



# UNIVERSITY OF ILLINOIS HOSPITAL & HEALTH SCIENCES SYSTEM

## HOSPITAL DASHBOARD

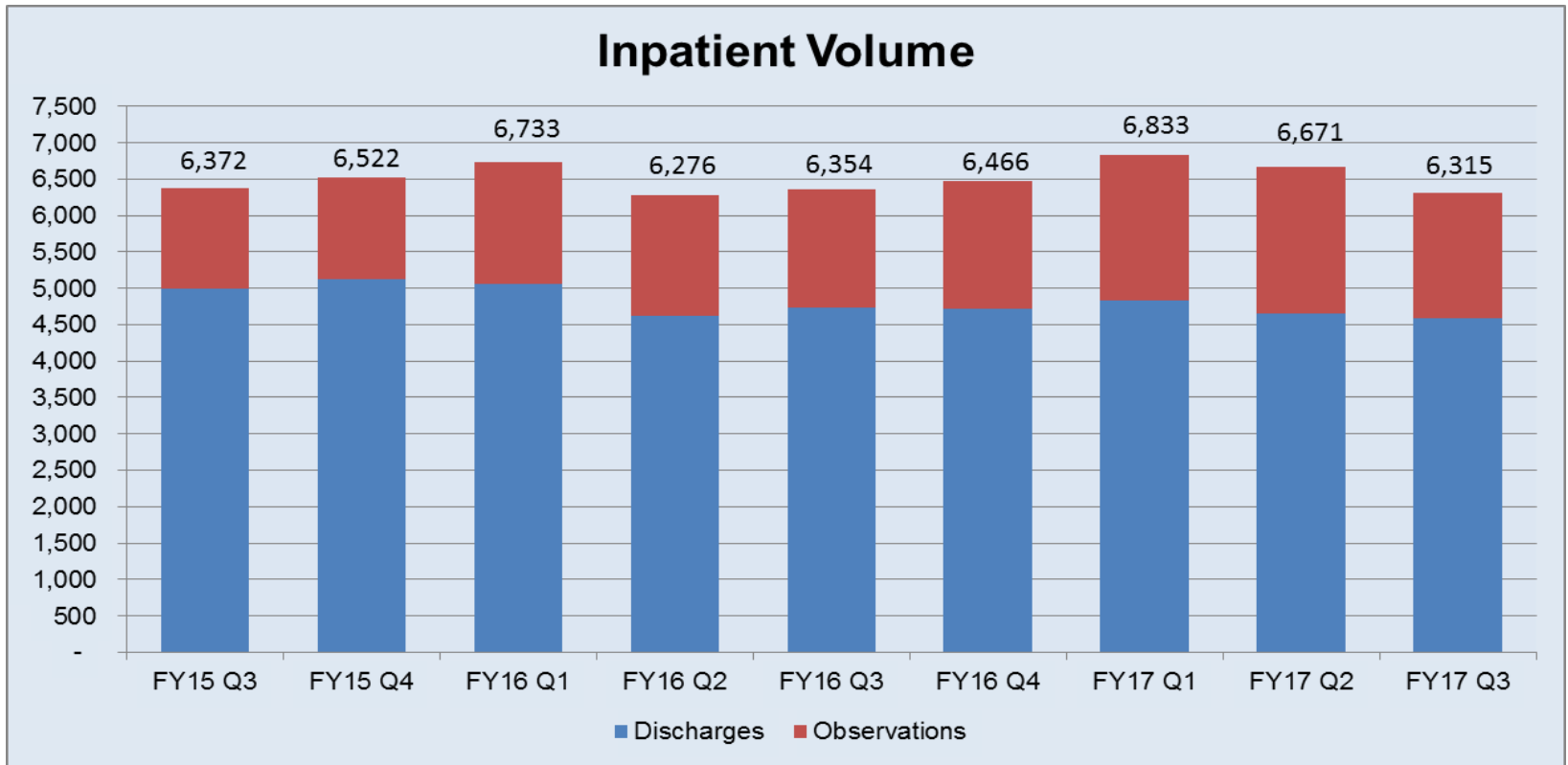
Reported to the Board of Trustees  
May 11, 2017



UI Health

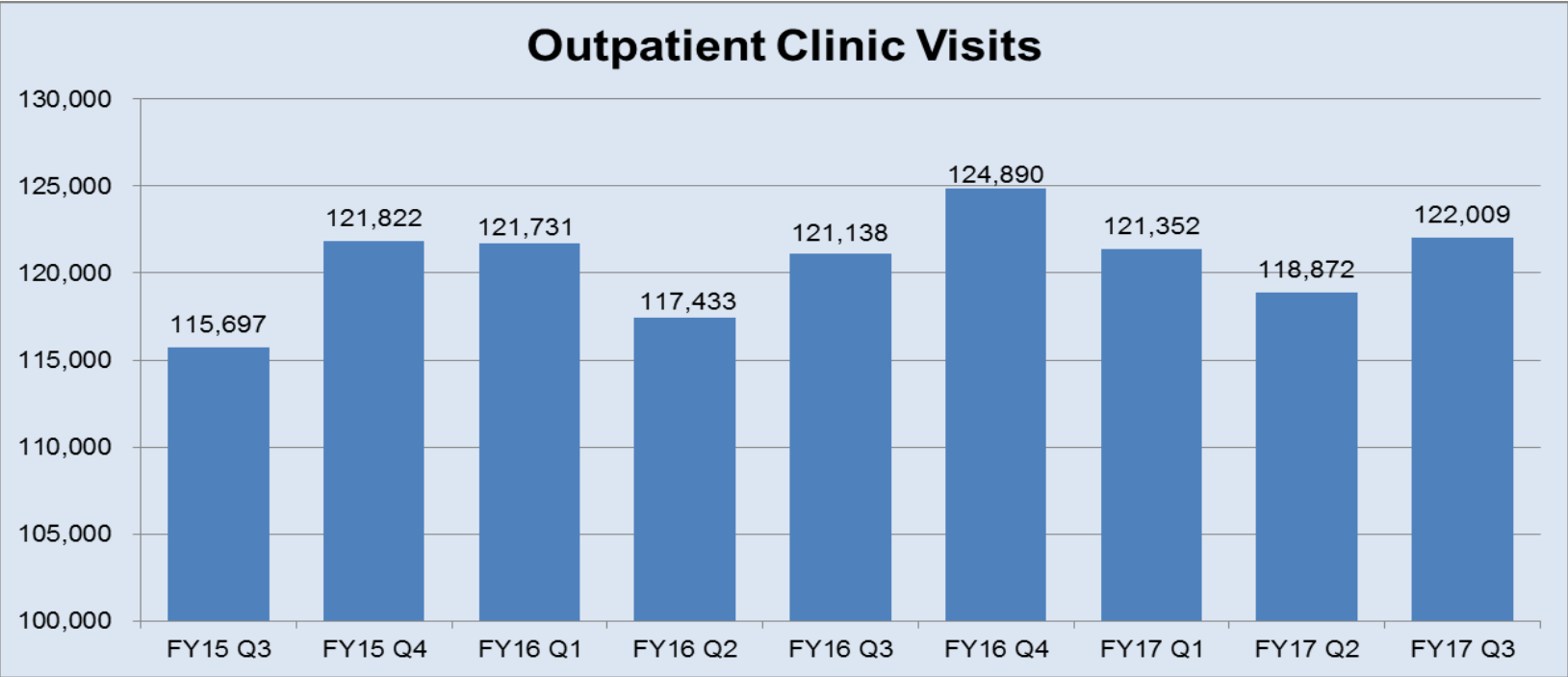


UI Health Metrics	FY17 Q3: 2 Month Actual + March Budget	FY17 Q3 Target	FY16 Q3 Actual	3rd Quarter % change FY17 vs FY16
Discharges	4,580	4,632	4,729	Combined -0.6%
Observation Cases	1,735	1,624	1,625	



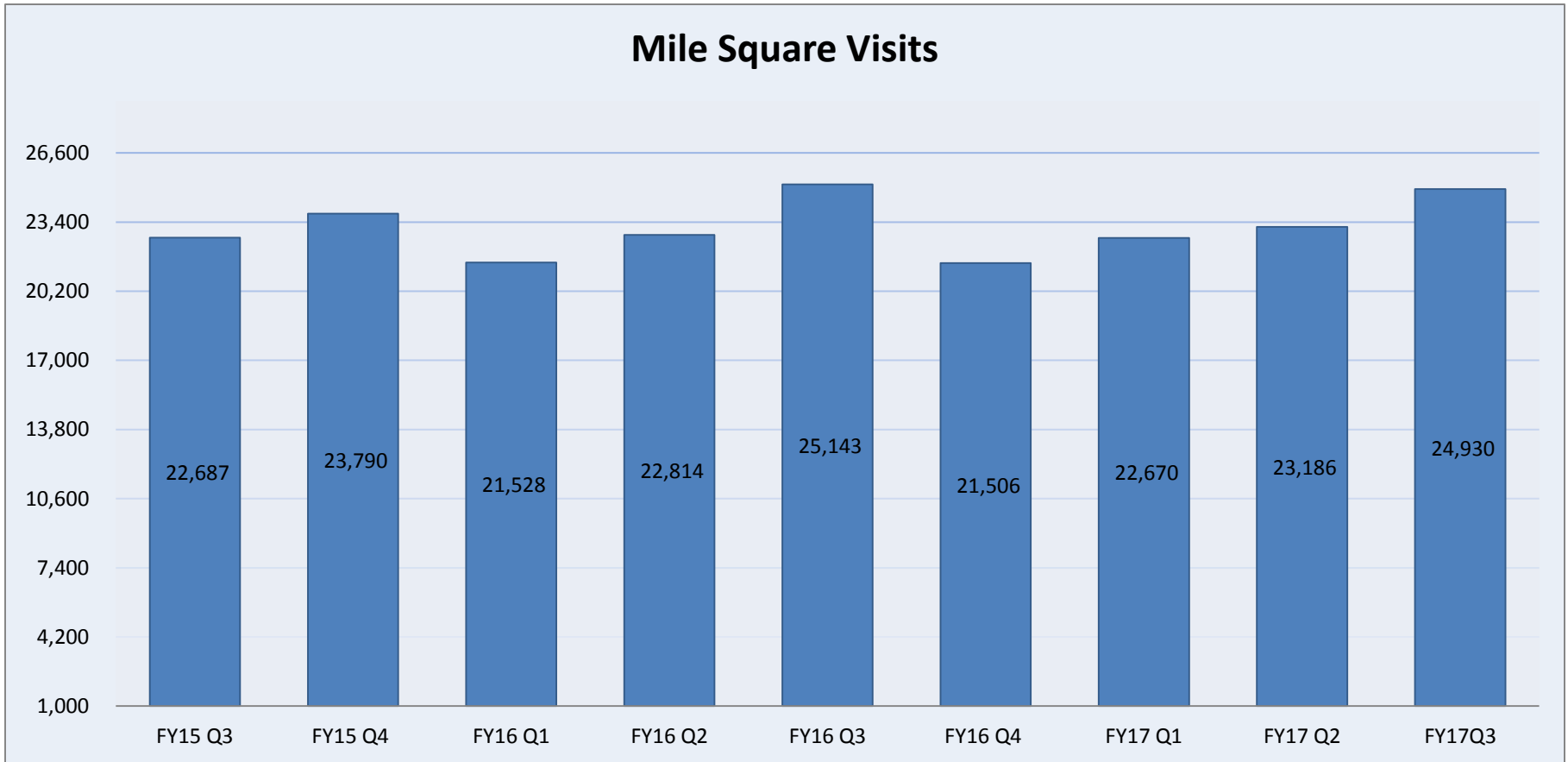
Combined Discharges and Observation Cases for the eight months ending February 2017 are 4.6% above budget and 3.1% greater than last year.

UI Health Metrics	FY17 Q3: 2 Month Actual + March Budget	FY17 Q3 Target	FY16 Q3 Actual	3rd Quarter % change FY17 vs FY16
Outpatient Clinic Visits	122,009	118,301	121,138	0.7%



Clinic visits for the eight months ending February 2017 are 0.8% over budget and 1.3% above last year.

UI Health Metrics	FY17 Q3 Actual	FY17 Q3 Target	FY16 Q3 Actual
Mile Square Visits	24,930	41,155	25,143



**UI HEALTH**

**MISSION PERSPECTIVE:**

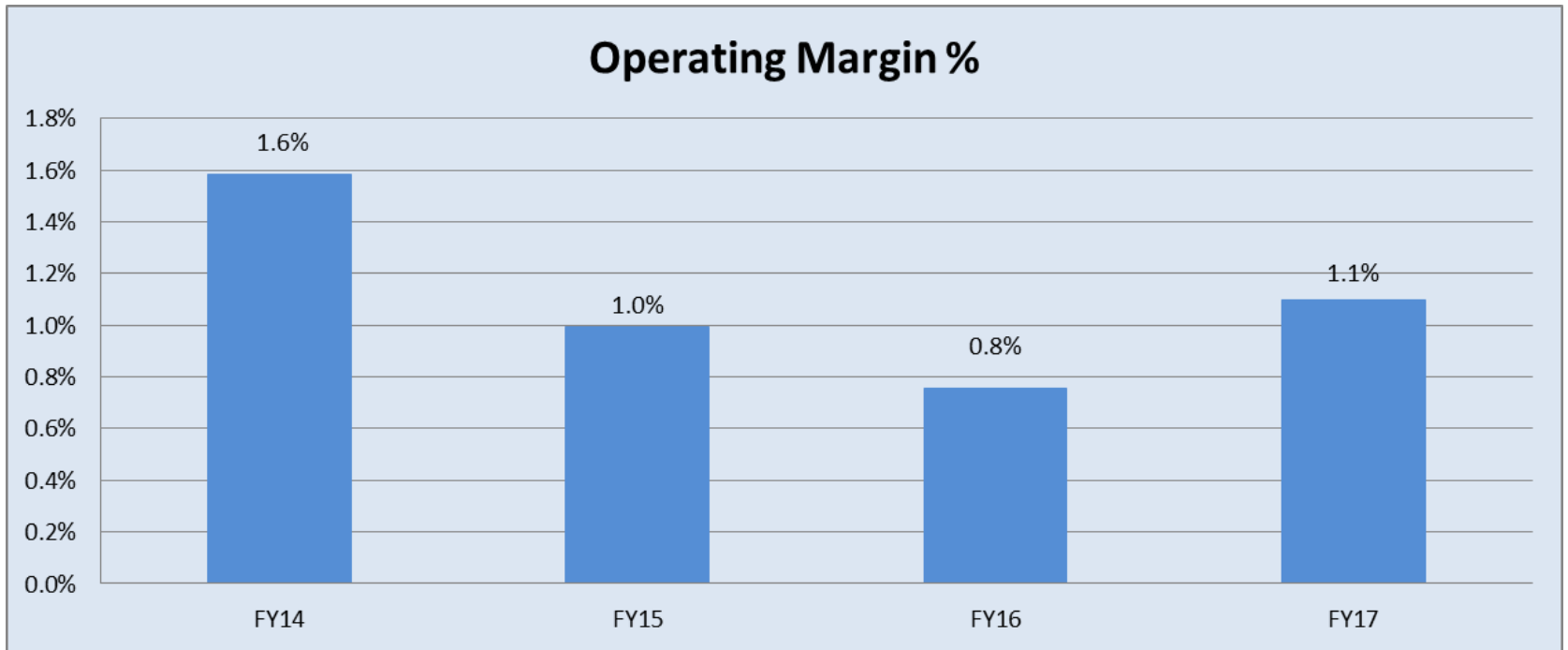
**FINANCIAL PERFORMANCE**

# STATEMENT OF OPERATIONS – FEBRUARY 2017

(\$ IN THOUSANDS)

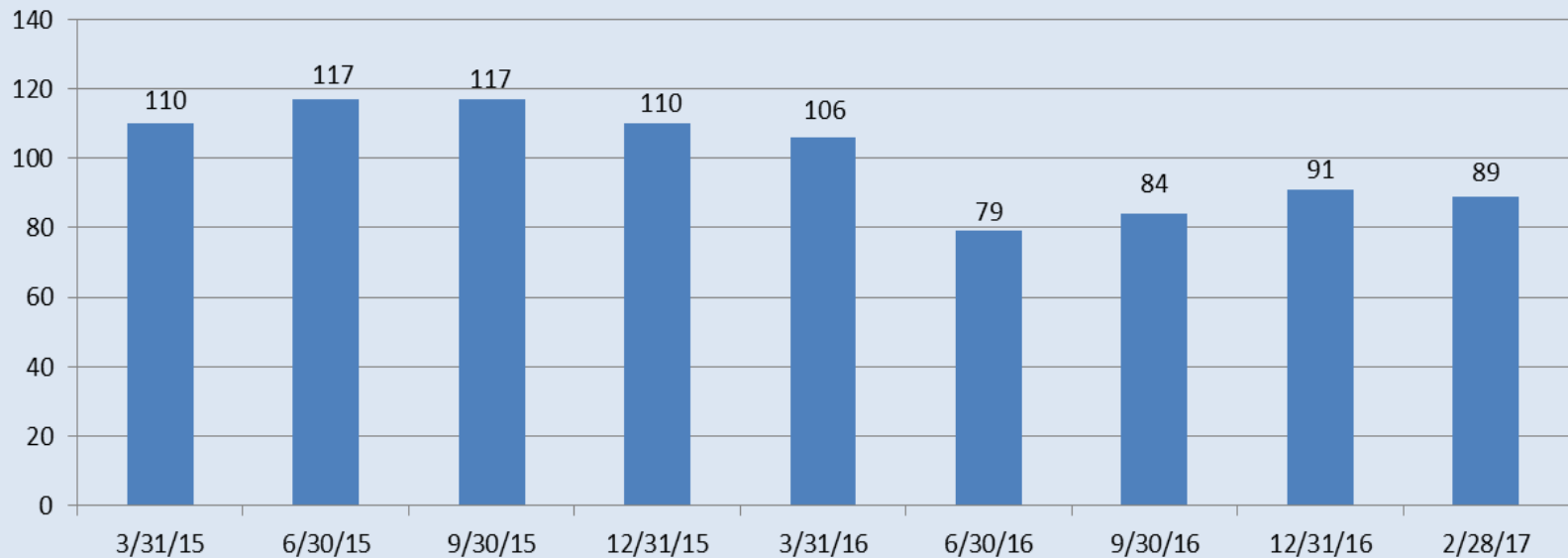
Month					Year-to-Date					
Actual	Budget	Variance		Prior Year		Actual	Budget	Variance		Prior Year
		\$	%					\$	%	
\$ 54,777	\$ 51,688	3,089	6.0%	\$ 50,250	<b>Net Patient Revenue</b>	\$ 437,932	\$ 446,071	(8,139)	-1.8%	\$ 395,785
24,757	24,650	107	0.4%	21,398	Other Revenue	198,708	197,549	1,159	0.6%	202,994
<b>79,534</b>	<b>76,338</b>	<b>3,196</b>	<b>4.2%</b>	<b>71,648</b>	<b>Total Revenue</b>	<b>636,640</b>	<b>643,620</b>	<b>(6,980)</b>	<b>-1.1%</b>	<b>598,779</b>
25,180	25,256	76	0.3%	25,537	Salaries & Wages	212,839	220,062	7,223	3.3%	203,914
20,056	20,072	16	0.1%	17,105	Employee Benefits	160,630	160,851	221	0.1%	161,115
29,550	27,857	(1,693)	-6.1%	24,548	Department Expenses	231,399	231,705	306	0.1%	203,948
3,097	3,097	0	0.0%	3,667	General Expenses	24,782	24,782	0	0.0%	29,336
<b>77,883</b>	<b>76,282</b>	<b>(1,601)</b>	<b>-2.1%</b>	<b>70,857</b>	<b>Total Expenses</b>	<b>629,650</b>	<b>637,400</b>	<b>7,750</b>	<b>1.2%</b>	<b>598,313</b>
<b>\$ 1,651</b>	<b>\$ 56</b>	<b>1,595</b>	<b>2848.2%</b>	<b>\$ 791</b>	<b>Operating Margin</b>	<b>\$ 6,990</b>	<b>\$ 6,220</b>	<b>770</b>	<b>12.4%</b>	<b>\$ 466</b>
(300)	(266)	(34)	-12.8%	(403)	Net Non-operating Income/(Loss)	(2,249)	(2,133)	(116)	-5.4%	(2,322)
<b>\$ 1,351</b>	<b>\$ (210)</b>	<b>1,561</b>	<b>743.3%</b>	<b>\$ 388</b>	<b>Net Income/(Loss)</b>	<b>\$ 4,741</b>	<b>\$ 4,087</b>	<b>654</b>	<b>16.0%</b>	<b>\$ (1,856)</b>

UI Health Metrics	FY17 YTD ACTUAL	FY17 (12 mos) Target	FY16 Actual
Operating Margin %	1.1%	1.1%	0.8%



Operating Margin includes Payments on Behalf for Benefits and Utilities. YTD Margin of 1.1% is on budget and slightly ahead of last year.

## Days Cash on Hand (Unrestricted)



Median Unrestricted Days Cash on Hand for UI Health's Bond Rating Category (S&P "A" and Moody's "A3") is 218 days.

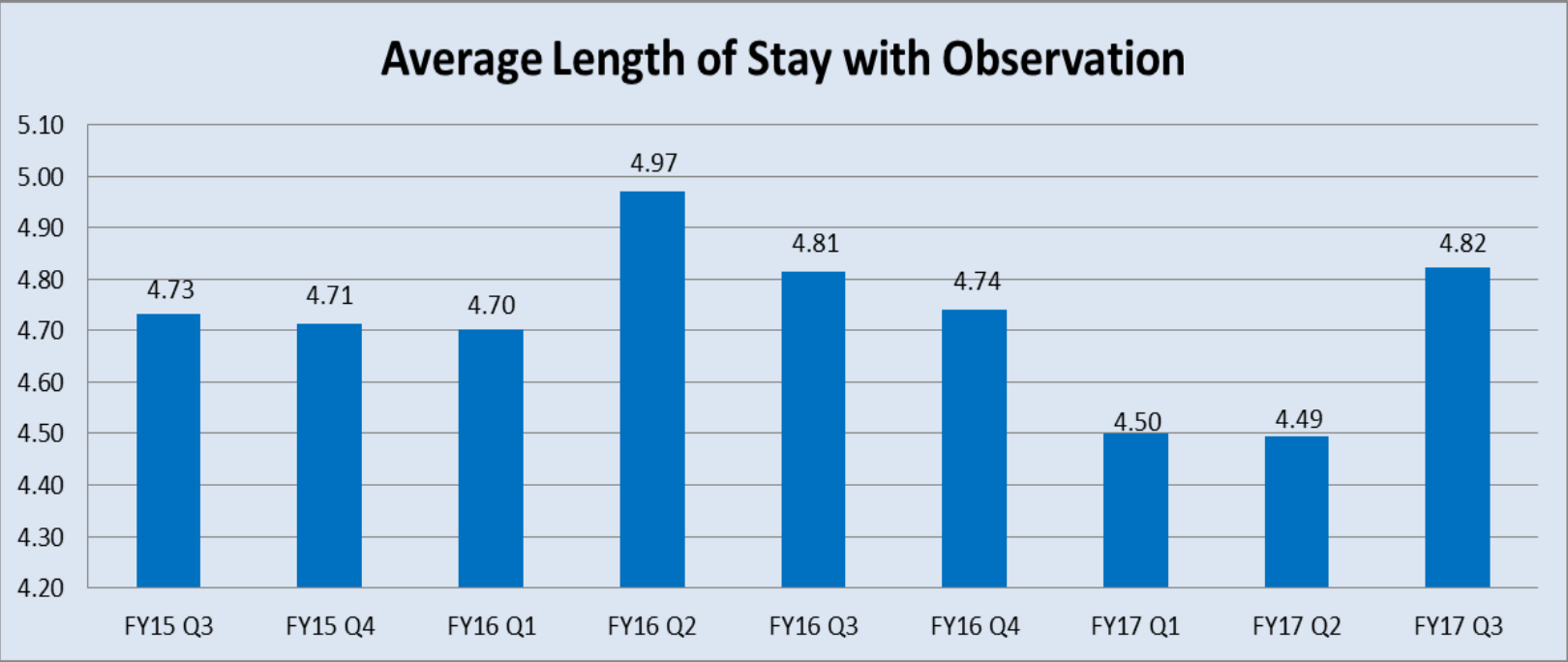


**UI HEALTH**

**MISSION PERSPECTIVE:**

**OPERATIONAL EFFECTIVENESS**

UI Health Metrics	FY17 Q3: 2 Month Actual + March Budget	FY17 Q3 Target	FY16 Q3 Actual
Average Length of Stay with Observation (Days)	4.82	4.80	4.81



FY 17 Budget Target is to be at 4.78 days by year-end.

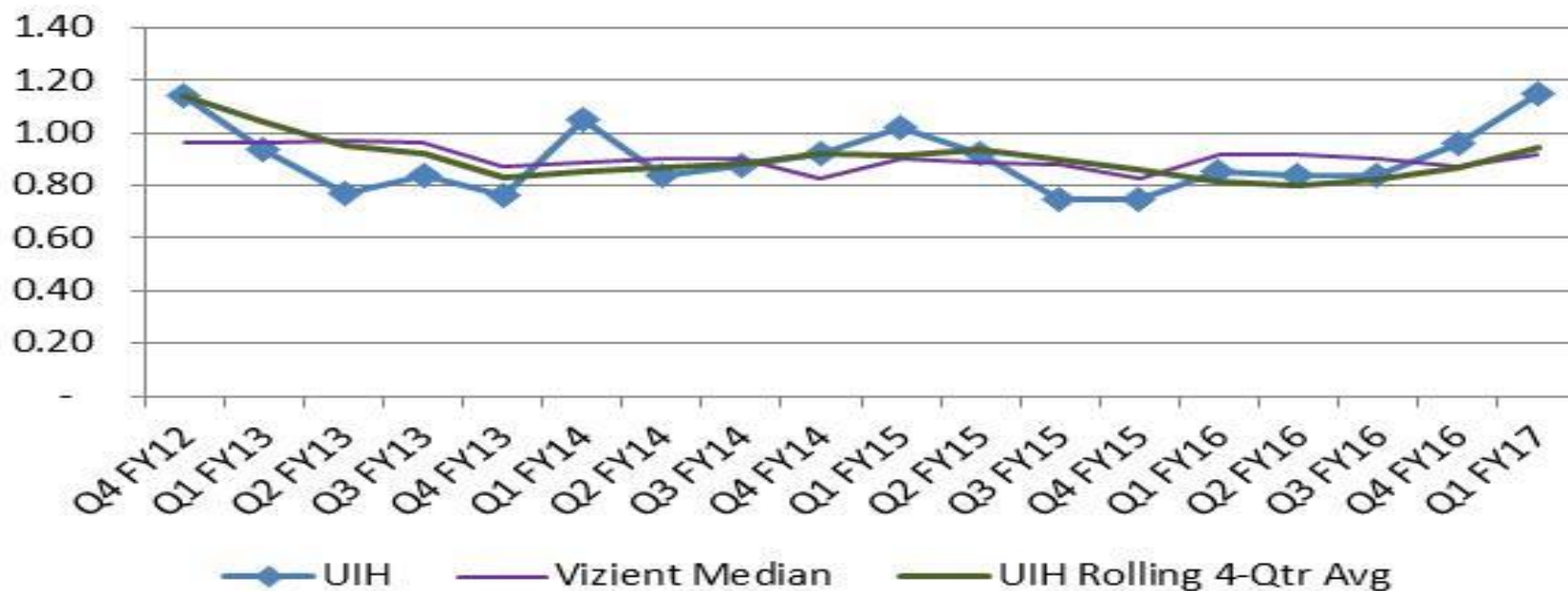
**UI HEALTH**

**MISSION PERSPECTIVE:**

**QUALITY & SAFETY**

Vizient Metrics (Q1 FY17, July – Sept 2016)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Total Inpatient Mortality Index (Observed/Expected Ratio)	96	0.95	1.15	0.92	113/135

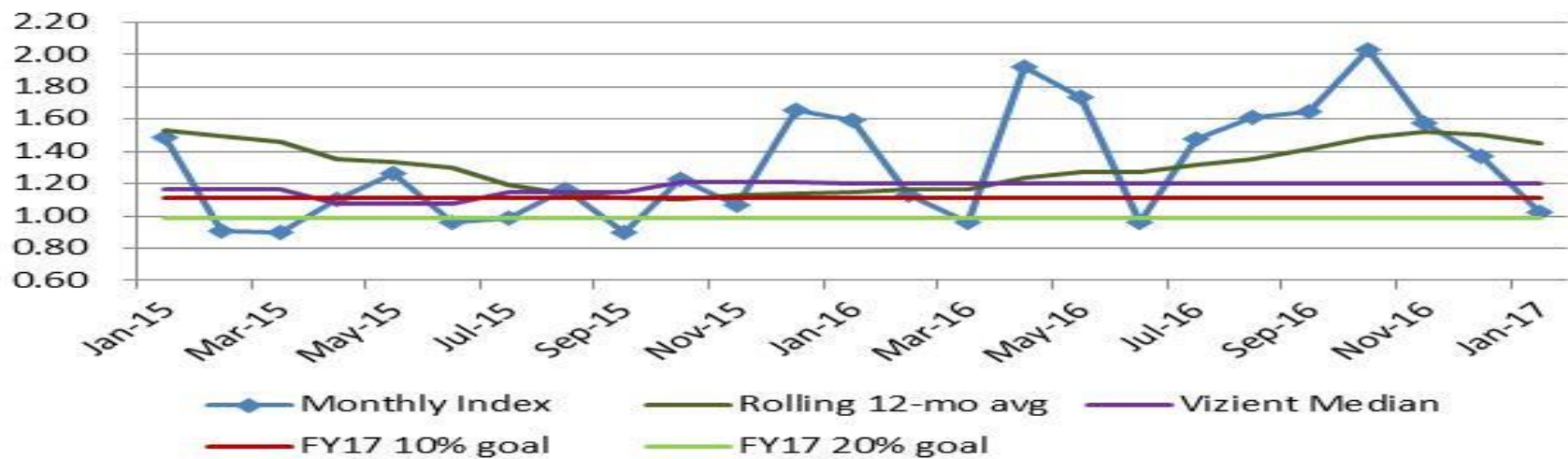
### UI Health Total Inpatient Mortality Index (Observed/Expected)



During Q1 FY17, UI Health’s Total Inpatient Mortality Index (observed/expected deaths) worsened to 1.15. Our rolling 4-quarter average slightly exceeds the Vizient median of 0.92.

Vizient Metrics (Q1 FY17, July – Sept 2016)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Sepsis Mortality (Observed/Expected)	54	1.43	1.70	1.20	118/135

### Monthly Sepsis Mortality Index (Observed/Expected)



	Jan 16	Feb 16	Mar 16	Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17
Number of Sepsis Cases by Month	77	64	91	64	83	72	75	89	74	76	66	64	67
Number of Sepsis Deaths by Month	12	11	11	11	15	8	16	18	20	13	14	8	7

During January 2017, UI Health’s rolling 12-month Sepsis Mortality index (observed/expected deaths) was 1.02, the third consecutive month of improving performance.

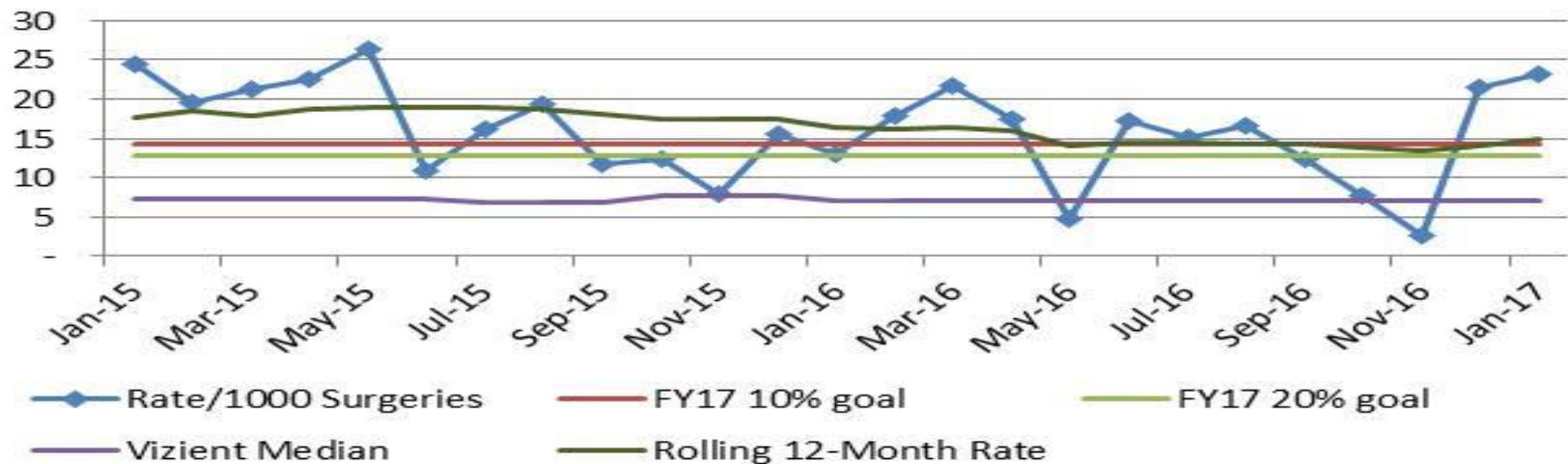
Our FY17 goal is to reduce our rolling 12-month Sepsis Mortality by at least 10% from our June 2016 baseline of 1.24.

**UI Health Mission Perspective:**  
Quality & Safety

\*PE = Pulmonary Embolism  
\*\*DVT = Deep Venous Thrombosis

Vizient Metrics (Q1 FY17, July – Sept 2016)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Patient Safety Indicator 12: Post-operative Pulmonary Embolism or Deep Vein Thrombosis (rate per 1000 surgical patients)	18	14.3	14.69	7.62	132/135

### UIH Post-Op PE\* or DVT\*\* per 1000 Surgeries



	Jan 16	Feb 16	Mar 16	Apr 16	May 16	Jun 15	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17
Number of Post-Op DVTs by Month	4	5	8	3	1	3	3	3	3	2	1	6	6
Number of Post-Op PEs by Month	1	3	1	5	1	4	3	4	2	2	0	2	5

During January 2017, UI Health’s rolling 12-month average post-operative PE/DVT rate worsened slightly from the previous month to 14.86, remaining higher than the Vizient median.

Our FY17 goal is to reduce our rolling 12-month average post-op PE/DVT rate by at least 10% from our June 2016 baseline of 15.89.

**UI Health Mission Perspective:**  
**Quality & Safety**

\*PE = Pulmonary Embolism

\*\*DVT = Deep Venous Thrombosis

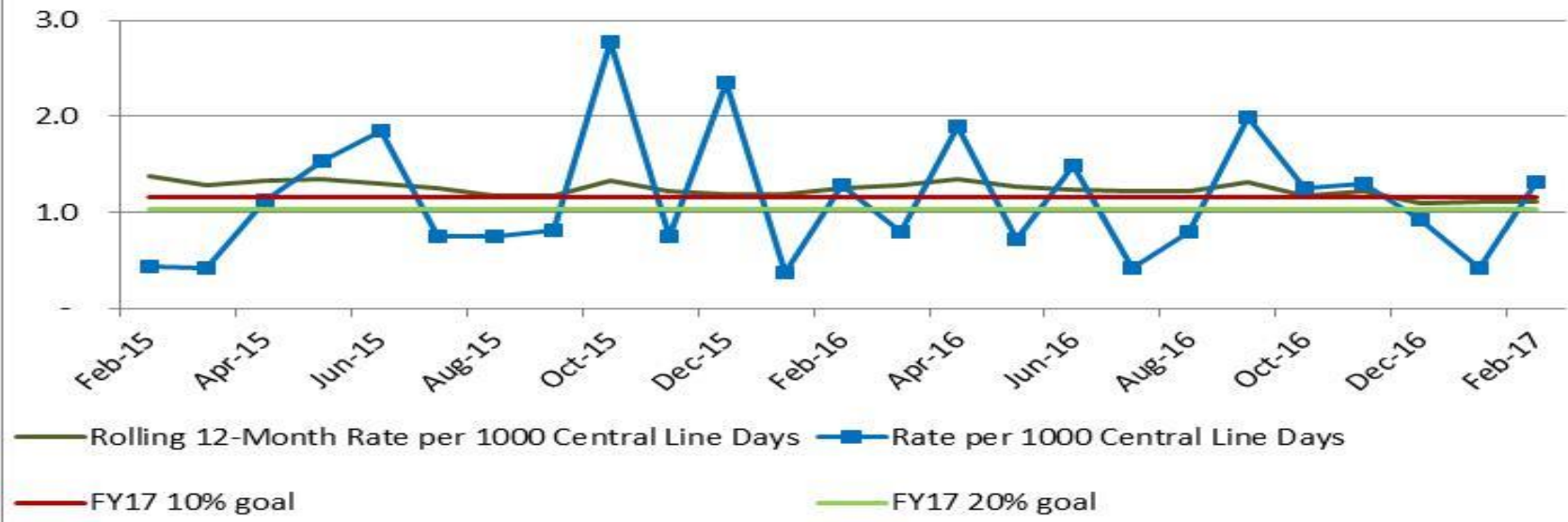


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Changing medicine. For good.



Vizient Metrics (Q4 FY16, Apr - Jun 2016)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Central Line-Associated Blood Stream Infections	1	0.40	0.39	0.20	91/134

### Monthly Whole-House Central Line-Associated Blood Stream Infections



	Feb 16	Mar 16	Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17
Number of Infections by Month	3	2	5	2	4	2	2	5	3	4	2	1	5

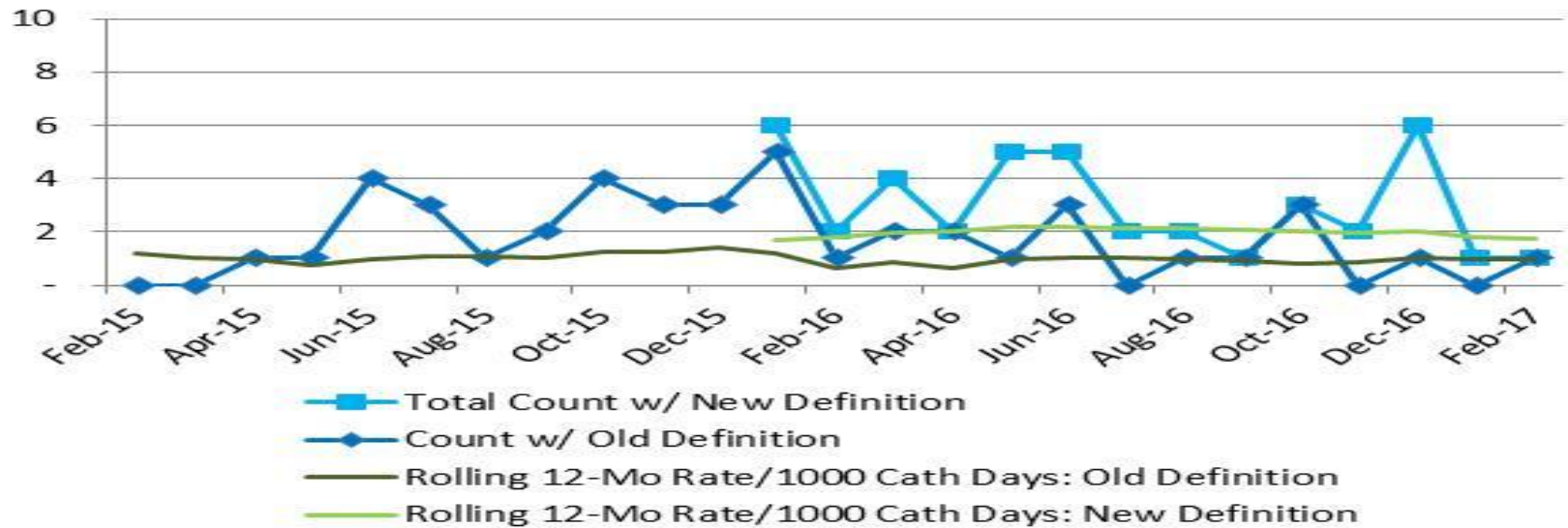
Our 12-month rolling average whole-house CLABSI rate held steady at 1.1 for the third consecutive month in February 2017.

Our FY17 goal is to reduce CLABSI by at least 10% from our June 2016 baseline of 1.23.

**UI Health Mission Perspective:**  
**Quality & Safety**

Vizient Metrics (Q1 FY17, July – Sept 2016)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Catheter-Associated Urinary Tract Infections	1	0.64	0.23	0.67	20/135

### Monthly Whole-House Catheter-Associated Urinary Tract Infections



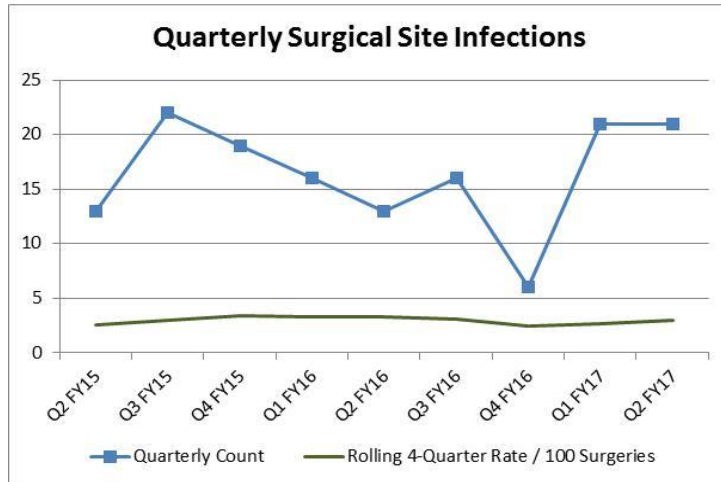
	Feb 16	Mar 16	Apr 16	May 16	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17
Number of Infections by Month	2	4	2	5	5	2	2	1	3	2	6	1	1

Our rolling 12-month average house-wide CAUTI rate held steady at 1.8 for the second consecutive month in February 2017.

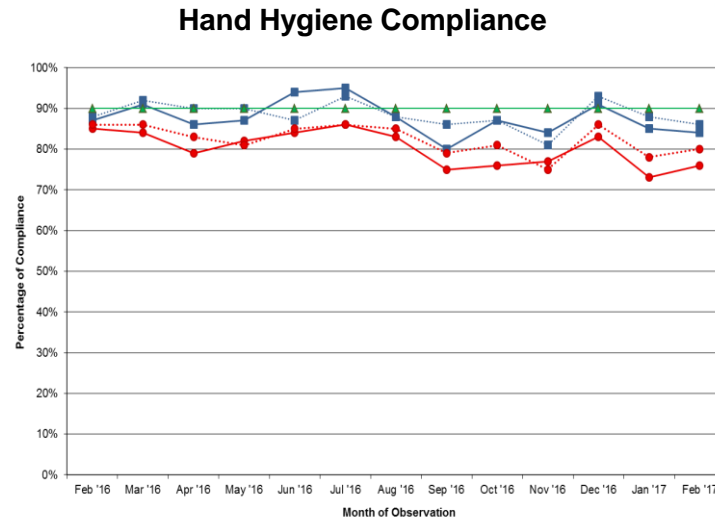
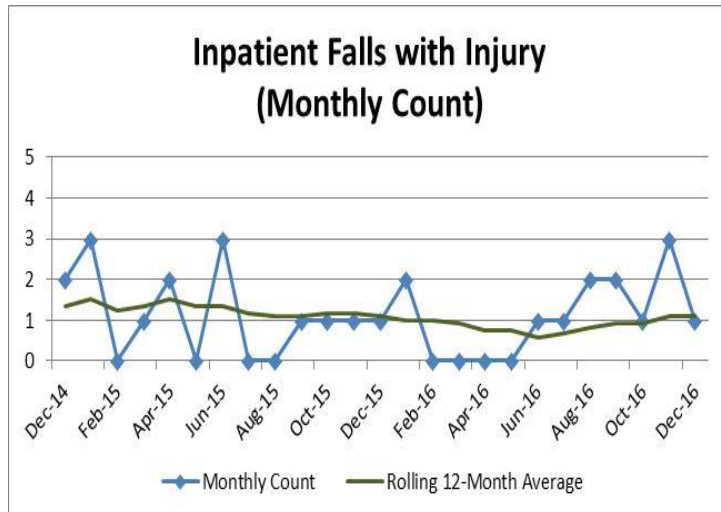
Our FY17 goal is to reduce CAUTIs by at least 10% from our June 2016 baseline of 2.2.



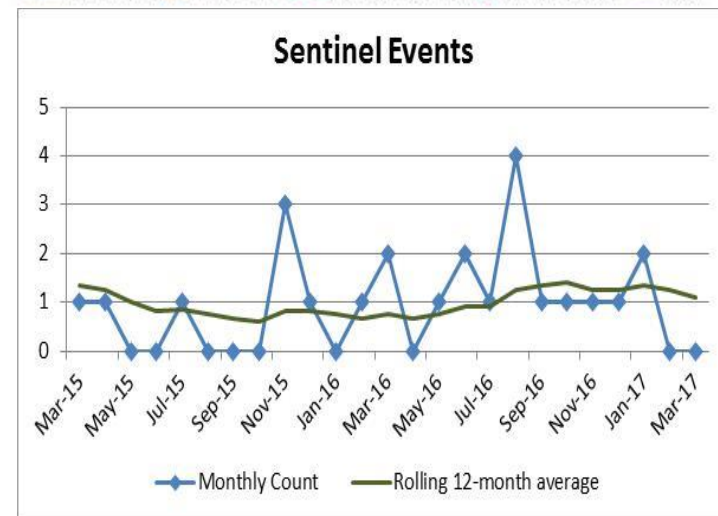
# Our Other Zero Harm Metrics



*\*Includes Abdominal and Vaginal Hysterectomies, C-Sections, Hip and Knee Arthroplasties, Vascular Surgeries, Cardiac Surgeries, Coronary Artery Bypass Grafts, Laminectomies, Craniotomies, Nephrectomies, Colon Surgeries.*

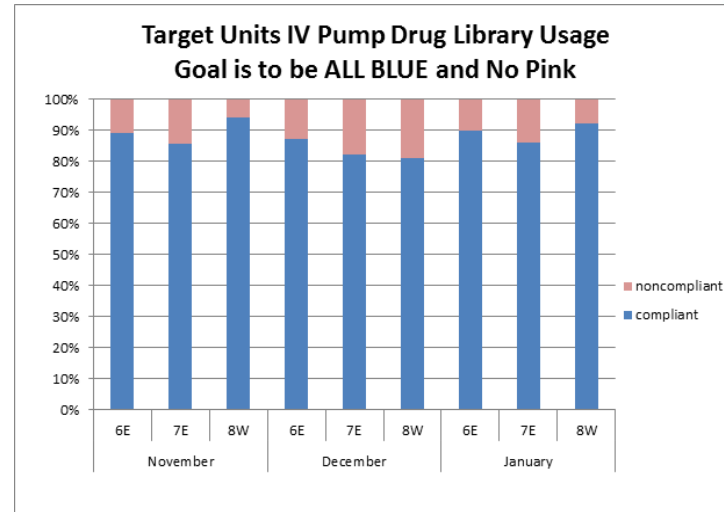
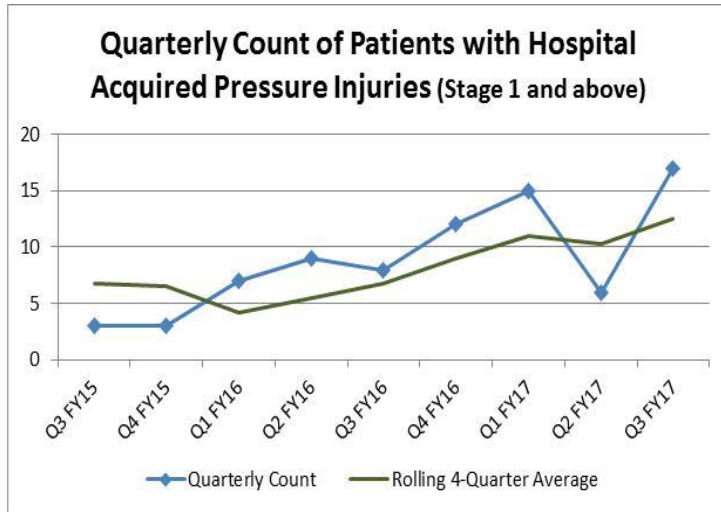


Legend: ICU Before (blue square), ICU After (blue square), Non-ICU Before (red circle), Non-ICU After (red circle), Goal (green triangle)

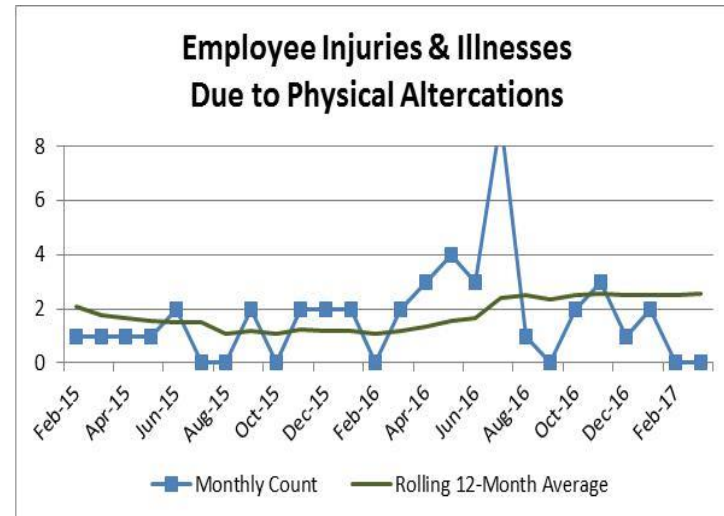
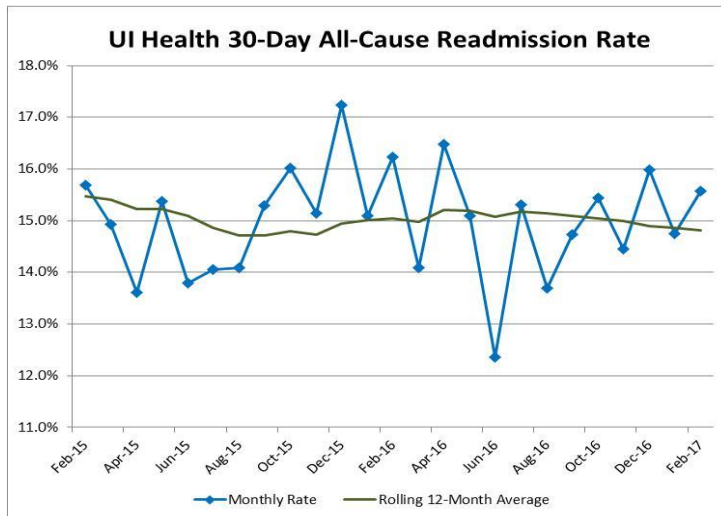


**A Sentinel Event is a patient safety event that results in death, permanent harm, or severe temporary harm.**

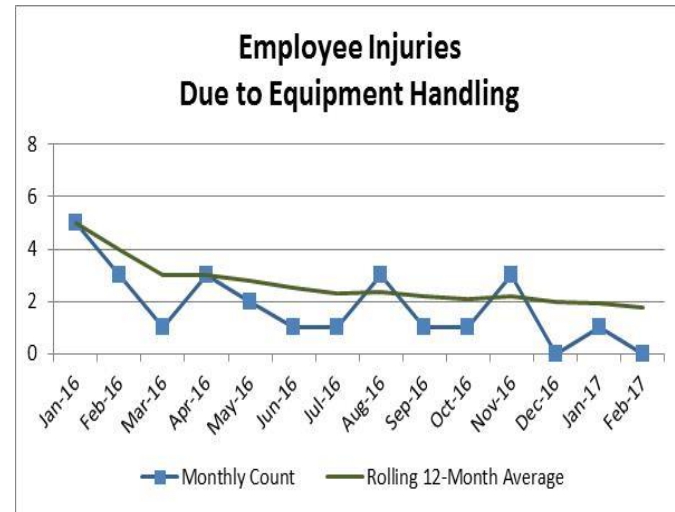
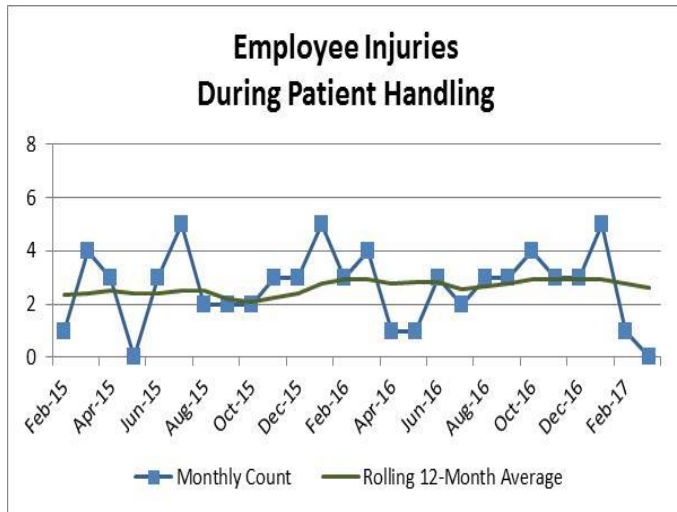
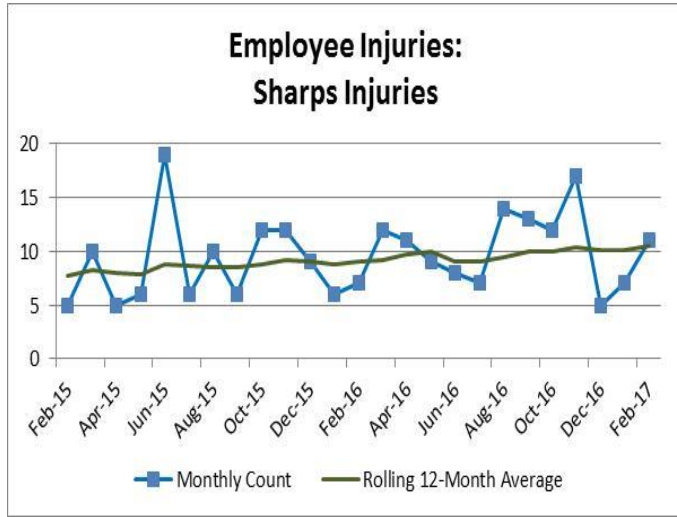
# OUR ZERO HARM METRICS, CONT



*Pressure ulcers are localized injuries to the skin and/or underlying tissue from pressure or friction.*

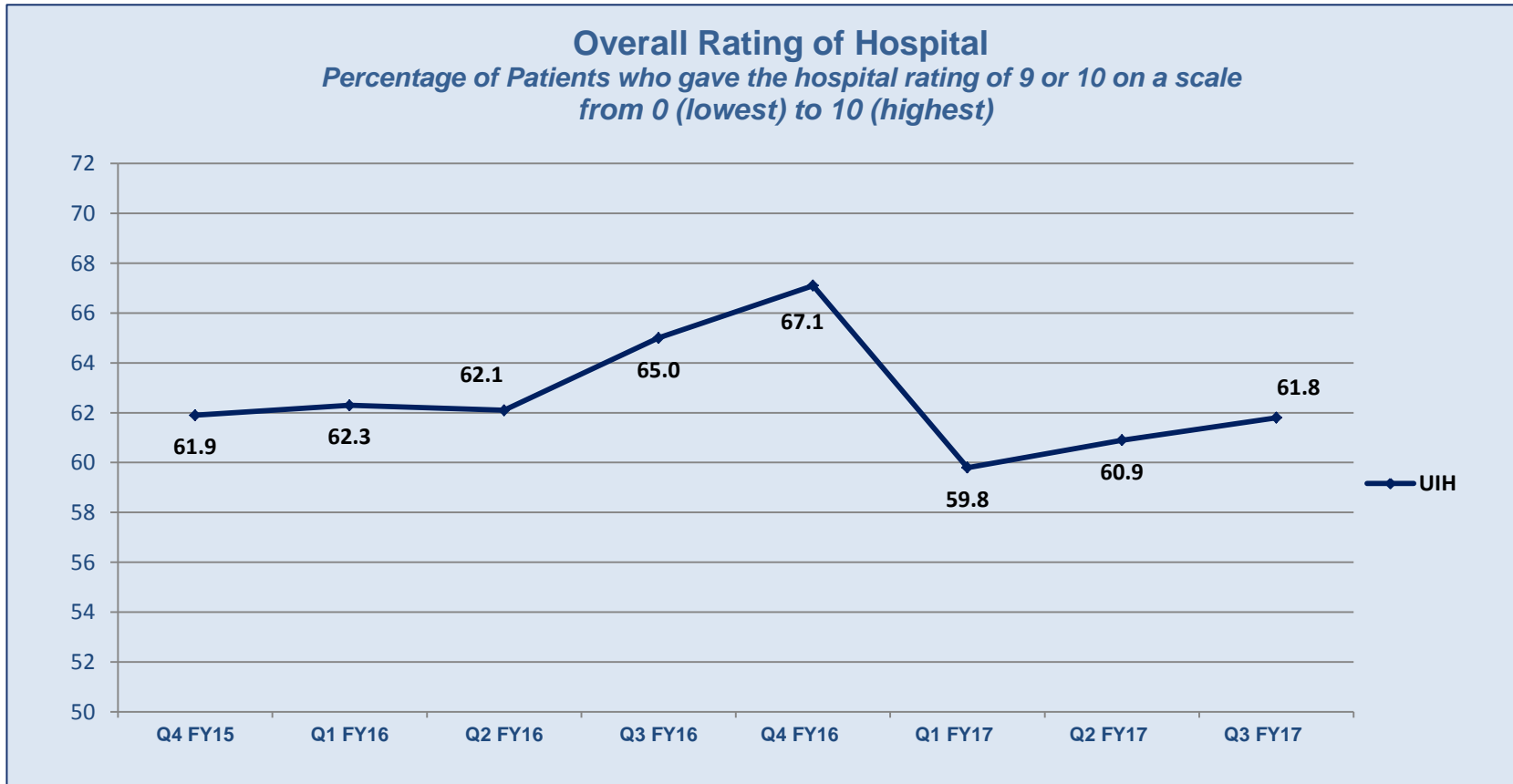


# OUR ZERO HARM METRICS, CONT

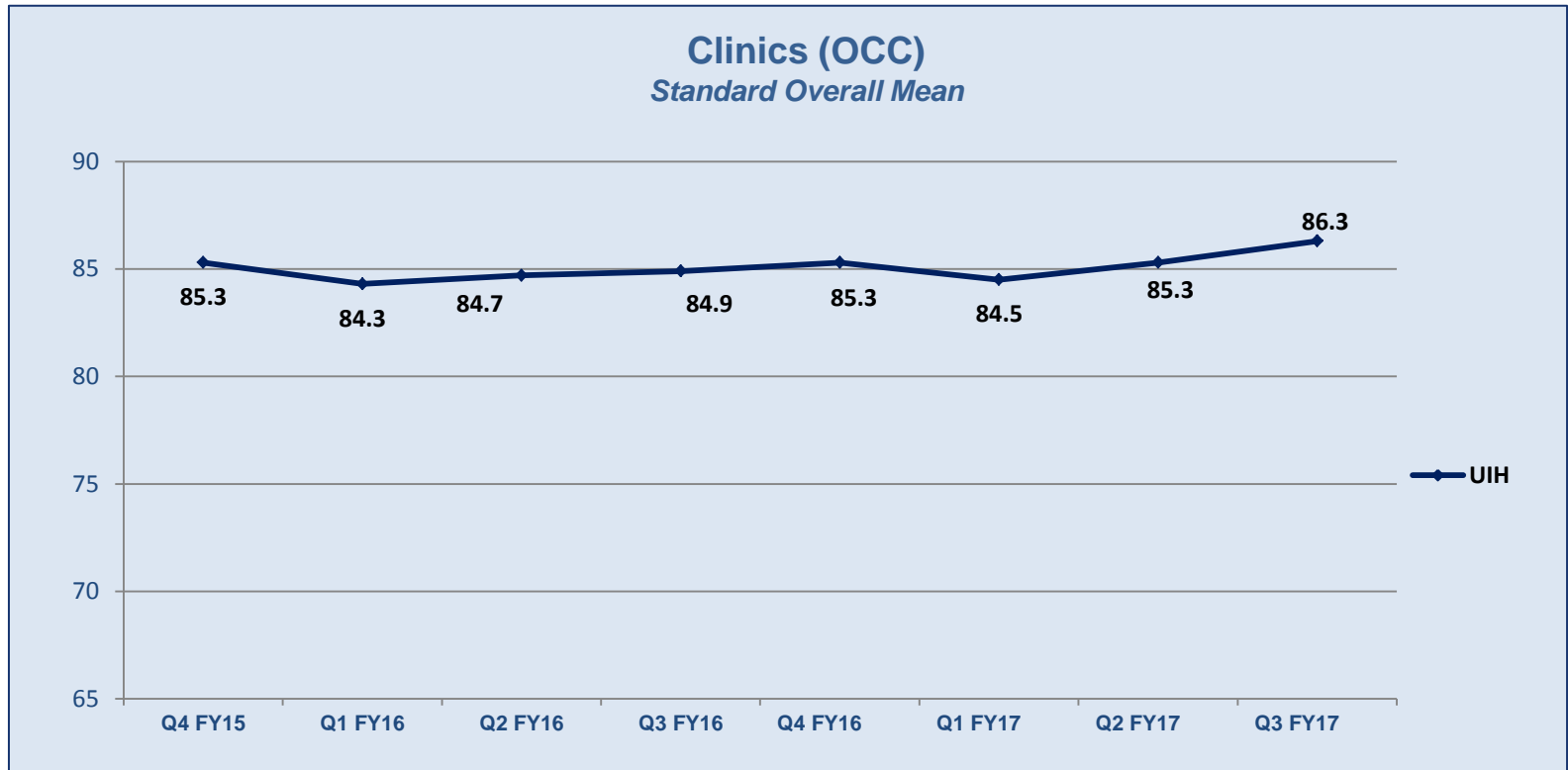


**UI HEALTH  
MISSION PERSPECTIVE:  
CUSTOMER**

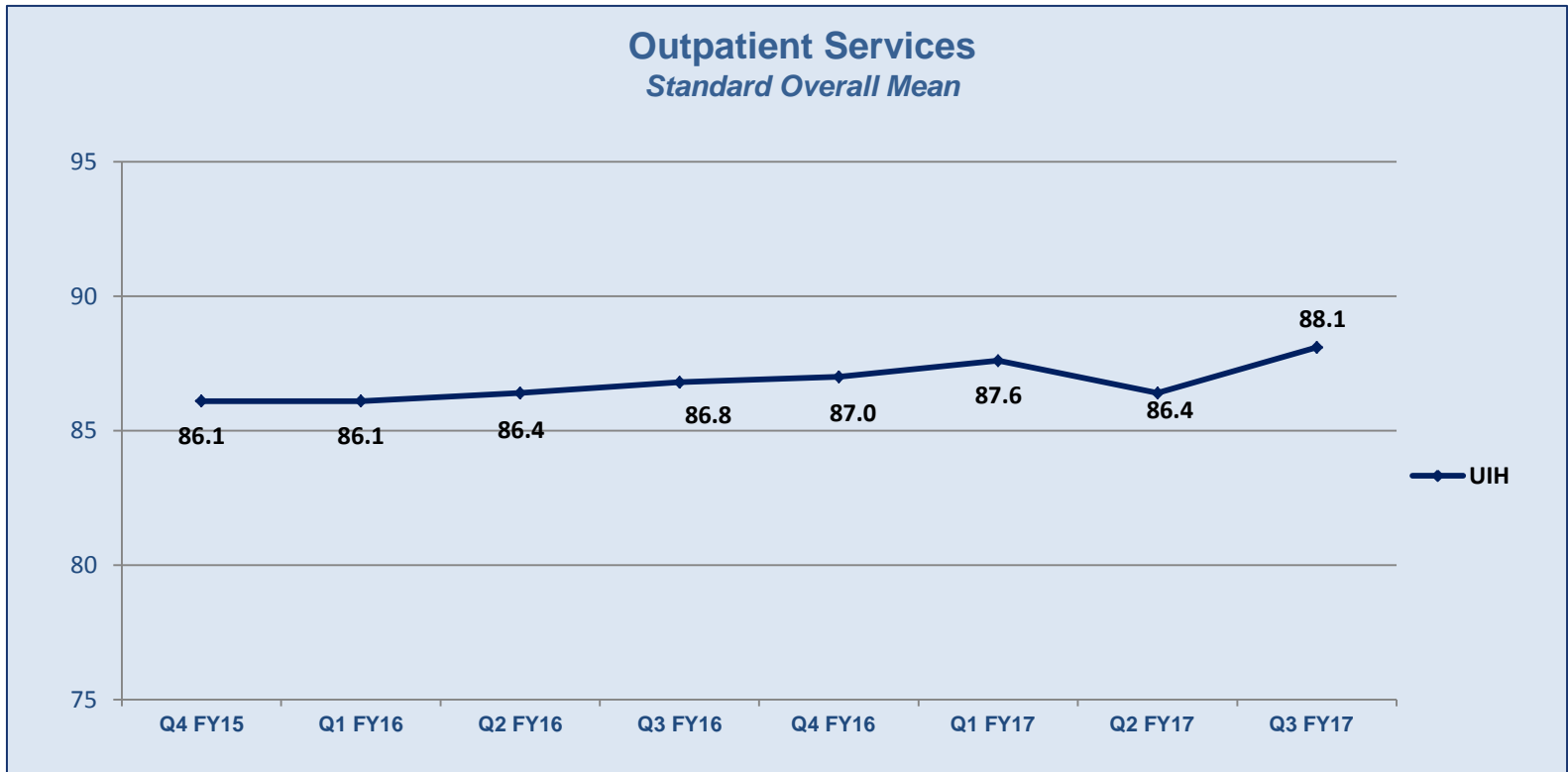
UI Health Metric	Current Quarter Q3 FY17	Prior Q3 FY16	UIH 8 Quarter Average
HCAHPS (Overall Rating of Hospital)	61.8	65.0	62.6



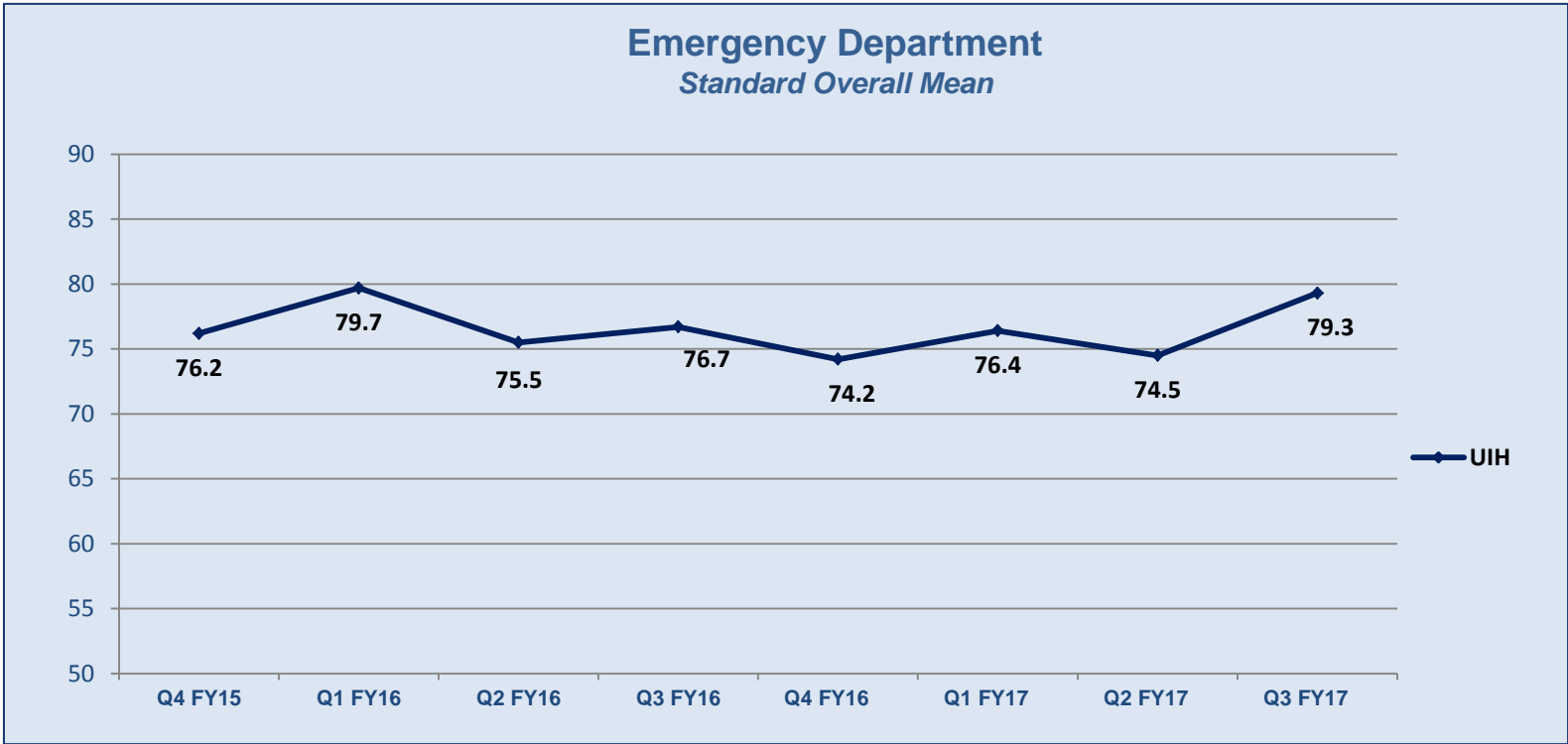
UI Health Metric	Current Quarter Q3 FY17	Prior Q3 FY16	UIH 8 Quarter Average
Clinics (OCC) Standard Overall Mean	86.3	84.9	85.1



UI Health Metric	Current Quarter Q3 FY17	Prior Q3 FY16	UIH 8 Quarter Average
Outpatient Services (Standard Overall Mean)	88.1	86.8	86.8

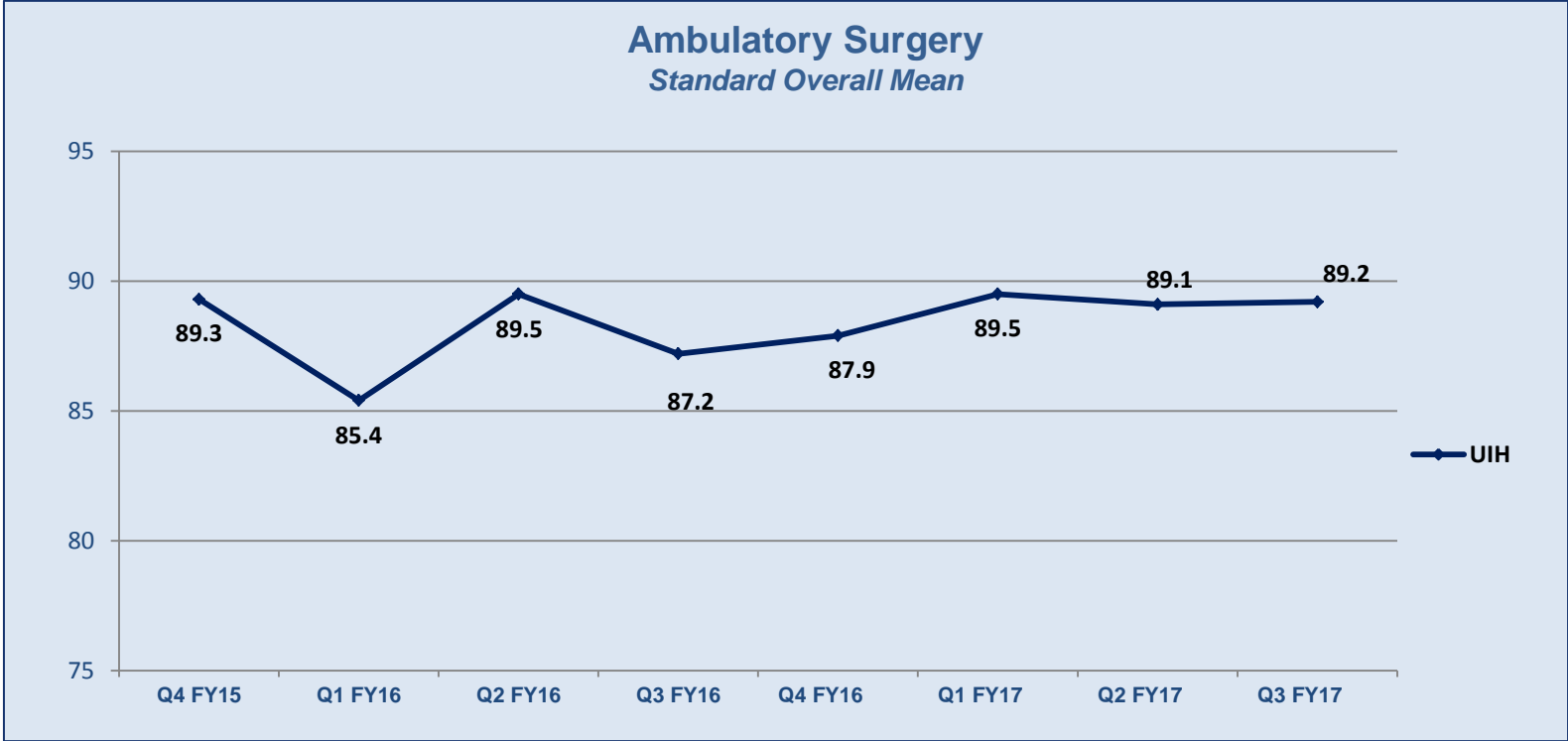


UI Health Metric	Current Quarter Q3 FY17	Prior Q3 FY16	UIH 8 Quarter Average
Emergency Department Standard Overall Mean	79.3	76.7	76.6





UI Health Metric	Current Quarter Q3 FY17	Prior Q3 FY16	UIH 8 Quarter Average
Ambulatory Surgery Standard Overall Mean	89.2	87.2	88.4



**UI Health Mission Perspective:  
Customer**

# DASHBOARD DEFINITIONS

UI Health Internal Measures	Definition/Notes	Source
Operating Margin %	Measures operating profitability as a percentage of operating revenue	UI Health Finance
Days Cash on Hand	Measures the number of days that the organization could continue to pay its average daily cash obligations with no new cash resources becoming available	UI Health Finance
Total Expense Net Bad Debt/Case Mix Index (CMI)-Adjusted Discharge	Total expense (area wage index-adjusted) divided by CMI-adjusted discharges. CMI-adjusted discharges is defined by CMI, multiplied by discharges, multiplied by gross total patient charges divided by gross inpatient charges.	Vizient (formerly University Healthcare Consortium)
Supply Expenses Per Adjusted Discharge	Defined by the supply expense less drugs, organs, and blood divided by SIS2-supply adjusted discharges. An organization's SIS2 is a value derived from a weighted average of the total number of discharges by their distribution of MS-DRG-weighted values, assigned based on expected supply-related consumption. Exclusions, Drug, organ procurement and blood expenses are excluded from the supply expense calculation	Vizient (formerly University Healthcare Consortium)
Patient Safety Indicator 12 Post-operative Pulmonary Embolism or Deep Vein Thrombosis (rate per 1000 surgical patients)	The rate of deep vein thrombosis (DVT) per 1000 is defined by the AHRQ Patient Safety Indicator (PSI) 12: postoperative pulmonary embolism (PE) or DVT rate	Vizient (formerly University Healthcare Consortium)
Sepsis Mortality	The sepsis mortality index represents all inpatient cases that had a discharge status of "expired" and a principal and/or secondary diagnosis/diagnoses related to sepsis: ICD-9 codes 038, 038.0-038.9, 785.52, 995.91, 995.92, 771.81, 998.02 (sepsis observed mortality rate divided by sepsis expected mortality rate).	Vizient (formerly University Healthcare Consortium)
30-Day All Cause Readmission Rate	The 30-day all cause readmission rate for adult, non-OB patients is the percentage of patients who return to the hospital for any reason within 30 days of discharge from the prior (index) admission.	Vizient (formerly University Healthcare Consortium)
Central Line Associated Blood Stream Infections	Laboratory-confirmed bloodstream infection (BSI) in a patient who had a central line within the 48 hour period before the development of the BSI and that is not related to an infection at another site - Rate per 1000 line days, all inpatient units combined	Vizient (formerly University Healthcare Consortium)
Catheter Associated Urinary Tract Infections	A UTI where an indwelling urinary catheter was in place for >2 calendar days on the date of event, with day of device placement being Day 1, and an indwelling urinary catheter was in place on the date of event or the day before. If an indwelling urinary catheter was in place for > 2 calendar days and then removed, the UTI criteria must be fully met on the day of discontinuation or the next day. - Rate per 1000 catheter days, all inpatient units combined	Vizient (formerly University Healthcare Consortium)