



UI Health Hospital Dashboard September 2017

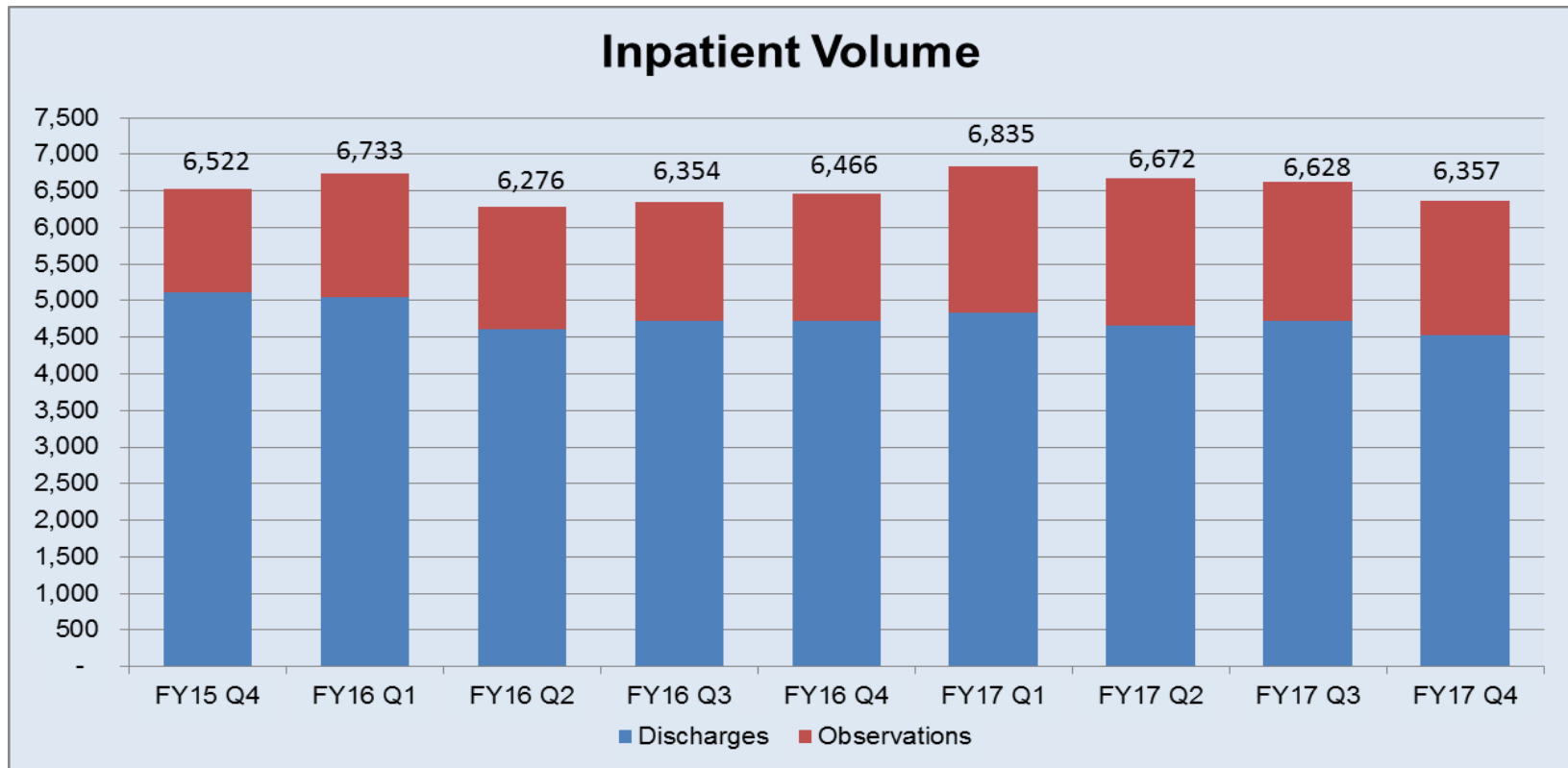
Reported to the Board of Trustees
September 7, 2017



UI Health

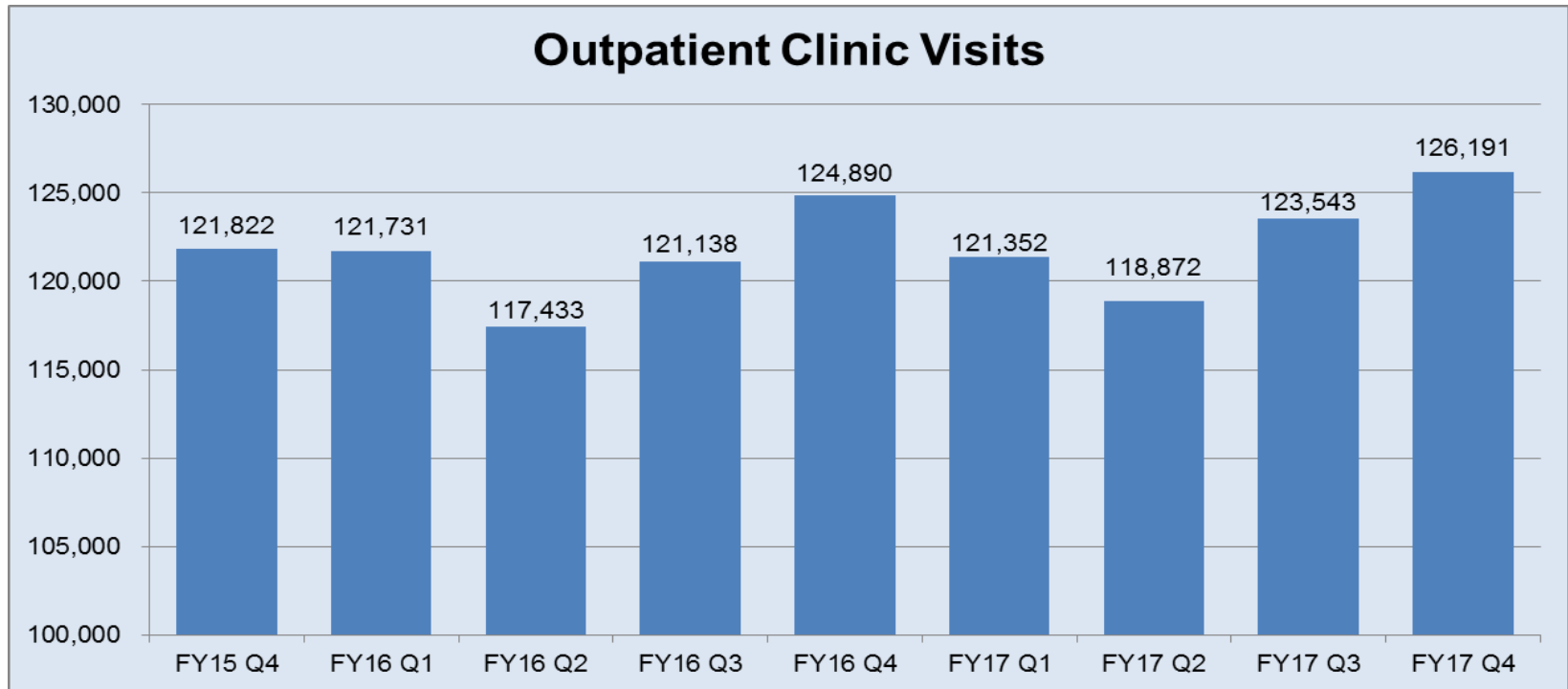


UI Health Metrics	FY17 Q4 Actual	FY17 Q4 Target	FY16 Q4 Actual	4th Quarter % change FY17 vs FY16
Discharges	4,558	4,680	4,720	Combined -1.7%
Observation Cases	1,797	1,651	1,746	



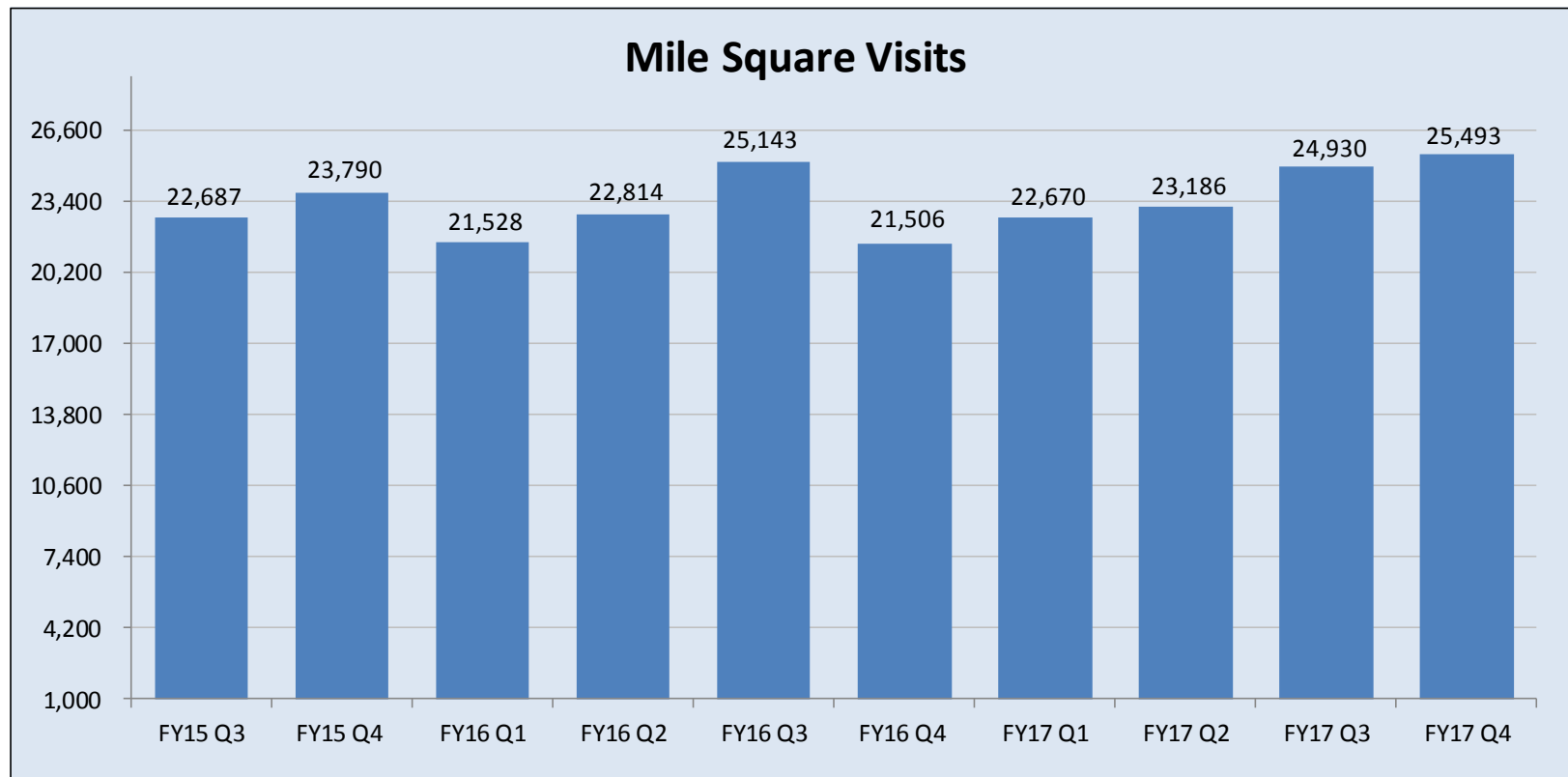
Combined Discharges and Observation Cases for the twelve months ending June 2017 was 4.4% above budget and 2.6% greater than last year.

UI Health Metrics	FY17 Q4 Actual	FY17 Q4 Target	FY16 Q4 Actual	4th Quarter % change FY17 vs FY16
Outpatient Clinic Visits	126,191	124,746	124,890	1.0%



Clinic visits for the twelve months ending June 2017 were 1.1% over budget and 1.0% above last year.

UI Health Metrics	FY17 Q4 Actual	FY17 Q4 Budget	FY16 Q4 Actual
Mile Square Visits	25,493	40,430	21,506



Mile Square visits for the twelve months ending June 2017 were 5.8% above last year.

UI HEALTH
MISSION PERSPECTIVE:
FINANCIAL PERFORMANCE

STATEMENT OF OPERATIONS – JUNE 2017

Pre-Audit

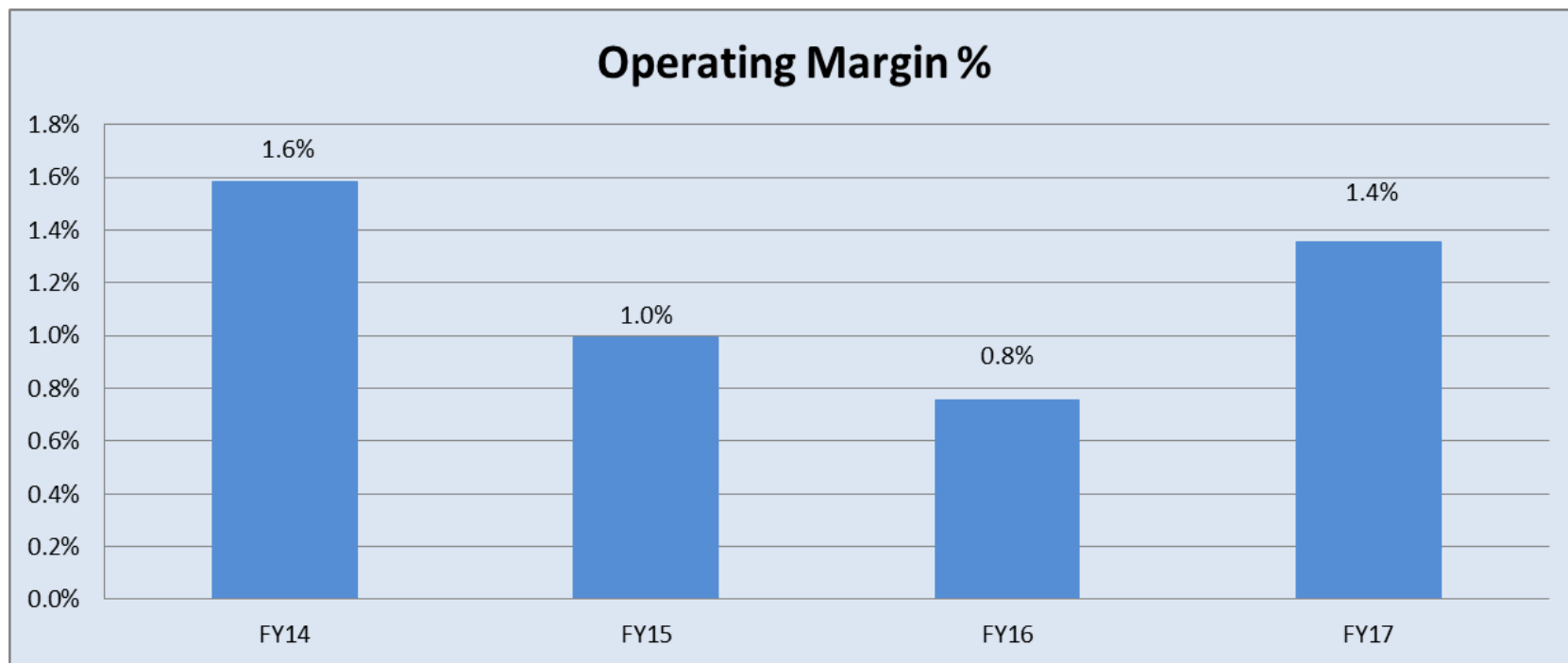
(\$ IN THOUSANDS)

Month					Year-to-Date					
Actual	Budget	Variance		Prior Year		Actual	Budget	Variance		Prior Year
		\$	%					\$	%	
\$ 63,693	\$ 55,135	8,558	15.5%	\$ 79,737	Net Patient Revenue	\$ 672,725	\$ 670,184	2,541	0.4%	\$ 620,406
26,288	24,846	1,442	5.8%	63,446	Other Revenue	301,807	298,236	3,571	1.2%	302,390
89,981	79,981	10,000	12.5%	143,183	Total Revenue	974,532	968,420	6,112	0.6%	922,796
30,838	27,115	(3,723)	-13.7%	25,510	Salaries & Wages	325,743	330,362	4,619	1.4%	308,656
20,104	20,107	3	0.0%	53,482	Employee Benefits	241,000	241,303	303	0.1%	241,807
35,854	28,881	(6,973)	-24.1%	60,208	Department Expenses	358,963	349,140	(9,823)	-2.8%	331,478
1,532	3,098	1,566	50.5%	(5,333)	General Expenses	35,628	37,174	1,546	4.2%	33,927
88,328	79,201	(9,127)	-11.5%	133,867	Total Expenses	961,334	957,979	(3,355)	-0.4%	915,868
\$ 1,653	\$ 780	873	111.9%	\$ 9,316	Operating Margin	\$ 13,198	\$ 10,441	2,757	26.4%	\$ 6,928
2,906	(267)	3,173	1188.4%	513	Net Non-operating Income/(Loss)	(380)	(3,200)	2,820	88.1%	(2,612)
\$ 4,559	\$ 513	4,046	788.7%	\$ 9,829	Net Income/(Loss)	\$ 12,818	\$ 7,241	5,577	77.0%	\$ 4,316

UI Health Mission Perspective:
Financial Performance



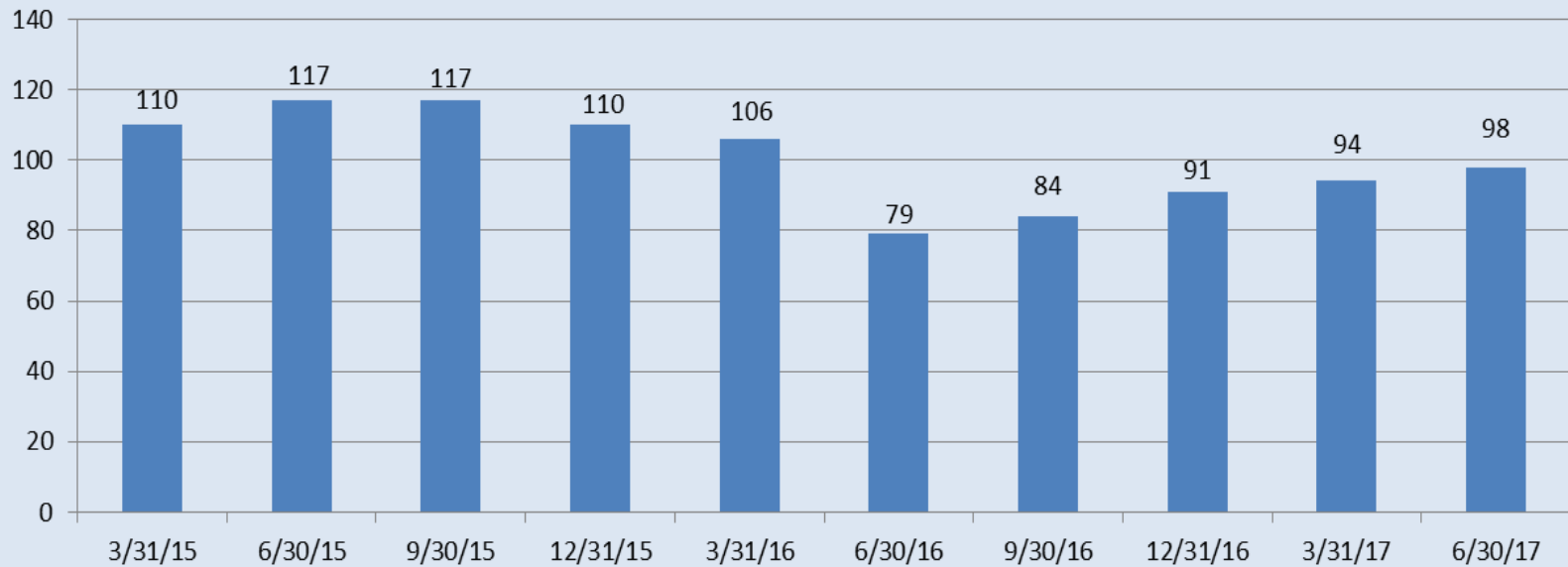
UI Health Metrics	FY17 YTD ACTUAL	FY17 (12 mos) Target	FY16 Actual
Operating Margin %	1.4%	1.1%	0.8%



Operating Margin includes Payments on Behalf for Benefits and Utilities. YTD Margin of 1.4% is ahead of budget and last year.

Pre-Audit

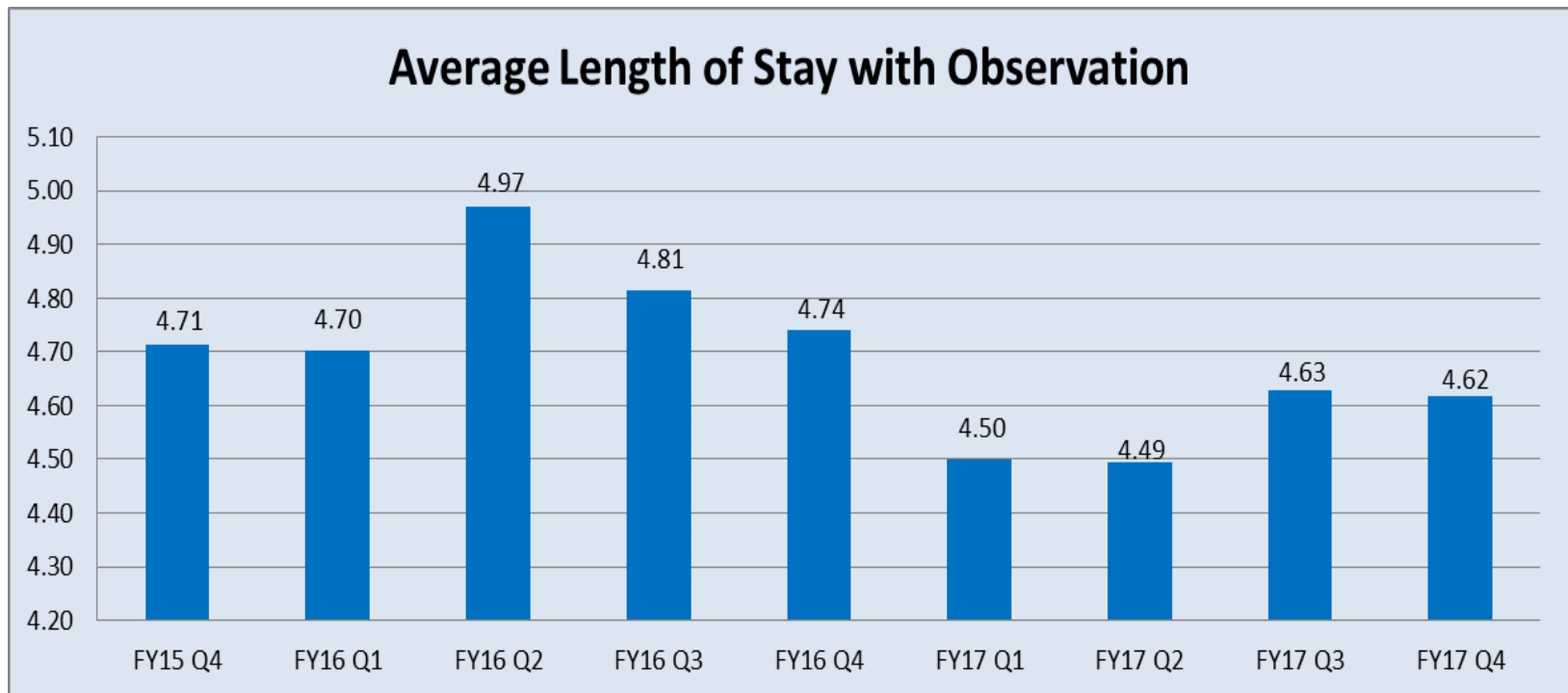
Days Cash on Hand (Unrestricted)



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

UI HEALTH
MISSION PERSPECTIVE:
OPERATIONAL EFFECTIVENESS

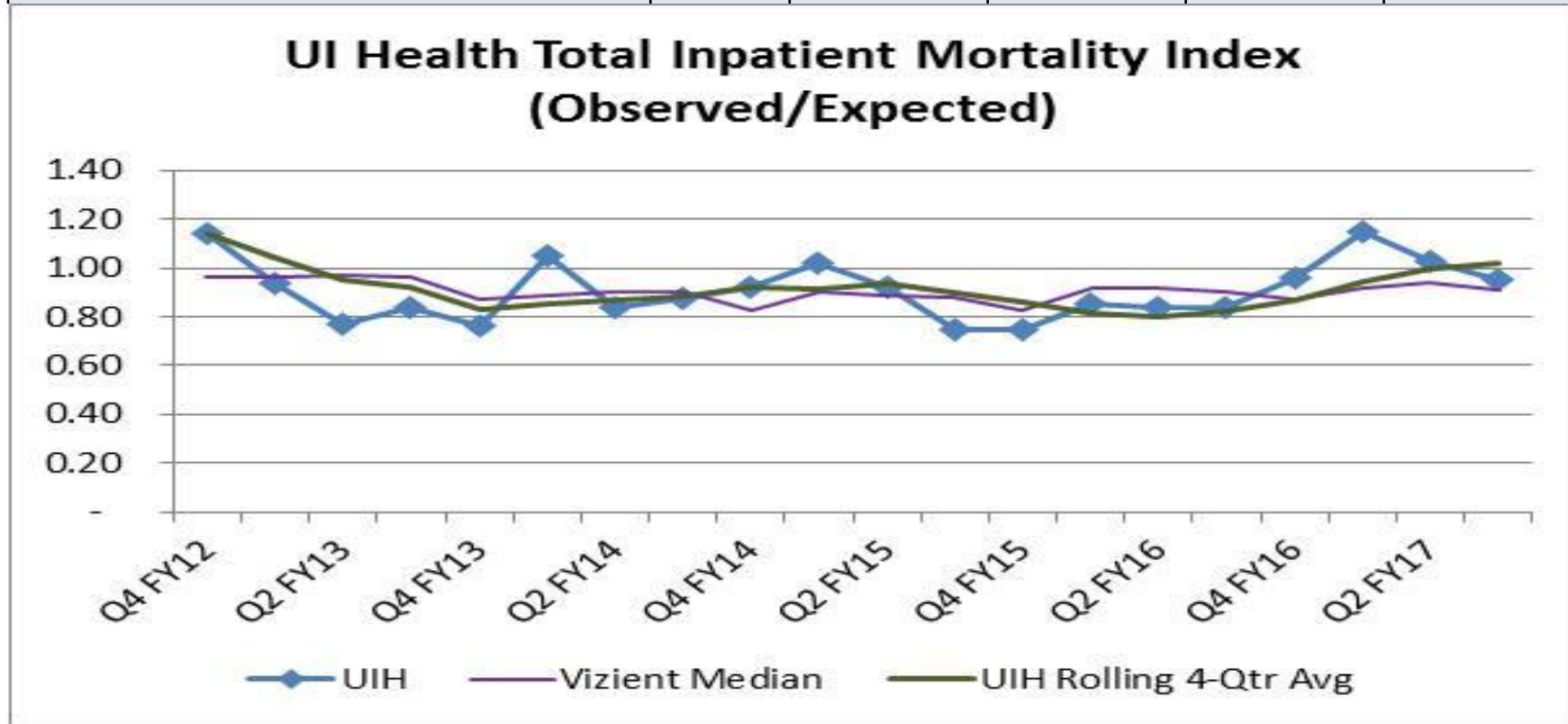
UI Health Metrics	FY17 Q4 Actual	FY17 Q4 Target	FY16 Q4 Actual
Average Length of Stay with Observation (Days)	4.62	4.79	4.74



FY17 Budget Target was to be at 4.78 days at June 2017.

UI HEALTH
MISSION PERSPECTIVE:
QUALITY & SAFETY

Vizient Metrics (Q3 FY17, Jan – Mar 2017)	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)	83	1.02	0.95	0.91	87/140

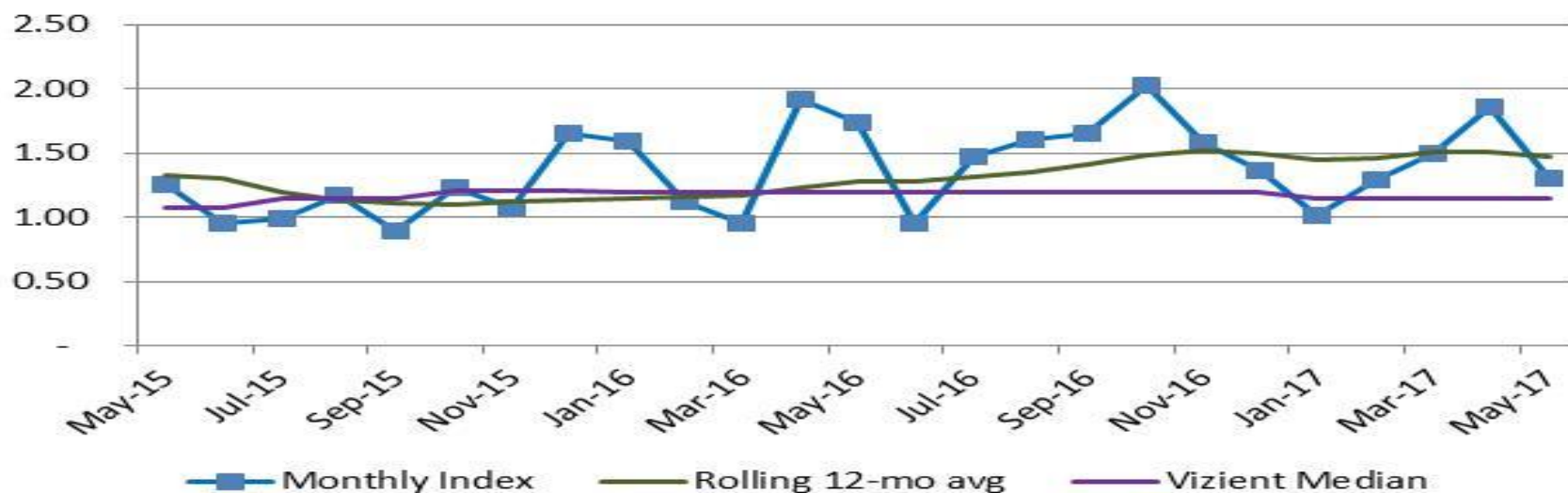


During Q3 FY17, UI Health's Total Inpatient Mortality Index (observed/expected deaths) improved to 0.95.

Our rolling 4-quarter average of 1.02 exceeds the Vizient median of 0.91.

Vizient Metrics (Q3 FY17, Jan – Mar 2017)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All Vizient	
				Vizient Median Score	Current UIH Rank
Sepsis Mortality (Observed/Expected)	34	1.60	1.34	1.15	109/140

Monthly Sepsis Mortality Index (Observed/Expected)



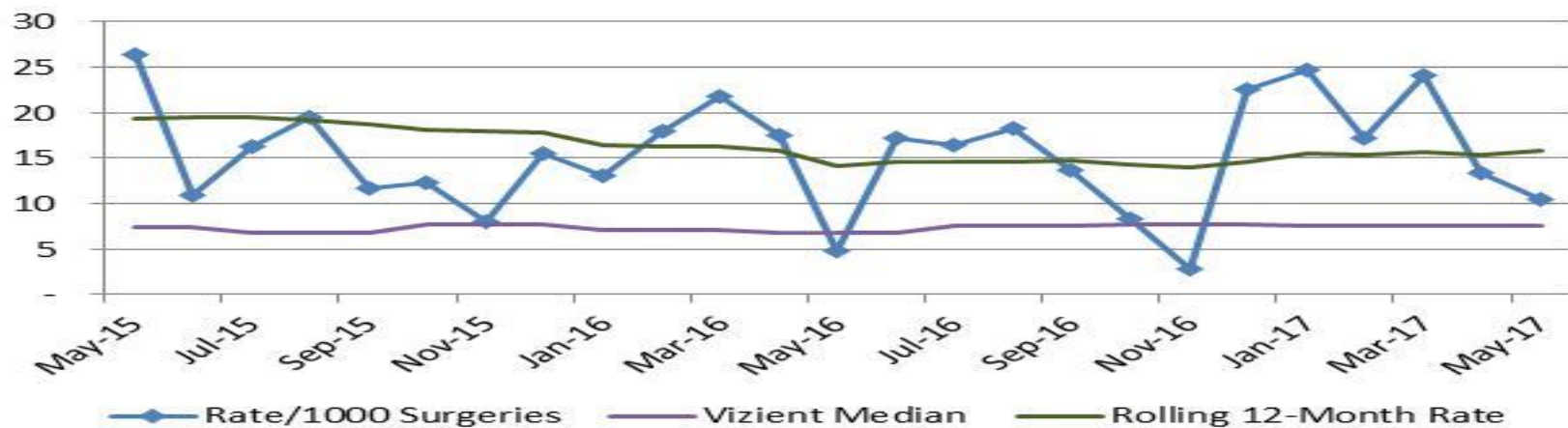
	May 16	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17
Number of Sepsis Cases by Month	83	72	75	89	74	76	66	64	67	66	90	75	65
Number of Sepsis Deaths by Month	15	8	16	18	20	13	14	8	7	10	20	18	9

During May 2017, UI Health's Sepsis Mortality index (observed/expected deaths) was 1.31, an improvement from the previous month.

Our rolling 4-quarter average of 1.47 exceeds the Vizient median of 1.15.

Vizient Metrics (Q3 FY17, Jan – Mar 2017)	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)	24	14.7	20.07	7.56	140/140

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



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

During May 2017, UI Health's post-operative PE/DVT rate decreased to 10.50.

Our rolling 4-quarter average of 15.78 remains higher than the Vizient median of 7.56.

Vizient Metrics (Q3 FY17, Jan – Mar 2017)	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	0.30	0.40	0.20	112/140

Monthly Whole-House Central Line-Associated Blood Stream Infections



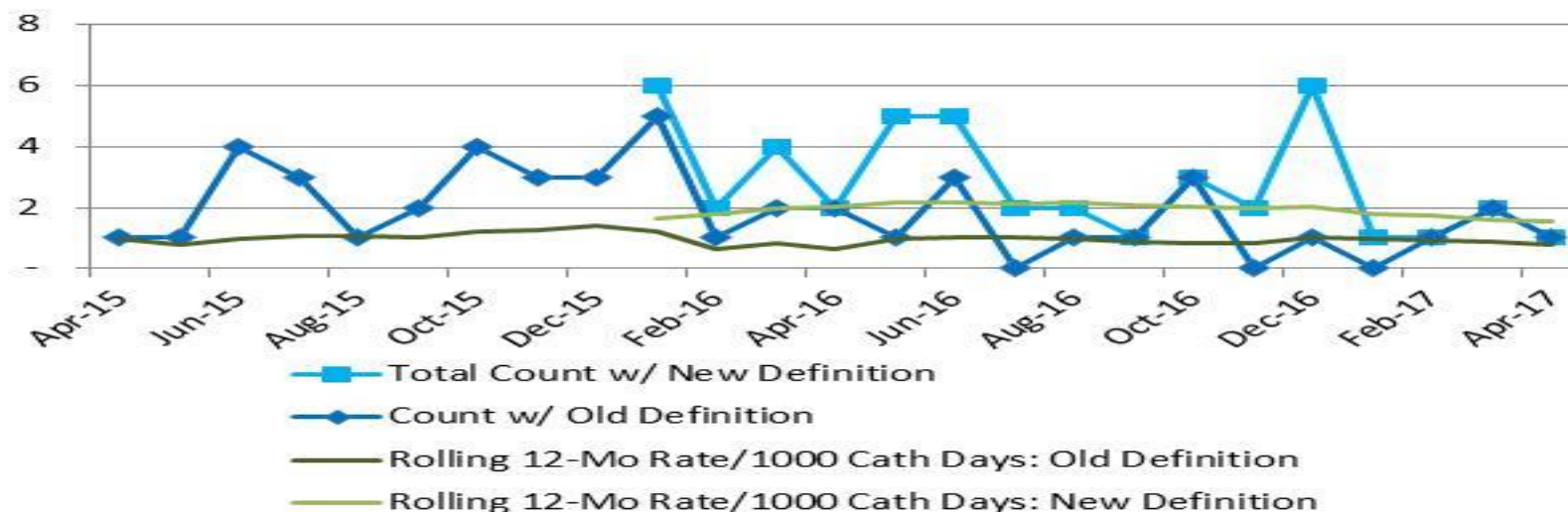
	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17
Number of Infections by Month	4	2	2	5	3	4	2	1	6	2	2	1	4

Our whole-house CLABSI rate increased to 1.0 in June 2017.

Our whole-house rolling 12-month average CLABSI rate of 0.9 marks our best performance since we began tracking CLABSI performance in 2013.

Vizient Metrics (Q3 FY17, Jan – Mar 2017)	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	0	0.41	0.00	0.00	1/140

Monthly Whole-House Catheter-Associated Urinary Tract Infections

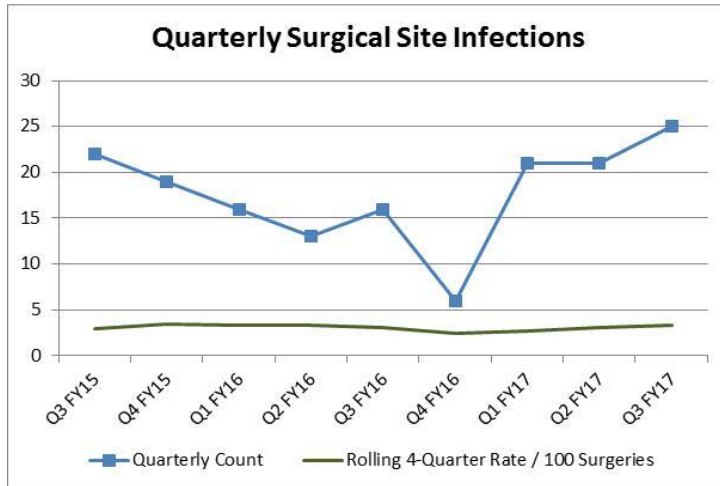


	Jun 16	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17
Number of Infections by Month	5	2	2	1	3	2	6	1	1	2	1	0	2

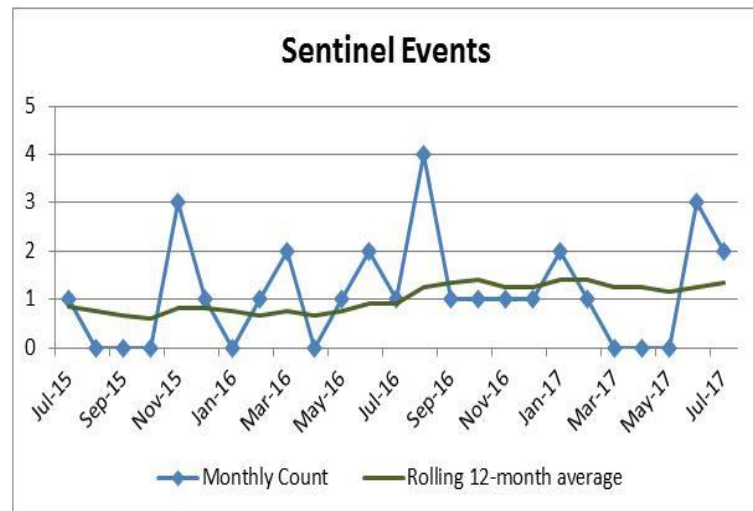
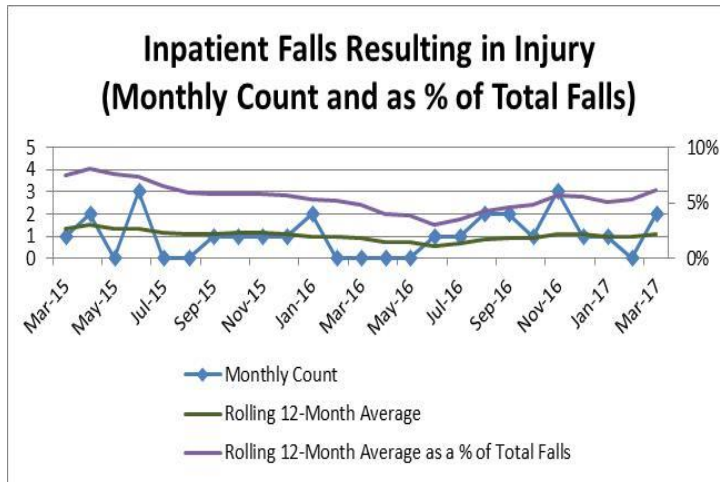
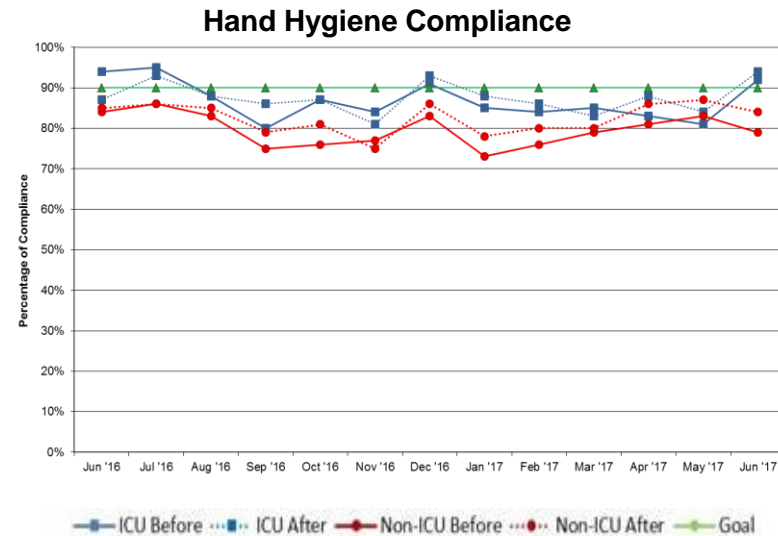
Our whole-house CAUTI rate increased to 1.2 in June 2017.

Our whole-house rolling 12-month average CAUTI rate of 1.2 marks our best performance since the definition of CAUTIs was expanded (to include nearly twice as many cases) in January 2016.

OTHER ZERO HARM METRICS



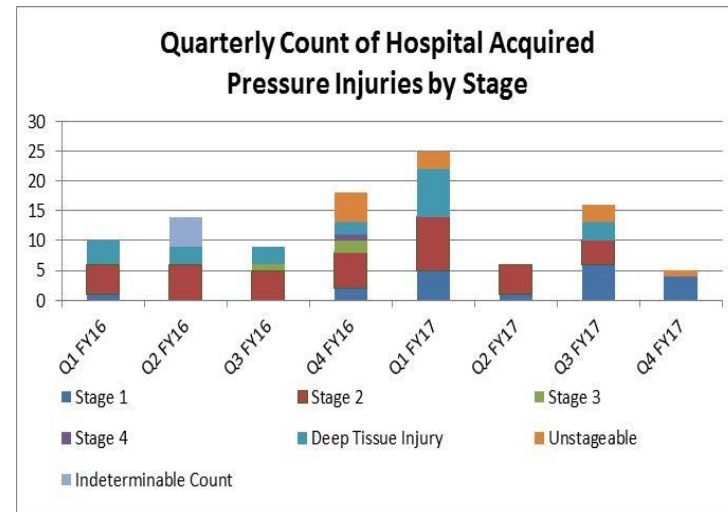
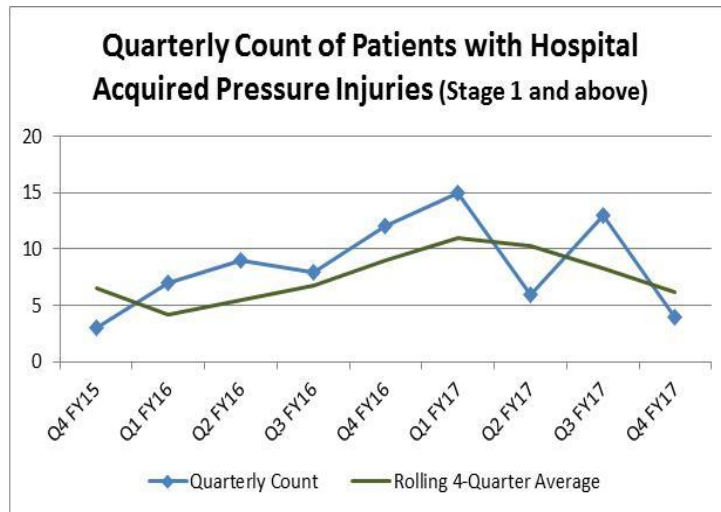
**Includes Abdominal and Vaginal Hysterectomies, C-Sections, Hip and Knee Arthroplasties, Vascular Surgeries, Cardiac Surgeries, Coronary Artery Bypass Grafts, Laminectomies, Craniotomies, Nephrectomies, Colon Surgeries.*



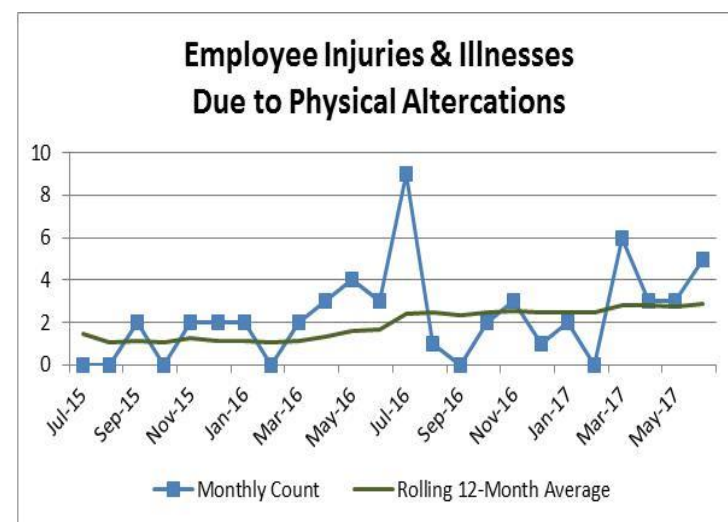
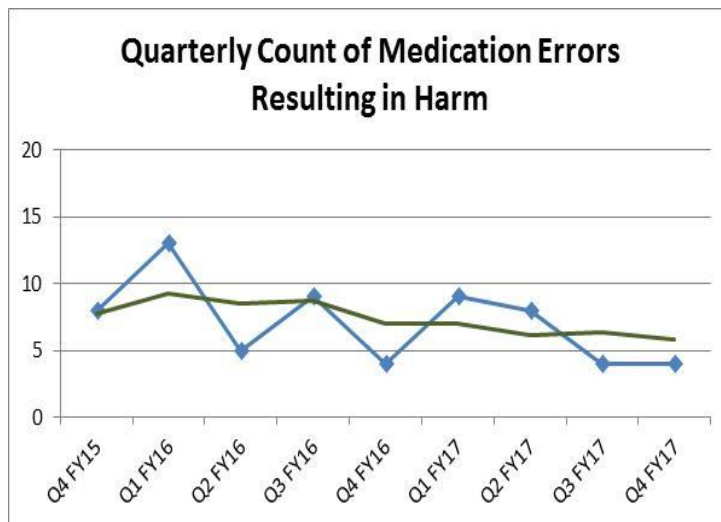
A **Sentinel Event** is a patient safety event that results in death, permanent harm, or severe temporary harm.



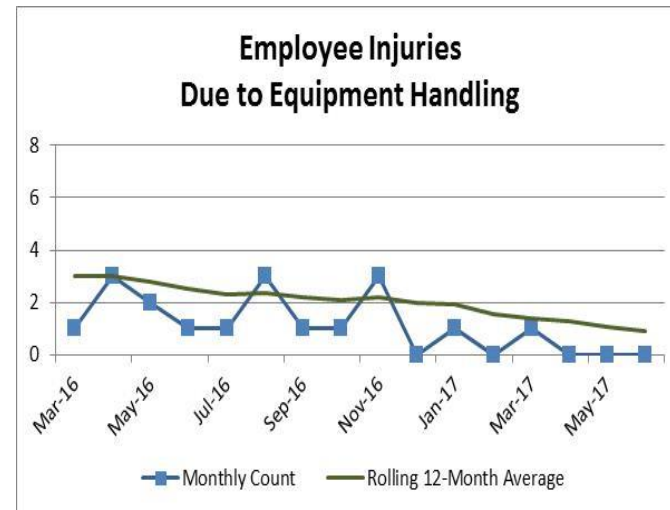
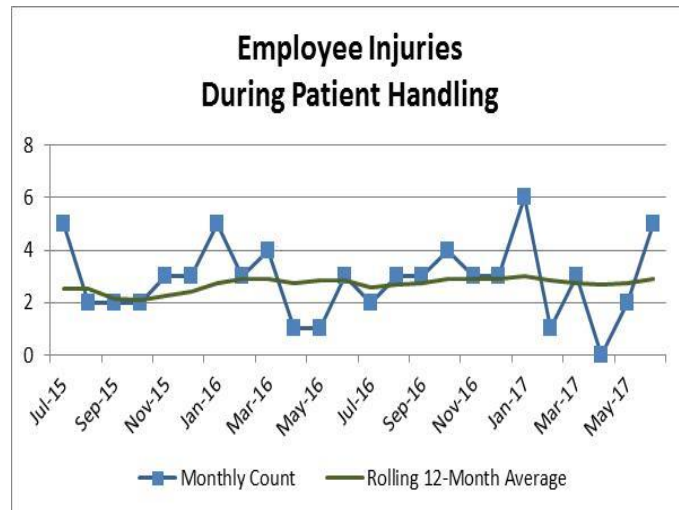
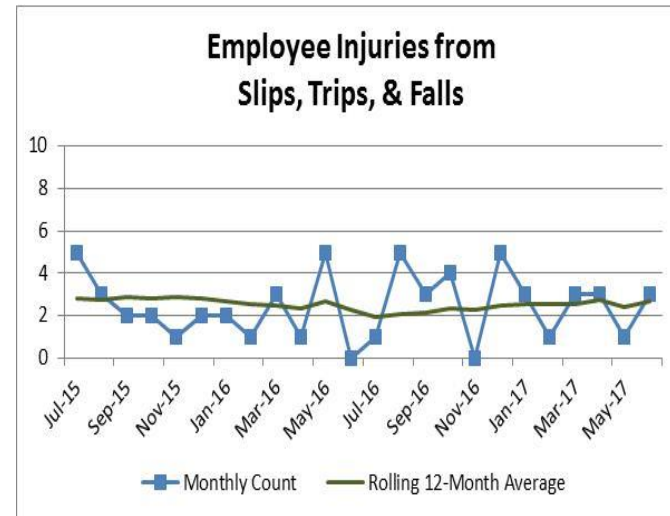
OTHER ZERO HARM METRICS



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



OTHER ZERO HARM METRICS

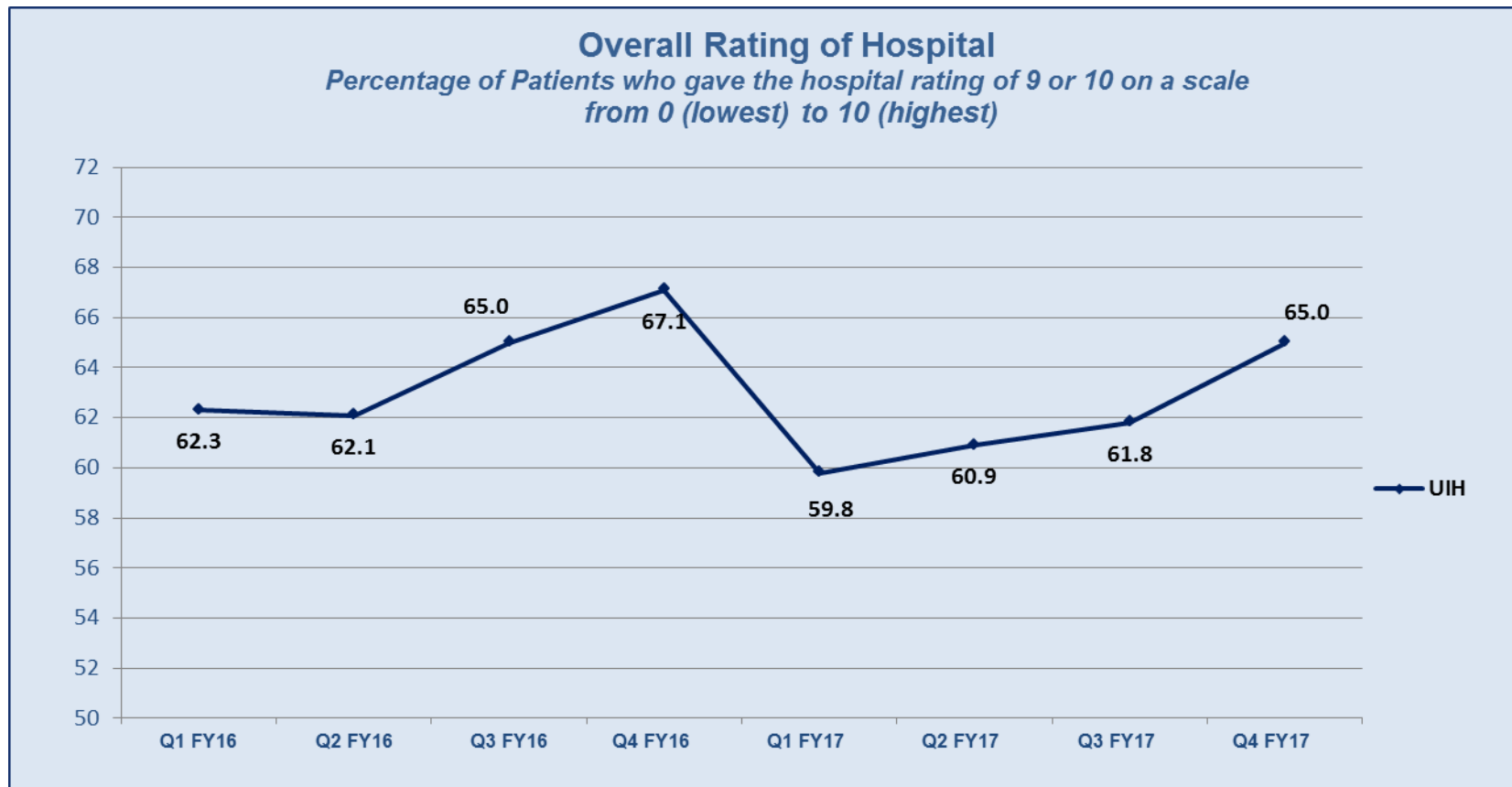


UI HEALTH
MISSION PERSPECTIVE:
CUSTOMER

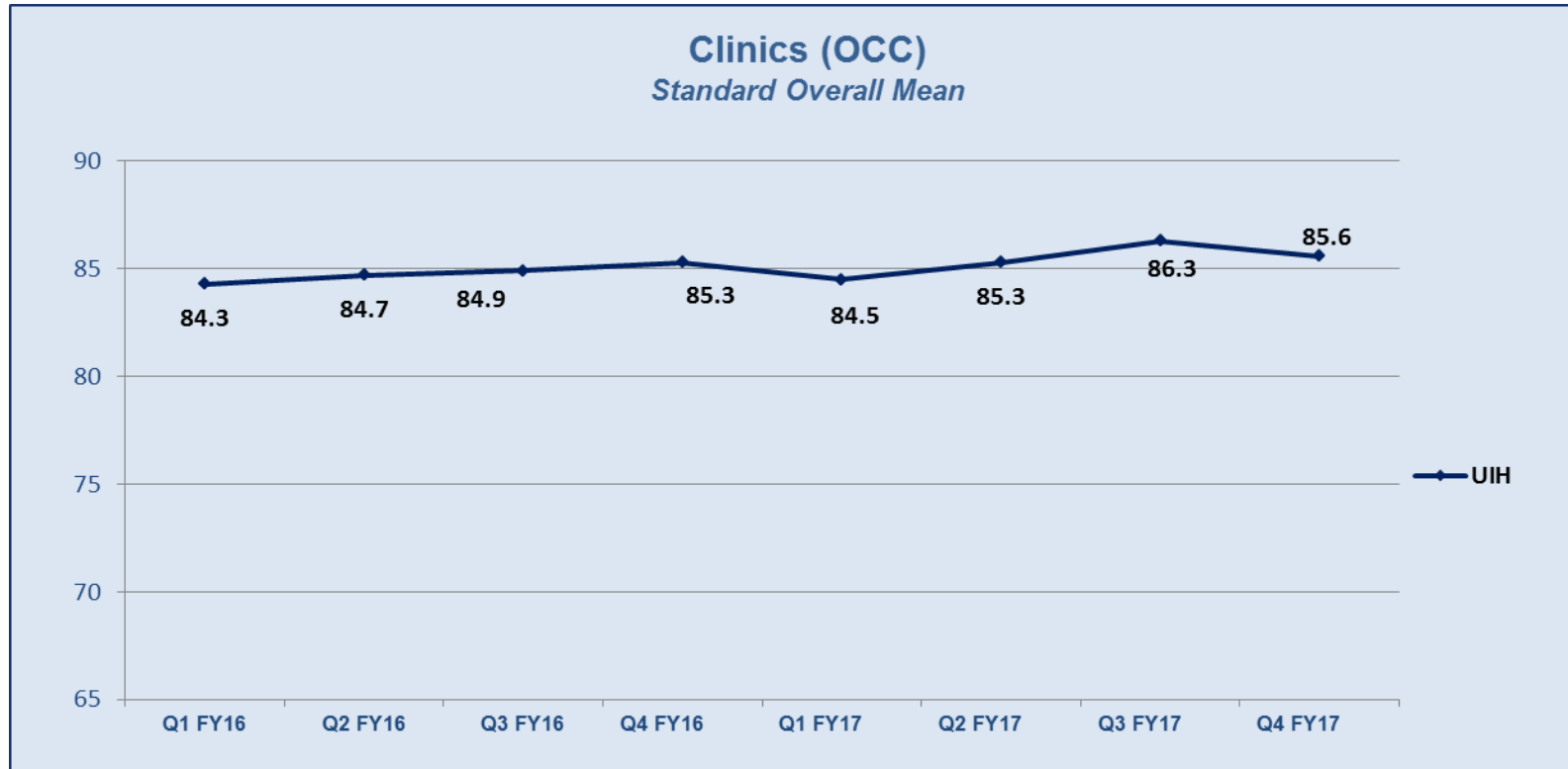
FY17 PATIENT EXPERIENCE SUMMARY

UI Health Metric	Jul-Sep 2016 Top Box/Mean	Apr-Jun 2017 Top Box/Mean	%ile rank
Inpatient (HCAHPS) Rate Hospital 9-10	59.8	65.0	18
Ambulatory Clinics Std Overall	84.5	85.6	17
Diagnostics Services* Including Therapy, Phlebotomy Lab and Sickle Cell Std Overall	87.6	87.4	3
Emergency Department Std Overall	74.2	78.2	10
Ambulatory Surgery Std Overall	89.5	89.2	6

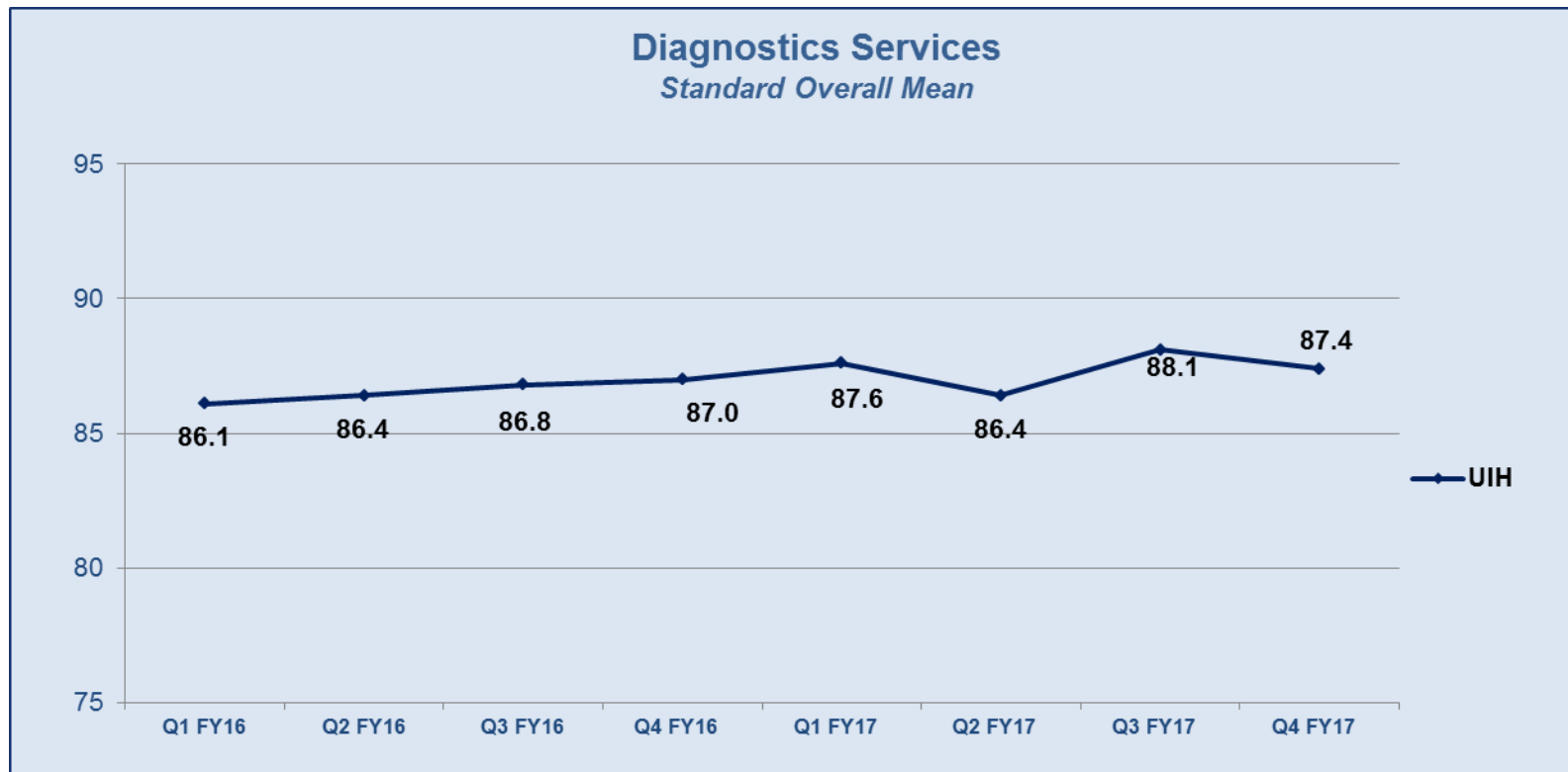
UI Health Metric	Current Quarter Q4 FY17	Prior Q4 FY16	UIH 8 Quarter Average
HCAHPS (Overall Rating of Hospital)	65.0	67.1	63.0



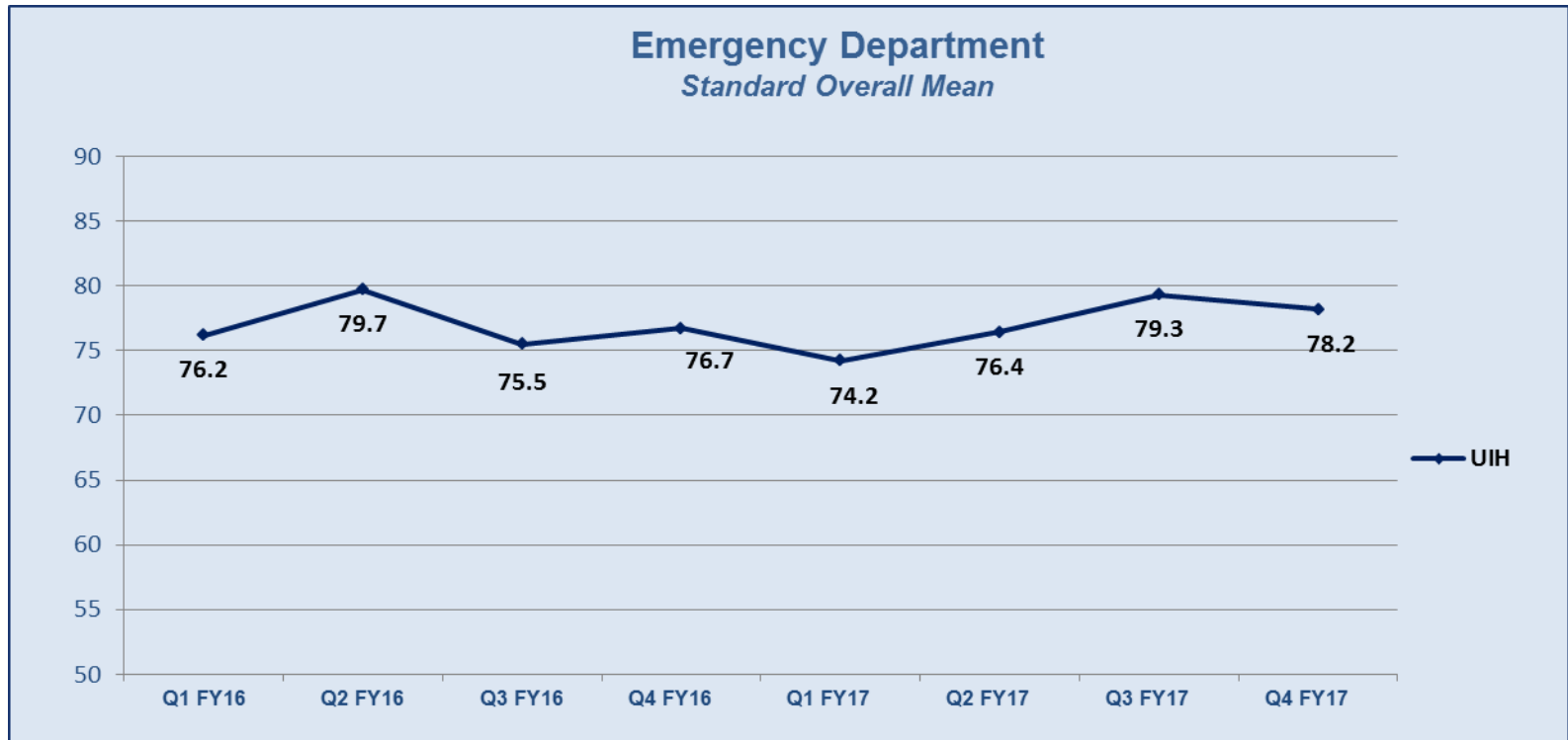
UI Health Metric	Current Quarter Q4 FY17	Prior Q4 FY16	UIH 8 Quarter Average
Clinics (OCC) Standard Overall Mean	85.6	85.3	85.1



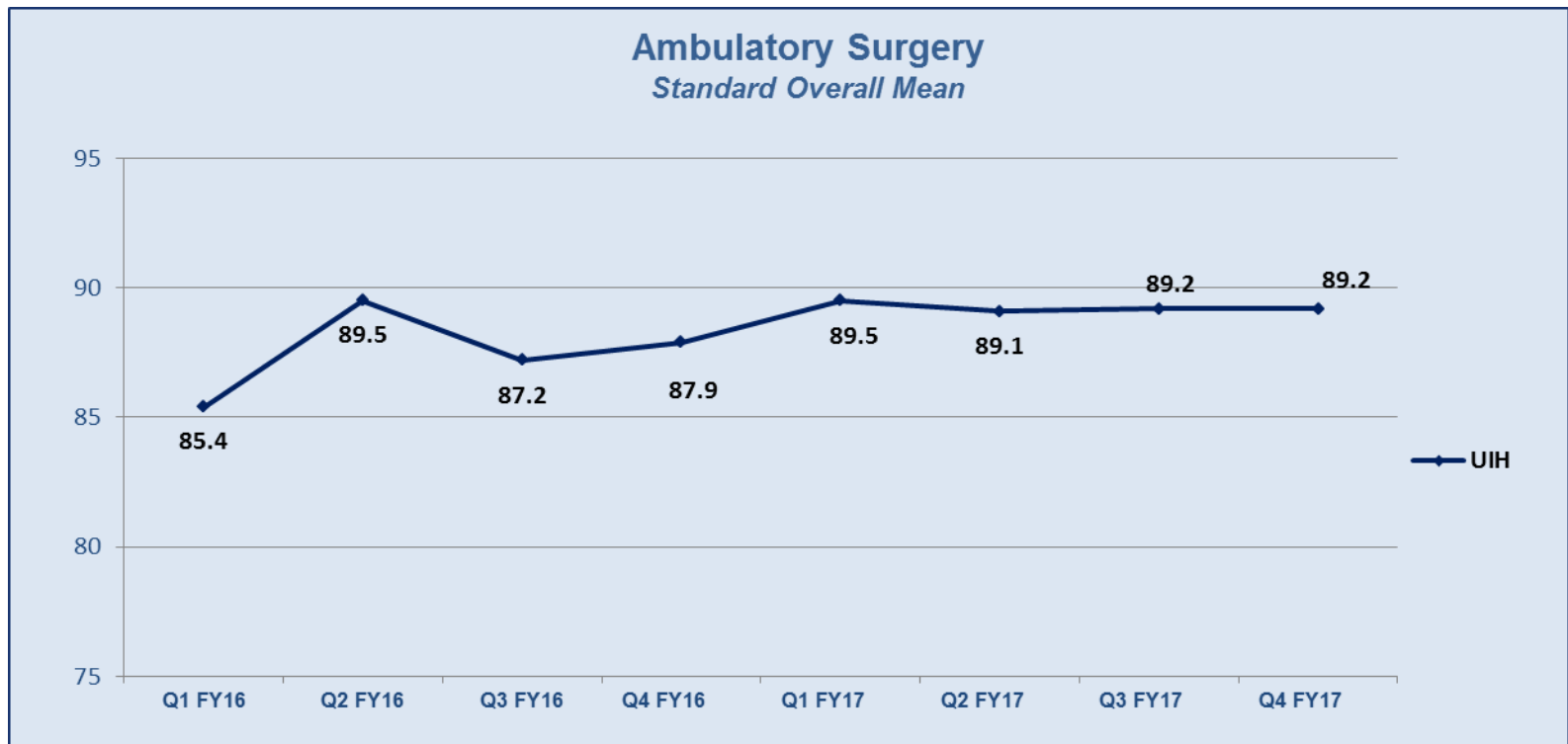
UI Health Metric	Current Quarter Q4 FY17	Prior Q4 FY16	UIH 8 Quarter Average
Diagnostics Services (Standard Overall Mean)	87.4	87.0	87.0



UI Health Metric	Current Quarter Q4 FY17	Prior Q4 FY16	UIH 8 Quarter Average
Emergency Department Standard Overall Mean	78.2	76.7	77.0



UI Health Metric	Current Quarter Q4 FY17	Prior Q4 FY16	UIH 8 Quarter Average
Ambulatory Surgery Standard Overall Mean	89.2	87.9	88.4



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 Expense (less Drugs) / Supply Intensity Score Adjusted Discharge	Supply expense (less drugs) divided by supply intensity score-adjusted discharges. Supply intensity score is a value derived from a weighted average of the total number of discharges by the distribution of MS-DRG—weighted values, assigned based on expected supply-related consumption.	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)