Transparency about healthcare quality

Ben Yandell, PhD, CQE
Associate Vice President
Clinical Information Analysis

ben.yandell@nortonhealthcare.org
Key points

• Openness about results is good medicine.
• It has side effects.
• It isn’t as easy as it looks.
• What’s the alternative?
About Norton Healthcare

• Not-for-profit

• 5 hospitals in Louisville (1 pediatric)
  1,800 licensed beds

2011 NQF National Quality Healthcare Award

THERE’S ONLY ONE.
And this year it’s Norton Healthcare.

Each year the National Quality Forum (NQF) honors one health care organization with its top award – the National Quality Healthcare Award. NQF presents this award to an organization that serves as a role model for achieving meaningful, sustainable improvements in patient care. We’re honored to be recognized for what we do every day – providing outstanding, quality-driven care.

Watch the Celebration Announcement | View photos on Facebook

Norton Healthcare is the recipient of the 2011 National Quality Forum National Quality Healthcare Award for exceptional organizational leadership and innovation to achieve continual improvement in the quality and safety of its patient care. Norton is the 18th recipient of the annual award and the first health care organization in Kentucky to receive this.
“Aren’t you the guys that do that quality report?”
What Norton Healthcare does

• Publish an objective evaluation of our performance (launch: 3/31/2005)

• 600+ nationally recognized indicators of hospital quality

• Voluntarily
YOU'RE CLEANING YOUR ROOM AND YOU DON'T HAVE TO?! THAT'S JUST PLAIN WEIRD....
How did you guys do that?

• Dan Varga, MD
• Robert Goodin, MD
• Steve Williams
We do not decide what to make public based on how it makes us look.

We display our results even when we disagree with the indicator definition.

Unused data never become valid.

We recognize that we must display and make decisions based upon imperfect data, because until the data are used, no resources will be spent making the data valid.
Stroke

A stroke occurs when the blood flow to the brain is suddenly stopped and oxygen does not reach part of the brain. Strokes can be caused by a blood clot or other blockage in the brain or by bleeding in the brain.

Symptoms of a stroke can include sudden severe headache, dizziness, nausea, vomiting, confusion, or difficulty speaking or walking. Other symptoms are possible, including numbness, tingling, weakness on one side of the body, or visual problems such as blindness or blurred or double vision. Recognizing stroke symptoms and seeking immediate care can save lives.

<table>
<thead>
<tr>
<th>indicator name</th>
<th>description</th>
<th>technical description</th>
</tr>
</thead>
<tbody>
<tr>
<td>stk01</td>
<td>who received venous thromboembolism (VTE) prophylaxis</td>
<td>Number of stroke patients who received venous thromboembolism (VTE) prophylaxis or have a documented reason for not receiving it on the day of or the day after hospitalization. Includes ischemic and hemorrhagic stroke patients. Excludes patients enrolled in a clinical trial and those admitted for an elective carotid intervention. (STK-1)</td>
</tr>
</tbody>
</table>

Location                  Technical Notes
---                       ---
Norton Audubon Hospital   % based on 187 stroke patients, 02/01/2010-01/31/2011. Technical. 99% confidence interval [54.2517,72.0864].
Norton Brownsboro Hospital% based on 115 stroke patients, 02/01/2010-01/31/2011. Technical. 99% confidence interval [70.8192,89.1961].
Norton Hospital           % based on 164 stroke patients, 02/01/2010-01/31/2011. Technical. 99% confidence interval [76.1884,90.6205].
Norton Suburban Hospital  % based on 99 stroke patients, 02/01/2010-01/31/2011. Technical. 99% confidence interval [76.9803,94.0184].
Kosair Suburban Hospital  Indicator does not apply to children.
Kosair Children's Hospital
Norton Healthcare         Total score for Norton Healthcare system is calculated by summing up numerators and denominators across individual facilities.
Kentucky                  No Kentucky comparison available.
<table>
<thead>
<tr>
<th>Key</th>
<th>Better than U.S. average</th>
<th>Near U.S. average</th>
<th>Worse than U.S. average</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
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</tr>
<tr>
<td></td>
<td>italics</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>blank</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>0</em> or <em>100</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Med-Surg ICUs - infections per 1000 device days (NHSN)**

<table>
<thead>
<tr>
<th></th>
<th>Norton Audubon Hospital</th>
<th>Norton Brownsboro Hospital</th>
<th>Norton Hospital</th>
<th>Norton Suburban Hospital</th>
<th>Kosair Children’s Hospital</th>
<th>Norton Healthcare</th>
<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>cath-assoc. UTIs</td>
<td>1.4</td>
<td>2.0</td>
<td><strong>0.9</strong></td>
<td>0.3</td>
<td>1.1</td>
<td></td>
<td></td>
<td>1.7</td>
</tr>
<tr>
<td>central-line-assoc. BSIs</td>
<td>1.7</td>
<td>1.1</td>
<td><strong>2.4</strong></td>
<td><strong>2.3</strong></td>
<td><strong>2.0</strong></td>
<td></td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>vent-assoc. pneumonia</td>
<td>1.9</td>
<td><em>0</em></td>
<td><strong>2.3</strong></td>
<td><em>0</em></td>
<td>1.6</td>
<td></td>
<td></td>
<td>1.6</td>
</tr>
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</table>

**Cardiothoracic ICUs - infections per 1000 device days (NHSN)**

<table>
<thead>
<tr>
<th></th>
<th>Norton Audubon Hospital</th>
<th>Norton Brownsboro Hospital</th>
<th>Norton Hospital</th>
<th>Norton Suburban Hospital</th>
<th>Kosair Children’s Hospital</th>
<th>Norton Healthcare</th>
<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>cath-assoc. UTIs</td>
<td>1.6</td>
<td><strong>0.9</strong></td>
<td>1.3</td>
<td>1.7</td>
<td></td>
<td></td>
<td></td>
<td>1.7</td>
</tr>
<tr>
<td>central-line-assoc. BSIs</td>
<td><em>0</em></td>
<td>1.9</td>
<td>0.7</td>
<td>1.2</td>
<td></td>
<td></td>
<td></td>
<td>1.2</td>
</tr>
<tr>
<td>vent-assoc. pneumonia</td>
<td><strong>5.5</strong></td>
<td>4.7</td>
<td><strong>5.2</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2.1</td>
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</table>

**Miscellaneous (AHRO)**

<table>
<thead>
<tr>
<th></th>
<th>Norton Audubon Hospital</th>
<th>Norton Brownsboro Hospital</th>
<th>Norton Hospital</th>
<th>Norton Suburban Hospital</th>
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<th>Norton Healthcare</th>
<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>% inpatients w/ central venous-catheter related BSI</td>
<td>0.13</td>
<td><strong>0.03</strong></td>
<td><strong>0.24</strong></td>
<td><strong>0.05</strong></td>
<td><strong>0.13</strong></td>
<td></td>
<td></td>
<td>0.08</td>
</tr>
</tbody>
</table>

**Med-Surg ICUs - device utilization ratio (these are not infection rates)**

<table>
<thead>
<tr>
<th></th>
<th>Norton Audubon Hospital</th>
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<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>urinary catheter</td>
<td>0.8</td>
<td><strong>0.82</strong></td>
<td><strong>0.74</strong></td>
<td><strong>0.82</strong></td>
<td></td>
<td></td>
<td></td>
<td>0.78</td>
</tr>
<tr>
<td>central line</td>
<td>0.57</td>
<td><strong>0.58</strong></td>
<td><strong>0.71</strong></td>
<td><strong>0.55</strong></td>
<td></td>
<td></td>
<td></td>
<td>0.63</td>
</tr>
</tbody>
</table>
Openness about results is good medicine.

It better be:

Transparency about healthcare quality is
• everywhere,
• mandatory if you want to be paid,
• increasing in importance.
Thought question #1:

A hospital’s infection control staff comes up with an innovative way to reduce catheter-associated bloodstream infections. The hospital spends the time and money to implement their idea – and it works! Infections are way down.

How much will this improvement increase the hospital’s market share?

1. None
2. Some
3. A lot
Goal: 5% or lower, July-Dec. 2011

There is a statistically significant downward trend.
Transparency has side effects.

• May lead to hiding flaws instead of tackling them.

• May reduce access to care, if providers avoid high-risk patients.

• May lower quality, if good care conflicts with what will give a good score.

• May praise or blame the wrong providers.
WILL PHYSICIANS 'FIRE' PATIENTS TO MEET QUALITY MEASURES?
AHRQ COUNCIL OFFERS WAYS TO MITIGATE CONFLICT BETWEEN PATIENT CHOICE, METRICS

Topics: Pay-for-Performance, Market Trends, Strategy, Collaborative Relationships, Physician Issues, Outcomes, Quality, Performance Improvement

Save in Library

November 07, 2011

Experts at an Agency for Healthcare Research and Quality (AHRQ) forum last week discussed whether physicians will "fire" noncompliant patients to ensure they meet quality metrics, CQ HealthBeat reports.

According to participants at AHRQ’s National Advisory Council forum, as more payers are instituting pay-for-performance programs, patients are becoming increasingly engaged in medical decision making and at times challenging official recommendations.

"I think we’re heading towards an inevitable clash," says Lisa Lafts, a member of the AHRQ council and WellPoint’s vice president for programs in clinical excellence. For example, parents who refuse to follow the recommended vaccine schedule could force physicians out of compliance with immunization benchmarks and impact payments.

As a result, physicians ultimately may “fire” noncompliant patients from their practices, push back against quality-improvement initiatives, and minimize patient empowerment efforts, CQ HealthBeat reports. Some physicians are already "firing" unvaccinated patients, noting that they pose a risk to others and reflect a lack of trust for physicians’ medical advice.

To mitigate the conflict, council members suggested altering performance metrics to account for medical advice recommended by the physician but declined by the patient. Some council members also suggested adjusting down performance measures that aim for 100% compliance (Bristol, CQ HealthBeat, 11/4 [subscription required]).
Some experts say certain federal health reform law provisions encourage hospitals to place patients under observation because penalties for 30-day readmissions will not apply to such patients.
It isn’t as easy as it looks.

<table>
<thead>
<tr>
<th>indicator name</th>
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<th>technical description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ic03a</td>
<td>vent-assoc. pneumonia</td>
<td>Number of medical/surgical intensive care unit (ICU) patients who acquired a ventilator-associated pneumonia in the ICU (per 1000 ventilator days). Ventilator must have been in place at the time or within 48 hours prior to onset of symptoms for infection to be included in these numbers. Pneumonia, especially following a period of mechanical ventilation, is the second most common infection in ICUs. Pneumonia can lead to increased risk of mortality and prolonged hospital stays. Includes adult inpatients with patient days in a medical/surgical intensive care unit who were on a ventilator. Excludes patients in the adult cardiothoracic intensive care unit, pediatric intensive care unit, neonatal intensive care unit and patients with pneumonia incubating or present at admission. (NQF HC 19 / NQF Nurs 8a / NHSN)</td>
</tr>
</tbody>
</table>

Location          | Technical Notes                                                  |
-------------------|-------------------------------------------------------------------|
Norton Audubon     | Ratio based on 2,057 vent days, 10/01/2010-09/30/2011.            |
Norton Audubon Hospital in Louisville, KY is ranked nationally in 1 pediatric specialty.

Norton Audubon Hospital in Louisville, KY is ranked nationally in 1 pediatric specialty. It is a 272-bed acute care teaching hospital and Level 1 trauma center located in the heart of downtown Louisville. The hospital has been recognized as a top hospital in the nation by U.S. News & World Report for its overall performance and clinical excellence. It has been nationally ranked in several specialties, including Cardiology, Gastroenterology, Neurology, and Orthopedics. The hospital is committed to providing high-quality care to its patients and is a leader in medical research and innovation.
In HealthGrades (2005-07 Medicare cases): AVH had 31; Torrance had 62. California state avg. mortality = 3.08%
Thought question #2:

Hospital: \# infections / \# patients = rate

A: 0 / 60 = 0.0%
B: 2 /200 = 1.0%
C: 8 /500 = 1.6%

(U.S. rate = 8.5%.)

As far as this one report is concerned, which is the best hospital – assuming the hospitals had a similar mix of patients and procedure complexity?
Hospital Compare

Where do you want to find a hospital?

Search Information

Location - ZIP Code or City, State
  e.g. 10009 or New York, NY

Search type
  - General
  - Medical Conditions
  - Surgical Procedures

Find Hospitals

Hospital Spotlight

Click on the new Patient Safety Tab during your hospital search to see new information Hospital Acquired Conditions and Serious Complications and Deaths.

In January, Medicare will report new measures for heart attack care and surgical care. Also, for the first time, we will be reporting information on central line infections from the Centers for Disease Control’s National Healthcare Safety Network.

You can now visit Medicare’s Hospital Value Based Purchasing Program page and learn more about future measures.

You can now get information on Mortality and Readmission Measures for approximately 150 Veterans Administration Hospitals.
From CMS website
Hospital Compare

30-day risk-adjusted death rates for Medicare inpatients

<table>
<thead>
<tr>
<th>Hospital</th>
<th>4000 KRESGE WAY LOUISVILLE,KY 40207 (502) 897-8100</th>
<th>200 ABRAHAM FLEXNER WAY LOUISVILLE,KY 40202 (502) 587-4011</th>
<th>200 EAST CHESTNUT STREET LOUISVILLE,KY 40202 (502) 629-6560</th>
</tr>
</thead>
<tbody>
<tr>
<td>Add To My Favorites</td>
<td></td>
<td>Add To My Favorites</td>
<td>Add To My Favorites</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>BAPTIST HOSPITAL EAST</th>
<th>JEWISH HOSPITAL &amp; ST MARY'S HEALTHCARE</th>
<th>NORTON HOSPITALS, INC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death Rate for Heart Attack Patients</td>
<td>No Different than U.S. National Rate</td>
<td>No Different than U.S. National Rate</td>
<td>No Different than U.S. National Rate</td>
</tr>
<tr>
<td>Death Rate for Heart Failure Patients</td>
<td>Better than U.S. National Rate</td>
<td>No Different than U.S. National Rate</td>
<td>No Different than U.S. National Rate</td>
</tr>
<tr>
<td>Death Rate for Pneumonia Patients</td>
<td>No Different than U.S. National Rate</td>
<td>No Different than U.S. National Rate</td>
<td>Better than U.S. National Rate</td>
</tr>
</tbody>
</table>
Only the Norton death rate is statistically significantly better than the national death rate, BUT:

These 3 hospitals are not significantly different from each other.
## KEY
- **Better than U.S. average**
- **Near U.S. average**
- **Worse than U.S. average**

- # = too few eligible cases to calculate a reliable statistic
- *italics* = no comparative data
- blank = does not apply
- *0* or *100* = best score possible

### PN accountability measures' composite
<table>
<thead>
<tr>
<th></th>
<th>Desired performance</th>
<th>Norton Audubon Hospital</th>
<th>Norton Brownsboro Hospital</th>
<th>Norton Hospital</th>
<th>Norton Suburban Hospital</th>
<th>Kosair Children's Hospital</th>
<th>Norton Healthcare</th>
<th>Kentucky</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of PN measure opportunities met (composite)</td>
<td>high</td>
<td>95</td>
<td>98</td>
<td>97</td>
<td>97</td>
<td>#</td>
<td>96</td>
<td>89</td>
<td>94</td>
</tr>
</tbody>
</table>

### Pneumonia treatment - percent of pneumonia patients
- given recommended antibiotic: high 93, 96, 93, 96, #, 93, 90, 93
- given antibiotic w/in 6hrs of arrival: high 88, 98, 91, 98, #, 93, 95, 96
- with blood cultures in ED before 1st antibiotic: high 97, 99, 99, 99, #, 98, 95, 96
- given pneumococcal vaccination: high 95, 98, 99, 98, #, 97, 94, 94
- screened or vaccinated for influenza: high 93, 99, 94, 95, #, 95, 91, 91
- who smoke given smoking counseling: high *100* *100*, 98, *100*, #, 100, 98, 98

### Other pneumonia treatment - percent of pneumonia patients
- in ICU given blood cultures w/in 24 hr of arrival: high *100* *100* *100* *100* *100* *100*, #, 96, 97
- in ICU given recommended antibiotic: high # # # # # #, 73, 75, 83
- not in ICU given recommended antibiotic: high 96, 99, 94, 97, #, 96, 94, 96

### Pneumonia mortality - percent of hospitalized pneumonia patients
- who die (AHRO risk-adjusted): low 19, 22, 19, 17, 19, 19, 3.7
- who die of any cause w/in 30 days: low 10.0, 10.0, 10.0, 10.0, 10.0, 10.0, 11.9

### Pneumonia readmission - percent of Pneumonia patients
- who are readmitted for any cause w/in 30 days (adj): low 18.5, 18.5, 18.5, 18.5, 18.5, 18.5, 18.4
What’s the alternative to healthcare transparency?

• Best PR department wins?
• Like us on Facebook!
• Newspaper comments / blogs: “I wouldn’t take my dog to that place!”
Looking for the best contractor or doctor in Louisville?

Angie's List is the premier provider for reviews you can trust. With verified reports on the best Louisville service providers and health professionals, Angie's List helps consumers avoid costly mistakes. Join today to start finding the top-rated providers in your area.

Find reliable Louisville service providers on Angie's List

Meet co-founder Angie Hicks and hear how Angie's List can save you time, money and make hiring easier.

Reviews come from real people, not anonymous users.

Companies can't pay to be on Angie's List

Exclusive discounts from top-rated businesses—save up to 70%

Service Categories in Louisville, KY

- Accountant
- Acupuncturist
- Addiction Counseling
- Adult Day Care
- Air Duct Cleaning
- Alcohol Treatment Centers
- Allergist
- Allergists
- Allocations
- Alternative Medicine
- Aesthetics
- Animal Removal
- Antiques
- Appliance Refinishing
- Appliance Repair
- Appliance Rental
- Architect
- Aromatherapy
- Asbestos Removal
- Computer Training
- Concrete Driveways
- Concrete Repair
- Copiers
- Cosmetic Dentist
- Cosmetic Surgery
- Costume Rental
- Countertops
- Custom Cabinets
- Custom Furniture
- Dance Classes
- Day Spa
- Daycare
- Deck Cleaning
- Decks
- Delivery Service
- Dentists
- Denture Labs
- Dentures
- Dermatologist
- Gift Shops
- Glass Block
- Glass Repair
- Graphic Designers
- Greenhouses
- Grief Counseling
- Gutter Cleaning
- Gutter Repair
- Hair Removal
- Hair Replacement
- Hair Stylist
- Hand Doctor
- Handicapped Equipment
- Handyman Service
- Hardscaping
- Hardwood Floor Repair
- Hauling Services
- Health Insurance Brokers
- Health Insurance Providers
- Health Workshops
- Mattresses
- Metal Restoration
- Mobile Home Remodeling
- Mold Removal
- Mortgage Broker
- Motorcycle Repair
- Moving Companies
- Mulching
- Muller Repair
- Muir
- Murals
- Music Lessons
- Musical Instrument Repair
- Nail Salons
- Neurologist
- Neurosurgeon
- Nurse Practitioners
- Nursing Home
- Obgyn
- Office Equipment Repair
- Real Estate Appraisal
- Reception Halls
- Reflexology
- Remodeling
- Replacement Windows
- Rheumatology
- Roof Cleaning
- Roof Snow Removal
- Roofing
- Roto Tilling
- Ry Sales
- Satellite TV Service
- Screen Repair
- Secretarial Services
- Security Windows
- Septic Tank
- Sewer Cleaning
- Shoe Repair
- Shoulder Doctor
- Siding
Core measures

• For 20 core measures:
• Looks at trends in our composite %
• Compares our results to the most recent U.S. average from Hospital Compare.

So, more of this, please:
Composite thermometer shows the unweighted average (mean) % of the displayed core measures.
### 2003 Composite %

<table>
<thead>
<tr>
<th>topic</th>
<th>description</th>
<th>Audubon</th>
<th>Norton</th>
<th>Suburban</th>
</tr>
</thead>
<tbody>
<tr>
<td>heart attack (AMI)</td>
<td>aspirin at arrival</td>
<td>90%</td>
<td>92%</td>
<td>93%</td>
</tr>
<tr>
<td>heart attack (AMI)</td>
<td>aspirin at discharge</td>
<td>92%</td>
<td>97%</td>
<td>90%</td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>LVSD ACEI or ARB</td>
<td>38%</td>
<td>91%</td>
<td></td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>smoking counseling</td>
<td>61%</td>
<td>79%</td>
<td></td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>beta blocker at discharge</td>
<td>88%</td>
<td>94%</td>
<td>100%</td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>complete discharge instructions</td>
<td>19%</td>
<td>10%</td>
<td>50%</td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>LVF assessment</td>
<td>83%</td>
<td>79%</td>
<td>97%</td>
</tr>
<tr>
<td>heart failure (HF)</td>
<td>prescribed ACEI/ARB at discharge</td>
<td>51%</td>
<td>80%</td>
<td>71%</td>
</tr>
<tr>
<td>pneumonia (PN)</td>
<td>smoking counseling</td>
<td>57%</td>
<td>32%</td>
<td>77%</td>
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<tr>
<td>pneumonia (PN)</td>
<td>pneumococcal vaccination</td>
<td>45%</td>
<td>4%</td>
<td>46%</td>
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<tr>
<td>pneumonia (PN)</td>
<td>blood cultures in ED before antibiotic</td>
<td>84%</td>
<td>88%</td>
<td>93%</td>
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<tr>
<td>pneumonia (PN)</td>
<td>smoking counseling</td>
<td>64%</td>
<td>38%</td>
<td>68%</td>
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<tr>
<td>pneumonia (PN)</td>
<td>recommended antibiotic</td>
<td>74%</td>
<td>82%</td>
<td>83%</td>
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<tr>
<td>pneumonia (PN)</td>
<td>screened or vaccinated for influenza</td>
<td>78%</td>
<td>70%</td>
<td>76%</td>
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<tr>
<td>surgery (SCIP)</td>
<td>preop. antibiotic on time</td>
<td>80%</td>
<td>80%</td>
<td>96%</td>
</tr>
<tr>
<td>surgery (SCIP)</td>
<td>recommended preop. antibiotic</td>
<td>91%</td>
<td>94%</td>
<td>97%</td>
</tr>
<tr>
<td>surgery (SCIP)</td>
<td>antibiotic discontinued on time</td>
<td>58%</td>
<td>80%</td>
<td>81%</td>
</tr>
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### 2011 Jan. - May

**Composite %**

<table>
<thead>
<tr>
<th>topic</th>
<th>description</th>
<th>Audubon</th>
<th>Norton</th>
<th>Suburban</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Heart attack (AMI)</strong></td>
<td>aspirin at arrival</td>
<td>98%</td>
<td>99%</td>
<td><strong>100%</strong></td>
</tr>
<tr>
<td></td>
<td>aspirin at discharge</td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>LVSD ACEI or ARB</td>
<td><strong>100%</strong></td>
<td>95%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>smoking counseling</td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>beta blocker at discharge</td>
<td>99%</td>
<td>99%</td>
<td></td>
</tr>
<tr>
<td><strong>Heart failure (HF)</strong></td>
<td>complete discharge instructions</td>
<td>86%</td>
<td>83%</td>
<td><strong>82%</strong></td>
</tr>
<tr>
<td></td>
<td>LVF assessment</td>
<td><strong>99%</strong></td>
<td><strong>99%</strong></td>
<td><strong>100%</strong></td>
</tr>
<tr>
<td></td>
<td>prescribed ACEI/ARB at discharge</td>
<td><strong>100%</strong></td>
<td>96%</td>
<td></td>
</tr>
<tr>
<td></td>
<td>smoking counseling</td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Pneumonia (PN)</strong></td>
<td>pneumococcal vaccination</td>
<td>96%</td>
<td>99%</td>
<td><strong>98%</strong></td>
</tr>
<tr>
<td></td>
<td>blood cultures in ED before antibiotic</td>
<td>95%</td>
<td>99%</td>
<td><strong>99%</strong></td>
</tr>
<tr>
<td></td>
<td>smoking counseling</td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
<td><strong>100%</strong></td>
</tr>
<tr>
<td></td>
<td>recommended antibiotic</td>
<td>95%</td>
<td>91%</td>
<td><strong>99%</strong></td>
</tr>
<tr>
<td></td>
<td>screened or vaccinated for influenza</td>
<td>94%</td>
<td>97%</td>
<td><strong>95%</strong></td>
</tr>
<tr>
<td><strong>Surgery (SCIP)</strong></td>
<td>preop. antibiotic on time</td>
<td>97%</td>
<td>97%</td>
<td><strong>97%</strong></td>
</tr>
<tr>
<td></td>
<td>recommended preop. antibiotic</td>
<td><strong>98%</strong></td>
<td><strong>98%</strong></td>
<td><strong>97%</strong></td>
</tr>
<tr>
<td></td>
<td>antibiotic discontinued on time</td>
<td>92%</td>
<td>97%</td>
<td><strong>96%</strong></td>
</tr>
</tbody>
</table>