Deaths
Expected Deaths

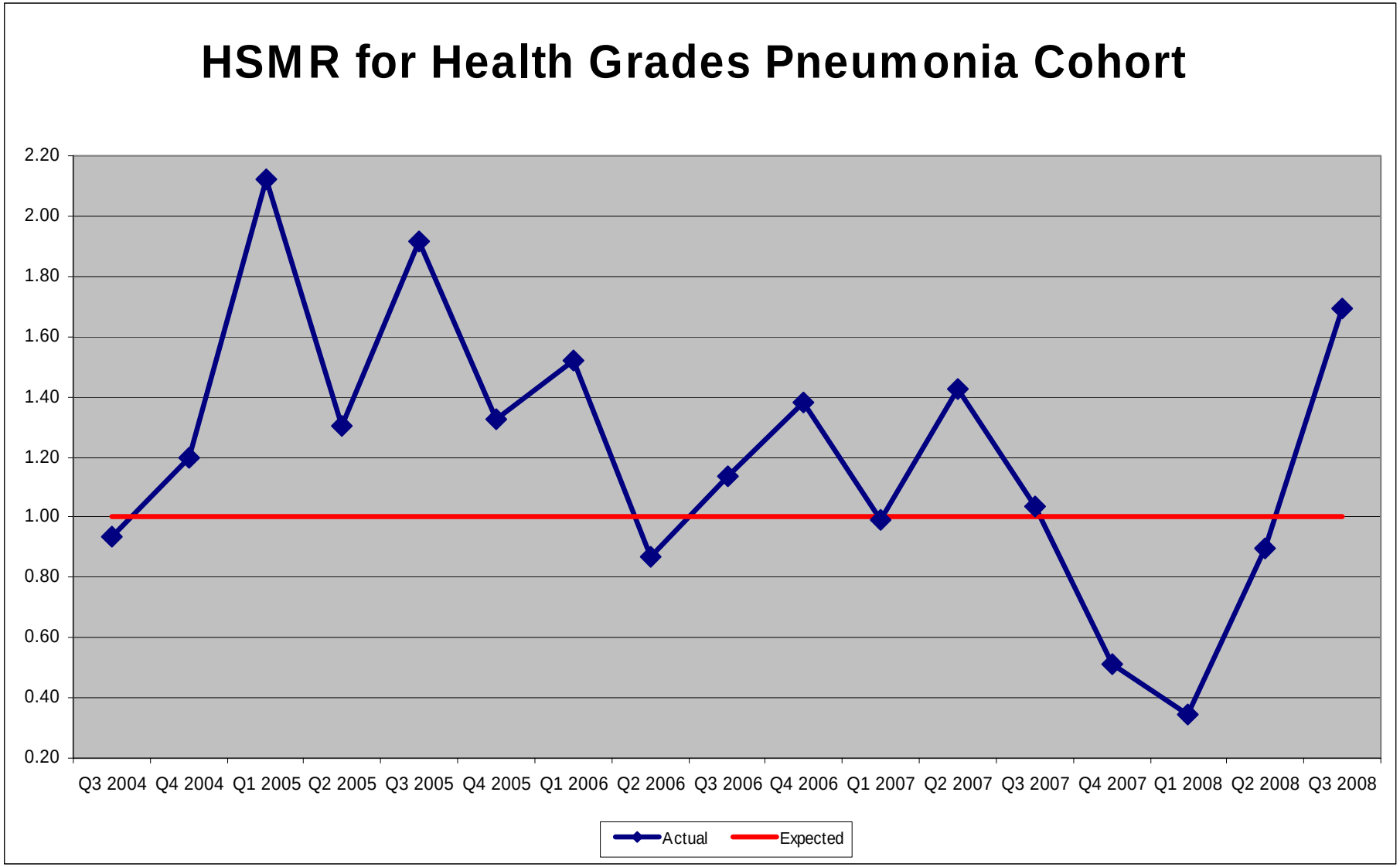

Hospital Standardized Mortality Ratio - Age 65 & Older
1.80
1.70
1.60
1.50
1.40
1.30
1.20
1.10
1.00
0.90
0.80
3rd Quarter 2004
1st Quarter 2005
3rd Quarter 2005
1st Quarter 2006
3rd Quarter 2006
1st Quarter 2007
3rd Quarter 2007
1st Quarter 2008
3rd Quarter 2008

Acute Care Inpatients Age 65 & Older

Calendar Quarter	Total Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
3rd Quarter 2004	1,380	84	53.04	6.09%	3.84%	1.58
4th Quarter 2004	1,361	98	59.25	7.20%	4.35%	1.65
1st Quarter 2005	1,522	103	61.68	6.77%	4.05%	1.67
2nd Quarter 2005	1,479	90	55.27	6.09%	3.74%	1.63
3rd Quarter 2005	1,413	99	55.97	7.01%	3.96%	1.77
4th Quarter 2005	1,475	98	64.56	6.64%	4.38%	1.52
1st Quarter 2006	1,546	110	75.49	7.12%	4.88%	1.46
2nd Quarter 2006	1,445	100	65.91	6.92%	4.56%	1.52
3rd Quarter 2006	1,453	78	61.42	5.37%	4.23%	1.27
4th Quarter 2006	1,388	82	61.89	5.91%	4.46%	1.32
1st Quarter 2007	1,581	92	70.20	5.82%	4.44%	1.31
2nd Quarter 2007	1,522	116	78.40	7.62%	5.15%	1.48
3rd Quarter 2007	1,482	82	60.42	5.53%	4.08%	1.36
4th Quarter 2007	1,621	88	76.31	5.43%	4.71%	1.15
1st Quarter 2008	1,790	112	85.98	6.26%	4.80%	1.30
2nd Quarter 2008	1,716	102	74.20	5.94%	4.32%	1.37
3rd Quarter 2008	1,679	99	68.60	5.90%	4.09%	1.44
Grand Total	25,853	1,633	1,128.59	6.32%	4.37%	1.45


Actual versus Expected Deaths - Age 65 & Older
120
110
100
90
80
70
60
50
3rd Quarter 2004
1st Quarter 2005
3rd Quarter 2005
1st Quarter 2006
3rd Quarter 2006
1st Quarter 2007
3rd Quarter 2007
1st Quarter 2008
3rd Quarter 200
Actual Deaths
Expected Deaths

Pneumonia (Age >=65)



Pneumonia (Age >= 65)

Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	50	2	2.14	4.00%	4.28%	0.93
Q4 2004	85	5	4.18	5.88%	4.92%	1.20
Q1 2005	143	14	6.59	9.79%	4.61%	2.12
Q2 2005	81	6	4.61	7.41%	5.69%	1.30
Q3 2005	75	6	3.13	8.00%	4.17%	1.92
Q4 2005	128	9	6.79	7.03%	5.30%	1.33
Q1 2006	165	19	12.49	11.52%	7.57%	1.52
Q2 2006	95	5	5.76	5.26%	6.06%	0.87
Q3 2006	81	7	6.15	8.64%	7.59%	1.14
Q4 2006	88	6	4.34	6.82%	4.93%	1.38
Q1 2007	135	9	9.10	6.67%	6.74%	0.99
Q2 2007	80	8	5.62	10.00%	7.03%	1.42
Q3 2007	71	4	3.86	5.63%	5.44%	1.04
Q4 2007	95	3	5.87	3.16%	6.18%	0.51
Q1 2008	155	3	8.71	1.94%	5.62%	0.34
Q2 2008	64	4	4.45	6.25%	6.95%	0.90
Q3 2008	41	3	1.77	7.32%	4.32%	1.69
Grand Total	**1,632**	**113**	**95.56**	**6.92%**	**5.86%**	**1.18**

HSMR 4 quarters ending 9/30/08 = 0.63

FFY 2005	**96.00**	**7.75**	**4.63**	**8.07%**	**4.83%**	**1.67**
FFY 2006	**117.25**	**10.00**	**7.80**	**8.53%**	**6.66%**	**1.28**
FFY 2007	**93.50**	**6.75**	**5.73**	**7.22%**	**6.12%**	**1.18**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Pneumonia inclusion/exclusion criteria.
This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.
Expected deaths are calculated using 3M APR DRG version 25 with the 2006 national norm.

Pneumonia (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	40	31.2	1.28
Q4 2006 – Q3 2007	27	22.9	1.18
Q4 2007 – Q3 2008	13	20.8	0.63
3 Year Total	80	74.9	1.07

COPD (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	9	4.9	1.83
Q4 2006 – Q3 2007	6	6.4	0.94
Q4 2007 – Q3 2008	6	8.5	0.70
3 Year Total	21	19.8	1.06

Heart Failure (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	16	13.3	1.20
Q4 2006 – Q3 2007	12	12.8	0.94
Q4 2007 – Q3 2008	6	11.9	0.50
3 Year Total	34	37.99	0.89

Acute Myocardial Infarction (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	20	12.8	1.56
Q4 2006 – Q3 2007	24	14.4	1.67
Q4 2007 – Q3 2008	11	11.9	0.92
3 Year Total	55	39.1	1.41

Respiratory Failure (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	37	22.8	1.62
Q4 2006 – Q3 2007	29	17.4	1.66
Q4 2007 – Q3 2008	49	28.8	1.70
3 Year Total	115	69	1.67

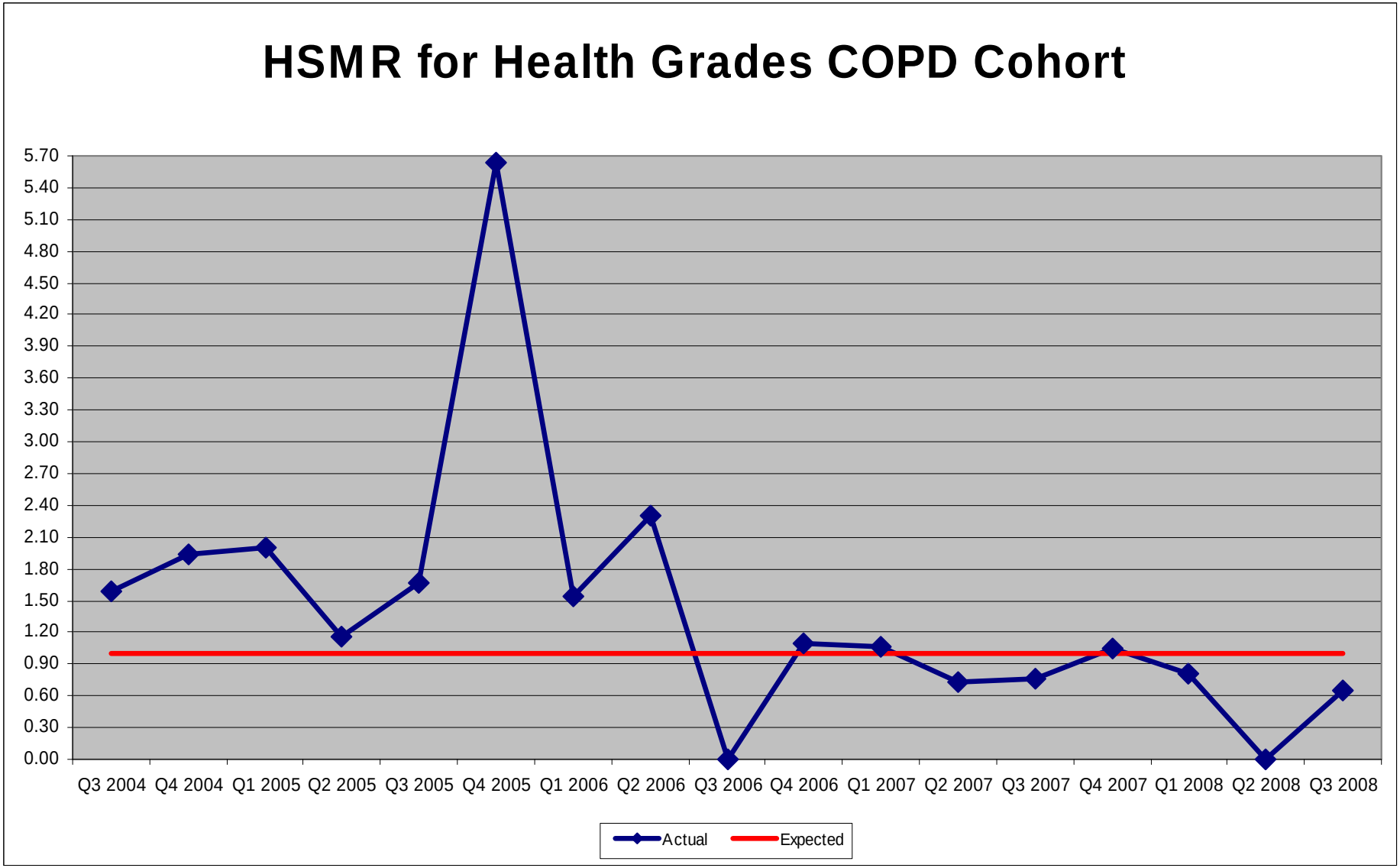
Sepsis (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	34	29.1	1.17
Q4 2006 – Q3 2007	42	34.6	1.21
Q4 2007 – Q3 2008	62	45.6	1.36
3 Year Total	138	109	1.26

Stroke (Age >= 65)

	Total Deaths	Expected Deaths	HSMR
Q4 2005 – Q3 2006	16	13.2	1.21
Q4 2006 – Q3 2007	23	16.8	1.37
Q4 2007 – Q3 2008	22	15.9	1.38
3 Year Total	61	45.9	1.33

Chronic Obstructive Pulmonary Disease (Age >= 65)



Chronic Obstructive Pulmonary Disease (Age >= 65)

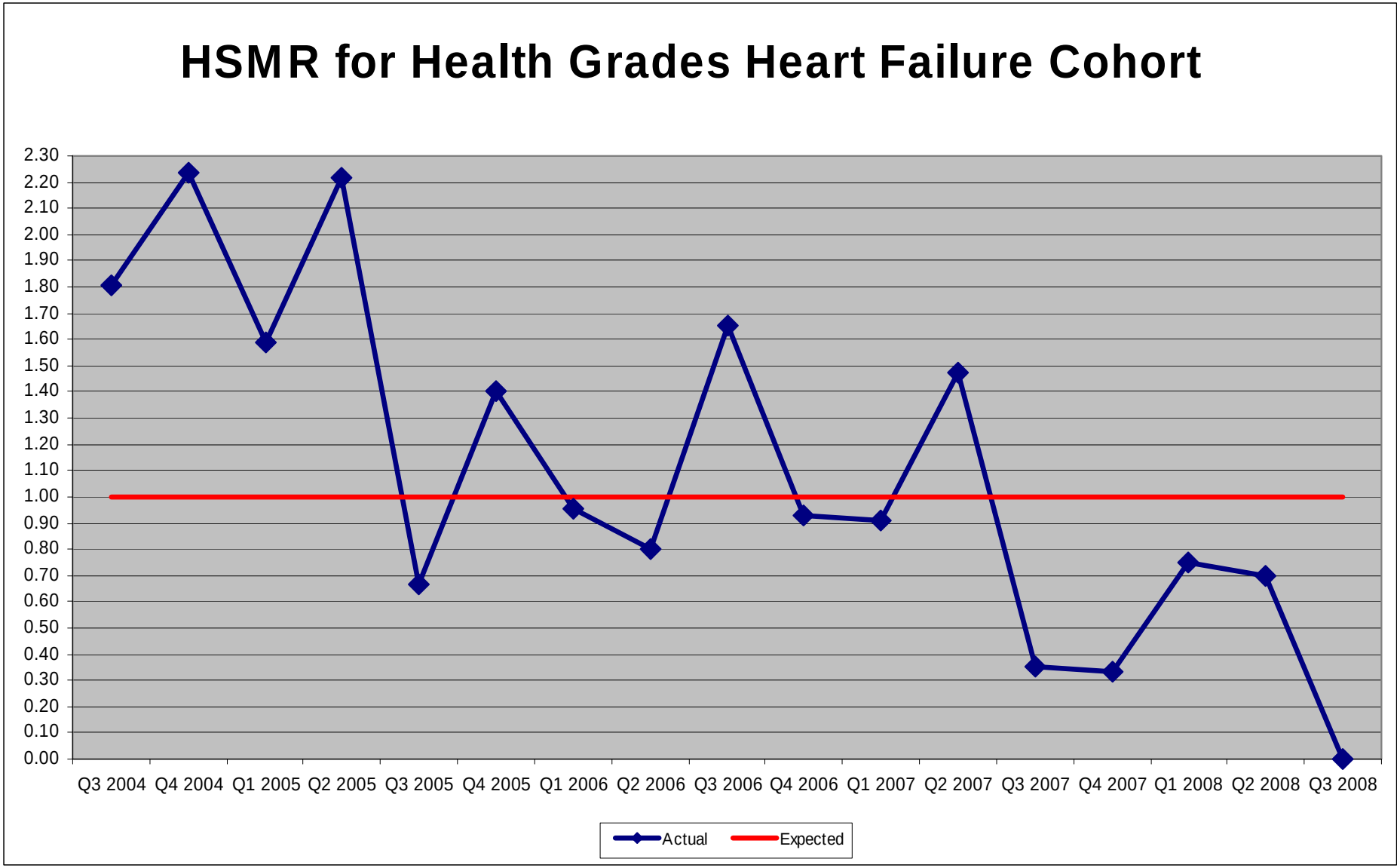
Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	23	1	0.63	4.35%	2.74%	1.59
Q4 2004	42	2	1.03	4.76%	2.45%	1.94
Q1 2005	53	3	1.50	5.66%	2.83%	2.00
Q2 2005	42	1	0.86	2.38%	2.05%	1.16
Q3 2005	22	1	0.60	4.55%	2.73%	1.67
Q4 2005	32	4	0.71	12.50%	2.22%	5.63
Q1 2006	52	2	1.30	3.85%	2.50%	1.54
Q2 2006	30	3	1.30	10.00%	4.33%	2.31
Q3 2006	33	0	1.62	0.00%	4.91%	0.00
Q4 2006	32	1	0.91	3.13%	2.84%	1.10
Q1 2007	61	3	2.84	4.92%	4.66%	1.06
Q2 2007	42	1	1.36	2.38%	3.24%	0.74
Q3 2007	40	1	1.30	2.50%	3.25%	0.77
Q4 2007	65	3	2.87	4.62%	4.42%	1.05
Q1 2008	76	2	2.47	2.63%	3.25%	0.81
Q2 2008	51	0	1.66	0.00%	3.25%	0.00
Q3 2008	40	1	1.54	2.50%	3.85%	0.65
Grand Total	**736**	**29**	**24.50**	**3.94%**	**3.33%**	**1.18**

HSMR 4 quarters ending 9/30/08 = 0.70

FFY 2005	**39.75**	**1.75**	**1.00**	**4.40%**	**2.51%**	**1.75**
FFY 2006	**36.75**	**2.25**	**1.23**	**6.12%**	**3.34%**	**1.83**
FFY 2007	**43.75**	**1.50**	**1.60**	**3.43%**	**3.65%**	**0.94**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Chronic Obstructive Pulmonary Disease inclusion/exclusion criteria. This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.

Heart Failure (Age >= 65)



Heart Failure (Age >= 65)

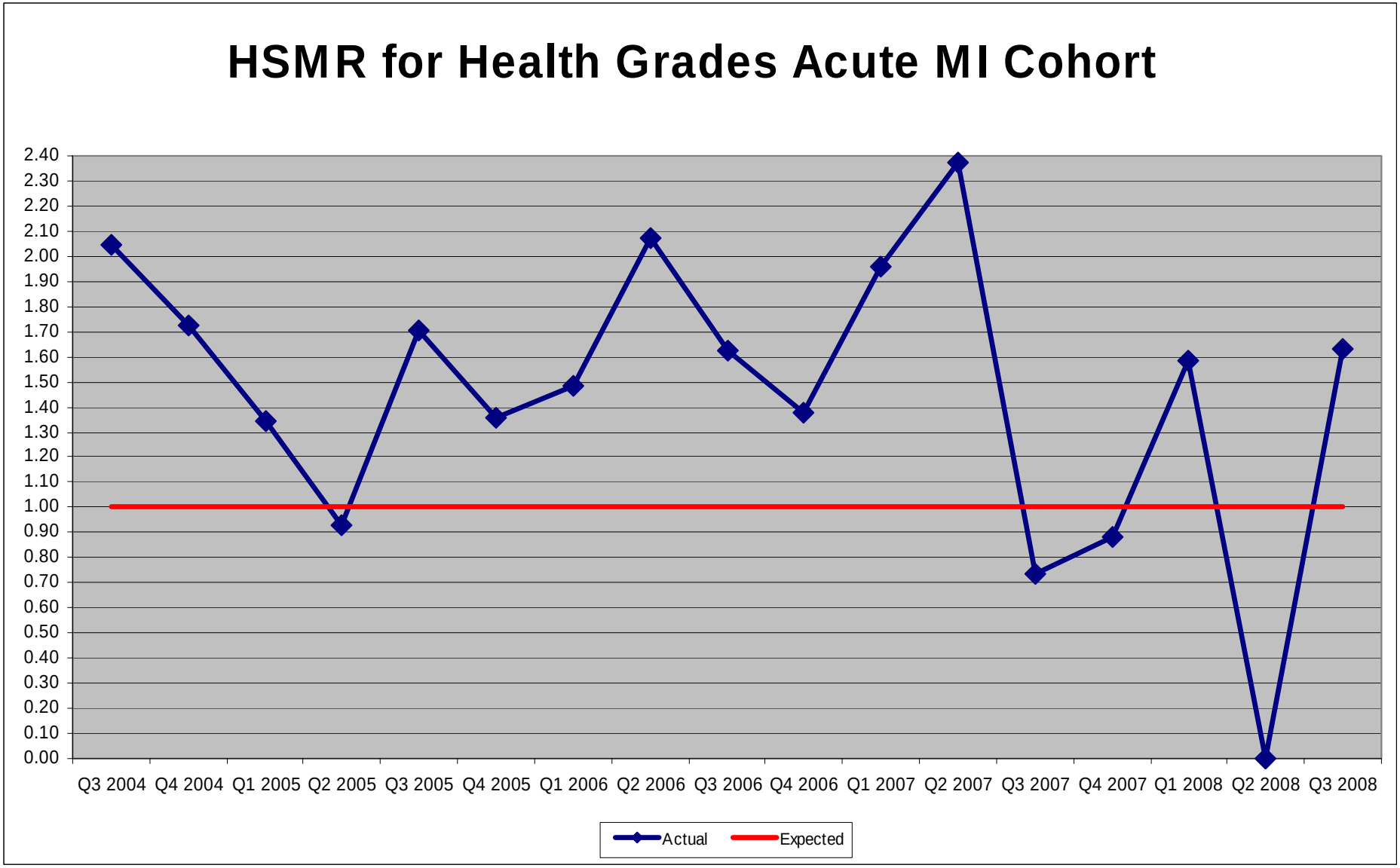
Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	68	6	3.32	8.82%	4.88%	1.81
Q4 2004	57	6	2.68	10.53%	4.70%	2.24
Q1 2005	80	7	4.40	8.75%	5.50%	1.59
Q2 2005	74	6	2.71	8.11%	3.66%	2.21
Q3 2005	50	1	1.50	2.00%	3.00%	0.67
Q4 2005	70	5	3.57	7.14%	5.10%	1.40
Q1 2006	83	4	4.20	4.82%	5.06%	0.95
Q2 2006	57	2	2.50	3.51%	4.39%	0.80
Q3 2006	67	5	3.03	7.46%	4.52%	1.65
Q4 2006	60	2	2.15	3.33%	3.58%	0.93
Q1 2007	114	4	4.40	3.51%	3.86%	0.91
Q2 2007	80	5	3.39	6.25%	4.24%	1.47
Q3 2007	59	1	2.84	1.69%	4.81%	0.35
Q4 2007	62	1	3.00	1.61%	4.84%	0.33
Q1 2008	100	3	3.99	3.00%	3.99%	0.75
Q2 2008	68	2	2.87	2.94%	4.22%	0.70
Q3 2008	55	0	2.03	0.00%	3.69%	0.00
Grand Total	**1,204**	**60**	**52.58**	**4.98%**	**4.37%**	**1.14**

HSMR 4 quarters ending 9/30/08= 0.50

FFY 2005	**65.25**	**5.00**	**2.82**	**7.66%**	**4.33%**	**1.77**
FFY 2006	**69.25**	**4.00**	**3.33**	**5.78%**	**4.82%**	**1.20**
FFY 2007	**78.25**	**3.00**	**3.20**	**3.83%**	**4.07%**	**0.94**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Heart Failure inclusion/exclusion criteria.
This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.

Acute Myocardial Infarction (Age >= 65)



Acute Myocardial Infarction (Age >= 65)

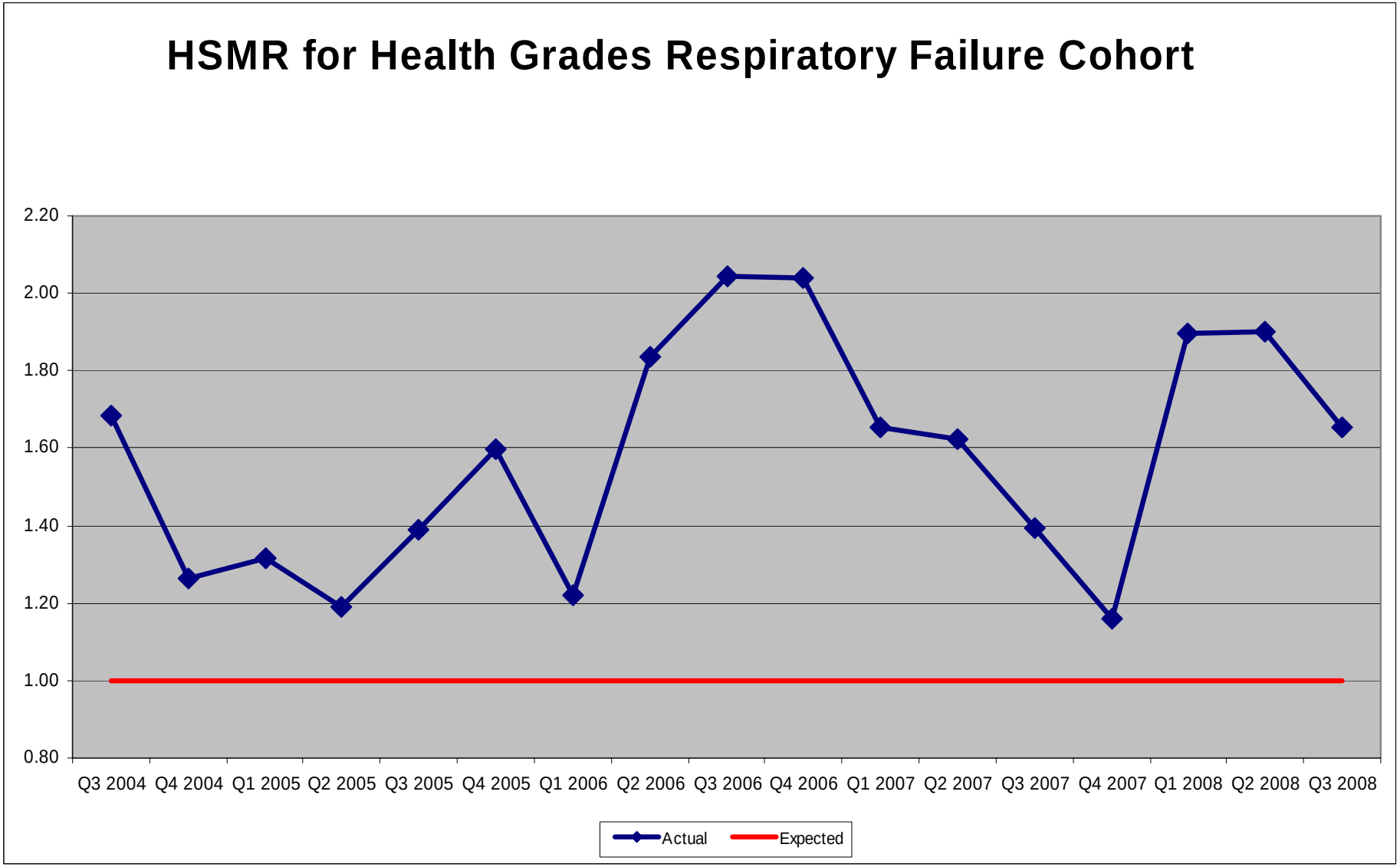
Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	44	7	3.42	15.91%	7.77%	2.05
Q4 2004	49	10	5.80	20.41%	11.84%	1.72
Q1 2005	48	6	4.46	12.50%	9.29%	1.35
Q2 2005	48	3	3.22	6.25%	6.71%	0.93
Q3 2005	51	4	2.35	7.84%	4.61%	1.70
Q4 2005	53	6	4.42	11.32%	8.34%	1.36
Q1 2006	48	6	4.04	12.50%	8.42%	1.49
Q2 2006	36	4	1.93	11.11%	5.36%	2.07
Q3 2006	36	4	2.46	11.11%	6.83%	1.63
Q4 2006	50	5	3.63	10.00%	7.26%	1.38
Q1 2007	58	10	5.10	17.24%	8.79%	1.96
Q2 2007	49	7	2.95	14.29%	6.02%	2.37
Q3 2007	33	2	2.73	6.06%	8.27%	0.73
Q4 2007	56	3	3.41	5.36%	6.09%	0.88
Q1 2008	41	5	3.15	12.20%	7.68%	1.59
Q2 2008	48	0	3.52	0.00%	7.33%	0.00
Q3 2008	40	3	1.84	7.50%	4.60%	1.63
Grand Total	**788**	**85**	**58.43**	**10.79%**	**7.41%**	**1.45**

HSMR 4 quarters ending 9/30/08 = 0.92

FFY 2005	**49.00**	**5.75**	**3.96**	**11.73%**	**8.09%**	**1.45**
FFY 2006	**43.25**	**5.00**	**3.21**	**11.56%**	**7.41%**	**1.56**
FFY 2007	**47.50**	**6.00**	**3.60**	**12.63%**	**7.56%**	**1.67**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Acute Myocardial Infarction inclusion/exclusion criteria. This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.

Respiratory Failure (Age >= 65)



Respiratory Failure (Age >= 65)

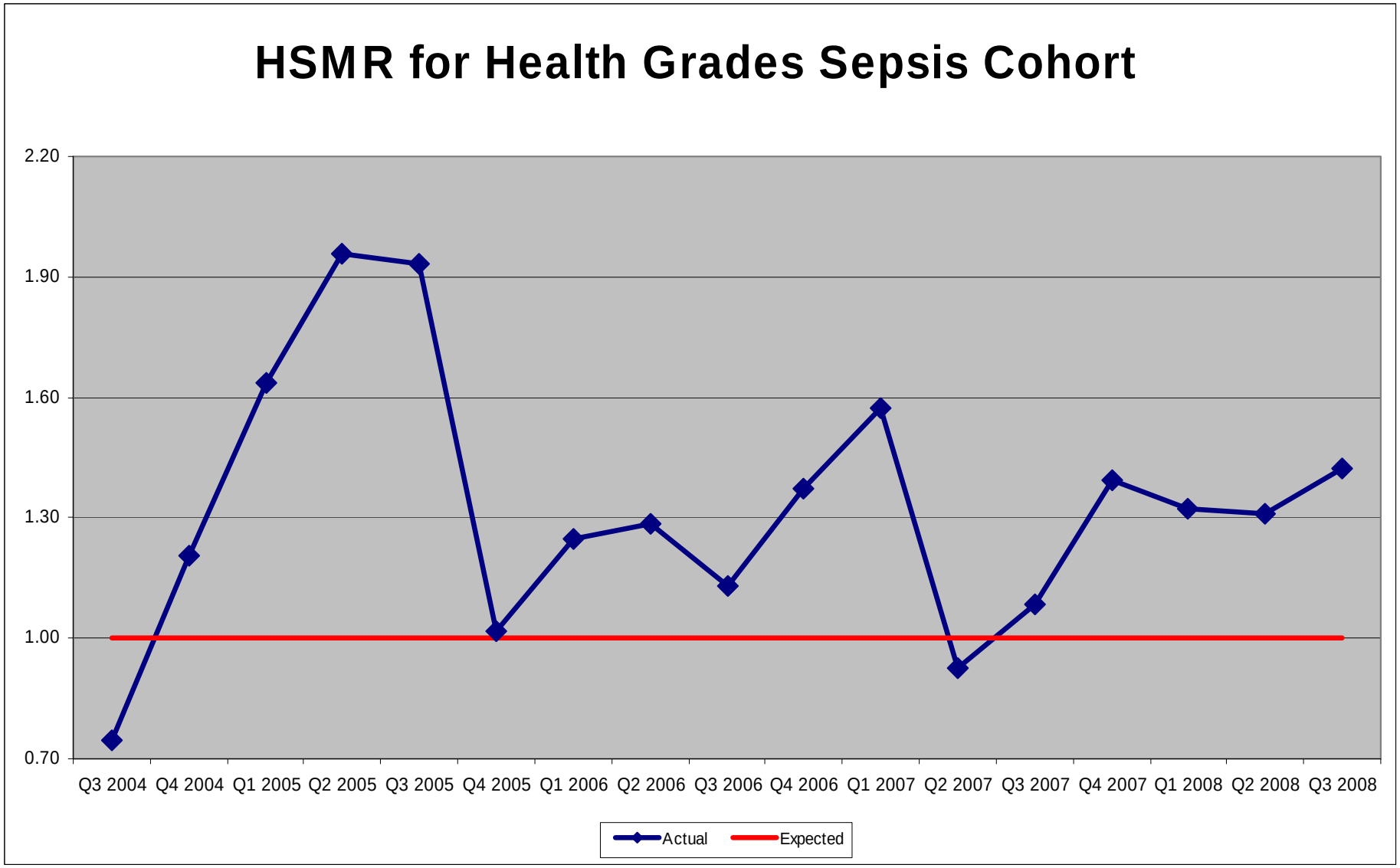
Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	9	3	1.78	33.33%	19.78%	1.69
Q4 2004	13	5	3.96	38.46%	30.46%	1.26
Q1 2005	24	8	6.09	33.33%	25.38%	1.31
Q2 2005	22	6	5.04	27.27%	22.91%	1.19
Q3 2005	18	7	5.04	38.89%	28.00%	1.39
Q4 2005	23	11	6.88	47.83%	29.91%	1.60
Q1 2006	26	8	6.55	30.77%	25.19%	1.22
Q2 2006	26	10	5.45	38.46%	20.96%	1.83
Q3 2006	13	8	3.91	61.54%	30.08%	2.05
Q4 2006	13	7	3.43	53.85%	26.38%	2.04
Q1 2007	15	5	3.02	33.33%	20.13%	1.66
Q2 2007	23	12	7.39	52.17%	32.13%	1.62
Q3 2007	13	5	3.59	38.46%	27.62%	1.39
Q4 2007	18	7	6.04	38.89%	33.56%	1.16
Q1 2008	37	18	9.49	48.65%	25.65%	1.90
Q2 2008	32	16	8.41	50.00%	26.28%	1.90
Q3 2008	19	8	4.84	42.11%	25.47%	1.65
Grand Total	**344**	**144**	**90.91**	**41.86%**	**26.43%**	**1.58**

HSMR 4 quarters ending 9/30/08 = 1.70

FFY 2005	**19.25**	**6.50**	**5.03**	**33.77%**	**26.18%**	**1.29**
FFY 2006	**22.00**	**9.25**	**5.70**	**42.05%**	**25.96%**	**1.62**
FFY 2007	**16.00**	**7.25**	**4.36**	**45.31%**	**27.30%**	**1.66**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Respiratory Failure inclusion/exclusion criteria. This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.

Sepsis (Age >= 65)



Sepsis (Age >= 65)

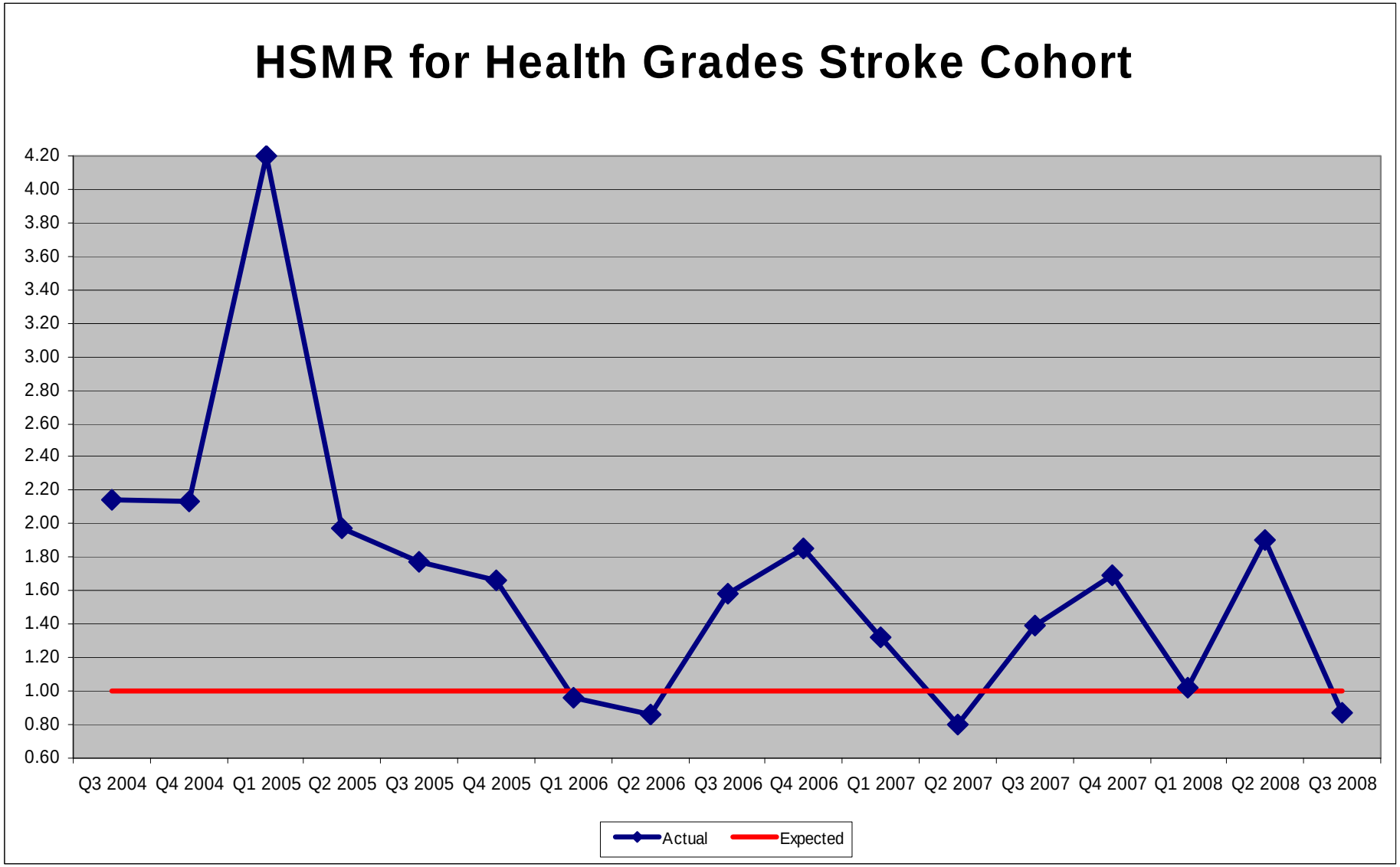
Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	35	4	5.36	11.43%	15.31%	0.75
Q4 2004	30	6	4.98	20.00%	16.60%	1.20
Q1 2005	39	10	6.12	25.64%	15.69%	1.63
Q2 2005	31	10	5.11	32.26%	16.48%	1.96
Q3 2005	46	13	6.73	28.26%	14.63%	1.93
Q4 2005	44	7	6.89	15.91%	15.66%	1.02
Q1 2006	28	7	5.61	25.00%	20.04%	1.25
Q2 2006	34	10	7.77	29.41%	22.85%	1.29
Q3 2006	50	10	8.84	20.00%	17.68%	1.13
Q4 2006	47	11	8.02	23.40%	17.06%	1.37
Q1 2007	46	12	7.62	26.09%	16.57%	1.57
Q2 2007	51	9	9.73	17.65%	19.08%	0.92
Q3 2007	49	10	9.21	20.41%	18.80%	1.09
Q4 2007	57	13	9.33	22.81%	16.37%	1.39
Q1 2008	64	17	12.87	26.56%	20.11%	1.32
Q2 2008	67	15	11.44	22.39%	17.07%	1.31
Q3 2008	64	17	11.95	26.56%	18.67%	1.42
Grand Total	**782**	**181**	**137.58**	**23.15%**	**17.59%**	**1.32**

HSMR 4 quarters ending 9/30/08 = 1.36

FFY 2005	**36.50**	**9.75**	**5.74**	**26.71%**	**15.71%**	**1.70**
FFY 2006	**39.00**	**8.50**	**7.28**	**21.79%**	**18.62%**	**1.17**
FFY 2007	**48.25**	**10.50**	**8.65**	**21.76%**	**17.98%**	**1.21**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Sepsis inclusion/exclusion criteria.
This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.

Stroke (Age >=65)



Stroke (Age >= 65)

Calendar Quarter	Discharges	Total Deaths	Expected Deaths	Actual Mortality Rate	Expected Mortality Rate	Hospital Standardized Mortality Ratio
Q3 2004	38	9	4.19	23.68%	11.03%	2.15
Q4 2004	46	7	3.28	15.22%	7.13%	2.13
Q1 2005	37	6	1.43	16.22%	3.86%	4.20
Q2 2005	34	6	3.04	17.65%	8.94%	1.97
Q3 2005	46	6	3.38	13.04%	7.35%	1.78
Q4 2005	36	6	3.61	16.67%	10.03%	1.66
Q1 2006	49	4	4.18	8.16%	8.53%	0.96
Q2 2006	37	3	3.49	8.11%	9.43%	0.86
Q3 2006	29	3	1.90	10.34%	6.55%	1.58
Q4 2006	46	8	4.31	17.39%	9.37%	1.86
Q1 2007	37	5	3.79	13.51%	10.24%	1.32
Q2 2007	35	3	3.73	8.57%	10.66%	0.80
Q3 2007	37	7	5.01	18.92%	13.54%	1.40
Q4 2007	45	10	5.92	22.22%	13.16%	1.69
Q1 2008	53	4	3.91	7.55%	7.38%	1.02
Q2 2008	44	5	2.63	11.36%	5.98%	1.90
Q3 2008	59	3	3.43	5.08%	5.81%	0.87
Grand Total	**708**	**95**	**61.23**	**13.42%**	**8.65%**	**1.55**

HSMR 4 quarters ending 9/30/08 =1.38

FFY 2005	**40.75**	**6.25**	**2.78**	**15.34%**	**6.82%**	**2.25**
FFY 2006	**37.75**	**4.00**	**3.30**	**10.60%**	**8.76%**	**1.21**
FFY 2007	**38.75**	**5.75**	**4.21**	**14.84%**	**10.83%**	**1.37**

Report Source: 3M Health Data Management
Selection Criteria: The population was defined using Health Grades Stroke inclusion/exclusion criteria.
This criteria includes age >=65, discharge disposition <> AMA or discharged/transferred to another acute hospital.