

# Key Reports Synopses



**University**  
HOSPITAL

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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
- % Occupancy
- Observation Over 1 Day
- Inhouse Average LOS
- 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:**

### Radiology

- General Radiography
- Portables
- CT
- Ultrasound
- MRI
- Nuclear Medicine
- Operating Room
- Neuro-Interventional
- Vascular Interventional
- DOC & Mammo

### Neuro-Lab

- EEG
- EMG
- EP
- V-EEG
- TCD
- BR. STIM.
- EXT. EEG
- OR
- AMBUL.
- C EEG

### Echo-ECG

- Echocardiography
- ECG/Holter

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

## 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                 | • Isolation type                   | • Room                   |
| • Trash removal            | • High dusting                     | • Floor                  |
| • Walls                    | • Bed                              | • Touch point sanitizing |
| • Fixtures                 | • Refill dispensers                | • Curtains               |
| • High-touch room surfaces | • Monitoring method / fluorescence |                          |

## 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 Source:** E-print Banner, Monthly Emailed Finance Reports, Human Resources, NHSN/IP Database, Hand Hygiene Database (RedCAP), Safety Intelligence, Vizient CDB, Medisolv, Patient Relations, Press Ganey, Electronic Birth Certificate

### **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 Satisfaction
- Patient Days
- Staff Turnover Rate
- Hospital Acq. Infections
- Patient Safety Indicators
- Hospital Acq. Complication



## 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 Name:** Manual Bed Management Report

**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 <emontaj@uhnj.org>; Fernandes, Yvonne <fernany2@uhnj.org>; Franklin, Hamani <Franklha@uhnj.org>; Gauthier, Christopher <gauthic1@uhnj.org>; Gibson, Theresa <gibsonth@uhnj.org>; Gist, Thomas <gistta@uhnj.org>; Glover, Marie <chervime@uhnj.org>; Goins, Ma Ritchie <goinsms@uhnj.org>; Gonzalez-Parra, Claudia <parrac1@uhnj.org>; Green, Jonathan <greenjp@uhnj.org>; Herrera, Iris <herreri1@uhnj.org>; Hogges, Marisha <Hoggesma@uhnj.org>; Holliday, Johnny <hollidjc@uhnj.org>; Holubek, William <holubew1@uhnj.org>; Hussein, Mohamed <husseimm@uhnj.org>; Iannaccone, Robert <iannacr1@uhnj.org>; Irving, Royston <irvingrc@uhnj.org>; Jackson, Valerie <jacksovc@uhnj.org>; Kazekjian, Alice <kazekjam@uhnj.org>; Kena, Prince <kenapa@uhnj.org>; Kirton, Carl <kirtonca@uhnj.org>; Linsalata, Heather <linsalhe@uhnj.org>; Logan Daniels, JoAnn <logandjo@uhnj.org>; Mennona, Paul <mennonpa@uhnj.org>; Pardo, Victor <pardovi@uhnj.org>; Pernel, Chris T. <pernelct@uhnj.org>; Pianko, Ashley <piankoan@uhnj.org>; Poon, Roxanne <poonrm@uhnj.org>; Ragovin, Richard <ragovirm@uhnj.org>; Rodriguez, Minerva <rodrigmi@uhnj.org>; Ruping, Kathleen <rupingka@uhnj.org>; Samson, Soji <samsonso@uhnj.org>; Santiago, Alicia <santiaa2@uhnj.org>; Sardinas, Nicole <sardinn1@uhnj.org>; Smith, Doneca <smithda1@uhnj.org>; Smith, Jennifer <smithje1@uhnj.org>; Sutton, Savitri <suttonsb@uhnj.org>; Tavares, Ana <tavaream@uhnj.org>; Tran, Vy <tranvy@uhnj.org>; UH Utilization Management <uhutilizationmgmt@uhnj.org>; Veltz, Tyree <veltzty@uhnj.org>; Vitalicio, Marlon <vitalimr@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 | • Maintained Beds    | • Inhouse Average LOS    |
| • Observation Census  | • Unoccupied Beds    | • Transfer Location      |
| • Inpatient Census    | • % Occupancy        | • Bed type Requested     |
| • Total Census        | • Transfers          | • Insurance and Approval |
| • COVID status        | • Pending Bed status | • 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   | • Patient Days                          | • Average Length of Stay                     |
| • Staffing Turnover Rate | • Mortalities                           | • 30-Day Readmissions                        |
| • Falls                  | • Falls rate per 1000 patient days      | • Medication Related events                  |
| • Pressure Injury        | • Pressure Injury per 1000 patient days | • Complaints                                 |
| • Grievances             | • Patient Safety Indicators             | • Healthcare & Community Acquired Conditions |
| • Handwashing            | • Core Measures                         | • 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 <fernany2@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 a 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
- HOSP ACCT
- MRN
- INP ADMIT DATE
- FINANCIAL CLASS
- SEX
- AGE
- DEPARTMENT
- ROOM-BED
- ADMIT DIAGNOSIS
- SERVICE
- ADMIT PROVIDER
- ATTENDING PROVIDER



## 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   | • CMI                                   | • Length of Stay (LOSI)     |
| • Staffing Turnover Rate | • Mortality (Mort Index)                | • 30-Day Readmissions       |
| • Falls                  | • Falls rate per 1000 patient days      | • Medication Related events |
| • Pressure Injury        | • Pressure Injury per 1000 patient days | • Complaints                |
| • Grievances             | • Patient Safety Indicators (PSIs)      | • Hosp Acq Infections       |
| • Handwashing            | • Core Measures                         | • 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