Reported to the Board of Trustees January 23, 2014

University of Illinois Board of Trustees Meeting January 23, 2014

Quality Report December 2013

The Quality and Patient Safety program at the University of Illinois Hospital & Health Sciences System ("UI Health") supports quality and safety improvement for UI Health's entire scope of clinical operations including Mile Square Health Center.

During 2013, several key changes were made to improve alignment and integration of quality and safety efforts with other organizational priorities, as well as to facilitate more effective partnerships with UI Health's seven health sciences colleges. These are briefly outlined below.

Alignment of Quality and Patient Safety Departments

In January 2013, the following teams were moved under the Associate Vice President for Health Affairs, Quality and Patient Safety:

- Quality Performance and Improvement
- Accreditation and Clinical Compliance
- Patient Safety and Risk Management
- Infection Prevention and Control

Collectively, these teams have implemented a coordinated plan to help UI Health consistently deliver high quality, cost effective patient care and health outcomes, and to assist in the pursuit of eliminating disparities in health and healthcare.

Launch of New Quality and Patient Safety Steering Committee

In April 2013, the Quality and Safety Strategy and Leadership Steering Committee ("QSSL") was established to provide leadership, direction, and oversight to UI Health's enterprise-wide quality and patient safety priorities, performance, and action plan.

Co-chaired by the Associate Vice President for Health Affairs ("VPHA"), Quality and Patient Safety and the Chief Medical Officer, QSSL's responsibilities are as follows:

- Confirm a small set of enterprise-wide quality and patient safety priorities at least annually, based on evaluation of clinical, operational, and strategic opportunities
- Define quality and patient safety metrics and annual performance targets
- Approve annual enterprise-wide quality and patient safety operating plan

- Regularly review key quality and patient safety data including trended data
- Oversee and actively support improvement initiatives to facilitate goal achievement
- Ensure broad, frequent communications on quality and patient safety priorities and progress

QSSL meets monthly. Its membership includes key clinical and operational leaders from across the clinical enterprise, representatives from all seven health sciences schools, the Associate VPHA for Hospital Operations, the Associate VPHA for Community Based Practice, and the Associate VPHA for Population Health Sciences. A selection process is also underway to add two patient representatives to this group.

FY14 Enterprise-Wide Quality & Patient Safety Goals

In June 2013, the Quality and Safety Strategy and Leadership Steering Committee set the following goals for Fiscal Year 2014 (July 2013 – June 2014):

- 1. Reduce Central Line-Associated Blood Stream Infections ("CLABSIs") by 20% (target goal) to 30% (stretch goal)
- 2. Reduce Catheter-Associated Urinary Tract Infections ("CAUTIS") by 10% (target goal) to 30% (stretch goal)
- 3. Reduce 30-day All-Cause Readmissions by at least 25%.

These improvement goals are relative to UI Health's baseline performance as of June 30, 2013.

These priorities were selected based on the following considerations:

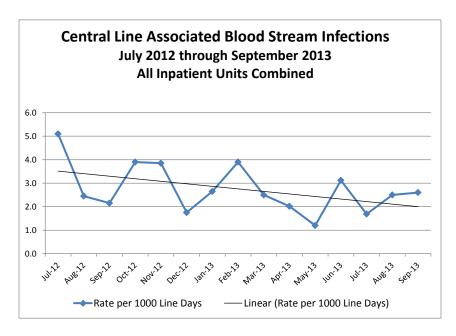
- Current performance relative to internal and external benchmarks
- Magnitude of opportunity (including incidence, costs, and disease burden)
- Availability of evidence and known best practices to inform improvements
- Financial impact (including payor penalties for poor performance)
- Opportunities for collaboration across departments, units, and settings

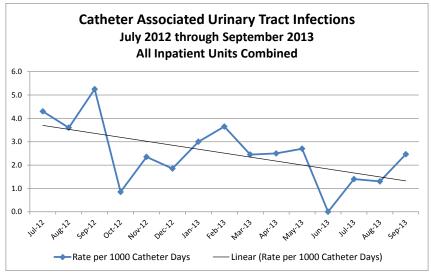
Achieving the stretch goals will place UI Health's performance in the top half of hospitals included in the University HealthSystem Consortium (UHC) for each of these priority areas.

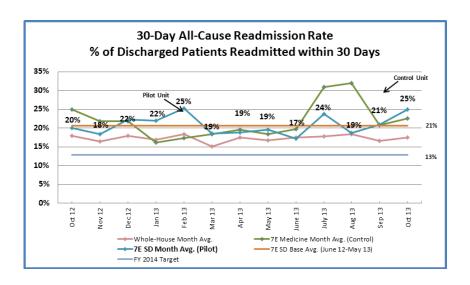
Supporting Enterprise-Wide Goal Achievement

For each of the three priority areas outlined above, multidisciplinary project teams have been assembled and detailed project plans developed. Performance is being tracked monthly by QSSL, and progress is shared broadly each month throughout UI Health.

Nearing the half-way point in the fiscal year, current CLABSI and CAUTI performance is consistent with achieving the stretch goals for both priority areas (see graphs below). Readmissions rates are not yet demonstrating sustained improvements.







Supporting Other Quality and Safety Efforts

UI Health's quality and safety agenda is much broader than the three priority areas of CLABSIs, CAUTIs, and Unplanned Readmissions. The Quality and Safety team continues to provide support, consultation, and facilitation for the important body of work that collectively comprises UI Health's performance improvement journey.

One such example is the support of UI Health's Clinical Compliance activities. Every three years, UI Hospital and the Outpatient Care Center undergo a four-day unannounced survey by one of UI Health's accrediting bodies, The Joint Commission. The Joint Commission's most recent visit occurred in early December 2013, several months earlier than had been expected. Due to the hard work and dedication of UI Health's entire workforce over the past year, this survey went very smoothly and created the opportunity to showcase all the important progress that is being made to improve the safety and effectiveness of care at UI Health.