

December 2019

Executive Summary Staff
Report

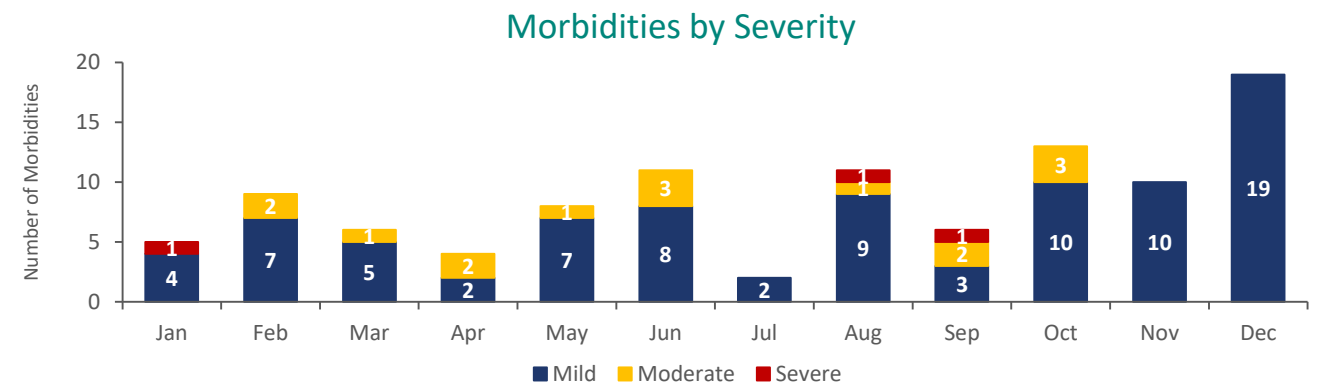
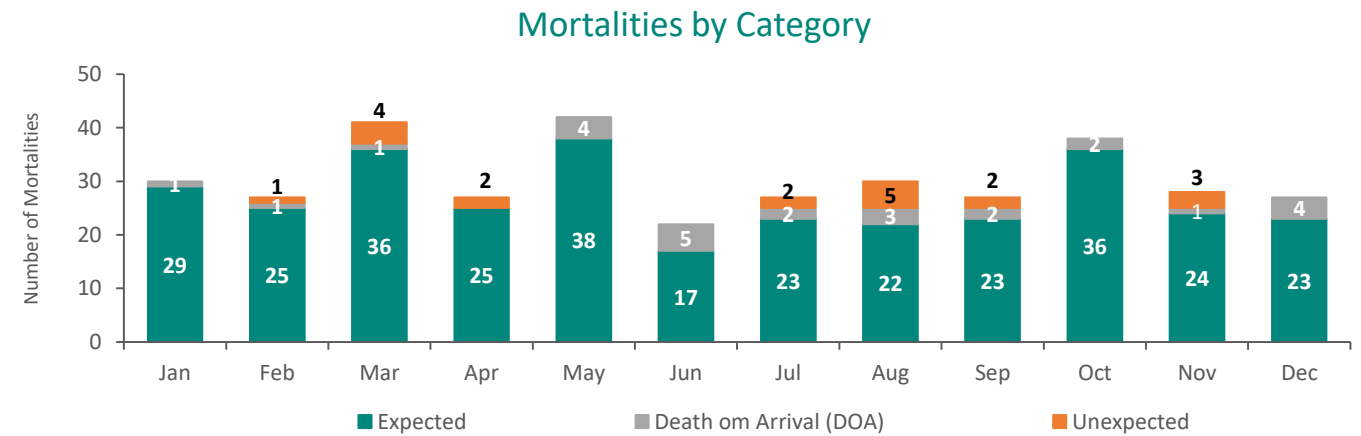
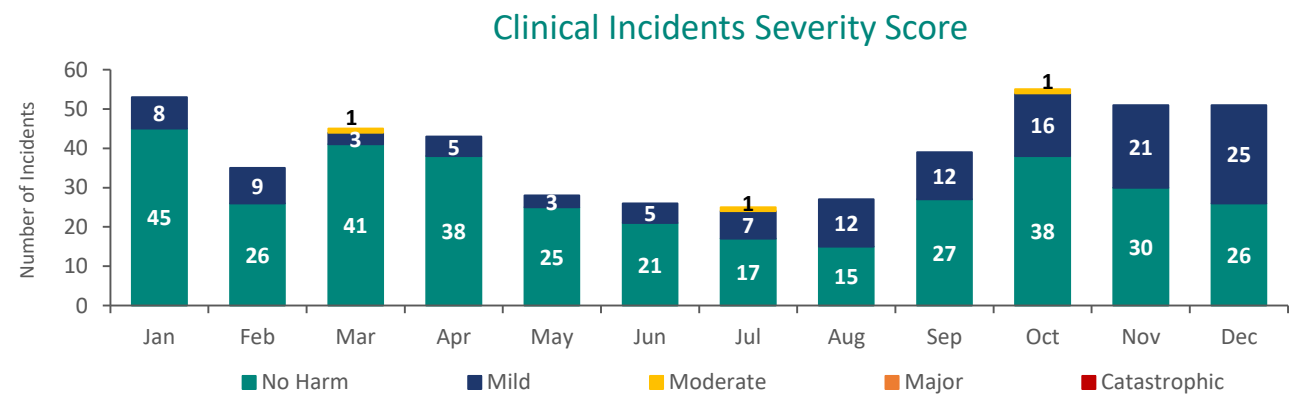
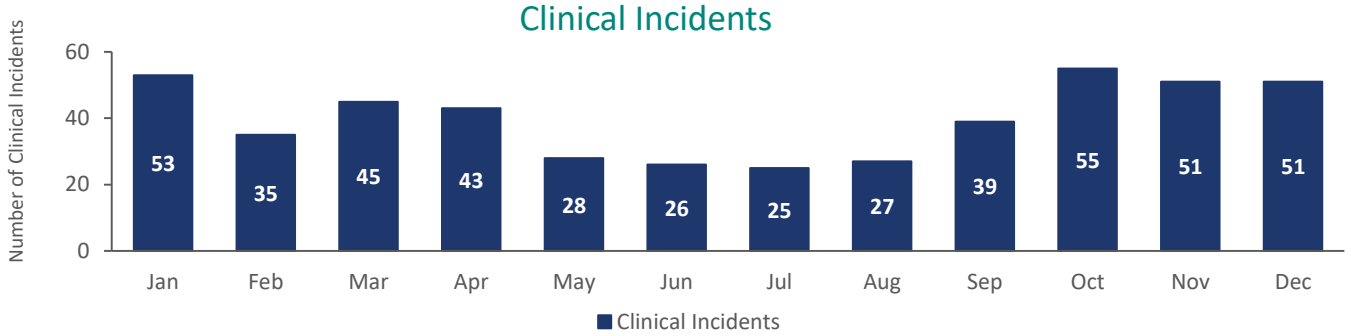


JHAH at a Glance

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2019 Clinical Incident Reporting by Staff into DATIX Software

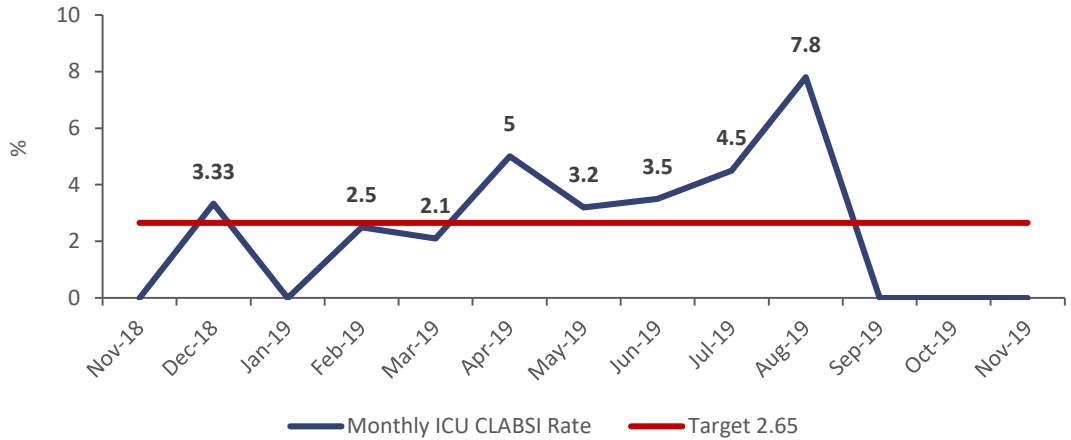


Intensive Care Unit Central Line Associated Bloodstream Infection (ICU CLABSI) Rate

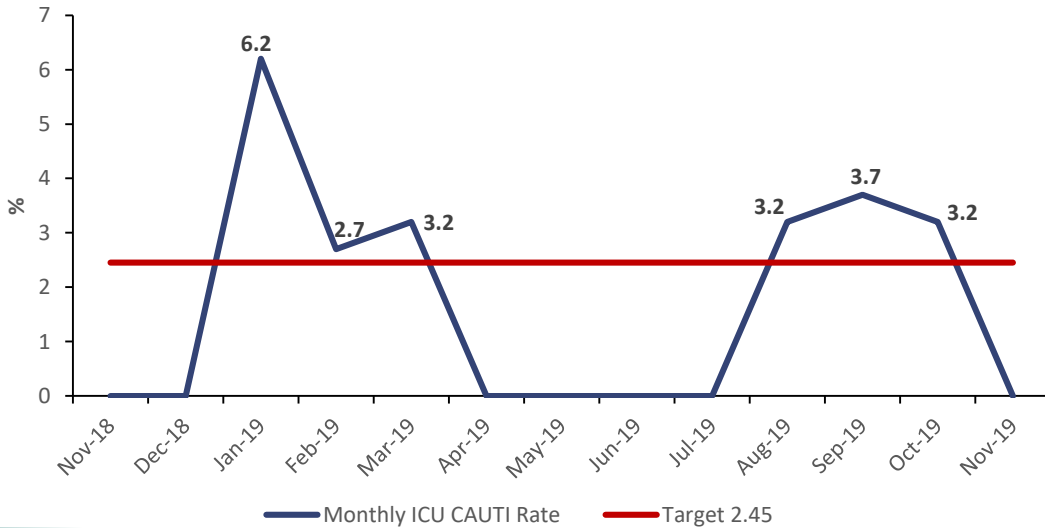
The number increased in August due to two infections reported

The data for each month is measured with no lag on the 5th of the following month

CLABSI YTD: 2.4
GCC Benchmark: 4.1
USA Benchmark: 1



Intensive Care Unit Catheter Associated Urinary Tract Infection (ICU CAUTI) Rate



The number increased in August due to one infection reported

The data for each month is measured with a 1 month lag on the 5th of the following month

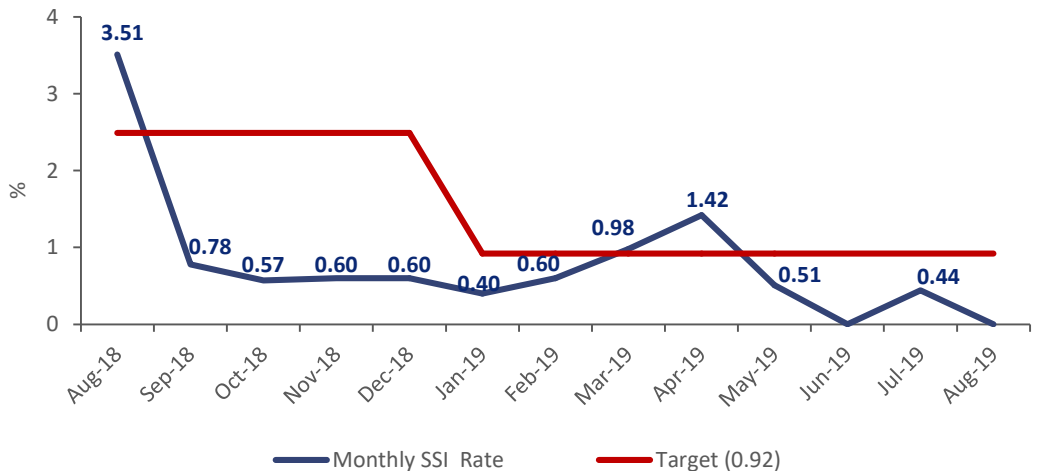
CAUTI YTD: 2
GCC Benchmark: 3.2
USA Benchmark: 2.1

Deep / Organs Surgical Site Infection (SSI) Rate

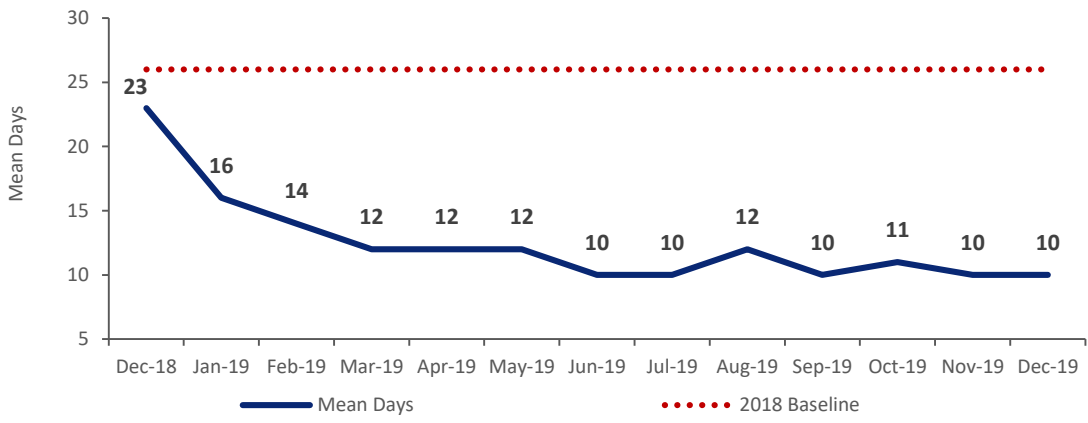
The data for each month is measured with a 4 month lag on the 5th of the month

SSI YTD: 0.59
NHSN Benchmark: 0.75%

NHSN: National Health Safety Network



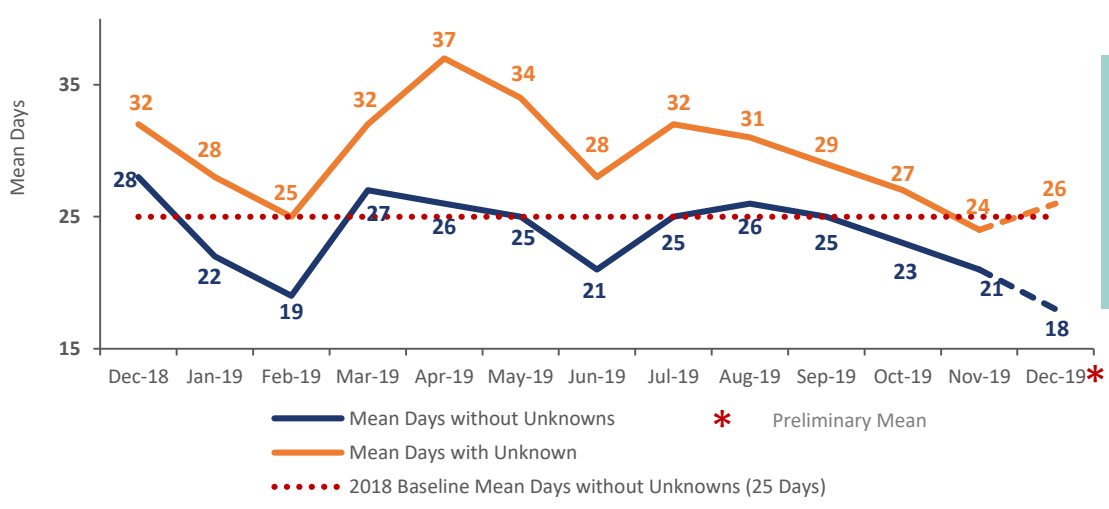
Access to Care - Aggregate Mean Days to First Scheduled Appointment from PC to KPI Clinics



The data for each month is measured with no lag on the 5th of the following month

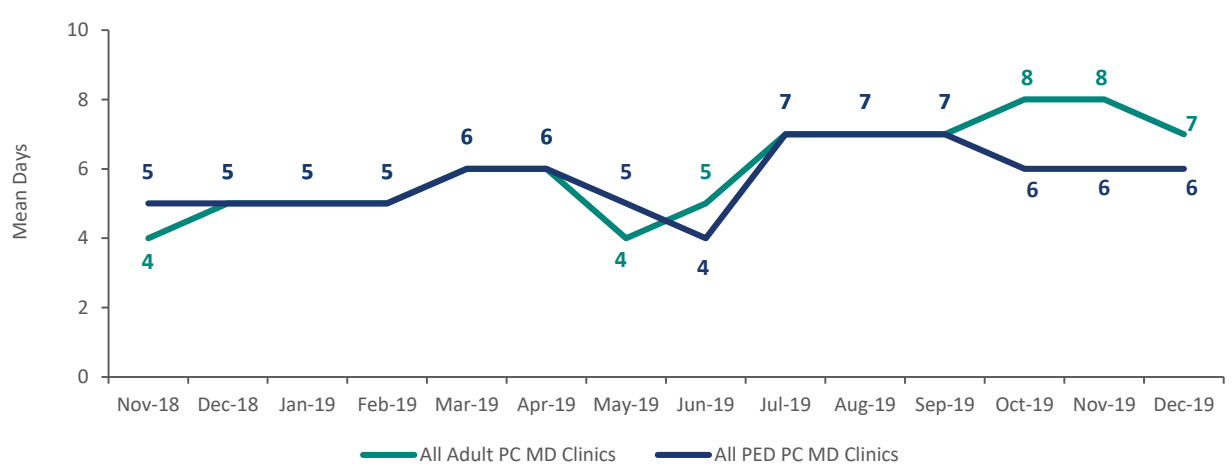
Access data is measured with old methodology

General Access to Care - Aggregate Mean Days to First Scheduled Appointment from PC to ALL Specialty Clinics

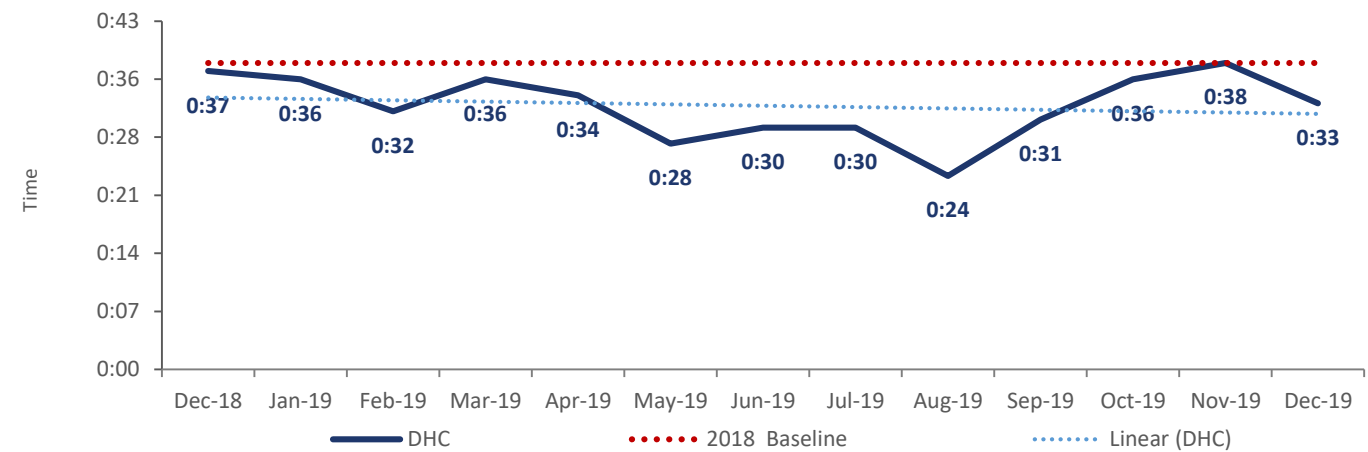


The data for each month is measured with a 1 month lag on the 5th of the following month

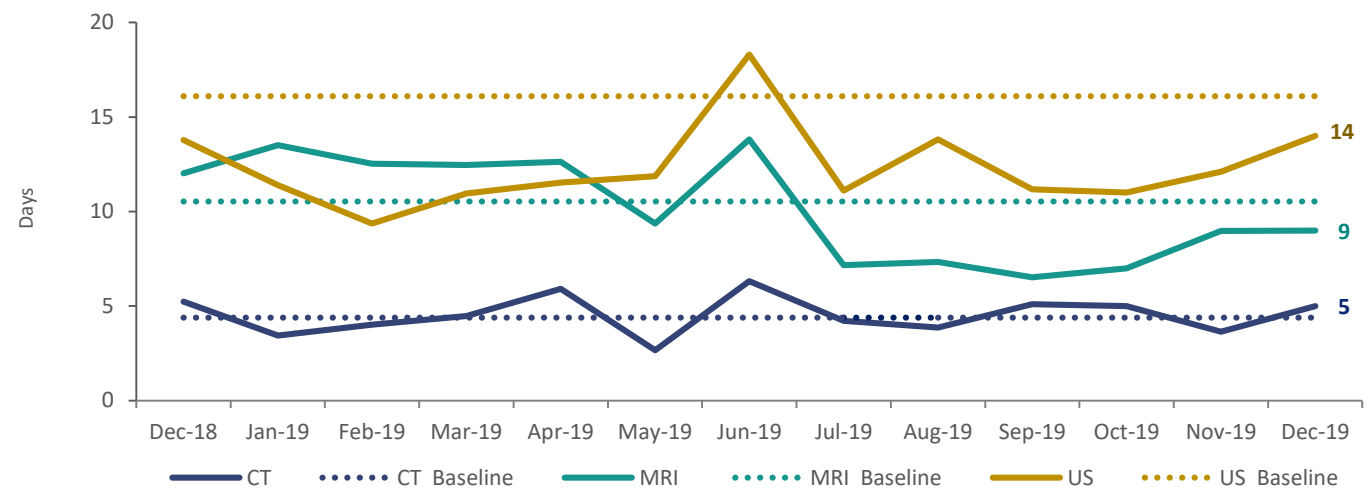
Dhahran Access to Care - Adult & Pediatric Primary Care MD Clinic - Lead Time



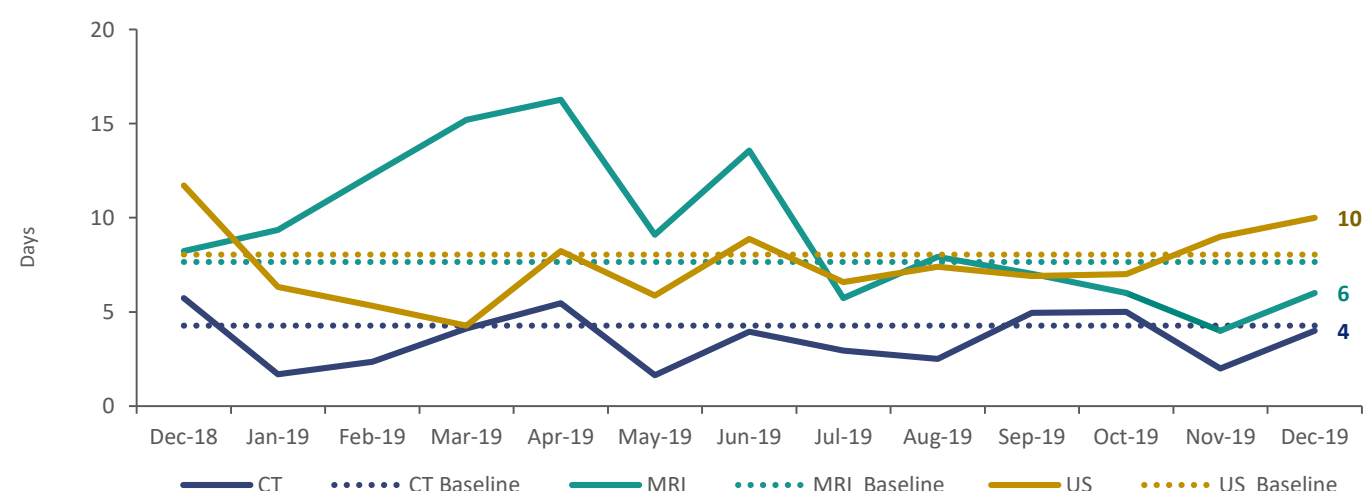
Dhahran EMS Access to Care from Arrival to Provider



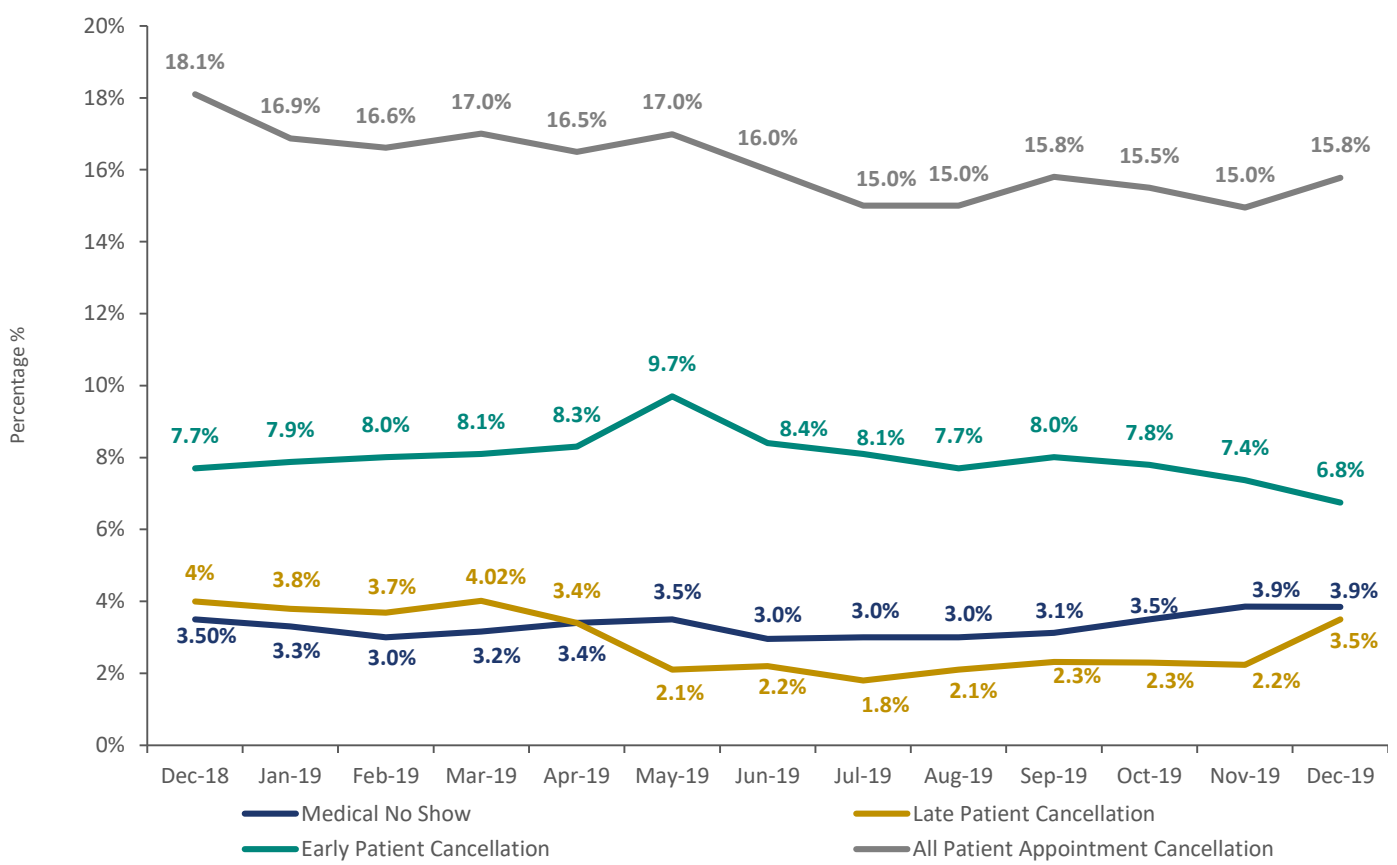
Dhahran Radiology Lead Time



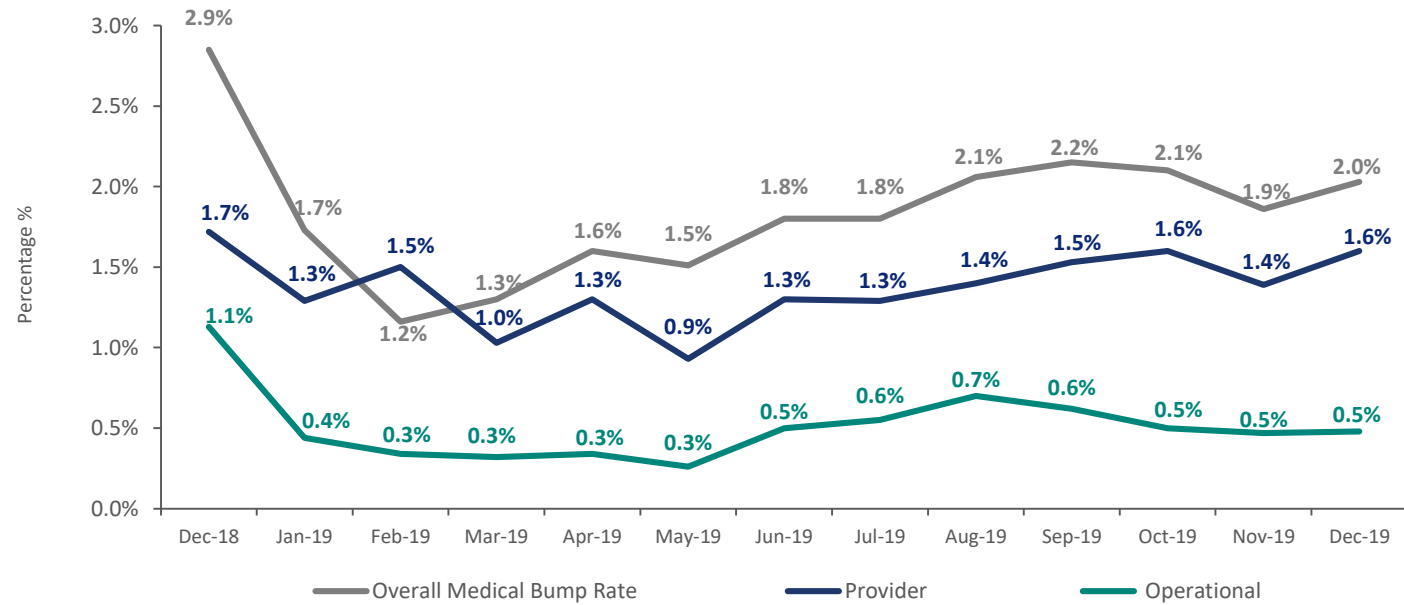
Al-Hasa Radiology Lead Time



Medical No-Show, Late & Early Patient Cancellation & All Patient Appointment Cancellation

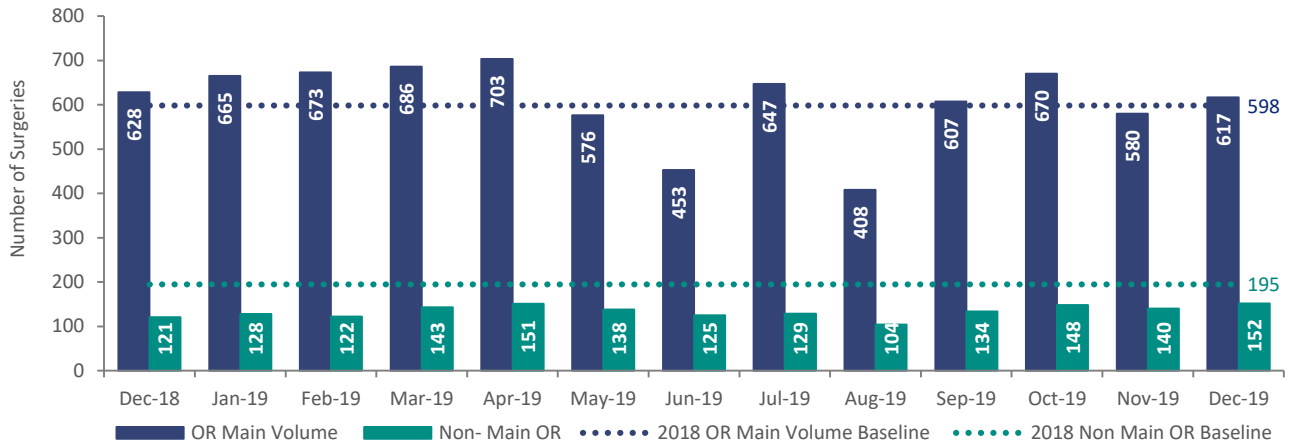


Overall Medical Bump Rate & Breakdown to Provider & Operational

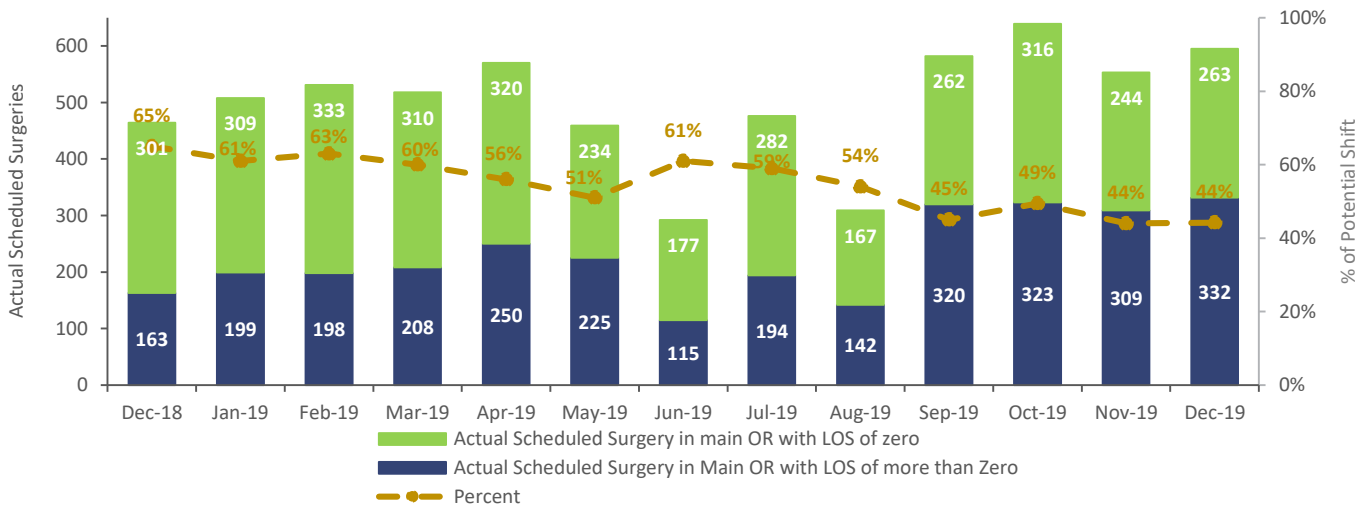


EFFECTIVE

OR & Non-Main OR Volumes

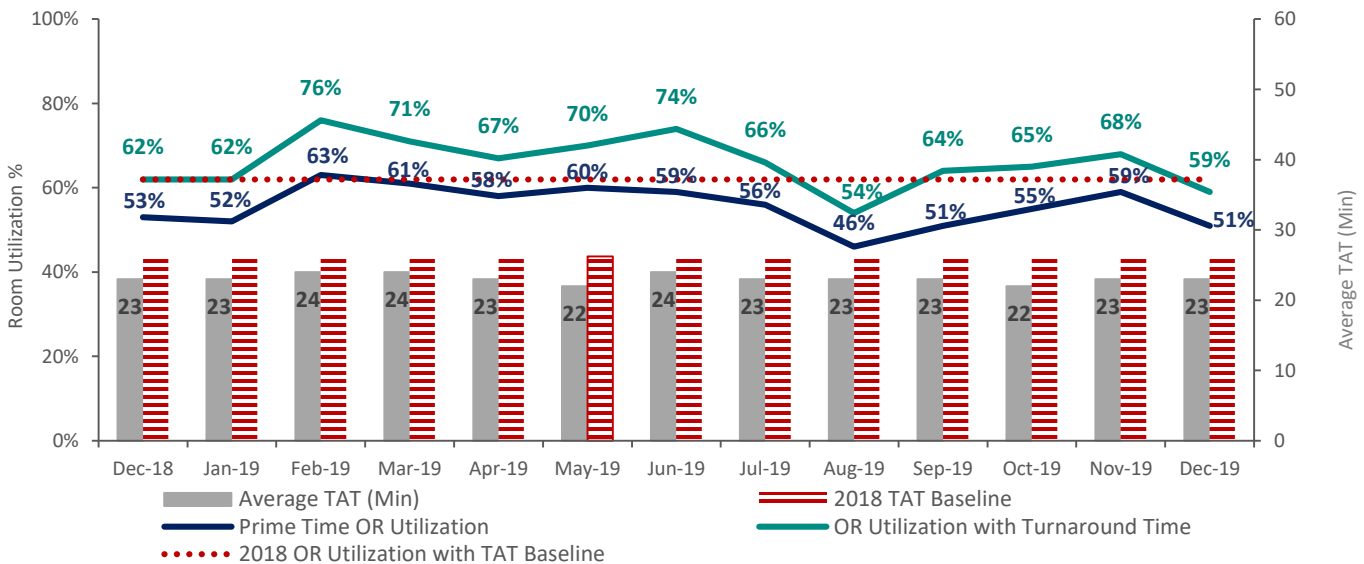


Outpatient to Inpatient Elective Surgery Ratio



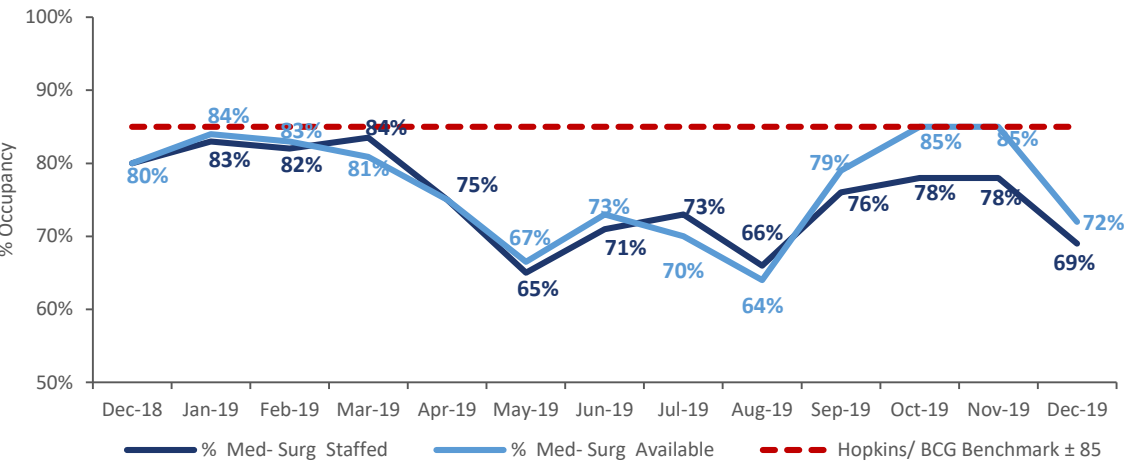
*Actual planned surgery in main OR excludes emergency surgical cases and inpatient cases with an add-on flag

OR Prime Time Utilization & OR Utilization with Turnaround Time



EFFICIENT

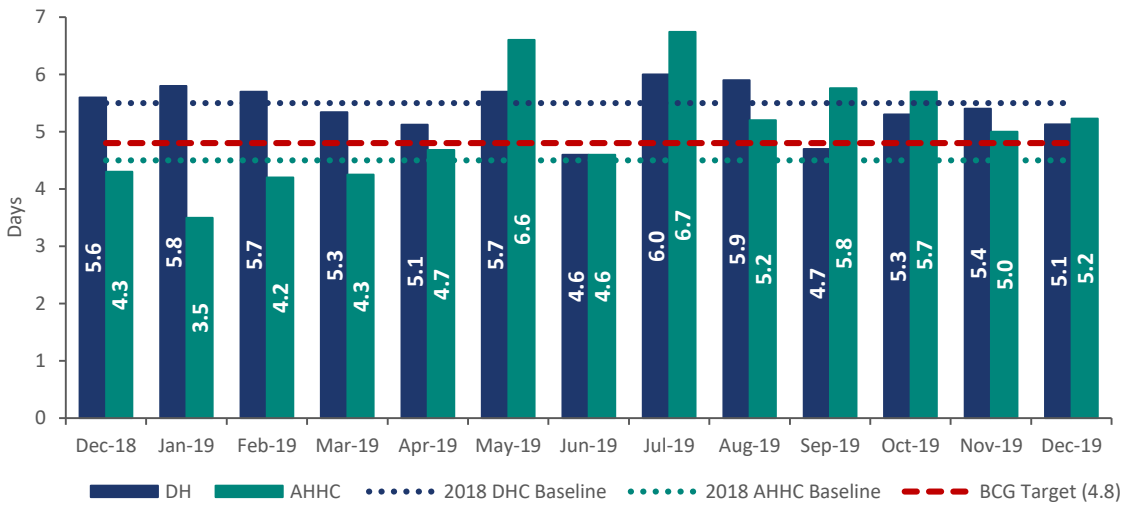
Dhahran Bed Occupancy



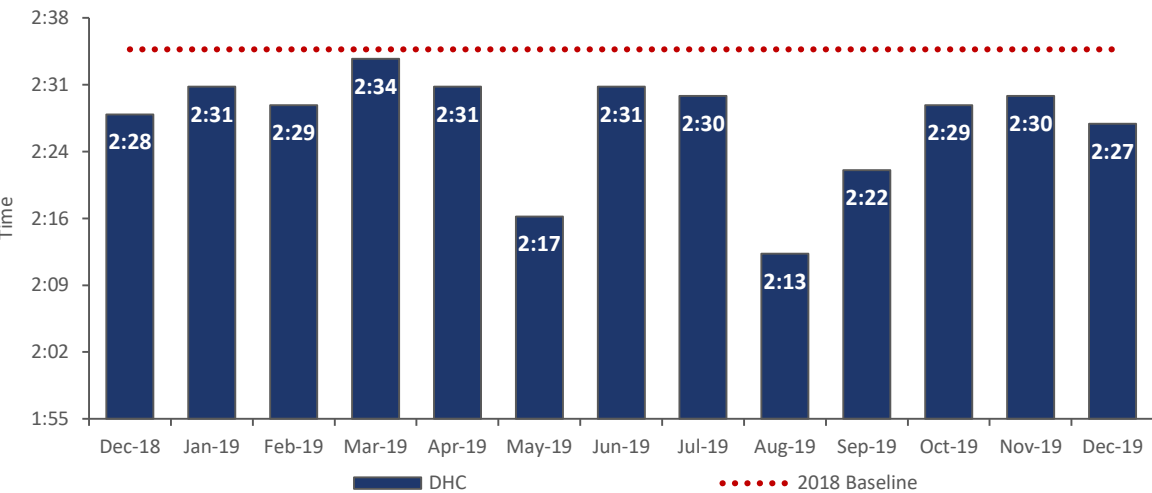
Starting August, 2018
DHC Total Beds: 329
beds (excluding 2J&3J)
post renovation.

Dhahran & Al Hasa Average Length of Stay (ALOS) *

*The measure is not risk adjusted.



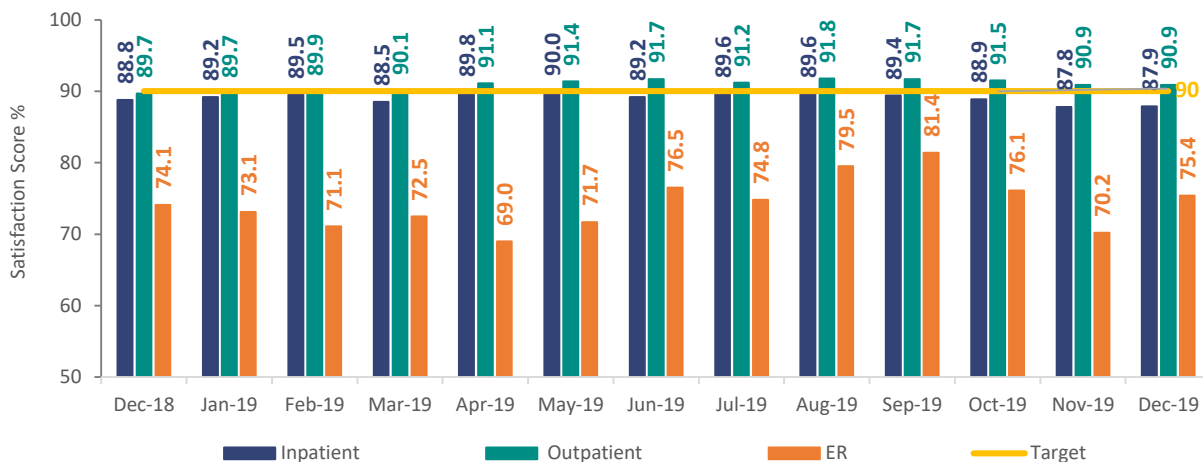
Dhahran EMS Length of Stay (LOS)



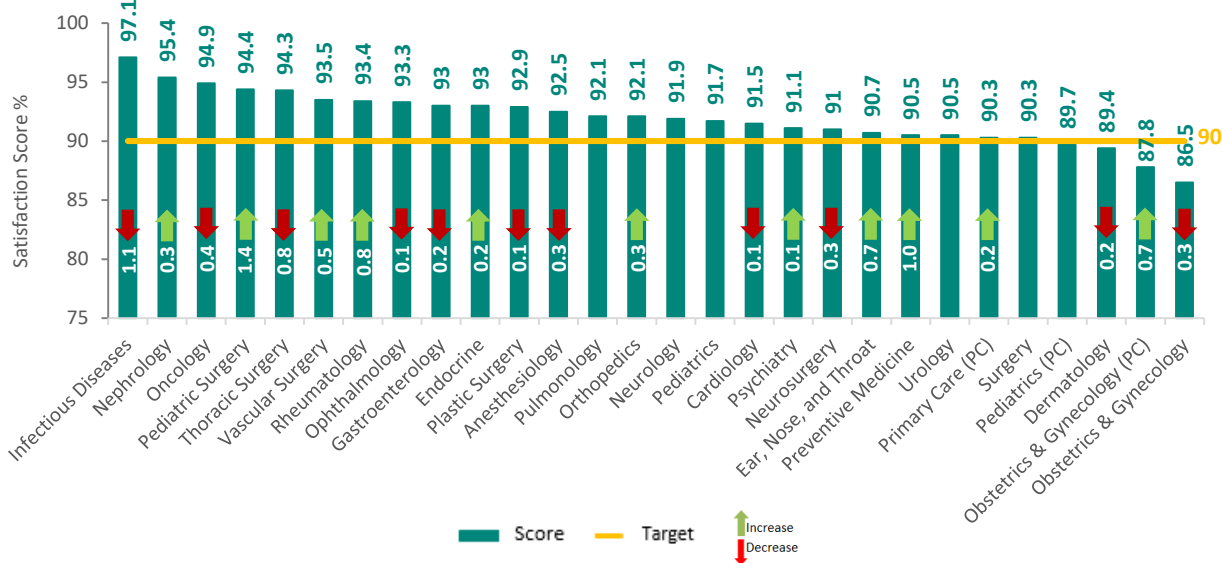
DHC EMS Monthly
YTD LOS = 02:27

PATIENT CENTERED

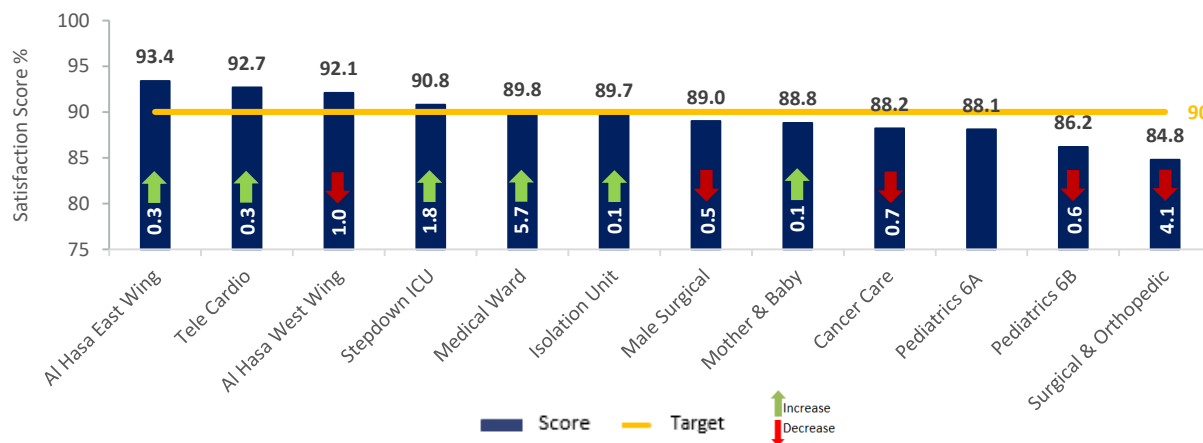
Patient Satisfaction Inpatient, Outpatient, and ER (Highest to Lowest Top 2 Box Ranking)



Outpatient Clinics (Highest to Lowest Top 2 Box Ranking)

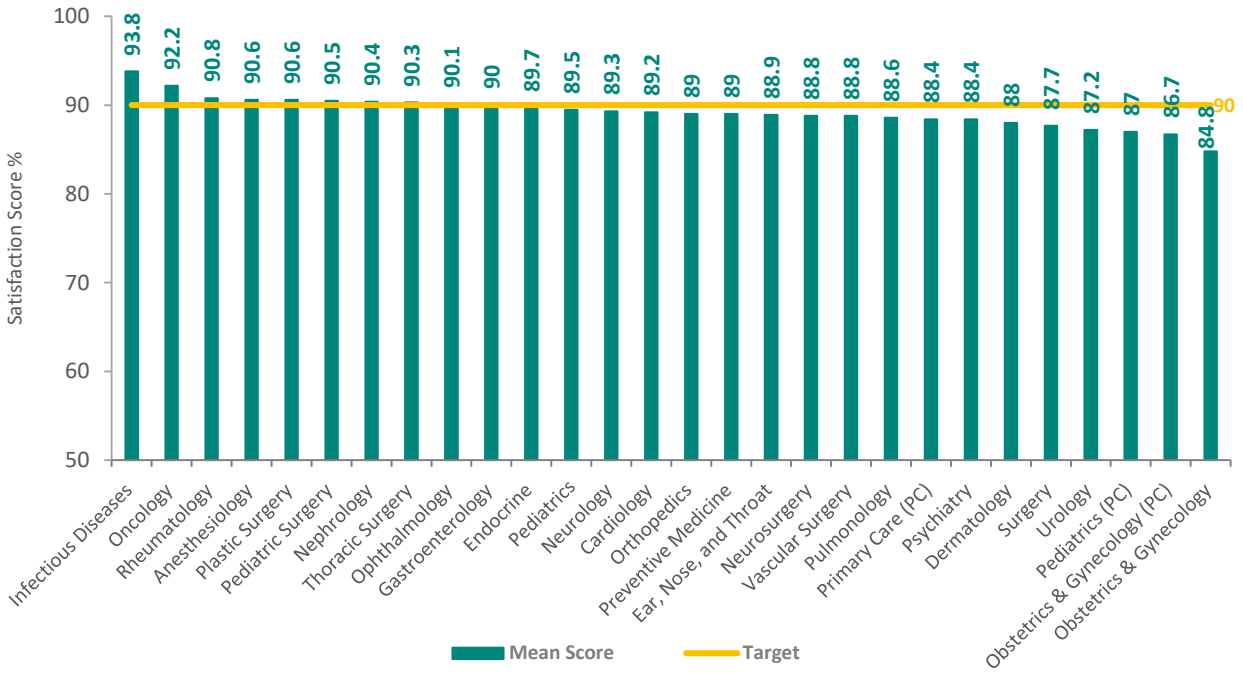


Inpatient Wards (Highest to Lowest Top 2 Box Ranking)



PATIENT CENTERED

Outpatient Clinics – December Mean

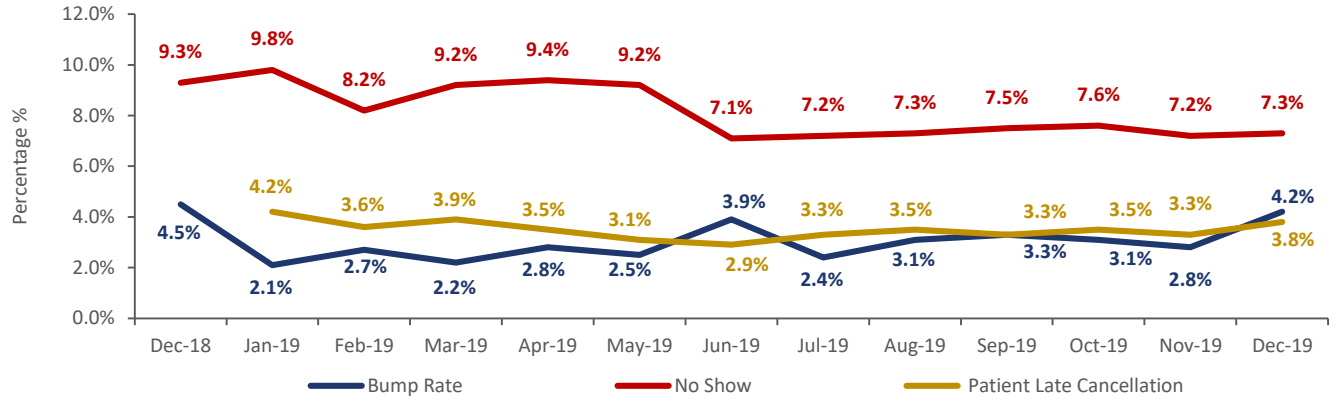


Inpatient Wards – December Mean

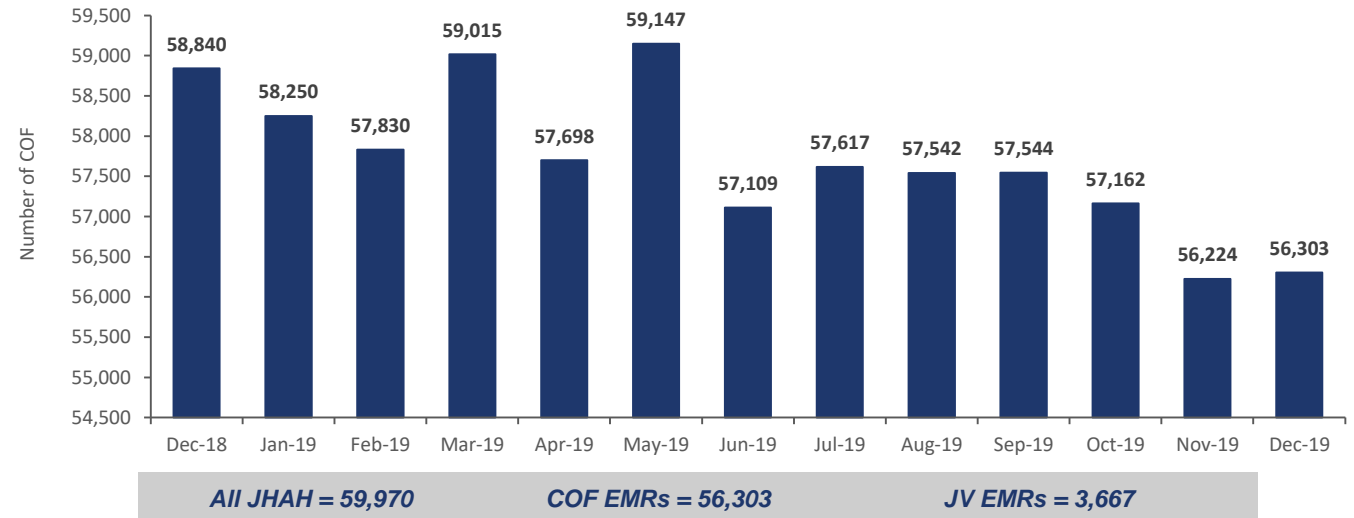


Dental

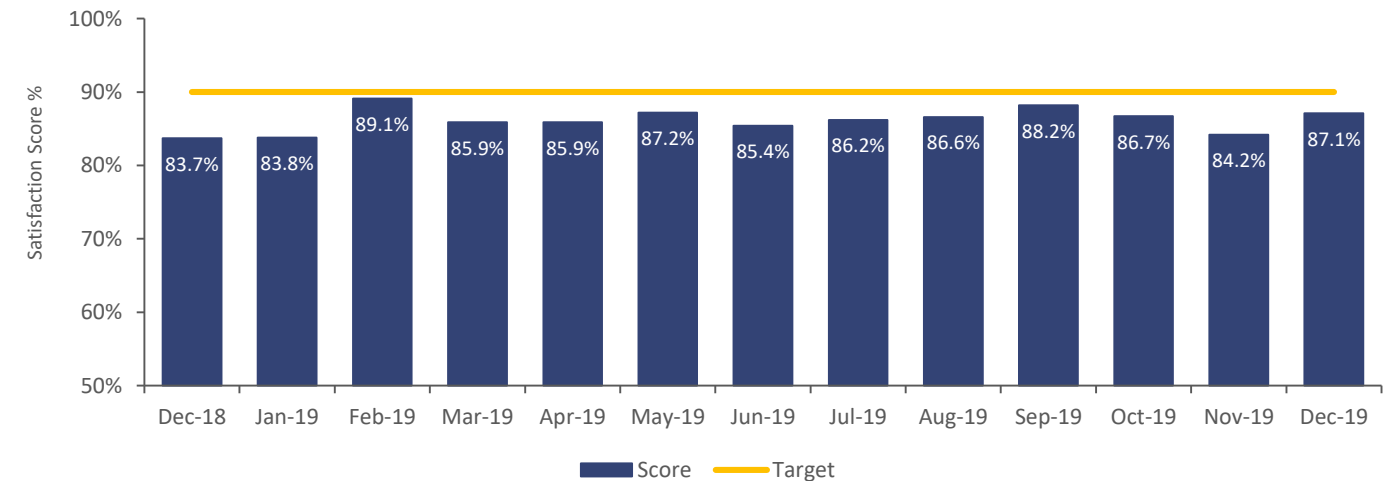
Dental Bump Rate , No-Show, and Patient Late Cancellation



JHAH COF Registered Dental Recipients



Dental Overall Satisfaction Score (Highest to Lowest Top 2 Box Ranking)



2019 JHAH Scorecard

98.94 100.00

KEY PERFORMANCE INDICATORS (KPIs)

Baseline July August September October November December YTD

Projected Year End Score Weight

I. CLINICAL EXCELLENCE (2019)													
1	Risk Identification (Near Misses)	NA	66	37	72	122	63	89	873	100.0%	N/A	4.08	4.08
2	Risk Identification (Moderate-Major)	NA	2	0	3	1	3	1	17	N/A	4.08	4.08	
3	Deep /Organ Surgical Site Infection (SSI) rate	0.97	0.44	0.00	93.95	93.74	93.62	93.62	0.59	0.92	4.08	4.08	
4	Inpatient Hand Hygiene Compliance	93.16	95.90	94.16	94.4	95.3	95.9	94.98	94.18	93	3.06	3.06	
5	Outpatient Hand Hygiene Compliance	94.44	95.6	94.3	94.4	95.3	95.9	94.98	94.98	93	3.06	3.06	
6	ED Arrival Time to EKG Median Time	4:00	3:00	3:00	3:00	3:00	3:00	3:00	3:00	7:00	4.08	4.08	
7	Inpatient Clinical Practice Guidelines	NA	3:00	3:00	3:00	3:00	3:00	3:00	3:00	N/A	5.10	5.10	
8	Hospital Acquired Pressure Injury (NDNQI)	5	3.1	3.1	3.1	3.1	3.1	3.1	3.88	4.50	3.06	3.06	
9	Arrival Time to PCI ≤ 90 minutes for non-transferred patients	65	100	100	100.0	100.0	100.0	100.0	100	85	1.02	1.02	
II. PATIENT & STAFF EXPERIENCE													
10	Outpatient Clinics Overall Experience Mean Score	86.80	88.7	89.4	89.4	89.5	88.8	88.9	88.77	100.0%	12.24	12.24	
11	Dhahran Hospital's Overall Experience Mean Score	85.17	87.4	86.8	86.5	86.4	85.4	85.3	86.18	85	5.61	5.61	
12	Overall Staff Engagement	3.88	3.91	3.91	3.91	3.91	3.91	3.91	3.91	3.91	1.02	1.02	
III. ACCESS TO CARE													
13	Access to Specialty Care									97.8%	47.92	48.98	
Group A													
	General Ophthalmology	14	3	5	5	4	2	6	5	13	3.06	3.06	
	ENT	16	4	4	4	4	5	6	6	15	3.06	3.06	
	Neurospinal	12	9	9	6	6	5	4	7	11	3.06	3.06	
	Colorectal Surgery	20	19	13	14	14	12	14	12	19	3.06	3.06	
	Plastic Surgery	16	9	10	11	8	9	11	13	15	3.06	3.06	
	Urology	14	11	15	9	12	7	13	11	13	3.06	3.06	
	Endocrinology	14	7	14	13	18	16	14	13	13	3.06	3.06	
	Gastroenterology	25	19	16	10	8	5	6	14	22	3.06	3.06	
	OB/GYN Specialty	23	18	23	16	28	17	20	19	20	3.06	3.06	
Group B													
	Bariatric Surgery	29	12	16	15	12	13	10	14	25	2.04	2.04	
	Cardiology	27	19	19	18	12	13	10	21	23	2.04	2.04	
	Dermatology	38	19	19	19	18	26	14	21	32	1.02	1.02	
	Neurology	28	18	22	23	20	16	28	21	24	2.04	2.04	
	General Orthopedics	29	22	12	20	20	11	13	16	25	2.04	2.04	
Group C													
	Access to Primary Care	71	84	83	82	82.70	84.09	83.79	78.43	75	4.08	4.08	
	Access to Physical Therapy	16	11	8	8	8	8	9	10	15	2.04	2.04	
	TKR In-Patient receiving Physical Therapy within 24 hours post surgery (Inpatient)	65.94	100	100	100	100.0	100.0	100.0	99.32	100	2.04	2.04	
	ED Arrival time to Provider Median time COF assigned to ESI 2 category.	14.03	9:30	9:25	9:18	9:09	9:14	9:09	9:09	15:00	4.08	4.08	
	Emergency Response to Industrial (Oil & Gas) Locations, Time from 911 Call	100	100	100	93.3	100.0	100.0	100.0	98.72	98	1.02	1.02	
	Emergency Response to Industrial (Oil & Gas) Locations, Time from Dispatch to	96.05	100	83.3	93.3	100.0	100.0	100.0	93.59	97	0.00	1.02	
IV. POPULATION HEALTH STATUS													
20	% diabetic patients who have HbA1c test ordered within 6 months	96.51	96.3	95.62	95.9	95.3	98.0	98.4	96.73	95	2.04	2.04	
21	Percent Poorly Controlled Diabetics	25.12	24.1	24.5	24.5	25.2	24.9	24.2	24.51	25.40	3.06	3.06	
V. NETWORK													
22	SFS/MRI requests turnaround time (TAT) from all full service network providers	93	100.0	99.9	100.0	99.8	100.0	100.0	100	95	2.04	2.04	
23	SFS/Endoscopy requests turnaround time (TAT) from all full service network	NA	100.0	100.0	100.0	100.0	100.0	100.0	100	N/A	N/A	N/A	

December 2019 - Scorecard