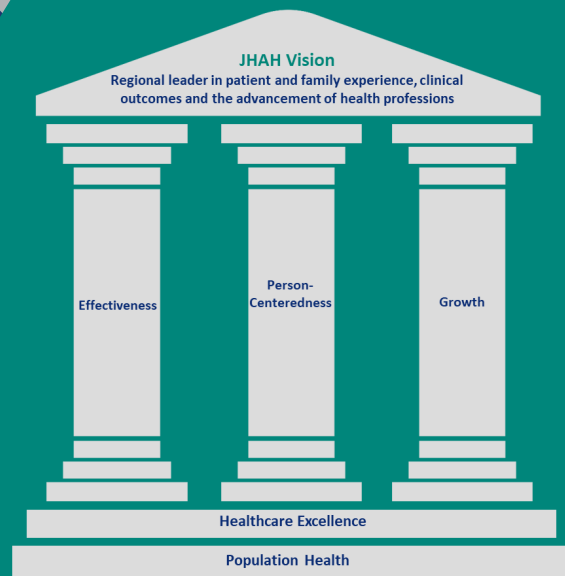


May 2020

Executive Summary Staff
Report

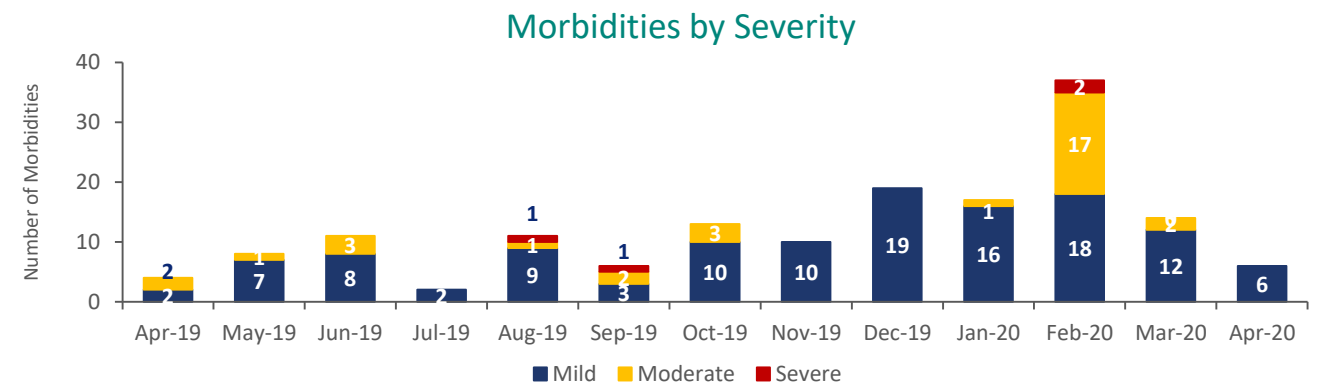
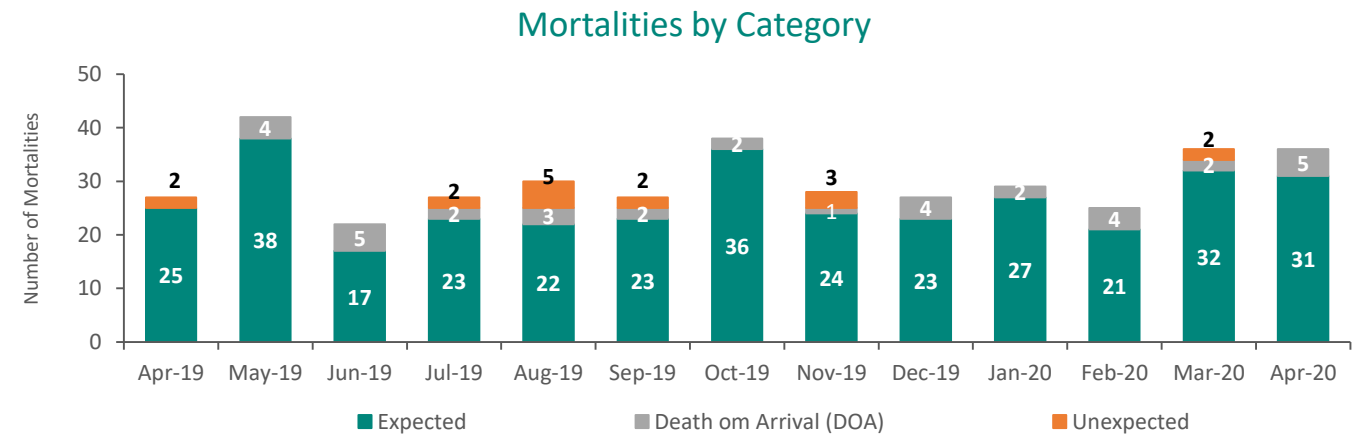
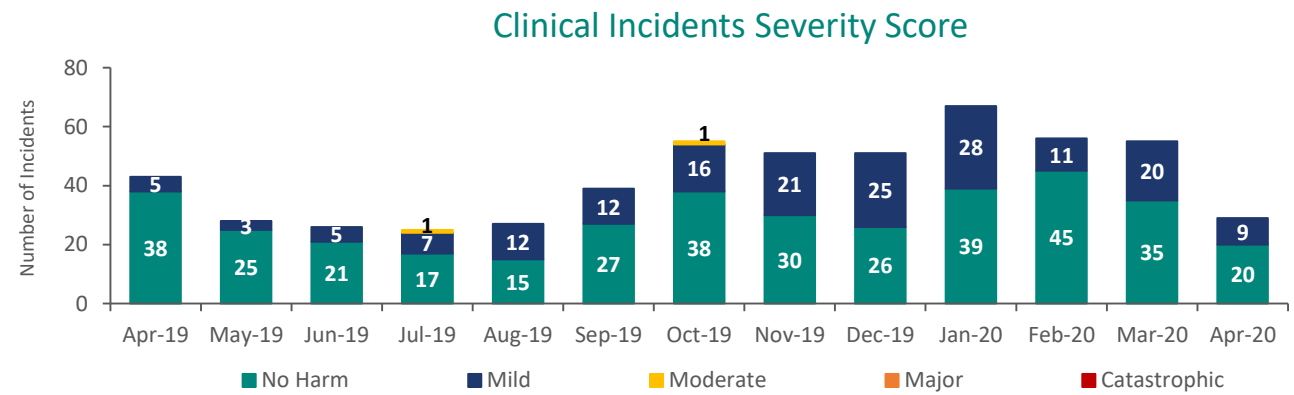
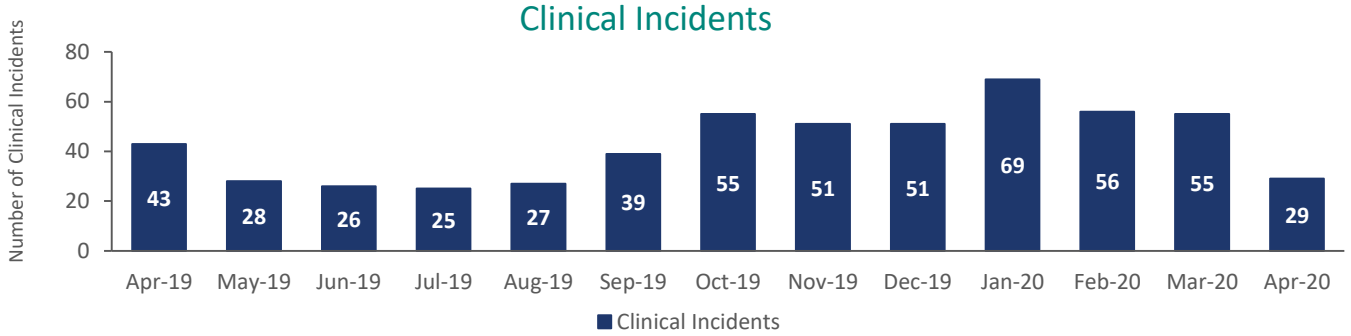


JHAH at a Glance

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Clinical Incident Reporting by Staff into DATIX Software



With the recent COVID-19 pandemic, all healthcare organizations are dealing with this pandemic as a priority. Similarly, JHAH is heavily involved with COVID-19 Pandemic. The Infection Control team efforts are dedicated towards managing COVID-19 in collaboration with the MOH.

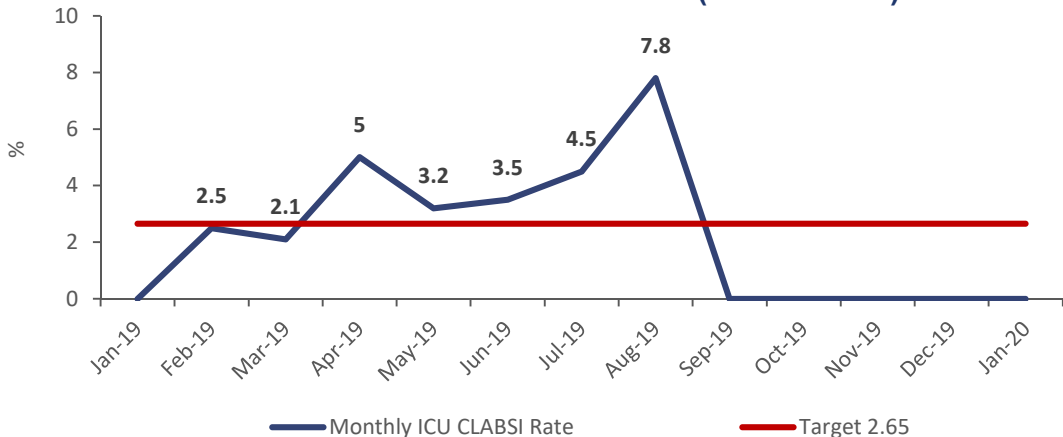
JHAH continues to maintain its infection control standards and measures throughout its operations. However, a delay in reporting infection control KPIs is expected during this period.

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

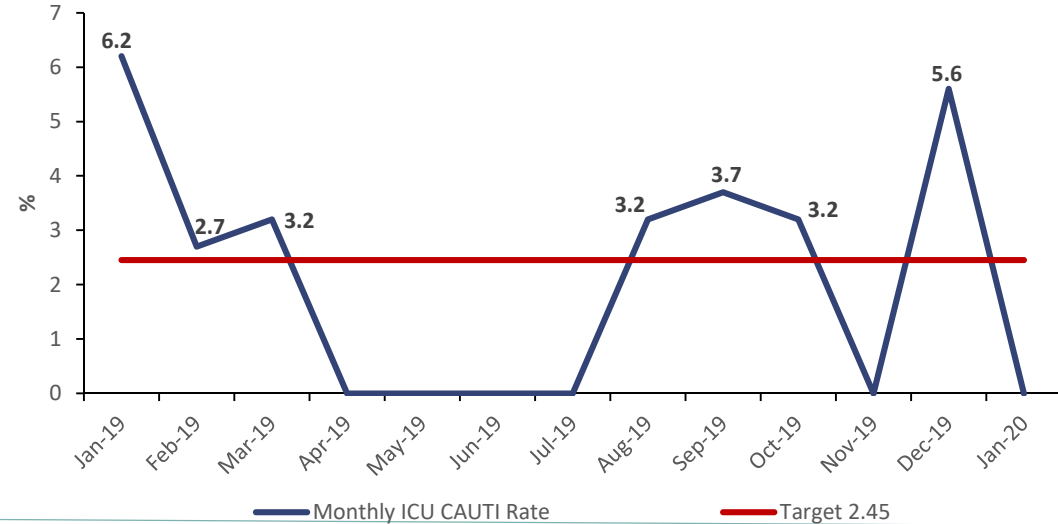
The number increased in August due to two infections reported

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

CLABSI YTD: 0
GCC Benchmark: 4.1
USA Benchmark: 1



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



The number increased in December due to low denominator number

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

CAUTI YTD: 0
GCC Benchmark: 3.2
USA Benchmark: 2.1

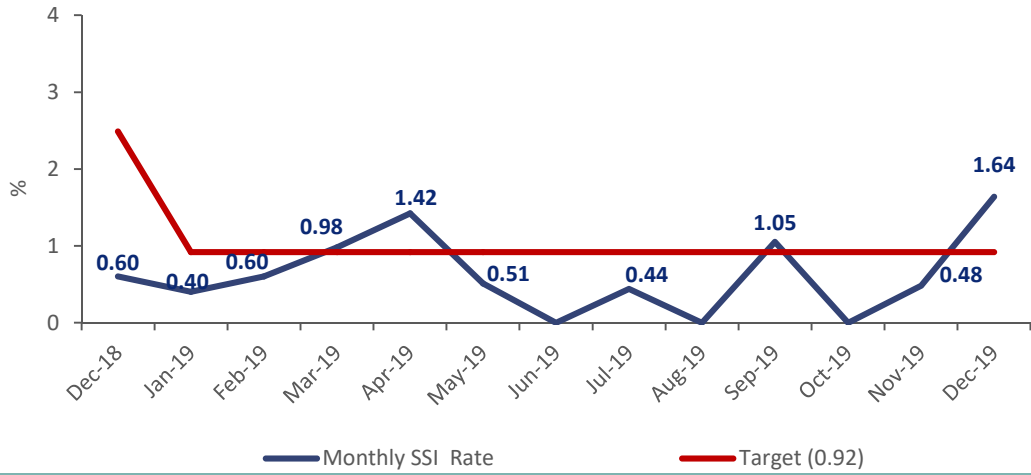
Deep / Organs Surgical Site Infection (SSI) Rate

Increase in December due to 3 SSI out of 183

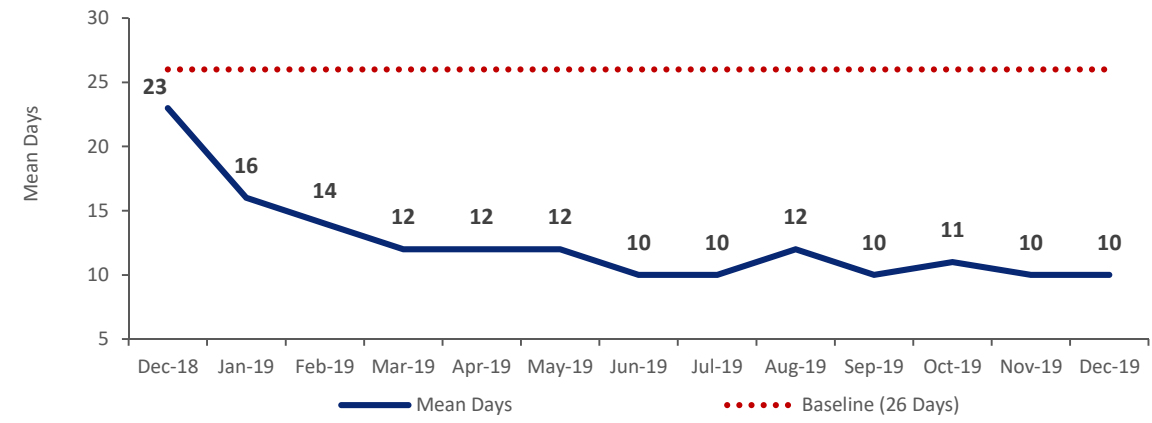
The data for each month is measured with a 4 month lag on the 5th of the month

SSI YTD: 0.65
NHSN Benchmark: 0.75%

NHSN: National Health Safety Network



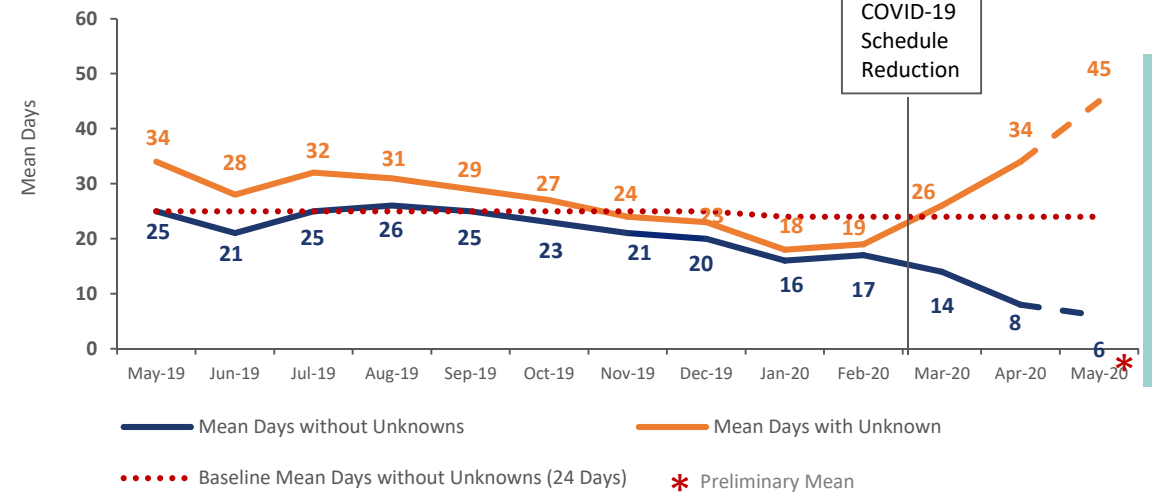
Access to Care - Aggregate Mean Days to First Scheduled Appointment from PC to KPI Clinics



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

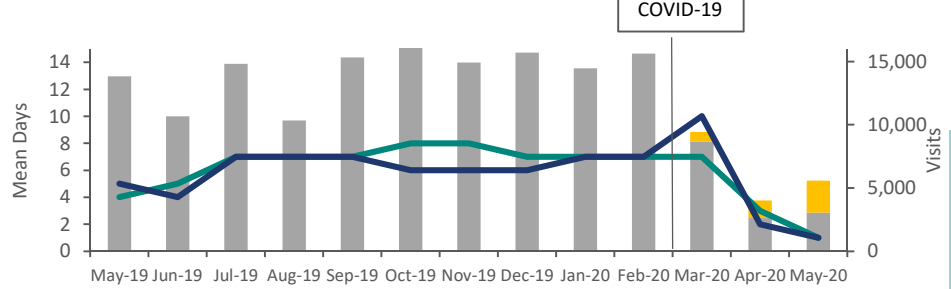
Access data is measured with old methodology and will be replaced with new methodology post KPI agreement

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 & Completed PC MD Visits Volume

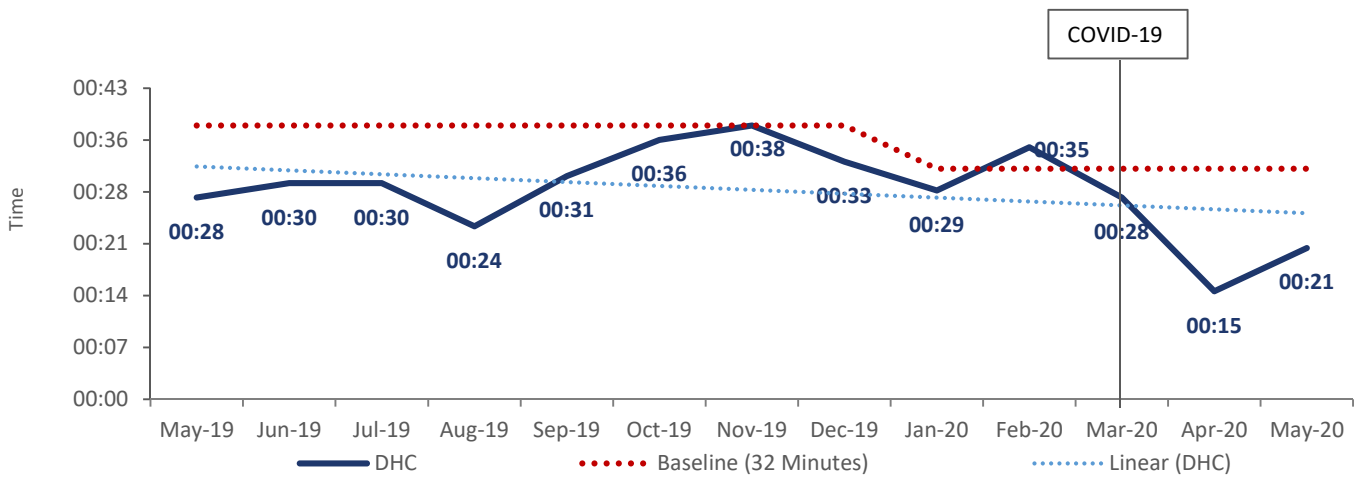


This measurement is expected to increase after introducing new agreed KPI measurement

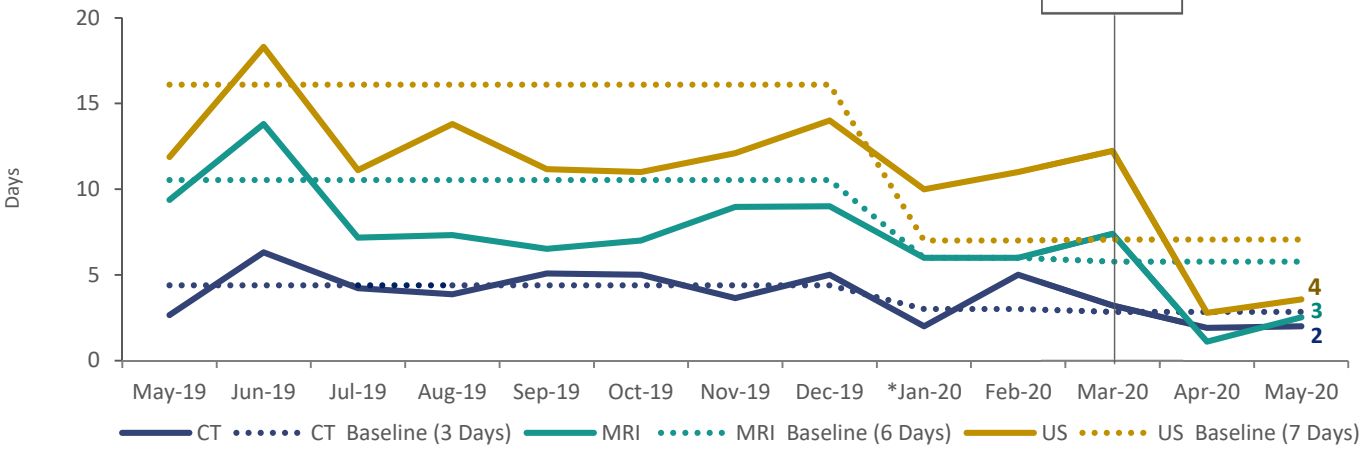
	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Video & Telephone Visit Volumes											765	1,378	2,512
In Person Visits	13,820	10,660	14,818	10,344	15,329	17,063	14,905	15,708	14,467	15,636	8,664	2,626	3,061
All Adult PC MD Clinics	4	5	7	7	7	8	8	7	7	7	7	3	1
All PED PC MD Clinics	5	4	7	7	7	6	6	6	7	7	10	2	1

Note: Graph updated to reflect MD scheduled appointments excluding walk-ins

Dhahran EMS Access to Care from Arrival to Provider

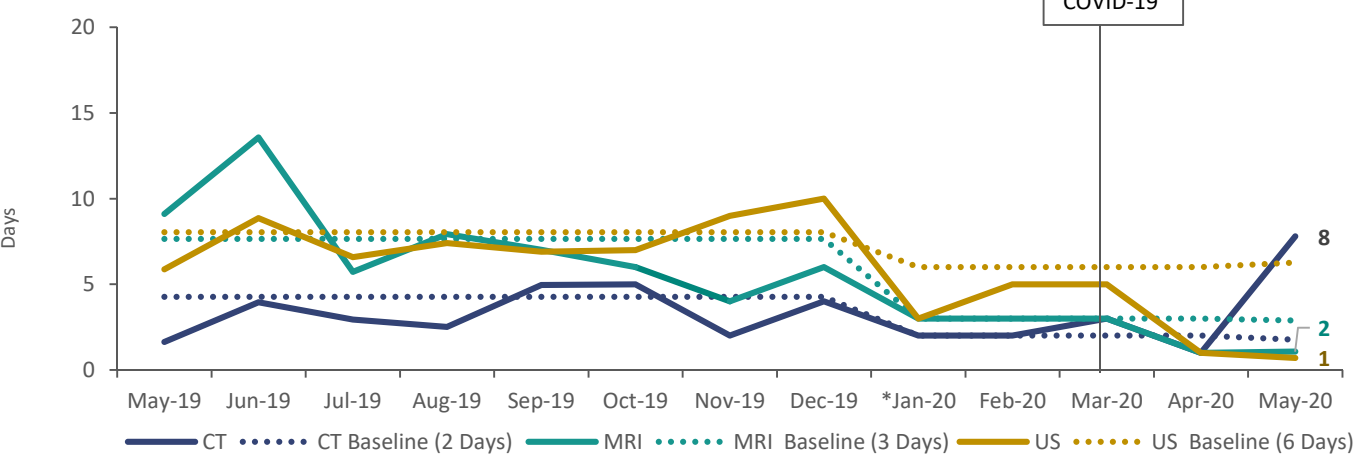


Dhahran Radiology Lead Time



* Starting January 2020 Radiology lead time reflects first available slot (refer to definition)

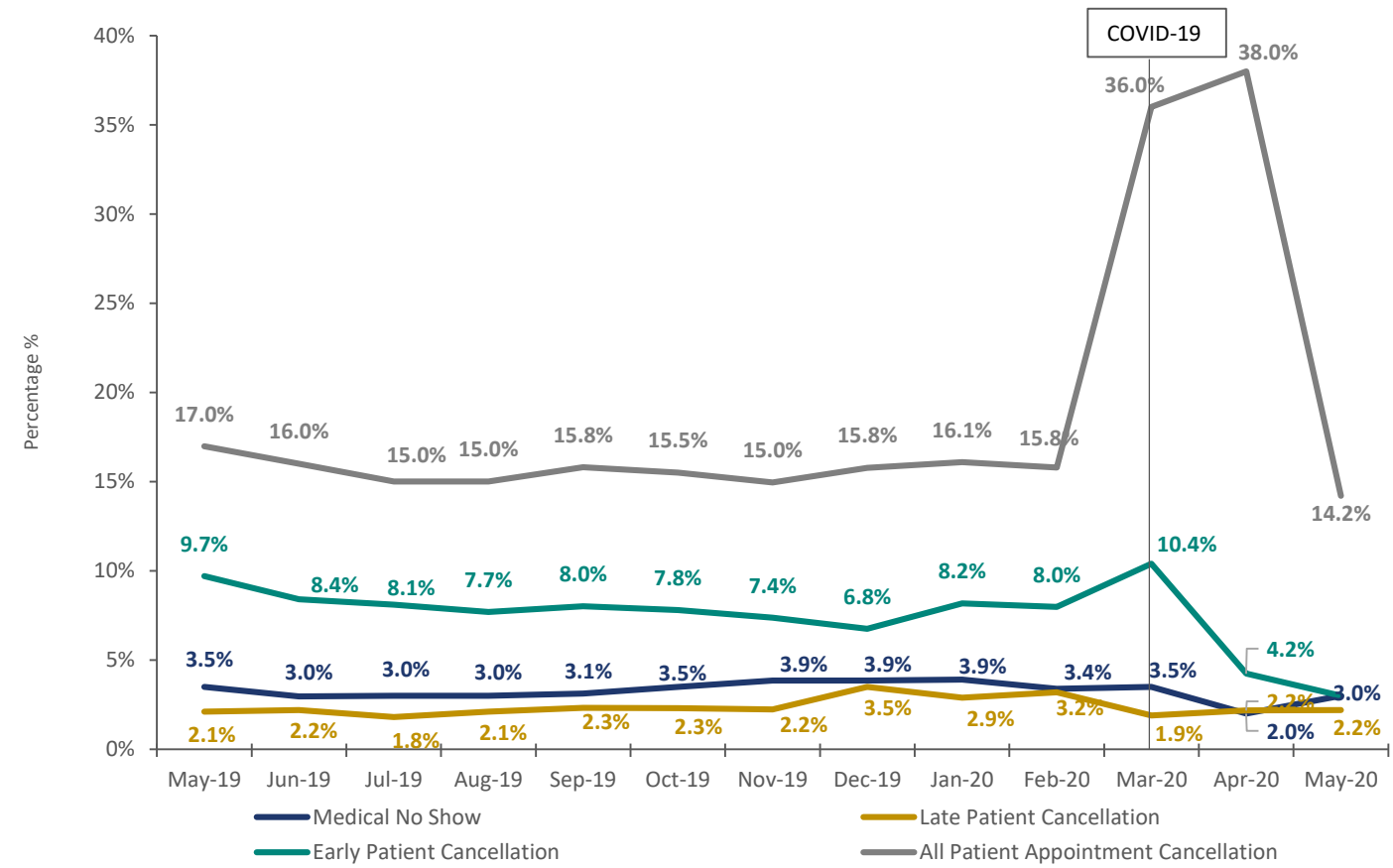
Al-Hasa Radiology Lead Time



* Starting January 2020 Radiology lead time reflects first available slot (refer to definition)

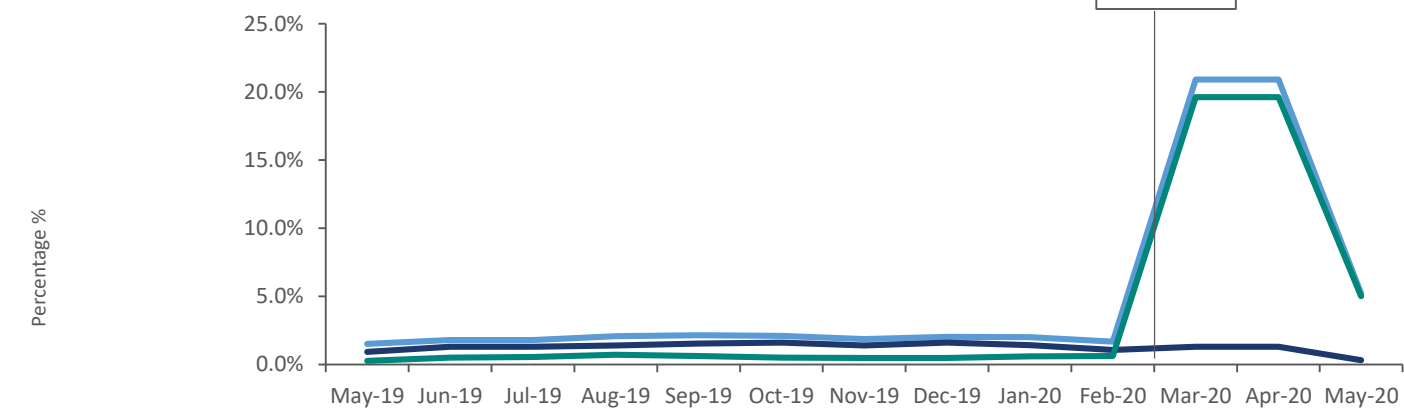
Medical No-Show, Late & Early Patient Cancellation & All Patient Appointment Cancellation

Increase in All Patient appointment Cancellation & Early patient Cancellation is due to COVID-19 Outbreak



Overall Medical Bump Rate & Breakdown to Provider & Operational

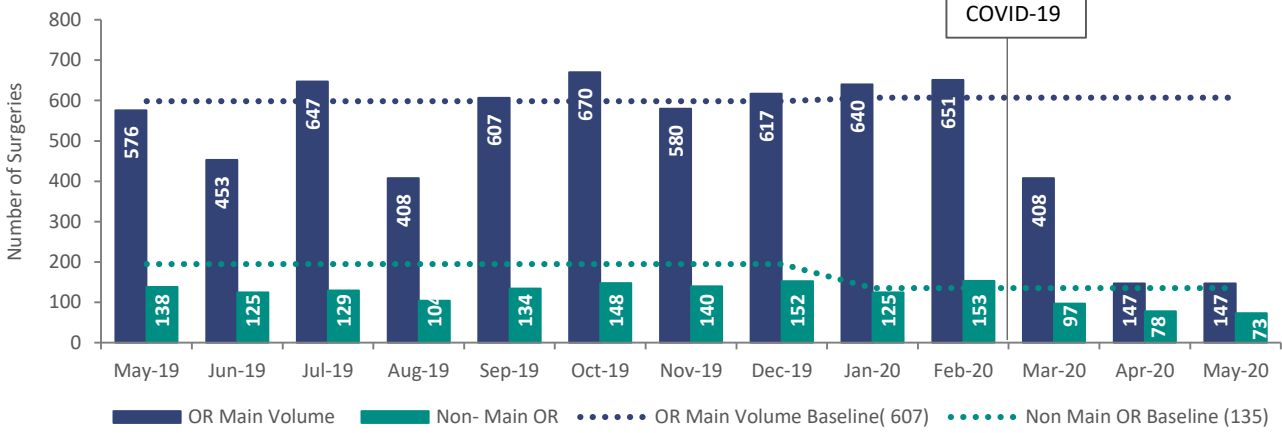
Increase in Bump Rate is due to COVID-19 Outbreak



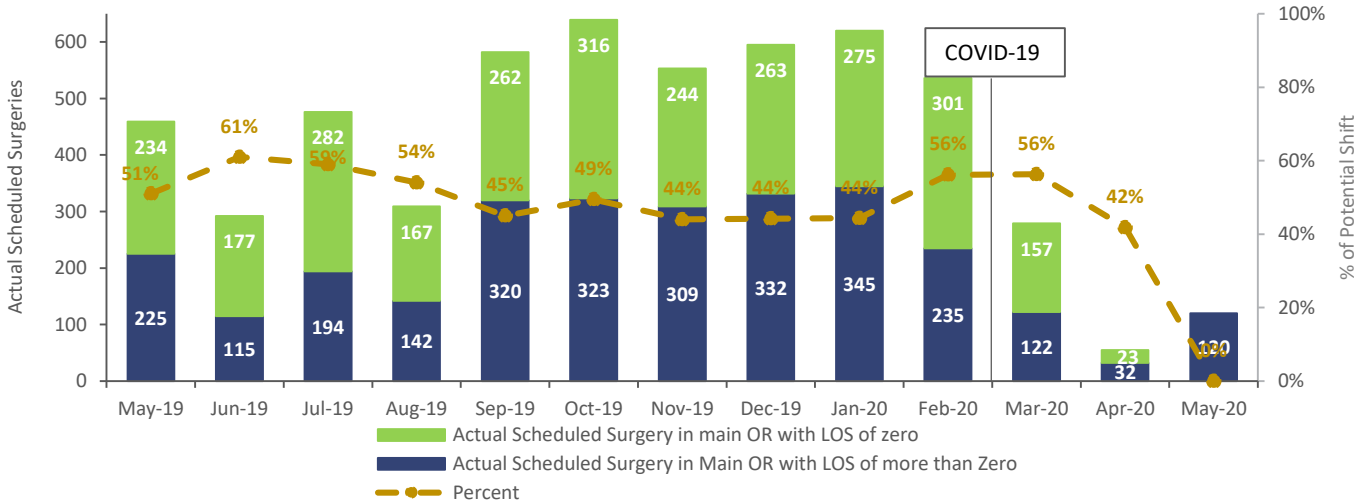
	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Overall Medical Bump Rate	1.5%	1.8%	1.8%	2.1%	2.2%	2.1%	1.9%	2.0%	2.0%	1.7%	20.9%	20.9%	5.20%
Volumes									3,170	2,708	27,390	27,389	3,235
Provider	0.9%	1.3%	1.3%	1.4%	1.5%	1.6%	1.4%	1.6%	1.4%	1.1%	1.3%	1.3%	0.30%
Operational	0.3%	0.5%	0.6%	0.7%	0.6%	0.5%	0.5%	0.5%	0.6%	0.6%	19.6%	19.6%	5.0%

EFFECTIVE

OR & Non-Main OR Volumes *Due to COVID-19 outbreak non-urgent cases were cancelled to avoid crowding*

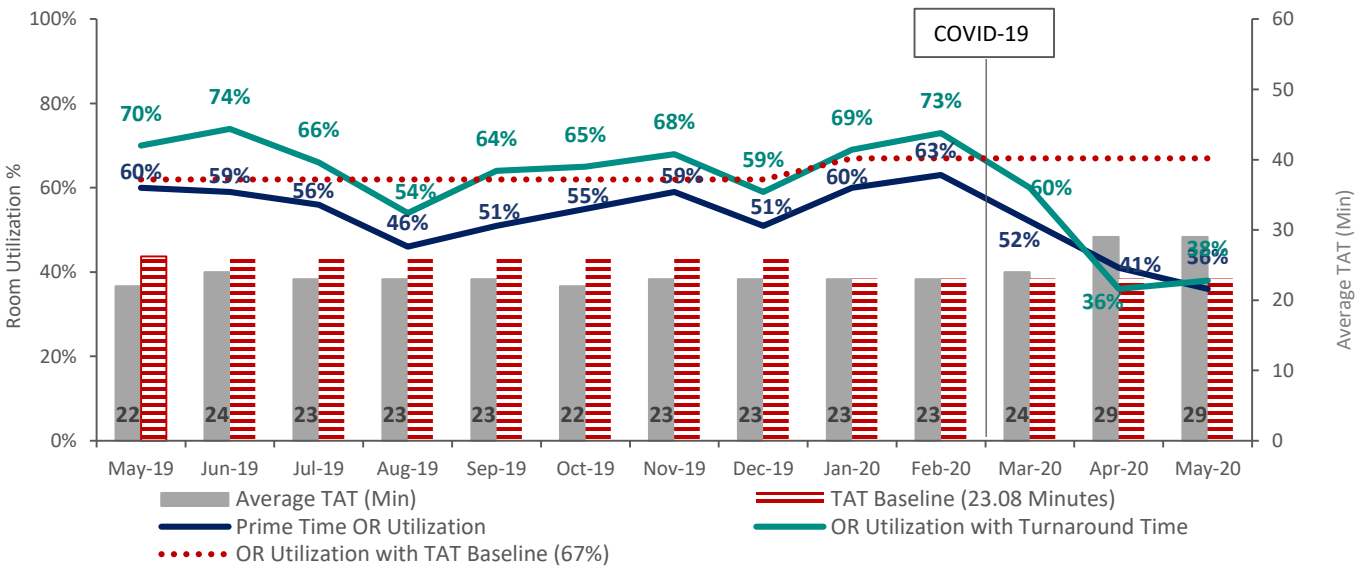


Outpatient to Inpatient Elective Surgery Ratio



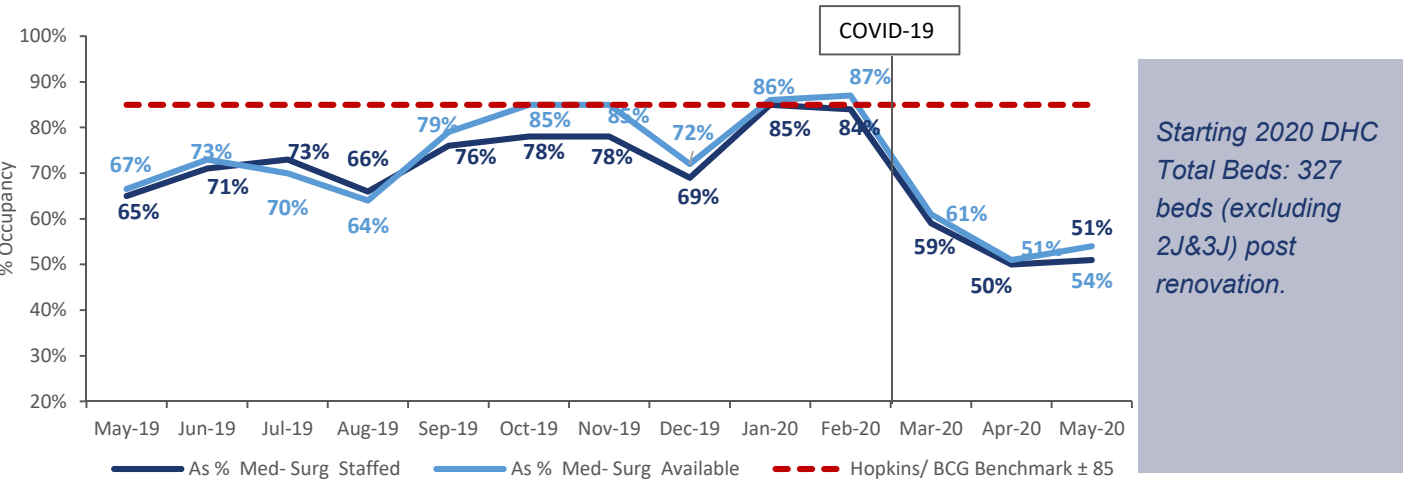
Actual planned surgery in main OR excludes emergency surgical cases and inpatient cases with an add-on flag

OR Prime Time Utilization & OR Utilization with Turnaround Time

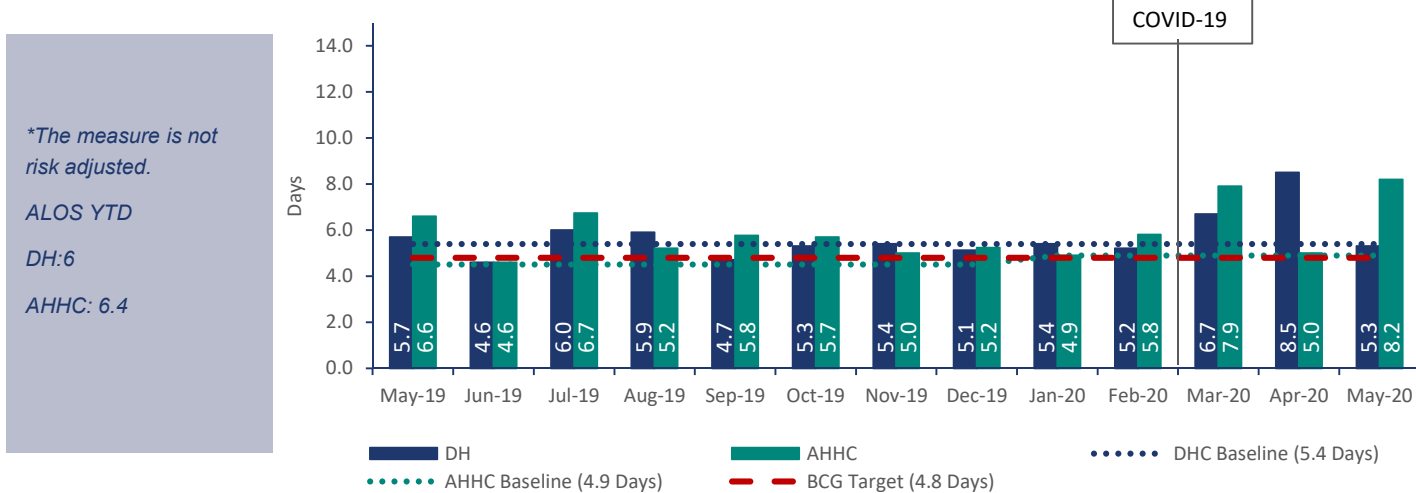


EFFICIENT

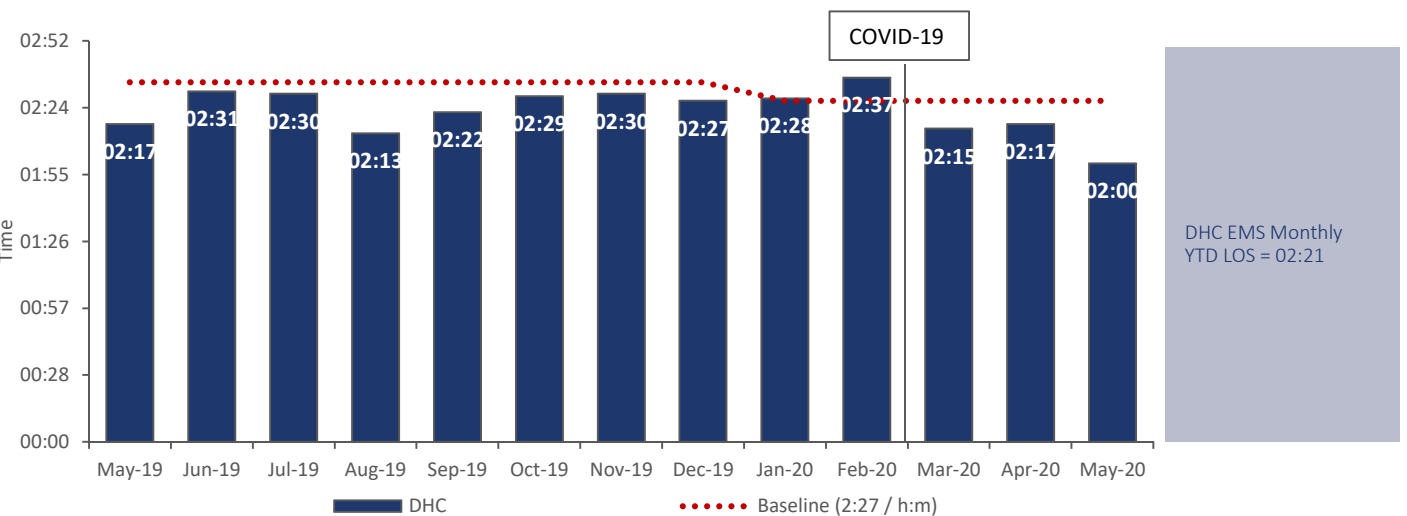
Dhahran Bed Occupancy *The drop in bed occupancy is an intentional effort to increase the readiness for surge capacity*



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

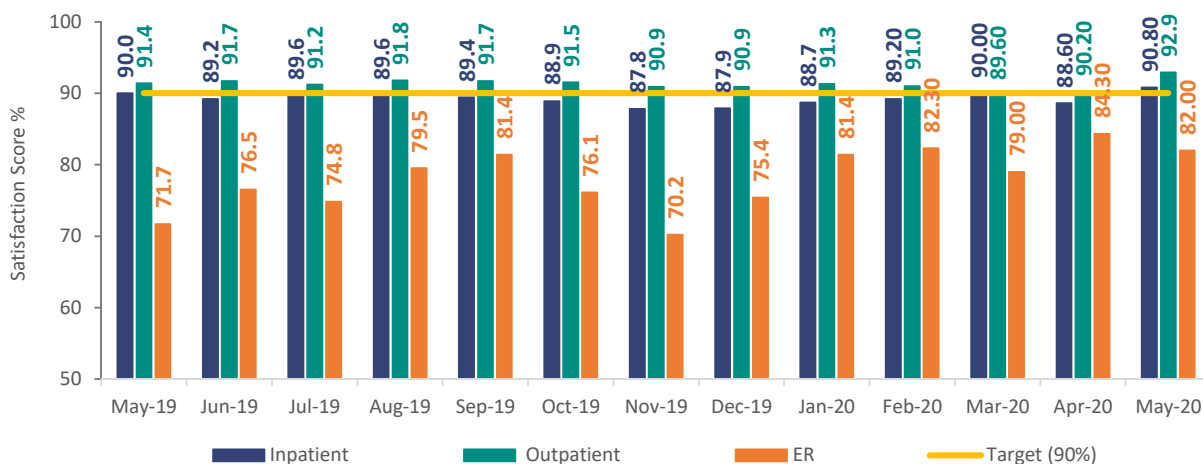


Dhahran EMS Length of Stay (LOS)

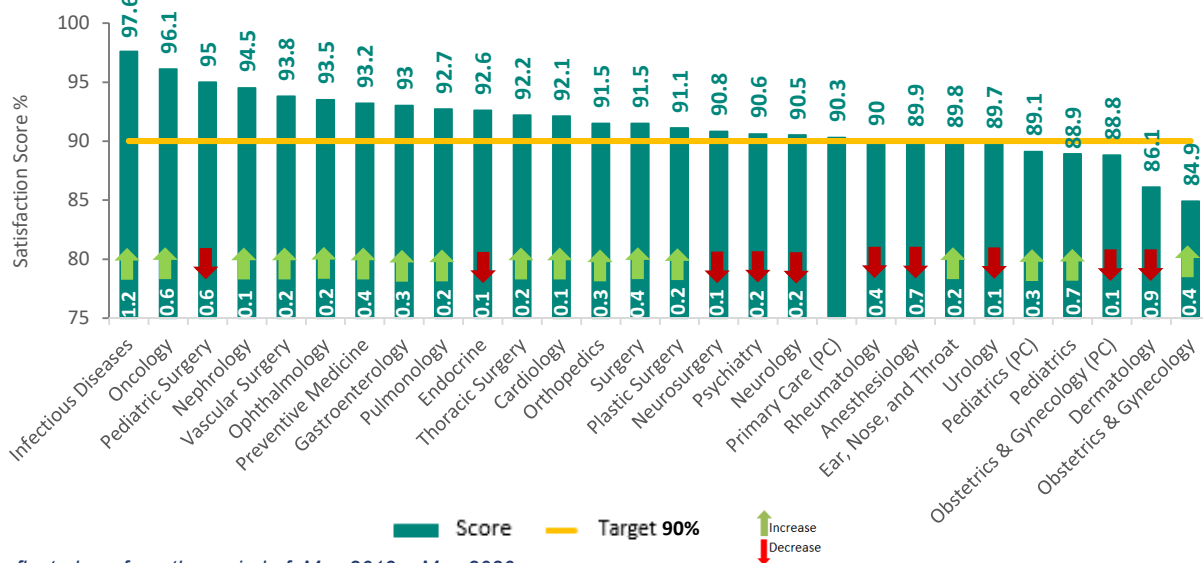


PATIENT CENTERED

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

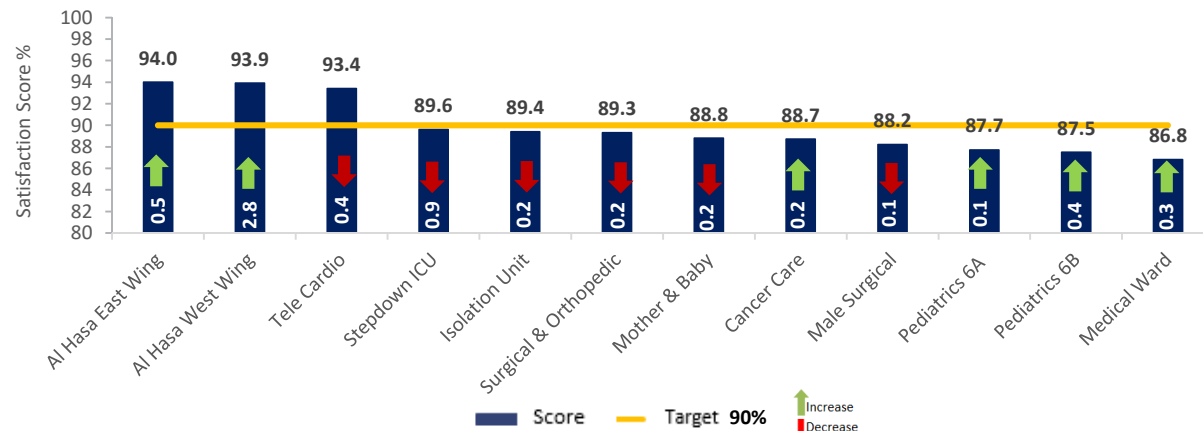


Outpatient Clinics (Highest to Lowest Top 2 Box Ranking)



Scores reflected are from the period of May 2019 – May 2020

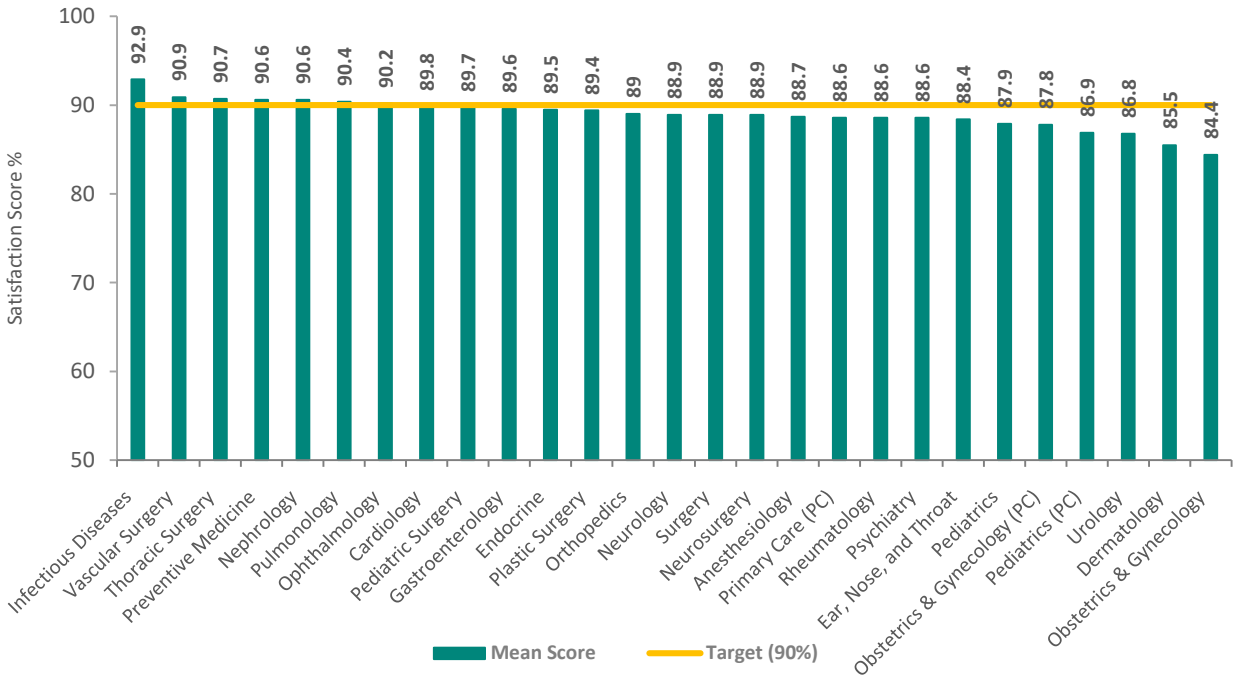
Inpatient Wards (Highest to Lowest Top 2 Box Ranking)



Scores reflected are from the period of May 2019 – May 2020

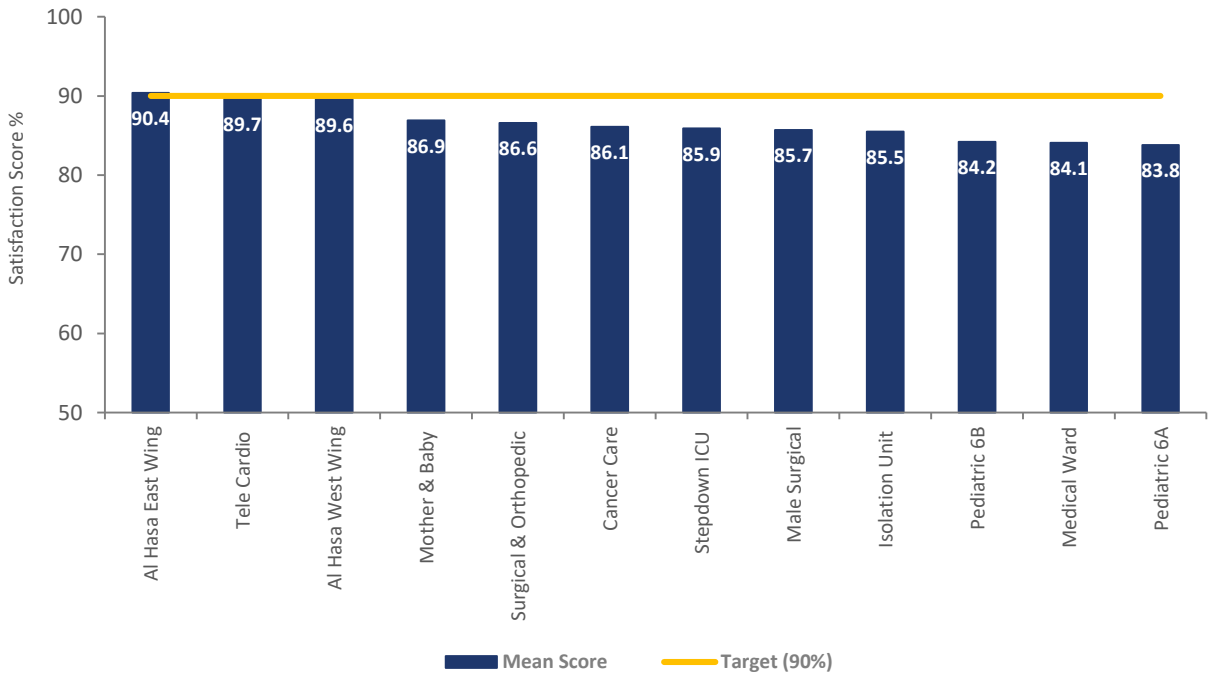
PATIENT CENTERED

Outpatient Clinics – Mean



Scores reflected are from the period of May 2019 – May 2020

Inpatient Wards – Mean

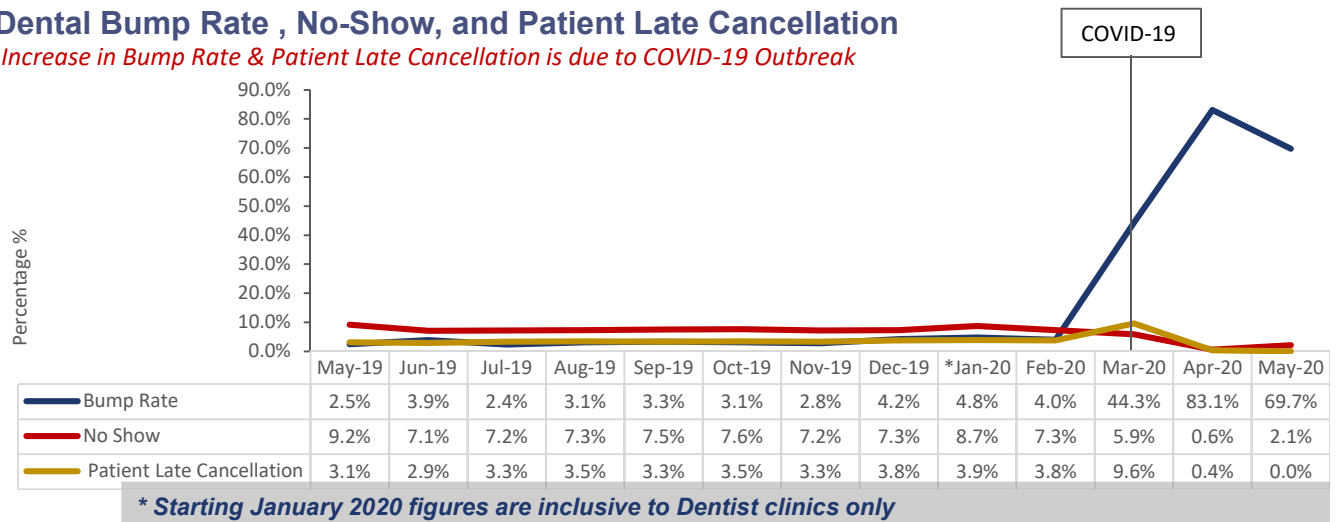


Scores reflected are from the period of May 2019 – May 2020

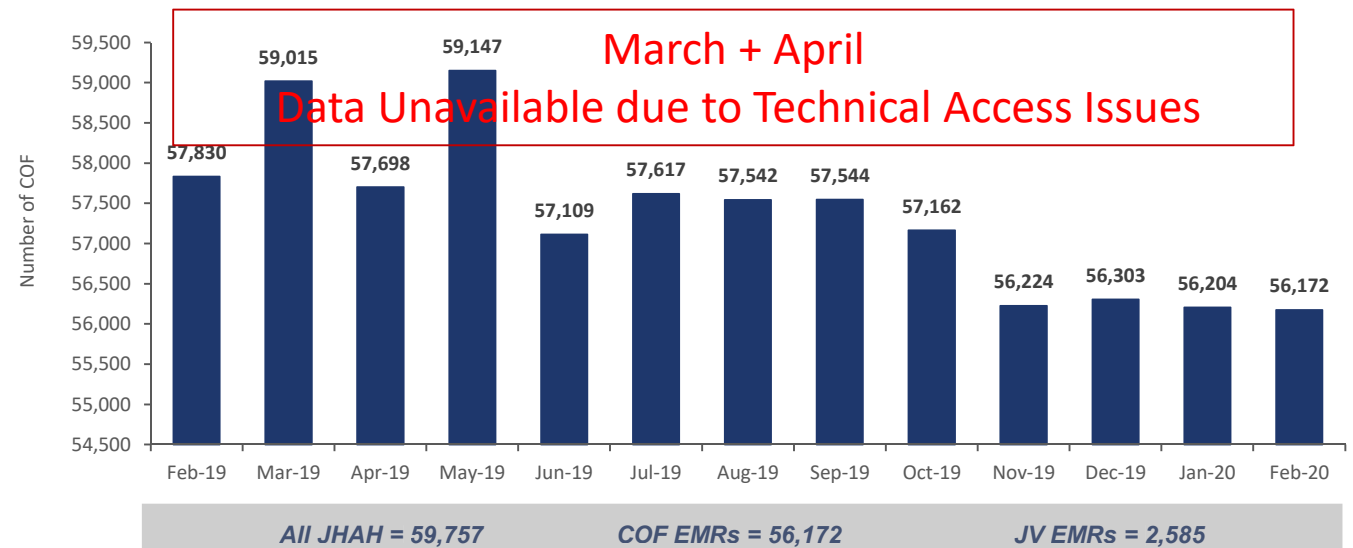
Dental

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

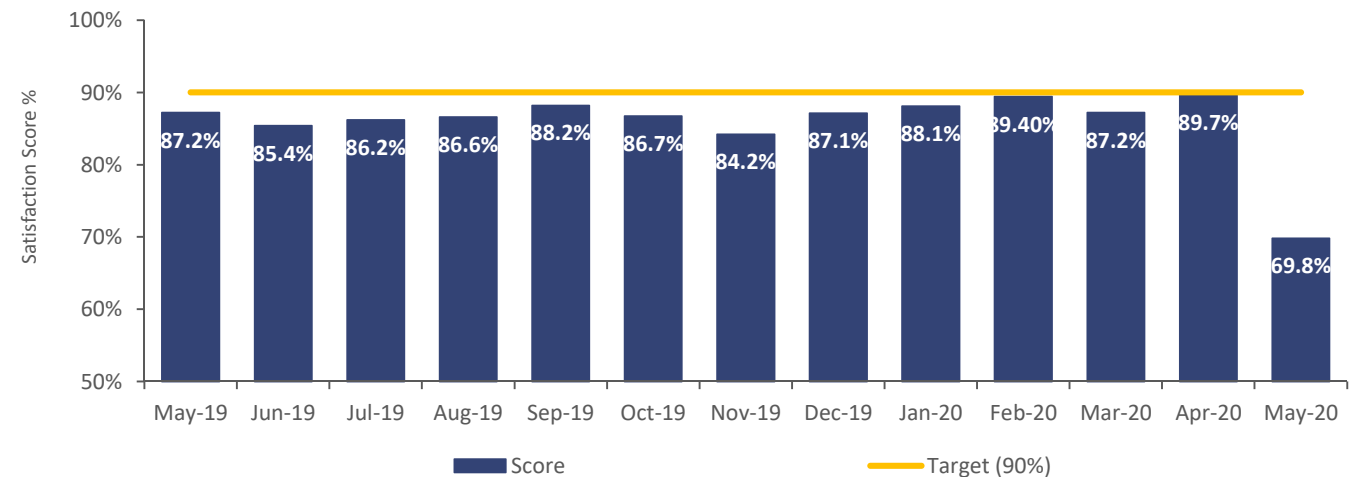
Increase in Bump Rate & Patient Late Cancellation is due to COVID-19 Outbreak



JHAH COF Registered Dental Recipients



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



Scores reflected are from the period of May 2019 – May 2020

Scorecard

2019 JHAH Scorecard

98.94 100.00

KEY PERFORMANCE INDICATORS (KPIs)

I	CLINICAL EXCELLENCE (2019)	Baseline												YTD	Target	Projected Year End Score	Weight
		July	August	September	October	November	December										
1	Risk Identification (Near Misses)	NA	66	37	72	122	63	89	873	N/A	4.08	4.08	4.08	4.08	31.63	31.63	4.08
2	Risk Identification (Moderate-Major)	NA	2	0	3	1	3	1	17	N/A	4.08	4.08	4.08	4.08	4.08	4.08	4.08
3	Deep Organ Surgical Site Infection (SSI) rate	0.97	0.44	0.00	1.05	0.00	0.48	1.84	0.65	0.92	4.08	4.08	4.08	4.08	4.08	4.08	4.08
4	Inpatient Hand Hygiene Compliance	95.16	95.90	94.16	93.95	93.74	95.62	95.10	94.26	93	3.06	3.06	3.06	3.06	3.06	3.06	3.06
5	Outpatient Hand Hygiene Compliance	94.44	95.6	94.3	94.4	95.3	95.9	93.3	94.83	93	3.06	3.06	3.06	3.06	3.06	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	4.08	4.08	4.08	4.08	4.08
7	Inpatient Clinical Practice Guidelines	N/A	N/A	3:00	3:00	3:00	3:00	3:00	3:00	N/A	5.10	5.10	5.10	5.10	5.10	5.10	5.10
8	Hospital Acquired Pressure Injury (HAPCI)	5	5	5	3.1	3.1	3.1	3.6	3.88	4.50	3.06	3.06	3.06	3.06	3.06	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	100.0	100.0	85	1.02	1.02	1.02	1.02	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	87	5.61	5.61	5.61	5.61	12.24	12.24	5.61
11	Inpatient Hospital's Overall Experience Mean Score	85.17	87.4	86.8	86.5	86.4	85.4	85.3	84.78	85	5.61	5.61	5.61	5.61	12.24	12.24	5.61
12	Overall Staff Engagement	3.88								3.91	1.02	1.02	1.02	1.02	48.59	48.59	1.02
III. ACCESS TO CARE																	
13	Access to Specialty Care									97.8%	47.92	48.59	48.59	48.59	48.59	48.59	48.59
Group A																	
General Ophthalmology																	
		14	3	5	5	4	2	5	5	13	3.06	3.06	3.06	3.06	3.06	3.06	3.06
ENT																	
		16	4	4	4	4	5	6	6	15	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Neurosurgical																	
		12	9	9	6	6	5	4	7	11	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Colorectal Surgery																	
		20	19	13	14	14	12	14	12	19	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Plastic Surgery																	
		16	9	10	11	8	9	11	13	15	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Urology																	
		14	11	15	9	12	7	13	11	13	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Endocrinology																	
		14	7	14	13	18	16	14	13	13	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Gastroenterology																	
		25	19	16	10	8	5	6	14	22	3.06	3.06	3.06	3.06	3.06	3.06	3.06
OB/GYN Specialty																	
		23	18	23	16	28	17	20	19	20	3.06	3.06	3.06	3.06	3.06	3.06	3.06
Group B																	
Bariatric Surgery																	
		29								Dropped							
Cardiology																	
		27	12	16	15	12	13	10	14	23	2.04	2.04	2.04	2.04	2.04	2.04	2.04
Dermatology																	
		38	19	19	19	18	26	14	21	32	1.02	1.02	1.02	1.02	1.02	1.02	1.02
Neurology																	
		28	18	22	23	20	16	28	21	24	2.04	2.04	2.04	2.04	2.04	2.04	2.04
General Orthopedics																	
		29	22	12	20	20	11	13	16	25	2.04	2.04	2.04	2.04	2.04	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	4.08	4.08	4.08	4.08	4.08
Access to Physical Therapy																	
		16	11	8	8	8	8	9	10	15	2.04	2.04	2.04	2.04	2.04	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	2.04	2.04	2.04	2.04	2.04
ED Arrival time to Provider/Median time COP 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	4.08	4.08	4.08	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	1.02	1.02	1.02	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	0.00	0.00	0.00	0.00	0.00	0.00
IV. POPULATION HEALTH STATUS																	
% diabetic patients who have HbA1c test ordered within 6 months																	
		96.51	96.3	96.62	95.9	96.3	98.0	98.4	96.73	96	2.04	2.04	2.04	2.04	2.04	2.04	2.04
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	3.06	3.06	3.06	3.06	3.06
V. NETWORK																	
SP/SMART requests turnaround time (TAT) from all full service network providers																	
		93	100.0	99.9	100.0	99.8	100.0	100.0	100.0	95	2.04	2.04	2.04	2.04	2.04	2.04	2.04
SP/Endoscopy requests turnaround time (TAT) from all full service network																	
		N/A	100.0	100.0	100.0	100.0	100.0	100.0	100.0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A