



2015  
**VALUE  
REPORT**





The past year is one to celebrate. 2015 brought changes and achievements unlike any we've experienced before. At the top of these is our Magnet status – the highest institutional honor for nursing excellence from the American Nurses Credentialing Center's Magnet Recognition Program.® Out of nearly 6,000 health care organizations in the nation, less than 7 percent have achieved this prestigious honor. We completed our assessment for this achievement during calendar year 2015 with our recognition announcement in early 2016.

Not only does this award recognize our nurses' quality patient care, it emphasizes our effort to revolutionize the profession and acknowledges years of hard work from our nurse leaders. They have devoted countless hours to making this achievement possible and we are exceptionally proud of them.

Our successes do not stop there. UK HealthCare's Resuscitation Team received the "Get with the Guidelines®-Resuscitation Gold Quality Achievement Award" from the American Heart Association (AHA) and more than 125 UK HealthCare Physicians were named to the Best Doctors in America® list by Best Doctors Inc. From achieving the Healthcare Equality Index – the national LGBT benchmarking tool – to being designated as Baby-Friendly®, our dedication to excellence is palpable every day.

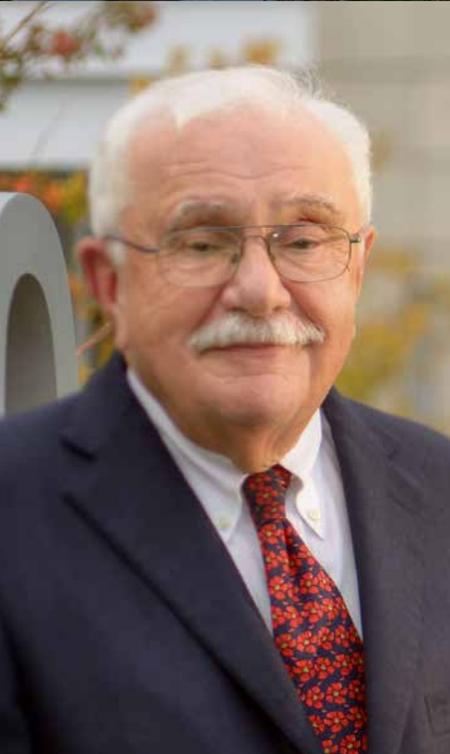
While our victories should be celebrated, they should continue to inspire us and keep us grounded in our important work. At the core of UK HealthCare remains the focus of safety. We must always strive to cultivate an educated and accountable environment through streamlining our efforts in reducing risk and increasing positive outcomes.

At the center of every strategic goal is the willingness to improve. We are serving the Commonwealth at a greater depth than we have ever known, and as health professionals we must be intentional with our actions – at the bedside, in the lab or in the community. Our tenacious presence must be seen, felt and expected by our patients every day.

## **IT'S UK HEALTHCARE'S PROMISE TO KENTUCKIANS AND OUR COMMITMENT TO GREATNESS.**

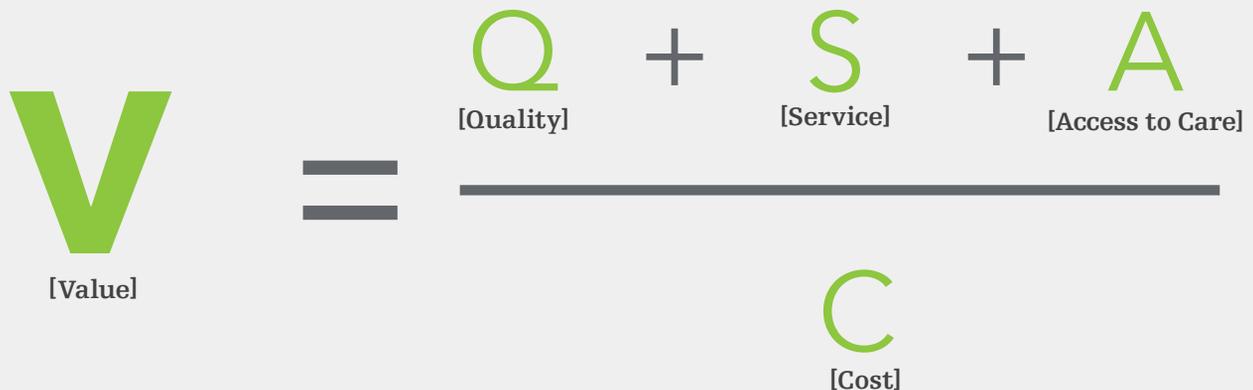
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EXECUTIVE VICE PRESIDENT  
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# VALUE

At UK HealthCare, we put our patients first. We strive to improve predictability in patient outcomes and to deliver optimal care at the lowest cost possible. We are adopting evidence-based practices and build an organizationwide culture of improvement across all clinical settings that will benefit our patients for years to come!



UK HealthCare serves all of its patients. Unlike other health care institutions, we are developing new delivery models for patients with complex chronic conditions that will improve their health outcomes through a high-touch outpatient approach and a new chronic care clinic.

Nurses, physicians, pharmacists and other staff are hard at work on numerous projects with health system engineers to move us forward toward a healthier future and toward reaching a larger patient population. Our promise to our patients is efficient, superior care that is unparalleled to other hospitals in the community.

# QUALITY

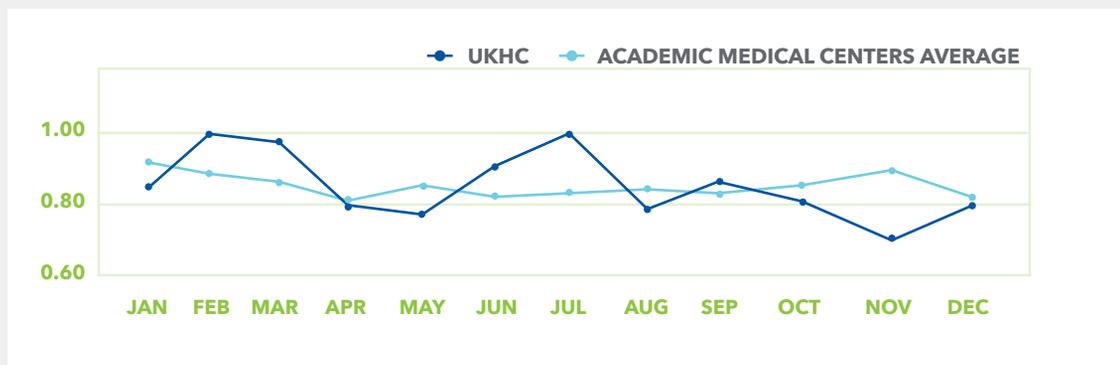
## PATIENT SURVIVAL

Patient survival rates are adjusted to account for just how sick the patients are when they come to the hospital, considering the seriousness of their illness plus complicating factors such as age, obesity, diabetes or heart failure. Observed-to-expected mortality (death) compares two numbers:

1. Observed mortality is the actual number of patients who died during a particular period. For example, 10 deaths among 1,000 patients would be an observed rate of 1 percent.

2. Some people are so sick they are not reasonably expected to survive. More of these patients are seen at places like UK HealthCare because these hospitals are better equipped to help than most others. Expected mortality adjusts for how sick patients are compared with patients seen at other hospitals in the United States.

To reach the final number, the observed rate is divided by the expected rate, meaning that the number of actual deaths is compared to how many people were so sick that they were not expected to live.



PATIENT SURVIVAL BY MONTH (CALENDAR YEAR 2015)

## SERIOUS COMPLICATIONS HARM SCORE COMPOSITE (PSI-90)

Higher rates of serious but potentially preventable complications may be a sign of poorer quality hospital care. Hospitals can reduce the chance of these serious complications by following safe practices. This composite summarizes eight individual Patient Safety Indicator (PSI) measures.

These measures include:

- Pressure sores.
- Collapsed lung that results from medical treatment.
- Infections from a large venous catheter.
- Broken hip from a fall after surgery.
- Blood clots in the lung or a large vein in surgery patients.
- Bloodstream infection after surgery.
- A rupture along a surgical suture.
- Accidental cuts and tears.

## EFFICIENT CARE IS BETTER CARE

### Length of Stay (LOS)

LOS is the number of days a patient is in the hospital. It refers to the number of calendar days from the day of admission to the day of discharge. For example, the LOS for a patient admitted on May 12 and discharged on May 17 is five days.

The LOS Index compares two numbers:

- Observed LOS is the amount of time patients are actually in the hospital.
- Expected LOS is the amount of time patients are expected to be in the hospital. Several factors including age, sex and existing medical conditions are used to determine the amount of time patients are expected to stay in the hospital.

To reach the LOS Index, the observed length of stay is divided by the expected length of stay.

### Readmissions

Tracking the number of patients who, without having planned to, must come back into the hospital within 30 days of a previous hospital stay is another way we measure the quality of care we provide. An example of this would be a patient who had surgery who then develops an infection at their incision site. It's important to note that unplanned readmissions are not always related to the previous hospital stay, and not all are preventable.

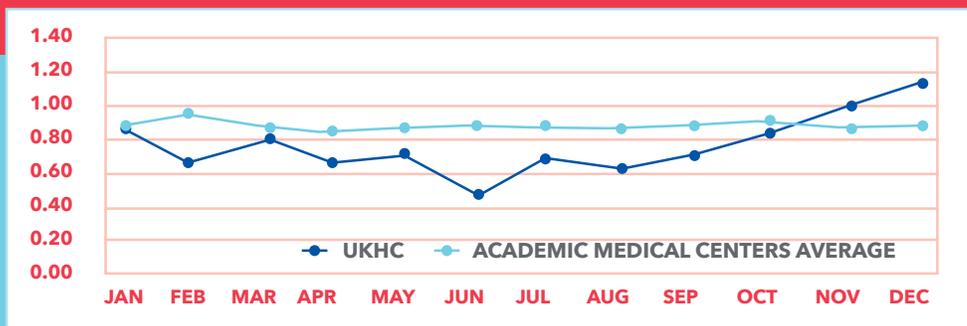
	UKHC LOS	ACADEMIC MEDICAL CENTERS AVERAGE
JAN	1.10	1.05
FEB	1.08	1.05
MAR	1.08	1.04
APR	1.13	1.03
MAY	1.05	1.01
JUN	1.06	1.03
JUL	1.01	1.02
AUG	0.98	1.02
SEP	1.02	1.04
OCT	1.03	1.03
NOV	1.03	1.02
DEC	1.07	1.02

## LOS INDEX '15

	UKHC % 30 DAY READMIT	ACADEMIC MEDICAL CENTERS AVERAGE
JAN	11.00	11.72
FEB	11.35	11.68
MAR	10.67	11.60
APR	10.97	11.90
MAY	11.70	11.81
JUN	10.50	11.72
JUL	10.47	11.78
AUG	10.12	11.72
SEP	10.17	11.75
OCT	11.60	11.61
NOV	9.95	11.67
DEC	10.54	11.83

## READMISSION RATES '15

Since 2013, UK HealthCare hospitals have outperformed the PSI-90 target. In FY15, the fourth quarter (April – June 2015) PSI-90 score for UK HealthCare was 0.45, the best among 138 academic medical centers. Overall for FY15, UK ranked fifth among 140 centers.



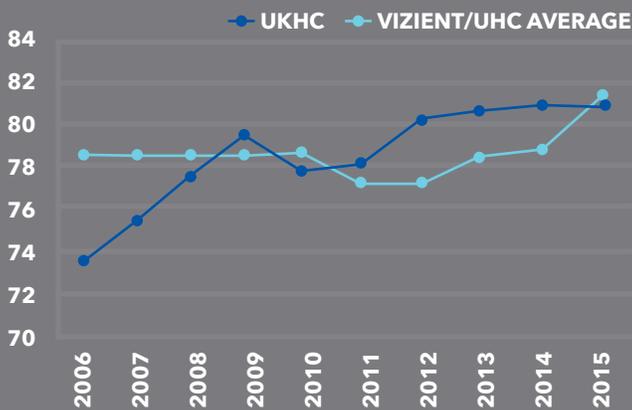
## HARM SCORE COMPOSITE BY MONTH (CALENDAR YEAR 2015)

# SERVICE

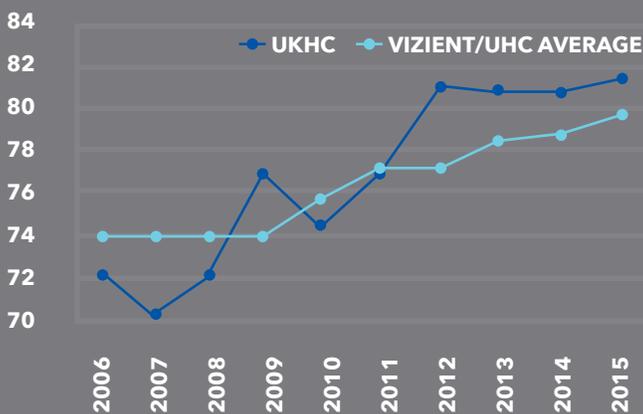
## PATIENT SATISFACTION

We focus on each patient as a unique individual, not just an illness or a set of symptoms. We work in partnership with patients and their families to make sure every decision takes into account their wants, needs and preferences. At UK HealthCare, we strive to enhance the patient experience and reduce waste, duplication and inefficiencies.

As a member of UHC/Vizient, we measure ourselves based on other national academic medical centers.



## SATISFACTION WITH PHYSICIAN



## SATISFACTION WITH NURSING

# ACCESS TO CARE

Our goal at UK HealthCare is to provide the best possible care in the most efficient manner, and we are continually working to improve and streamline our processes so we can do just that. We continue to work to make it easier for patients to be seen in our hospitals and clinics in a timely manner.

## AMBULATORY ACCESS METRICS

- New-patient wait time averages 33 days from date of call to date of appointment.
- 20 clinics have availability for a new patient appointment within 14 days of request.
- Total ambulatory visits thru May FY16 up 9.94 percent over last fiscal year based on our ambulatory visit statistics.

## PATIENT ACCESS CENTER

- More than 1.1 million patient calls to our clinics.
- Average call abandonment rate of 6.8 percent.
- Average hold time 49 seconds with ease of scheduling above the UHC/Vizient 75th percentile.

# COST

Achieving high-value patient care is essential. At UK HealthCare, our patients can rely on high-quality performance, a patient- and family- centered approach, and optimal patient care. Through our UK OptimalCare project (initiated in April 2015), we have shown that we can optimize patient care through the elimination of unnecessary variation. This improves outcomes and quality of care for our patients.

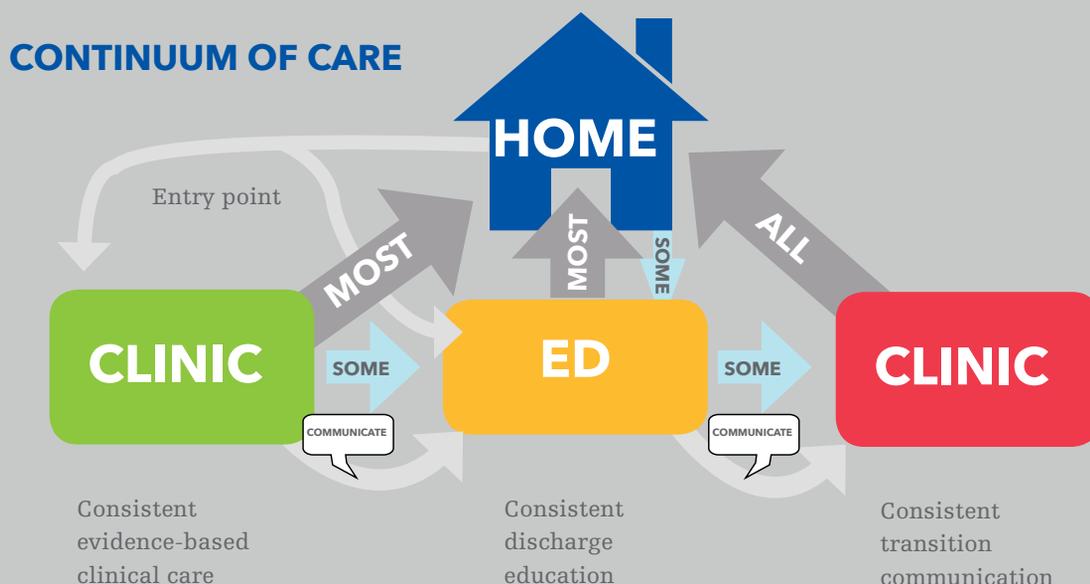
## UK OPTIMALCARE: BRONCHIOLITIS

When thinking about reducing unnecessary variation in practice, we must understand that a patient who crosses different settings of health care is vulnerable to both the variations between sites and the variations in practice which can exist. Our bronchiolitis team is committed to providing excellent tools for each end user at key intervals. The team has determined that when those tools are utilized patients have improved outcomes.

In reviewing tool feedback, UK HealthCare's multidisciplinary bronchiolitis team\* has found:

- Increased parent satisfaction with relatively immediate relief of nasal congestion and more comfortable breathing.
- Increased clinical staff engagement with participation in this initiative designed to improve patient care.
- Educational opportunities improved for care providers involved.
- Consistent evidence-based clinical care, discharge education and transition communication support as referenced in the figure below.

\* The UK OptimalCare bronchiolitis multidisciplinary team included members from finance, information technology, emergency services, pediatric radiology, pediatric intensive care, ambulatory services, respiratory therapy, nursing and physician participants.



# 2015 AWARDS

## GET WITH THE GUIDELINES®

- For the second year, UK HealthCare's Resuscitation Team has received the **"Get With The Guidelines-Resuscitation Gold Quality Achievement Award"** for maintaining specific quality measures outlined by the American Heart Association for the treatment of patients who suffer cardiac arrests in the hospital.
- UK HealthCare's Kentucky Neuroscience Institute (KNI) has received the **"Get With The Guidelines – Stroke Gold-Plus Quality Achievement Award"** by the American Heart Association/American Stroke Association for maintaining nationally recognized standards for the treatment of stroke patients.

## BABY-FRIENDLY® DESIGNATION

**Baby-Friendly USA** is a not-for-profit organization dedicated to ensuring that all birthing facilities in the United States become designated Baby-Friendly. UK HealthCare is the first and only hospital in Lexington that has achieved the standard of excellence of being Baby-Friendly designated.

## MAGNET STATUS

UK HealthCare has achieved Magnet status – the highest institutional honor for nursing excellence from the American Nurses Credentialing Center's Magnet Recognition Program.®

## THE JOINT COMMISSION:

- **Joint Commission Top Performer Key Quality Measures® 2015:** Children's Asthma, Heart Attack, Pneumonia, Surgical Care, Heart Failure, Stroke and Perinatal Care
- Recertifications & Accreditations
  - **Ventricular Assist Device Certification – recertification in 2015**
  - **Advanced Comprehensive Stroke Center Certification – recertification in 2015**
  - **The Joint Commission Triennial (Accreditation Survey) - Accredited**

## 2015 KHA QUALITY AWARD (EASTERN STATE HOSPITAL)

Eastern State Hospital earns the **2015 Quality Award** from the Kentucky Hospital Association in the Psychiatric Care category. The award honors hospital leadership and innovation in quality, safety and commitment to patient care.

## HEALTHCARE EQUALITY INDEX (HEI)

The **HEI** is the national LGBT benchmarking tool that evaluates healthcare facilities' policies and practices related to the equity and inclusion of their LGBT patients, visitors and employees. UK HealthCare is HEI designated! This is important to UK HealthCare because it ensures an equitable, knowledgeable, sensitive and welcoming environment for LGBT patients, visitors and employees.

## NATIONAL SURGICAL QUALITY IMPROVEMENT PROJECT (NSQIP)

**Recognized UK HealthCare as one of 52 ACS NSQIP participating hospitals that have achieved meritorious outcomes for surgical patient care.**

ACS NSQIP selected outcomes in the following eight outcome areas: for all surgical cases: Mortality, Cardiac (cardiac arrest and myocardial infarction), Pneumonia, Unplanned intubation, Ventilator (more than 48 hours), Renal failure, Cardiac incidents (cardiac arrest and myocardial infarction), Respiratory (pneumonia), SSI (surgical site infection: superficial incisional SSI, deep incisional SSI and organ/space SSI), Urinary tract infection.

## BEST DOCTORS IN AMERICA®

**More than 125 UK HealthCare physicians named to Best Doctors in America list for 2015-16.** The Best Doctors in America list, assembled by Best Doctors Inc. and audited and certified by Gallup, results from polling of more than 40,000 physicians in the United States. Doctors in more than 40 specialties and 400 subspecialties of medicine appear on this year's list. The experts who are part of the Best Doctors in America database provide the most advanced medical expertise.