

## Quality Health Indicators



### *QHi Benchmarking Opportunity for Rural Health Clinics*

*Sharing best practices for exceptional patient care*



## PiHQ

Partners in Healthcare Quality



## Quality Health Indicators



Kansas Hospital Education and Research Foundation

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# Quality Health Indicators



## Agenda

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- I. What is QHi?
  - 1) Philosophy
  - 2) Who participates
  - 3) What we measure
  
- II. Rural Health Clinic Pilot Project
  - 1) Measures identified
  - 2) How to get started
  
- III. Live QHi Site Demonstration
  
- IV. Q&A



# Quality Health Indicators



## Using benchmarking data to strengthen quality activities

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1. Identify
2. Benchmark
3. Implement



## Quality Health Indicators



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### QHi Advisory Committees Direct and Drive the Project

- Charge of Committees:
  - Continuously re-evaluate current measures, their calculations and definitions
  - Consider new measures
  - Insure Core Measure Set remains relevant and meaningful
  - Make recommendations for site enhancements
- *All* QHi registered users are invited to participate



## Quality Health Indicators



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### Four Pillars Of Measurement

*Providing an Enterprise-wide Dashboard*



Clinical  
Quality



Financial  
Operational



Employee  
Contribution



Patient  
Satisfaction



## Quality Health Indicators



### QHi Hospital Measures

**40 Clinical Quality**

- 22 CMS (easy upload from CART)
- 18 User Defined

**74 Financial/Operational**

- Most pulled from cost report
- 44 staffing/productivity for:
  - Operating Room
  - Radiology
  - Lab
  - Physical Therapy
  - Long Term Care and SNF

**8 Employee Contribution**

- Salary to Operating Expense
- Staff Turnover

**31 Patient Satisfaction**

- All HCAHPS
- 5 HSI defined
- 2 QHi defined

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## Quality Health Indicators



All participating **hospitals** are asked to collect and report the

### 8 QHi Core Hospital Measures

Clinical Quality

- Healthcare Associated Infections per Patient Day
- Pneumococcal Immunization (PPV23) - Age 65 and Older - CMS IMM-1b
- Discharge Instructions - CMS HF-1
- Unassisted Patient Falls

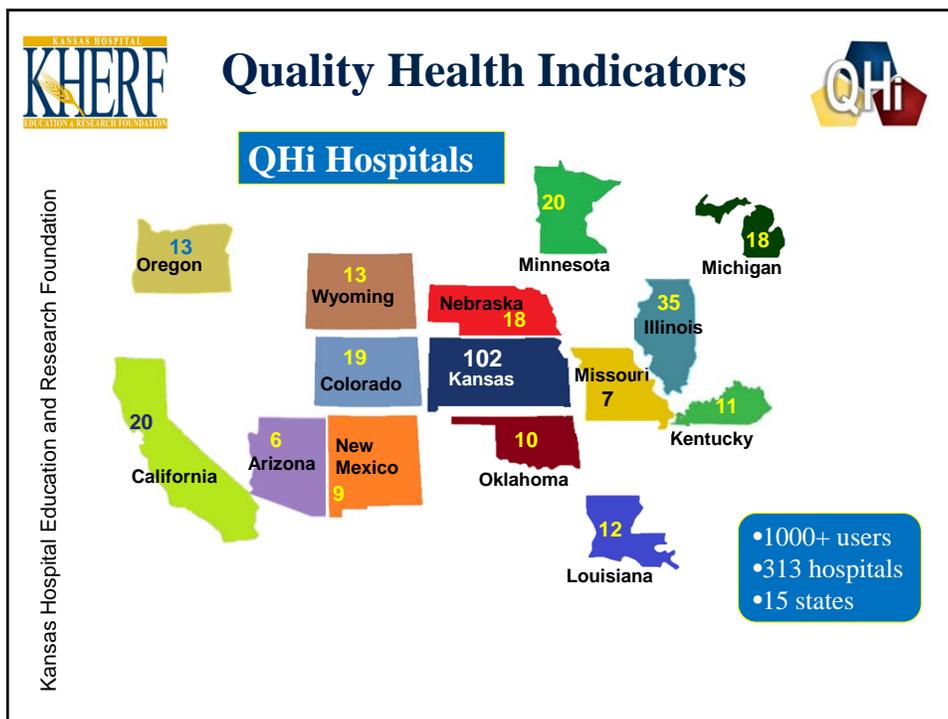
Financial Operational

- Gross Days in AR
- Days Cash on Hand

Employee Contribution

- Benefits as a Percentage of Salary
- Staff Turnover

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**Quality Health Indicators**

**RHC Pilot Project**  
(May 2013 – August 2013)

**Expanding to Rural Health Clinics**

- Develop Measures
- Redesign QHi application to manage RHC data entry/reporting
- Determine Fee Schedule
- Begin Pilot Project

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## Quality Health Indicators



### RHC Pilot Project

*(May 2013 – August 2013)*

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- May, June, July and August** interested clinics can join and use the QHi site at **no cost**
- Clinics must sign a **Data Use Agreement**, complete the **clinic profile form** and provide contact information of the person designated as the **provider contact**.
- In August, participating clinics will be invoiced for the Flex year August 2013 – September 2014



## Quality Health Indicators



### Rural Health Clinic Quality Measures (14)

*12 are National Quality Forum endorsed*

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1. Controlling High Blood Pressure (NQF #0018)
2. Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (NQF #0024)
3. Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028)
4. Childhood Immunization Status (NQF #0038)
5. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (NQF #0059)
6. Ischemic Vascular Disease (IVD): Use of Aspirin or another Antithrombotic (NQF #0068)
7. IVD: Blood Pressure Management (NQF #0073)



## Quality Health Indicators



### Rural Health Clinic Quality Measures (14)

*12 are National Quality Forum endorsed*

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8. IVD: Complete Lipid Profile and LDL Control < 100 (NQF #0075)
9. Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF #0421)
10. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%) (NQF #0575)
11. Children Who Receive Preventive Medical Visits (NQF #1332)
12. Immunizations for Adolescents (NQF #1407)
13. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Good Control (<7.0%) (*MI measure*)
14. CVD: Complete Lipid Profile and LDL Control < 100 (*MI measure*)



## Quality Health Indicators



### Rural Health Clinic Financial Measures

*(annual)*

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1. Patient visits per FTE
2. Total provider cost per visit
3. Medicare reimbursement per visit (from cost report)
4. Medicaid reimbursement per visit (from cost report)
5. Medicare cost per visit (from cost report)
6. Total visits (from cost report)
7. Productivity Limit (from cost report)
8. Rural Health Clinic Encounters per FTE (*monthly*)

14



## Quality Health Indicators



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All participating **clinics** are asked to collect and report the

### 3 QHi Core *Clinic* Measures

#### Clinic Clinical Quality

- Controlling High Blood Pressure (NQF #0018)
- Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028)
- Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF #0421)



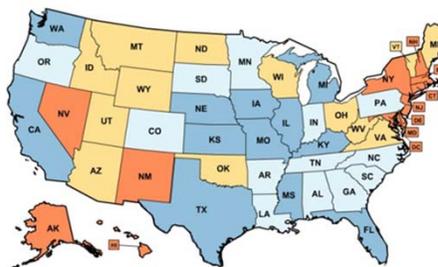
## Quality Health Indicators



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### RHCs in QHi States

Number of RHCs in QHi States			
Arizona	17	Minnesota	83
California	293	Missouri	374
Colorado	58	Nebraska	139
Illinois	221	New Mexico	11
Kansas	179	Oklahoma	46
Kentucky	147	Oregon	62
Louisiana	112	Wyoming	18
Michigan	172	<b>Total</b>	<b>1,199</b>



3,950 RHCs in the US



# Quality Health Indicators

## RHC Fee Schedule

(September 2013 – August 2014)



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**State Partners (Partners provide state level support, contracting for multiple hospitals in QHi)**

**\$200/year for RHCs associated with participating QHi hospitals**

**\$500/year for RHCs independent of a participating QHi hospital**

*State Organizations which contract separately for multiple participating hospitals in QHi will pay no more than a combined \$40,000 annually for both hospital and clinic participation.*

**State Partners (Partners provide state level support, contract for multiple RHCs, do not support hospital participation)**

\$12,000/year for up to 20 RHCs (provider based or independent)

\$400/year for each additional up to 40

\$200/year for each additional up to 100 (\$32,000)

**Independent RHC (No state/network level support)**

\$1,000/year

**Hospital plus RHCs (No state/network level support)**

\$3,000/year plus \$200 for each associated RHC



# Quality Health Indicators



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PiHQ Search Resource Library Calendar **QHi** Learning Modules HSI SQSS Risk Management
Search PiHQ Sign out

**Quality Health Indicators**  
 About QHi

Jane Doe  
Rural Health Clinic - Sally  
Change
March 2013  
Submission activated  
(click to view)
Inbox (0) | Outbox (0) | Ask My Admin

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**Welcome Center**  
 Latest Updates

**QHi FAQs**

**QHi and Quality Education Opportunities**

**QHi Back to Basics Session - May 9 2013**  
 Please join us on Thursday, May 9 from 2:00 to 3:00 for our monthly QHi Back to Basics Session. During this session, after a brief overall project update, we will review the fundamentals of completing the hospital profile, adding users, selecting measures, and running reports. Following the demonstration we will open up the lines discussion, so bring questions you might have for other facilities in the project. All QHi registered users are invited to attend this free webinar/conference call. Please click [here](#) to register for the session.

**Clinic Welcome Page**

Dashboard Options

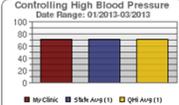
View Options	Email PDF of Dashboard
<a href="#">Tables view</a> <a href="#">Graph and table view</a> <a href="#">PDF File</a>	<a href="#">To Myself</a> <a href="#">Choose Recipients</a> <a href="#">Create Schedule</a>
Change start month: <span>Default month selection</span>	

Core Measures Dashboard

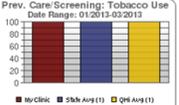
View My Dashboard | At A Glance Dashboard

Best Practice Report | New Reports

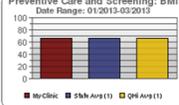
Controlling High Blood Pressure  
Date Range: 01/2013-03/2013



Prev. Care/Screening: Tobacco Use  
Date Range: 01/2013-03/2013



Preventive Care and Screening: BMI  
Date Range: 01/2013-03/2013



Note: Provider specific data will not display on quality measure graphs for providers with no occurrences during the reporting period.

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# Quality Health Indicators



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[Search](#) | 
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Sally Perkins  
 Provider Mode: (switch modes)  
 Rural Health Clinic - Sally  
 Change
 

**Quality Health Indicators**  
 About QHI

 March 2013  
 103 of 316 provider submissions are activated  
 Inbox (0) | Outbox (0) | Ask My Admin

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 [Measures](#) | 
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 [Export](#) | 
 [Config](#)

Clinic Profile

[Save](#) | 
 [Export](#) | 
 [Measure Selection](#)

### Clinic Information

\* Name: Rural Health Clinic - Sally  
 ID: 123456  
 Address:  
 Line 1:  
 Line 2:  
 \* City: Topka  
 \* State: KS  
 Zip:  
 County:  
 Trauma Council:  
 Phone:

### Contact Information

\* Provider Contact: None Selected  
 Administrator Name:  
 Email:  
 CFO Name:  
 Email:

### Characteristics

Clinic Type: Rural Health Clinic  
 RHC Type: None Selected  
 Annual Total Gross Revenue: \$ 0.00  
 Annual Patient Visits: 0  
 Number of Local Mid-Level Practitioners:  
 Number of FTEs:  
 Number of active physicians:  
 Clinic Type: None Selected

Check All that Apply

Provide OB services  
 Provide assisted living services  
 Provide Telehealth services  
 Provide Visiting Nursing services  
 Provide Outpatient Mental Health Treatment  
 Provide Physical and Occupational Therapy

### Status

Data Entry Restrictions

Active:

Updated: May 8, 2013  
 Updated by: Wes Garrison

## Clinic Profile

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# Quality Health Indicators



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Sally Perkins  
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 [Config](#)

Clinic Profile: Measure sets and collected measures

[Back to provider profile](#)

### Collected Measure Sets

**My Measure Sets**

- RHC Core Measure Set (show measures)

(Available Measure Sets)

### Collected Measures

**Clinic: Clinical Quality**

- Controlling High Blood Pressure (NQF #0018) "Core Measure" (2 collecting) [show elements](#)
- Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028) "Core Measure" (2 collecting) [show elements](#)
- Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-up (NQF #0421) "Core Measure" (2 collecting) [show elements](#)

### Additional Measures

Currently Collecting	Available to Collect
<b>Clinic: Annual Financial</b> Patient visits per FTE (1 collecting) <a href="#">show elements</a> Medicare reimbursement per visit (from cost report) (1 collecting) <a href="#">show elements</a>	<b>Clinic: Annual Financial</b> Total provider cost per visit (0 collecting) <a href="#">show elements</a> Medicare reimbursement per visit (from cost report) (0 collecting) <a href="#">show elements</a> Medicare cost per visit (from cost report) (0 collecting) <a href="#">show elements</a> Medicare reimbursement per visit (from cost report) (0 collecting) <a href="#">show elements</a> Medicare cost per visit (from cost report) (0 collecting) <a href="#">show elements</a> Medicare reimbursement per visit (from cost report) (0 collecting) <a href="#">show elements</a> Medicare cost per visit (from cost report) (0 collecting) <a href="#">show elements</a>

### Quality

assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (NQF #0024) (0 collecting) [show elements](#)

- Childhood Immunization Status (NQF #0038) (2 collecting) [show elements](#)
- Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (NQF #0050) (0 collecting) [show elements](#)
- Ischemic Vascular Disease (IVD): Use of Aspirin or another Antithrombotic (NQF #0068) (0 collecting) [show elements](#)
- IVD: Blood Pressure Management (NQF #0075) (0 collecting) [show elements](#)
- IVD: Complete Lipid Profile and LDL Control < 100 (NQF #0075) (0 collecting) [show elements](#)
- Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%) (NQF #0575) (0 collecting) [show elements](#)
- Children Who Receive Preventive Medical Visits (NQF #1332) (0 collecting) [show elements](#)
- Immunizations for Adolescents (NQF #1407) (0 collecting) [show elements](#)
- Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Good Control (<7.0%) (0 collecting) [show elements](#)
- IVD: Complete Lipid Profile and LDL Control < 100 (0 collecting) [show elements](#)

## Clinic Measure Selection

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**Quality Health Indicators**

EDUCATION & RESEARCH | PIHQ Search | Resource Library | Calendar | QHI Learning Modules | HSI | SQSS | Risk Management



March 2013  
103 of 316 provider submissions are activated  
Johns (0) | Outbox (0) | Ask My Admin

Search PIHQ | Sign out

Clinic Monthly Data Entry

Go to: January

Rural Health Clinic - Sally  
Submissions for January 2013

Month to add:  
January 2013

Activate data for reporting:

Clinic: Clinical Quality

Controlling High Blood Pressure (NQF #0018) \*Core Measure\* [QHI Core Measure]

Patients 18-85 with hypertension-Denominator      The number of patients in the denominator whose most recent, representative blood pressure is adequately controlled during the measurement year-Numerator

January	<input type="text" value="28"/>	<input type="text" value="20"/>	71.43
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Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028) \*Core Measure\* [QHI Core Measure]

All patients aged 18 years and older who were seen twice for any visits or who had at least one preventive care visit during the two-year measurement period-Denominator      Patients who were screened for tobacco use\* at least once during the two-year measurement period AND who received tobacco cessation counseling intervention\*\* if identified as a tobacco user-Numerator

January	<input type="text" value="20"/>	<input type="text" value="20"/>	100.00
---------	---------------------------------	---------------------------------	--------

Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF #0421) \*Core Measure\* [QHI Core Measure]

All pts 18yrs+kolder on date of encounter seen during 12mo. reporting period with one or more denominator CPT/HCPCS encounter codes reported on Medicare/Part C claims submission for the encounter along with 1 of 6 numerator HCPCS clinical quality codes-Denominator      Patients with BMI calculated within the past six months or during the current visit and a follow-up plan documented if the BMI is outside of parameters-Numerator

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**Quality Health Indicators**

EDUCATION & RESEARCH | PIHQ Search | Resource Library | Calendar | QHI Learning Modules | HSI | SQSS | Risk Management



March 2013  
103 of 316 provider submissions are activated  
Johns (0) | Outbox (0) | Ask My Admin

Search PIHQ | Sign out

Clinic Annual Data Entry

Home    Data Submissions    Reports    My Profile    Administration    Logout    Help

Monthly Data Entry      Annual Data Entry

Rural Health Clinic - Sally  
Submissions for FY 2013

Month to add:  
January 2013

Activate data for reporting:

Clinic: Annual Financial

Patient visits per FTE

Number of FTEs-Denominator      Number of patient visits-Numerator

FY 2013	<input type="text" value="30"/>	<input type="text" value="900"/>	30.00
---------	---------------------------------	----------------------------------	-------

Medicare reimbursement per visit (from cost report)

Number of visits-Denominator      Medicare reimbursement-Numerator

FY 2013	<input type="text" value="65"/>	<input type="text" value="4300"/>	66.15
---------	---------------------------------	-----------------------------------	-------

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**Quality Health Indicators**

**Reporting Options**



- Core Measure Dashboard
- Customized Dashboards
- At-a-Glance
- Best Practice Reports
- New Reports

**Dashboard Options**

View Options	Email PDF of Dashboard
Tables view Graph and table view PDF File	To Myself Choose Recipients Create Schedule

Change start month:

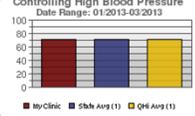
Rural Health Clinic - Sally (January 2013)

Core Measures Dashboard

View My Dashboard | At A Glance Dashboard

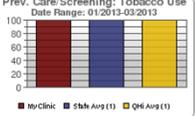
Best Practice Report | New Reports

Controlling High Blood Pressure  
Date Range: 01/2013-03/2013



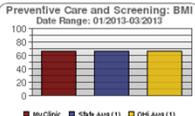
■ No Clinic ■ 5th Avg (1) ■ Q6 Avg (1)

Prev. Care Screening: Tobacco Use  
Date Range: 01/2013-03/2013



■ No Clinic ■ 5th Avg (1) ■ Q6 Avg (1)

Preventive Care and Screening: BMI  
Date Range: 01/2013-03/2013



■ No Clinic ■ 5th Avg (1) ■ Q6 Avg (1)

Note: Provider specific data will not display on quality measure graphs for providers with no occurrences during the reporting period.

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**Quality Health Indicators**



Dashboards

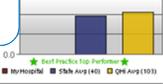
- Clinic to State to All QHi
- 3 month average

Core Measures Dashboard

View My Dashboard | At A Glance Dashboard

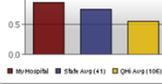
Best Practice Report | New Reports

IA Infections: 100 Inpt Days  
Date Range: 01/2012-03/2012



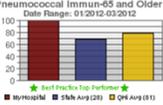
★ Best Practice Top Performer ★  
■ No Hospital ■ 5th Avg (46) ■ Q6 Avg (193)

Unassisted PI Falls: 100 Inpt Days  
Date Range: 01/2012-03/2012



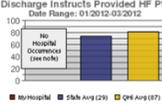
■ No Hospital ■ 5th Avg (41) ■ Q6 Avg (166)

Pneumococcal Immun-65 and Older  
Date Range: 01/2012-03/2012



★ Best Practice Top Performer ★  
■ No Hospital ■ 5th Avg (28) ■ Q6 Avg (51)

Discharge Instructs Provided HF Pts  
Date Range: 01/2012-03/2012



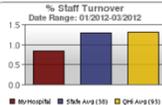
■ No Hospital Occurrences (See Note)  
■ No Hospital ■ 5th Avg (29) ■ Q6 Avg (87)

Benefits as % of Salary  
Date Range: 01/2012-03/2012



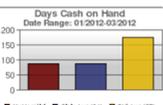
■ No Hospital ■ 5th Avg (19) ■ Q6 Avg (92)

% Staff Turnover  
Date Range: 01/2012-03/2012



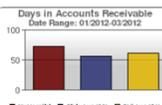
■ No Hospital ■ 5th Avg (10) ■ Q6 Avg (93)

Days Cash on Hand  
Date Range: 01/2012-03/2012



■ No Hospital ■ 5th Avg (24) ■ Q6 Avg (17)

Days in Accounts Receivable  
Date Range: 01/2012-03/2012



■ No Hospital ■ 5th Avg (23) ■ Q6 Avg (14)

Note: Hospital specific data will not display on quality measure graphs for hospitals with no occurrences during the reporting period.

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Facilities with a score in the top 5 are noted as "Best Practice Top Performers".



**Quality Health Indicators**

Reporting Options



**Quality Committee Dashboard**

[Rename dashboard](#)

hboard...  
add more than 6 measures, they'll automatically go to the next page.

**% Return ER Visits within 72 hrs**  
Date Range: 01.2013-03.2013

Best Practice Top Performer

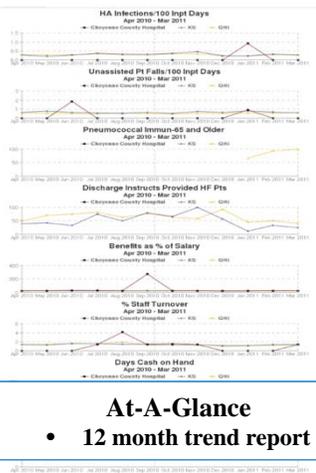
**HA Infections/100 Inpt Days**  
Date Range: 01.2013-03.2013

Best Practice Top Performer

**Unassisted PT Falls/100 Inpt Days**  
Date Range: 01.2013-03.2013

Best Practice Top Performer

NOTES: viewable on printouts, adding a note will change the report to show 6 graphs per page.  
Important notes to committee members typed in here...



**Customized Dashboard**

- Select from any collected measure
- **Clinic to State to All QHI**
- 3 month average

**At-A-Glance**

- 12 month trend report



**Quality Health Indicators**

Reporting Options



**Best Practice Reports**

Days Cash on Hand

Rank	Hospital	Apr 11 - Jun 11	Jul 11 - Sep 11	Oct 11 - Dec 11
1	Peer 194		3,499.2	2,499.8
2	Peer 791	806.7	821.2	874.8
3	Peer 70	681.0	883.8	795.8
4	Peer 533	657.2	562.3	626.9
5	Peer 455	599.9	596.1	578.8
51	My Hospital	70.3	106.3	88.1

n/a = No Active Submissions for Interval \* = No Occurrences for Interval

Benefits as a % of Salary

Rank	Hospital
1	Peer 151
2	Peer 600
3	Peer 656
4	Peer 932
5	Peer 604
60	My Hospital

Gross Days in A/R

Rank	Hospital	Apr 11 - Jun 11	Jul 11 - Sep 11	Oct 11 - Dec 11
1	Peer 955	1.0	1.0	1.1
2	Peer 461	31.5	29.1	17.4
3	Peer 863	25.8	24.9	25.6
4	Peer 530	n/a	n/a	28.6
5	Peer 315	22.7	22.2	29.3
73	My Hospital	73.6	64.3	72.5

n/a = No Active Submissions for Interval \* = No Occurrences for Interval

- Facilities with a Top 5 score are **Best Practice Performers**
- Direct connection to Best Performers
- Rank of Facility
- Create customized peer groups
- Report on multiple measures

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# Quality Health Indicators



Reporting Options

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**Create a new report**

**CHOOSE A DATE RANGE**

Date Range

Start Date: February 2013

End Date: April 2013

Rolling Date

Rolling Interval: Last 3 months

Grouping: Monthly

Quarter starts on: January

**COMPARE PEER GROUPS**

My Network

State (KS)

All QHi

**ADD COMPARISON PEER GROUPS**

Peer Group 1: Select criteria Select criteria first Add peer group criteria

**CHOOSE ONE OR MORE MEASURES**

MEASURE SETS

CLINIC: CLINICAL QUALITY

CLINIC: ANNUAL FINANCIAL

**OUTPUT FORMAT**

Webpage  PDF  Export  Gray Scale

**New Reports**

- Define Peer Group(s)
- Schedule Reports
- Select multiple measures
- Variety of display options

[New Report](#)

[Scheduled Reports](#)



# Quality Health Indicators



Reporting Options

Kansas Hospital Education and Research Foundation

		2011-01	2011-02	2011-03	2011-04	2011-05	2011-06	2011-07	2011-08	2011-09	2011-10	2011-11	2011-12
1	Healthcare Associated Infections per 100 Inpatient Days												
2	Month # Hospitals	148											
3	Hospital	0.9	0	0	0	0	0	0	0	0	0	0	0
4	All QHi	0.2	0.3	0.3	0.2	0.3	0.3	0.3	0.4	0.3	0.2	0.3	0.3
5	Peer 591	0.3	0	1	0	0	0.7	0	0	0.4	0	0	0
6	Peer 143	1.2	1	0	0.9								
7	Peer 341	0.5	0.8	1	0								
8	Peer 839	0	0	0.6	0								
9	Peer 782	0.3	0	0	0	0	0	0	0.7	0	0	0	0.4
10	Peer 974	0	0	0	0	0	0	0	0	1.5	0	0	0
11	Peer 34	0	0	0	0	0	1	0	1.2	0	0	0	0
12	Peer 819	0	0	0	1.3	0	0	0	0.6	0	0	0	0
13	Peer 153	1.8	1.3	0.7	0.4	1	0.4	0.9	0.5	0.4	0	1	1.8
14	Peer 963	0	0.2	0	0.3	0	0	1.4	0.8	0	0	0	0
15	Peer 91	0	0	1.1	0	0	0	0	0	1	0	0.7	0.5
16	Peer 161	0	0	0	0	0	1.2	0.6	1	0	0	0	0
17	Peer 204	0.9	0	0	0	0	2.4	2.6	0	0	1.2	1.6	0
18	Peer 548	1.8	1.8	0	0	0	0	9.1	0	0	0	0	0
19	Peer 152	0	1	0	0	0.6	0	0.4	0.4	0.4	0.6	0	0
20	Peer 685	0	0	0	0	0	0	0	0	0	0	0	0
21	Peer 114	0	0	0	0	0	0	0	0	0	0	0	0
22	Peer 778	0	0	0	0	0	0	0	0	0	0	2.4	0
23	Peer 859	0.2	0	0.5	0.3	0	0.7	0.4	0.2	0	0	0.3	0.5
24	Peer 48	0	0	0	0	0	0	0	0	0	0	0	0
25	Peer 631	1.4	0.6	1.6	1.1	0.6	0.8	0	1.4	0.7	0.6	0.7	0
26	Peer 681	0	0	0	0	2.2	0	0	2.5	0	0	1.9	0

**Export any report to Excel**

 **Quality Health Indicators** 

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[www.qualityhealthindicators.org](http://www.qualityhealthindicators.org)

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***Thank you!***

*Questions?*

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