

**Quality Measures Identified as Below Average on the
Maryland Health Care Commission Quality Data Website**

Thirty of the Forty-One measures on the Maryland Health Care Commission Quality Data Website where applicable to Anne Arundel Medical Center. Of the thirty applicable measures, Anne Arundel Medical Center was below average in a total of six measures. Below is a spreadsheet which identifies the measure, Maryland State Mean, AAMC's data, and applicable action plans in place to improve performance. (MHCC data from Calendar Year 2014)

STROKE		
Metric	State Mean 7.1014	Performance Improvement Action Plan
How often patients who came in after having stroke subsequently died in the hospital.	AAMC 13.4200	Emergency Department Standing Operating Procedure (SOP) was created, altering and enhancing patient flow to ensure immediate use of the NIH stroke scale and CT scan upon arrival; this facilitates early recognition and interventions needed (e.g., TPA). Concurrent rounding is performed by the Stroke Coordinator for proactive management of patient care. Rounding includes communication with the medical staff members when needed.
Summary Scores		
Metric	State Mean 0.9449	Performance Improvement Action Plan
How often patients die in the hospital from one of six problems: heart attack, heart failure, stroke, internal bleeding, hip fracture, or pneumonia	AAMC 1.3005	Core Measures abstractors perform concurrent rounding on a number of quality metrics to address the prevention of complications and/or death in the patient populations. Core Measures include assessment of care and interventions as needed to address heart attack, heart failure, stroke, hip replacement surgery, and pneumonia. Review 100% of medical records of patients who died during hospitalization utilizing the Hospital Mortality Tool Rules for Patient Record Review from IHI.
Surgical Patient Safety		
Metric	State Mean 99.8	Performance Improvement Action Plan
Preventing low body temperature during and after surgery	AAMC 99	Documentation in the electronic medical record was added to include prioritization of temperature monitoring intra-operatively and post-operatively. Convection/warming blankets and air warming devices are applied to patients for improved control of body temperature throughout surgery and postoperatively. Education was provided to the surgical team, including anesthesiologists, on the need for documentation of body temperature.
Metric	State Mean 98	Performance Improvement Action Plan
Surgery patients who have a thin tube inserted to drain their bladder and it is removed on the first or second day after surgery	AAMC 97	Post-operative surgery order sets include discontinuation of the Foley catheter on post-operative day one or two. The Critical Care progress note template was changed to include triggers for medical staff members to document status of necessity related to Foley catheters; necessity is also addressed and documented at least daily by nursing staff. Documentation requirements include the "indications for use" for any Foley catheter order. Concurrent rounding is performed by the Core Measures abstractors in order to proactively review cases for necessity of the Foley catheter. Rounding includes communication with the medical staff members and nursing staff when needed.

Prevention and Treatment		
Metric	State Mean	Performance Improvement Action Plan
Patients who developed a blood clot while in the hospital and did not get treatment that could have prevented it	AAMC 15.0	<p>Best practice alerts/advisories were built into the electronic medical record to prompt medical staff to evaluate patients for the need for Vein Thromboembolism (VTE) prophylaxis at point of admission.</p> <p>An automatic best practice alert within the medical record is initiated to prompt nursing staff to apply mechanical prophylaxis (e.g., SCDs) once ordered.</p> <p>Clinical Alert advisory messaging was sent out to educate staff on VTE core measures compliance requirements.</p> <p>Concurrent rounding of patients is performed by the Core Measures abstractors to ensure prompt patient assessment and immediate initiation of preventative interventions. Rounding includes communication with the medical staff members when needed.</p>
Heart Failure		
Metric	State Mean	Performance Improvement Action Plan
Test of how well the heart is able to pump blood	AAMC 99	Concurrent rounding of patients diagnosed with heart failure is performed by the Core Measures abstractors to ensure left ventricular (LV) assessment has been completed. Rounding includes communication with the medical staff members when needed.