Key Reports Synopses
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Key Report Synopsis

Report Name: Census Snapshot (Tableau)

Report Business Owner: Dr. Iris Herrera

Report Executive Owner: Dr. Bill Holubek

Report Purpose: Provides an "at the moment" view of "heads in beds" at the hospital, including patients in I status as well as O status. The report represents just that specific moments in time, 7:00 AM, 1PM, & 4PM every day.

Periodicity: 7:00 AM, 1PM, & 4PM every day.

Distribution: Anyone with Tableau Access

Change Request Process: Changes are made at the discretion of Chief Medical Information Officer. Changes require heat tickets so that the Prominence team can update Tableau

What would make it better: More timely data availability for specific metrics

Open Data Governance Questions: None

Data Source: EPIC Workbench feeding Tableau

Data Fields:

- Acute Care Location
- Department Name
- Observation Census
- Inpatient Census
- Total Census
- Maintained Beds
- Unoccupied Beds
- Inhouse Average LOS
- % Occupancy
- Observation Over 1 Day
- LOS 8+ Days Census
**Key Report Synopsis**

**Report Name:** Chief Quality Report

**Report Business Owner:** Department Chair/Chief

**Report Executive Owner:** Chief Medical Officer

**Report Purpose:** Provide monthly department, division and physician level performance data on standard measures (volume, ALOS, mortality, readmissions and complications). Allows for comparison against targets/goals.

**Periodicity:** Monthly

**Distribution:** Department Chief/Chair, Department/Program Administrators, Chief Medical Officer, Director of the Medical Staff Office, Executive Director of Quality, Executive Director of Case Management, Manager of Quality Data Analytics

**Change Request Process:** Measures are standard across Departments. Changes would come from Executive Director of Quality. Data feeds into OPPE physician profiles.

**What would make it better:** Ability to use Vizient to drill down on the data in a dashboard format.

**Open Data Governance Questions:** None

**Data Source:** Vizient CDB

**Data Fields:**

- Volume of Discharges (N)
- Complications
- Patient Safety indicators
- Length of Stay
- Case Mix Index
- Hospital Acq. Complications
- Mortality
- Readmissions
Key Report Synopsis

Report Name: Clinical Diagnostic Report

Report Business Owner: Richard Ragovin

Report Executive Owner: Executive Director Clinical Diagnostic Services

Report Purpose: Provides a vital role in spotting health problems and informing medical interventions, which helps to improve the lives of patients and save costs of further treatment. Additionally, clinical diagnostics also play a vital role in patients’ ongoing care programs.

Periodicity: Monthly

Distribution: Chief Financial Officer, Senior Financial Analyst, Business Administrator, Executive Vice President, Vice President of Strategic Planning Data Governance & Project Management, Chief Operating Officer, Assistant Manager Business Services, Principal Management Assistant Confidential

Change Request Process: N/A

What would make it better: None provided

Open Data Governance Questions: None

Data Source: None provided

Data Fields:

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Cardiac Cath & EP

- CATH LAB - DIAGNOSTIC
- CATH LAB - PCI
- ELECTROPHYSIOLOGY (EP)
- PAIN MANAGEMENT
- OTHER
**Key Report Synopsis**

**Report Name:** CMI Report  
**Report Business Owner:** Soyon Bongiovanni  
**Report Executive Owner:** Gary Huck  
**Report Purpose:** To provide all inpatient, expired inpatient and surgical inpatient CMI by Payor Group  
**Periodicity:** Monthly (1 month behind)  
**Distribution:** David Barone, Marie Glover, Gary Huck, Paul Lisa, Polycarp Nwosisi, Denise Baker, Irene Szczech  
**Change Request Process:** None Defined  
**What would make it better:** None  
**Open Data Governance Questions:**  
**Data Source:** Performance Manager  
**Data Fields:**  
- Payor Group  
- CMI
Key Report Synopsis

Report Name: CMS Hospital Compare Preview Report (HCPR)

Report Business Owner: Quality & Patient Safety Department

Report Executive Owner: Dr. William Holubek

Report Purpose: Presents hospital’s preview performance data for CMS’s Inpatient Prospective Payment System, Inpatient and Outpatient Quality Reporting that drives reduction or increase of the annual Medicare payment arrangements.

Periodicity: Quarterly

Distribution: ELG, Quality & Safety Department Exec Dir and Directors, Care Coord Exec Director, ACC Exec Director, Cancer Center Exec Dir.

Change Request Process: Quality Executives w consultation from the Directors of Quality & Patient Safety determine what measures will be submitted. Some measures are mandated by CMS and cannot be changed.

What would make it better:

- Formalized sign-off process
- More input from ELG on measure selection

Open Data Governance Questions:

Data Source: Billing Claims data, Medisolv, Press Ganey, & NHSN

Data Fields:

- 30-Day Mortality
- 30-Day Readmission
- Hospital Acq Infections
- Excess Days
- Imaging Measures
- Patient Safety Indicators
- Core Measures
- HCAHPS / CGCAHPS
- MSPB Ratio
Key Report Synopsis

**Report Name:** Critical Care Unit Scorecard

**Report Business Owner:** Director of Critical Care; Critical Care Quality Subcommittee

**Report Executive Owner:** Chief Medical Officer / Chief Nursing Officer

**Report Purpose:** Provide monthly and FY YTD division/unit-based performance on measures selected by the committee. Allows for identification of trends as well as comparison against targets/goals.

**Periodicity:** Monthly

**Distribution:** Director of Critical Care, Chief Medical Officer, Chief Nursing Officer, Executive Director of Nursing Services, Division Physicians, Director of Inpatient Performance Improvement, Quality Specialist for Critical Care, Executive Director of Quality, Manager of Data Analytics, Director of Patient Safety, Director of Ambulatory Performance Improvement, Administrative Assistant to the Chief Medical Officer

**Change Request Process:** Committee reviews trends and keeps up-to-date on reporting requirements and performance benchmarks. Based on these factors, the committee collectively decides whether to maintain, add, or delete measures.

**What would make it better:** More timely data availability for specific metrics

**Open Data Governance Questions:** None

**Data Source:** E-print Banner, Monthly Emailed Finance Reports, Human Resources, NHSN/IP Database, Hand Hygiene Database (RedCAP), Safety Intelligence, Vizient CDB, Medisolv, Quintiles, Get with the Guidelines, Patient Relations, Press Ganey

**Data Fields:**

- Volume of Discharges
- Average Length of Stay
- 30 Day Readmissions
- Patient Safety Events
- Complaints/Grievances
- Transfers Out
- Staff Turnover Rate
- Hospital Acq. Infections
- Patient Safety Indicators
- HCAHPS
- Patient Days
- Mortalities
- Handwashing
- Core Measures
Key Report Synopsis

Report Name: Daily Operating Statistical Summary Report

Report Business Owner: Dave Barone

Report Executive Owner: Gary Huck

Report Purpose: To provide a Daily, Month to Date, and Year to Date Inpatient & Observation Stats in PDF for review by Leadership and Care Coordination teams.

Periodicity: Daily

Distribution: Executive and Supervisory Group

Change Request Process: None Defined

What would make it better: None Defined

Open Data Governance Questions: None

Data Source: EPIC

Data Fields:

- Acute Care Location
- Discharges
- Patient Days
- Average Length of Stay
- Percentage of Occupancy
- Daily Budget
- Daily Actual
- Daily Variance
- MTD Budget
- MTD Actual
- MTD Variance
- YTD Budget
- YTD Actual
- YTD Variance
- Observation
- Status Conversion
Key Report Synopsis

Report Name: Denials Report

Report Business Owner: Dr. Joseph Borges

Report Executive Owner: Dr. William Holubek

Report Purpose: To provide a view of the number and dollar value of denials and recoveries by service.

Periodicity: Monthly

Distribution: William Holubek, Joseph Borges

Change Request Process: None Defined

What would make it better:

- Adding a m/m trend feature to understand if we are getting better / worse at recovery
- Add features to understand how stale denied cases are
- A download feature to get this information in an application that is easier to manipulate

Open Data Governance Questions: None

Data Source: EPIC

Data Fields:

By Category, Department, and Service

- # of cases
- Denial $$$
- Recovered $$$
- Recovered %
- Appeal Status
- Denied Days
- Reduced Days
Key Report Synopsis

Report Name: Emergency Department Scorecard

Report Business Owner: Emergency Department Quality Sub-Committee

Report Executive Owner: Dr. William Holubek, Jonathan Green

Report Purpose: To provide division/unit-based performance metrics data on a monthly basis demonstrating performance with comparison to targets/goals established for appropriate metrics.

Periodicity: Monthly

Distribution: Nina Awan, Shareef Elnahal, Ana Gehan, Jonathan Green, Lois Greene, JoEllen Harris, William Holubek, Alice Kazakjian, Carl Kirton, Lewis Nelson, Maureen Gang, Luis Perez, Roxanne Poon, Nicole Sardinas, Eduardo Torres, Anthony Rosania

Change Request Process: Committee reviews data trends collectively and determines appropriate maintenance of metrics

What would make it better:

- More timely available data reporting on specific metrics

Open Data Governance Questions:

Data Source: ED Tableau, EMS, Human Resources, Safety Intelligence, Medisolv, Emergency Department Specific Data, Press Ganey, Finance Reports

Data Fields:

- ED Visit Volume
- EMS Visits
- Pediatric Visits
- Length of Stay (Various)
- Adult Visits
- Left Before Treatment Completed
- Return to ED with 72 hours and admitted
- Hand Hygiene
- Left Without Being Seen
- ED Diversions
- Core Measures
- Suicide Prevention metrics
- Complaints & Grievances
- Safety Intelligence Events
- Restraints reporting
- Observation unit data
- Press Ganey patient satisfaction
Key Report Synopsis

Report Name: Environmental Services – Terminal Cleaning Report

Report Business Owner: Environmental Services / Quality Data Analytics

Report Executive Owner: JoEllen Harris, Eve Borzon

Report Purpose: To provide insight into Terminal Cleaning process completion and improvement

Periodicity: Monthly

Distribution: Debra Chew, JoEllen Harris, Debra Horton, for DOH reporting purposes

Change Request Process: Environmental Services requests change to questions based on current survey tool needs and Quality Data Analytics makes changes online (RedCap)

What would make it better:

- Timely reporting, feedback capture: electronic data capture at time of physical survey completion

Open Data Governance Questions:

Data Source: RedCap database completed via paper surveys

Data Fields:

- Location
- Trash removal
- Walls
- Fixtures
- High-touch room surfaces
- Isolation type
- High dusting
- Bed
- Refill dispensers
- Monitoring method / fluorescence
- Room
- Floor
- Touch point sanitizing
- Curtains
Key Report Synopsis

Report Name: Family Health Unit Scorecard

Report Business Owner: Director of Family Health; Family Health Quality Subcommittee

Report Executive Owner: Chief Medical Officer / Chief Nursing Officer

Report Purpose: Provide monthly and FY YTD division/unit-based performance on measures selected by the committee. Allows for identification of trends as well as comparison against targets/goals.

Periodicity: Monthly

Distribution: Director of Family Health, Chief Medical Officer, Chief Nursing Officer, Executive Director of Nursing Services, Assistant Directors of Nursing in Family Health, Chair of Obstetrics & Gynecology, Chair of Pediatrics, Physician Quality representatives for Pediatrics and Obstetrics & Gynecology, Director of Inpatient Quality, Quality Specialist for Family Health, Executive Director of Quality, Manager of Data Analytics, Director of Patient Safety, Director of Ambulatory Performance Improvement, Assistant to the Chief Medical Officer

Change Request Process: Committee reviews trends and keeps up-to-date on reporting requirements and performance benchmarks. Based on these factors, the committee collectively decides whether to maintain, add, or delete measures.

What would make it better: Improved access to data in the Electronic Health Record

Open Data Governance Questions: None


Data Fields:
- Volume of Discharges
- Deliveries
- Mortalities
- % Handwashing
- Pediatric Safety Indicators
- Complaints & Grievances
- Transfers Out
- Average Length of Stay
- 30 Day Readmissions
- Patient Safety Events
- Core Measures
- Patient Days
- Staff Turnover Rate
- Hospital Acq. Infections
- Patient Safety Indicators
- Hospital Acq. Complication
- Patient Satisfaction
Key Report Synopsis

**Report Name:** IP Volume by Service Line

**Report Business Owner:** Soyon Bongiovanni

**Report Executive Owner:** Gary Huck

**Report Purpose:** To provide inpatient volume by service line based on CMS DRG

**Periodicity:** Ad-hoc

**Distribution:** Ad-hoc

**Change Request Process:** None Defined

**What would make it better:**

**Open Data Governance Questions:** None

**Data Source:** Performance Manager

**Data Fields:**

- Service Line
- Payor Group, Primary Insurance
- MRN/Patient Account
- Admit/Discharge Dates, LOS
- Charges, Payments
- DRG/CMI, Primary/Principal ICD10 Diagnosis and Procedure
- Attending Physician, Principal Procedure Physician
- Admit Type/Source, Disch Disposition
- Patient Age, Gender, Address
Key Report Synopsis

Report Name: IH Daily Census without ED Report

Report Business Owner: Dr. Iris Herrera

Report Executive Owner: Dr. Bill Holubek

Report Purpose: Provides an “at the moment” view of “heads in beds” at the hospital, including patients in I status as well as O status. The report represents just that specific moment in time, 12:00 AM every day.

Periodicity: Daily

Distribution: Chekalin, Maxim <chekalms@uhnj.org>; Iris D. Herrera <herrerir@njms.rutgers.edu>; Richardson, Patricia <richarpa@uhnj.org>; Franklin, Hamani <franklha@uhnj.org>; Rahman, Mustafa <rahmanm6@uhnj.org>

Change Request Process: Changes are made at the discretion of Chief Medical Information Officer

What would make it better: This report is not particular user-friendly and has been overcome by the Census snapshot in Tableau. We keep this report running as backup

Open Data Governance Questions: None

Data Source: EPIC Workbench

Data Fields:

- Acute Care Location
- Observation Census
- Inpatient Census
- Total Census
- Maintained Beds
- Unoccupied Beds
- % Occupancy
- Observation Over 1 Day
- Inhouse Average LOS
- LOS 8+ Days Census
Key Report Synopsis

Report Name: Liver Transplant – Key Performance Indicators (KPI)

Report Business Owner: Liver Transplant Quality Committee / Quality Data Analytics

Report Executive Owner: Dr. James Guarrera

Report Purpose: To provide performance metric results in a trending report for patients that undergo a Liver Transplant during their stay

Periodicity: Monthly

Distribution: Transplant Quality Improvement Committee

Change Request Process: Committee discussions or data results and current process needs request change of quality analyst producing the reports

What would make it better:

Open Data Governance Questions:

Data Source: Vizient

Data Fields:

- Patient Volume
- Mortality
- Case Mix Index (CMI)
- Readmissions
- Length of Stay
Key Report Synopsis


Report Business Owner: Janet Clausen

Report Executive Owner: Dr. Carl Kirton

Report Purpose: Provides an “at the moment” view of “heads in beds” at the hospital, including patients in I status as well as O status. The report represents just that specific moments in time every day.

Periodicity: Daily 3 times a day

Distribution: DeFrancesco, Gina <santucgm@uhnj.org>; Einstein, Mark <einstema@uhnj.org>; Elnahal, Shereef <elnahasm@uhnj.org>; Emont, Andre <emonta@uhnj.org>; Fernandes, Yvonne <femany2@uhnj.org>; Franklin, Hamani <frankham@uhnj.org>; Gauthier, Christopher <gauthic1@uhnj.org>; Gibson, Theresa <gibsonth@uhnj.org>; Gist, Thomas <gista@uhnj.org>; Glover, Marie <chervime@uhnj.org>; Goins, Ma Ritchie <goinsms@uhnj.org>; Gonzalez-Parra, Claudia <parracl@uhnj.org>; Green, Jonathan <greenjp@uhnj.org>; Herrera, Iris <herrera1@uhnj.org>; Hoggess, Marisha <Hoggessma@uhnj.org>; Holliday, Johnny <hollidjo@uhnj.org>; Holubek, William <holubew@uhnj.org>; Hussein, Mohamed <husseinm@uhnj.org>; Iannaccone, Robert <iannacr1@uhnj.org>; Irving, Royston <irvingr@uhnj.org>; Jackson, Valerie <jacksonv@uhnj.org>; Kazekjian, Alice <kazekjama@uhnj.org>; Kena, Prince <kenapa@uhnj.org>; Kirton, Carl <kirtonna@uhnj.org>; Linsalata, Heather <linsalhe@uhnj.org>; Logan Daniels, JoAnn <logandjo@uhnj.org>; Mennona, Paul <mennonpa@uhnj.org>; Pardo, Victor <pardo@uhnj.org>; Pernell, Chris T. <pernelct@uhnj.org>; Pianko, Ashley <piankoan@uhnj.org>; Poon, Roxanne <poonr@uhnj.org>; Ragovin, Richard <ragovir@uhnj.org>; Rodriguez, Minerva <rodrigmi@uhnj.org>; Ruping, Kathleen <rupingka@uhnj.org>; Samson, Soji <samsonso@uhnj.org>; Santiago, Alicia <santiaa@uhnj.org>; Sardinas, Nicole <sardinn1@uhnj.org>; Smith, Doneca <smithda1@uhnj.org>; Smith, Jennifer <smithje1@uhnj.org>; Sutton, Savitri <suttobs@uhnj.org>; Tavares, Ana <tavareama@uhnj.org>; Tran, Vy <tranvy@uhnj.org>; UH Utilization Management <uhutilizationmgmt@uhnj.org>; Veltz, Tyree <veltzy@uhnj.org>; Vitalicio, Marlon <vitalicmr@uhnj.org>; Weinberg, Aaron <weinbeam@uhnj.org>; Young, Charmaine <youngc2@uhnj.org>

Change Request Process: Changes are made at the discretion of Chief Medical Information Officer

What would make it better: This report is not particular user-friendly, is highly manual in nature and for many stakeholder has been overcome by the Census snapshot in Tableau.

Open Data Governance Questions: N/A

Data Source: EPIC, manually input into a Spreadsheet

Data Fields:

- Acute Care Location
- Observation Census
- Inpatient Census
- Total Census
- COVID status
- Maintained Beds
- Unoccupied Beds
- % Occupancy
- Transfers
- Pending Bed status
- Inhouse Average LOS
- Transfer Location
- Bed type Requested
- Insurance and Approval
- Potential discharges
**Key Report Synopsis**

**Report Name:** Medical / Surgical Unit Scorecard

**Report Business Owner:** Dr. Kirton, CNO; Med/Surg Quality Sub-Committee

**Report Executive Owner:** Dr. William Holubek / Carl Kirton, CNO

**Report Purpose:** To provide division/unit-based performance metrics data on a monthly basis demonstrating performance with comparison to targets/goals established for appropriate metrics.

**Periodicity:** Monthly

**Distribution:** Adrienne Carson-Gunter, Alicia Santiago, Ana Tavares, Nina Awan, Edith Ike, Shareef Elnahal, Lois Greene, JoEllen Harris, William Holubek, Jana Cortex, Carl Kirton, Lilyan Cohen, Marie-Richie Goins, Luis Perez, Roxanne Poon, Nicole Sardinas, Jennifer Smith, Soji Samson, Eduardo Torres

**Change Request Process:** Committee reviews data trends collectively and determines appropriate maintenance of metrics

**What would make it better:**

- More timely available data reporting on specific metrics
- Ability to report metrics only currently available hospital side on a division or unit-based level

**Open Data Governance Questions:**

**Data Source:** E-print Banner, Safety Intelligence, Monthly emailed Finance Reports, Medisolv, Human Resources, Vizient, NHSN/IP Database, Hand Hygiene Database (RedCap), Press Ganey

**Data Fields:**

- Volume of Discharges
- Staffing Turnover Rate
- Falls
- Pressure Injury
- Grievances
- Handwashing
- Patient Days
- Mortalities
- Falls rate per 1000 patient days
- Pressure Injury per 1000 patient days
- Patient Safety Indicators
- Core Measures
- Average Length of Stay
- 30-Day Readmissions
- Medication Related events
- Complaints
- Healthcare & Community Acquired Conditions
- HCAHPS
Key Report Synopsis

Report Name: MTD Discharges

Report Business Owner: Dr. Iris Herrera

Report Executive Owner: Chief Medical Information Officer

Report Purpose: Provides MTD of Admissions, Discharge, Transfers (ADT) to update physicians and care management teams on a patient’s status in order to improve patient care coordination.

Periodicity: Daily

Distribution: Iris D. Herrera <herrerir@njms.rutgers.edu>; Franklin, Hamani <franklha@uhnj.org>; Borges, Joseph <borgesj1@uhnj.org>; Rahman, Mustafa <rahmanm6@uhnj.org>; Vitalicio, Marlon <vitalimr@uhnj.org>; Fernandes, Yvonne <fermany2@uhnj.org>; Mennona, Paul <mennonpa@uhnj.org>; Rondan-Mann, Patricia <rondanpd@uhnj.org>; Clausen, Janet <clauseja@uhnj.org>; Nwosisi, Polycarp <nwosispo@uhnj.org>

Change Request Process: Changes are made at the discretion of Chief Medical Officer

What would make it better: N/A

Open Data Governance Questions: None

Data Source: Clarity - EP-ADT-DISCH-MTD

Data Fields:

- PATIENT NAME
- MRN ID #
- SEX
- AGE
- PATIENT ACCT #
- FIN CLASS
- ATTENDING DEPT
- DEPT NAME
- ADMIT DATE
- DISCH DATE
- LOS
- DISCH DISP
- ABBRV
- FINAL ATTENDING
Key Report Synopsis

Report Name: Ongoing Professional Practice Evaluation (OPPE)

Report Business Owner: Medical Staffing Office / Quality Data Analytics

Report Executive Owner: Dr. William Holubek

Report Purpose: To provide medical/surgical division / departmental performance reports for all attending (Full-time, part-time, volunteer, etc.) physicians

Periodicity: Bi-annually

Distribution: All physician division Chiefs/Chairs and support staff, Medical Staffing Office (MSO), Quality Data Analytics

Change Request Process: Individual divisions/departments determine specific metrics of value and are implemented by Quality Data Analytics in reporting templates

What would make it better:

- Standardized reporting metrics and data sources
- Formalized sign-off process

Open Data Governance Questions:

Data Source: Vizient, Patient Experience, HMIS, MSO, Chairs/Chiefs of Service

Data Fields:

- Patient Volume
- Mortality
- Complaints
- Case Mix Index (CMI)
- Medical Record Suspensions
- Grievances
- Length of Stay
- HCAHPS / CGCAHPS
- Complications

Additional metrics determined by Chair/Chiefs in the following areas:

- Patient Care
- Medical & Clinical Knowledge
- Practice-Based Learning Improvement
- Interpersonal & Communication Skills
- Professionalism
**Key Report Synopsis**

**Report Name:** Patient Admission Report (EP-HIM-ADT-ADMITS)

**Report Business Owner:** Dr. Borges

**Report Executive Owner:** Dr. Iris Herrera

**Report Purpose:** Provides a daily running count of patients who were admitted to IP or O status, yesterday, as well as information about those patients

**Periodicity:** Daily

**Distribution:** Hamani Franklin, Dr. Borges, Dr. Herrera

**Change Request Process:** Changes are made at the discretion of Chief Medical Information Officer

**What would make it better:** N/A

**Open Data Governance Questions:** None

**Data Source:** EPIC Workbench

**Data Fields:**

- PATIENT NAME
- SEX
- SERVICE
- HOSP ACCT
- AGE
- ADMIT PROVIDER
- MRN
- DEPARTMENT
- INP ADMIT DATE
- ROOM-BED
- ATTENDING PROVIDER
- FINANCIAL CLASS
- ADMIT DIAGNOSIS
Key Report Synopsis

Report Name: PCU Report

Report Business Owner: Dr. Iris Herrera

Report Executive Owner: Dr. William Holubek

Report Purpose: To provide a top of the morning log in MS Excel of patients in intermediate care for review by leadership and care coordination teams

Periodicity: Daily

Distribution: William Holubek, Andrew R. Berman, Joseph Borges, Janet Clausen, Nina Glass, James Guarrera, Carl Kirton, Marc Klapholz, Lewis Nelson, Rutgers’ Chiefs, Stephanie Bonne, Iris Herrera

Change Request Process: Changes are made at the discretion of Chief Medical Information Officer

What would make it better:

- Add “patient record level detail on Expected Admissions” to the Excel report
- Automatically translate day/hour/minute LOS characters into a numerical figure

Open Data Governance Questions: None

Data Source: EPIC

Data Fields:

- Patient Name
- MRN
- Bed
- Department
- Attending Provider
- Service
- Admitting Provider
- PCU Criteria
- Specific Criteria
- Admission Diagnosis
- PCU LoS
- PCU Day Value
Key Report Synopsis

Report Name: Psychiatry Unit Scorecard

Report Business Owner: Director of Psychiatry; Psychiatry Quality Subcommittee

Report Executive Owner: Chief Medical Officer / Chief Nursing Officer

Report Purpose: Provide monthly and FY YTD division/unit-based performance on measures selected by the committee. Allows for identification of trends as well as comparison against targets/goals.

Periodicity: Monthly

Distribution: Director of Psychiatry, Chief Medical Officer, Chief Nursing Office, Executive Director of Nursing, Assistant Nurse Manager of G Yellow, Chair/Chief of Psychiatry, Director of Inpatient Quality, Executive Director of Quality, Manager of Data Analytics, Director of Patient Safety, Director of Ambulatory Performance Improvement, Assistant to the Chief Medical Officer

Change Request Process: Committee reviews trends and keeps up-to-date on reporting requirements and performance benchmarks. Based on these factors, the committee collectively decides whether to maintain, add, or delete measures.

What would make it better: More timely data availability for specific metrics

Open Data Governance Questions: None

Data Source: E-print Banner, Monthly Emailed Finance Reports, Human Resources, Safety Intelligence, Medisolv, Quintiles, Get with the Guidelines, Patient Relations, Internal Patient Satisfaction Survey (maintained by unit)

Data Fields:

- Volume of Discharges
- Turnover Rate
- Patient Safety Events
- Complaints & Grievances
- Patient Days
- Mortalities
- Core Measures
- Patient Satisfaction Survey (internal)
- Average Length of Stay
- 30 Day Readmissions
- Restraints
Key Report Synopsis

Report Name: SDS Volume

Report Business Owner: Soyon Bongiovanni

Report Executive Owner: Gary Huck

Report Purpose: To provide SDS volume

Periodicity: Ad-hoc

Distribution: Ad-hoc

Change Request Process: None Defined

What would make it better:

- Add service line grouping similar to inpatient

Open Data Governance Questions:

- How to define SDS service line grouping

Data Source: Performance Manager

Data Fields:

Payor Group, Primary Insurance

MRN/Patient Account

Admit/Discharge Dates,

Charges, Payments

Primary/Principal ICD10 Diagnosis and Procedure

Attending Physician, Principal Procedure Physician

Admit Type/Source, Disch Disposition

Patient Age, Gender, Address
Key Report Synopsis

Report Name: Stroke – Key Performance Indicators (KPI)

Report Business Owner: Stroke Quality Committee / Quality Data Analytics

Report Executive Owner: Dr. Kamel (?)

Report Purpose: To provide performance metric results in a trending report for patients diagnosed with Stroke.

Periodicity: Monthly

Distribution: Stroke Quality Improvement Committee

Change Request Process: Committee discussions or data results and current process needs request change of quality analyst producing the reports

What would make it better:

Open Data Governance Questions:

Data Source: Vizient

Data Fields:

- Patient Volume
- Mortality
- Case Mix Index (CMI)
- Readmissions
- Length of Stay
Key Report Synopsis

**Report Name:** TABLEAU Perioperative Services Volume

**Report Business Owner:** Sergio Romero Medina

**Report Executive Owner:** Director of Periop Business Services

**Report Purpose:** Provides volume of Perioperative surgeries performed by Department and Surgeon.

**Periodicity:** Monthly

**Distribution:** Chief Executive Officer & President, Director Business Development, Chief Innovation & Technology Officer, Chief Medical Officer, Executive Vice President, Vice President of Strategic Planning Data Governance & Project Management, Director of Periop Business Services, Principal Management Assistant Confidential, Chief Nursing Officer

**Change Request Process:** XXX

**What would make it better:** XXX

**Open Data Governance Questions:** None

**Data Source:** XXX

**Data Fields:**

- By Service and Surgeon
- FY19 Total
- FY20 Total
- FY21 Total
- FY19 Avg # per Month
- FY20 Pre-COVID Avg # per Month
- FY21 Avg # per Month
Key Report Synopsis

Report Name: University Hospital Scorecard

Report Business Owner: N.Awan/Jo Ellen Harris

Report Executive Owner: Dr. William Holubek CMO

Report Purpose: To provide high-level hospital quality performance data based on 5-pillar domains: finance, work-force, growth, quality, and patient experience. Trend performance from baseline and targets/goals.

Periodicity: Monthly

Distribution: Quality Improvement Steering Committee

Change Request Process: Committee reviews data trends collectively and determines appropriate maintenance of metrics

What would make it better:

- Automate this report from EPIC. Work bench are available for some measure but have not been validated or updated.

Open Data Governance Questions:

Data Source: E-print Banner, Safety Intelligence, HR RLAS active/separation list, Medisolv, Vizient CDB, NHSN/IP Database, Hand Hygiene Database (RedCap), Press Ganey, Compass OR

Data Fields:

- Volume of Discharges
- Staffing Turnover Rate
- Falls
- Pressure Injury
- Grievances
- Handwashing
- CMI
- Mortality (Mort Index)
- Falls rate per 1000 patient days
- Pressure Injury per 1000 patient days
- Patient Safety Indicators (PSIs)
- Core Measures
- Length of Stay (LOS)
- 30-Day Readmissions
- Medication Related events
- Complaints
- Hosp Acq Infections
- HCAHPS
Key Report Synopsis

Report Name: Vizient Quality & Accountability (Q&A) Dashboard

Report Business Owner: Nina Awan

Report Executive Owner: Chief Medical Officer / Exec Dir Quality & Safety

Report Purpose: Web-based dashboard that provides Vizient members their hospital ranking and overall star ranking within a cohort group of similar hospitals. It provides visual performance for each domain based on weighted scores, Vizient median, and top performers with historic trend.

Periodicity: Annual

Distribution: Quality Steering Committee

Change Request Process: Vizient solicits feedback from members regularly to assess whether change(s) is needed. Metrics evolve as publicly reported measures change.

What would make it better: UH is not submitting lab data which is needed for the equity and safety portion of the Q&A Dashboard. Currently, receiving 0% compliance for 6-lab related measures.

Open Data Governance Questions: None

Data Source: Health quest billing data, NHSN, Press Ganey

Data Fields:

- Mortality
- LOS
- Patient Safety Indicators
- Equity- TAT of lab results/testing
- Readmission
- Direct Cost
- Core Measures
- HCAHPS
- 30 Day Readmissions
- Hosp Acq infections