

BSDC QI DASHBOARD 2013

Indicator	4TH QUARTER 2012				1Q13				2Q13				3Q13				4Q13			
	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?
Individuals Are Safe (A)		# Met: 10 of 15		9 Action Plans		# Met: 8 of 13		6 Action Plans		# Met: 2 of 13		1 Action Plan		# Met: 4 of 13		2 Action Plans		# Met: 6 of 15		3 Action Plans
A1-Physical and Non-Physical Abuse	0%	1%	No	Yes	0%	0%	Yes	No	0%	0%	No	No	0%	2%	No	No	0%	0%	Yes	No
A2-Non-Physical Abuse (combined with A1)	Combined A1 and A2.				Combined A1 and A2.				Combined A1 and A2.				Combined A1 and A2.				Combined A1 and A2.			
A3-Neglect	0%	3.68%	No	Yes	0%	0.74%	No	No	0%	2.33%	No	No	0%	1.00%	No	No	0%	1.59%	No	No
A4a-Staff are comfortable reporting Abuse/Neglect	Combined A4a and A4b				Combined A4a and A4b				Combined A4a and A4b				Combined A4a and A4b				Combined A4a and A4b			
A4b-Reporting Abuse/Neglect by Individuals (Combined A4a and A4b)	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No
A5-Reporting Harmful Situations (Indicator Discontinued)	Indicator discontinued				Indicator discontinued				Indicator discontinued				Indicator discontinued				Indicator discontinued			
A6-Individuals Feel Safe (Combined with 4a and 4b)	Combined with 4a and 4b.				Combined with 4a and 4b.				Combined with 4a and 4b.				Combined with 4a and 4b.				Combined with 4a and 4b.			
A7-Injuries of Unknown Source (Annual)	100%	100%	Yes	No	Combined with A10 and A11.				Combined with A10 and A11.				Combined with A10 and A11.				Combined with A10 and A11.			
A8-Peer to peer abuse incidents of aggression	0%	3%	No	Yes	0%	4%	No	Yes	0%	4%	No	No	0%	1%	No	No	0%	1.5%	No	No
A9-Choking	0%	0%	Yes	No	Combined with A10.				Combined with A10.				Combined with A10.				Combined with A10.			
A10-Percentage of Incidents by Category	N/A	N/A	No	Yes	N/A	N/A	N/A	Yes	N/A	N/A	N/A	No	N/A	N/A	N/A	No	N/A	N/A	N/A	Yes
A11-Findings from Investigations Analysis	N/A	N/A	N/A	See A3	N/A	N/A	N/A	Yes	N/A	N/A	N/A	No	N/A	N/A	N/A	No	N/A	N/A	N/A	Yes
A12-Medication Error Rates	0.025%	0.0263%	Yes	Yes	0.025%	0.025%	Yes	Yes	0.025%	0.039%	No	Yes	0.025%	0.553%	No	Yes	0.025%	0.418%	No	Yes
A13-Medications Errors w/Harmful Outcomes	0%	0%	Yes	See A12	0%	0%	Yes	No	0%	0%	Yes	No	0%	0%	Yes	No	0%	0%	Yes	No
A14-Fall Incident Review	7.50%	6%	Yes	No	0.75%	0.67%	Yes	No	0.75%	0.82%	No	No	<.75%	0.84%	No	No	<.75%	0.77	No	No
A15-Physical Restraint	0%	3.80%	No	See A8	0%	4.50%	No	Yes	0%	1.60%	No	No	0%	2.40%	No	No	0%	0.8%	No	No
A16-Mechanical Restraint (Annual)	0%	0%	Yes	No	0%	0%	Yes	No	Reported annually				Reported annually				0%	0%	Yes	No
A17-Chemical Restraint (Annual)	0%	0%	Yes	No	0%	0%	Yes	No	Reported annually				Reported annually				0%	0%	Yes	N/A
A18a-Rates of Medical Restraints	100%	50%	No	Yes	100%	0%	No	No	100%	0%	No	No	100%	100%	Yes	No	100%	100%	Yes	No
A18b-Dental Under General Anesthesia	4%	2.67%	Yes	No	100%	100%	Yes	No	100%	44%	No	No	100%	20%	No	Yes	4%	4.97%	No	No
A19-Medications Used for Behavioral Crisis Intervention	100%	100%	Yes	No	0%	1.5%	No	No	0%	0.8%	No	No	0%	0.0%	Yes	No	0%	0.79%	No	No
Individuals Are Healthy (B)		# Met: 6 of 8		4 Action Plans		# Met: 2 of 10		2 Action Plans		# Met: 4 of 12		1 Action Plan		# Met: 2 of 12		2 Action Plans		# Met: 4 of 12		4 Action Plans
B1-Immunizations	>90%	100%	Yes	No	Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level			
B2-Annual Physical Examinations	100%	100%	Yes	No	Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level			
B3-Dental Exam and Oral Hygiene	75% good 0% poor	72% good 5% poor	No	Yes	75% good 0% poor	59% good 3% poor	No	Yes	75% good 0% poor	65% good	No	Yes	75% good 0% poor	71% good	No	Yes	75% good 0% poor	68% good	No	No
B4-Hospitalization/ER Transfer	0%	20%	No	Yes	0%	9.09%	No	No	0%	0.00%	Yes	No	0%	6.67%	No	No	0%	8.70%	No	No
B5-Rates of Infection	1.69 key 6.99 all	1.49 key 5.78 all	Yes	Yes	Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level			
B6-Rate of Pressure Ulcers	<.17	0.08	Yes	No	0%	0.8%	No	No	0%	0.76%	No	No	0%	0.00%	Yes	No	0%	0.79%	No	No

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B7-BMI <20	0%	0%	Yes	No	0%	2%	No	No	0%	0.79%	No	No	0%	1.6%	No	No	0%	0%	Yes	No
B8-BMI Equal to or >30	<15%	13.53%	Yes	Yes	<15%	12.4%	Yes	No	<15%	10.3%	Yes	No	<15%	4.8%	Yes	No	<15%	8.7%	Yes	No
B9-Rates of Pneumonia	New indicator 1st Qtr 2013				0.4	0.431	No	Yes	0.4	0.2597	Yes	No	0.4	0.174	Yes	Yes	<0.4	0.1741	Yes	No
B10-Rates of Urinary Tract Infections (UTIs)	New indicator 1st Qtr 2013				8.0%	2.27%	Yes	No	8.0%	9.30%	No	No	8.0%	18.332%	No	No	8.0%	0.79%	Yes	No
B11-PCP Progress notes	New indicator 1st Qtr 2013				TBD	N/A	N/A	N/A	100%	80.80%	No	No	100%	5%	N/A	N/A	100%	94%	No	Yes
B12-Laboratory and X-ray review	New indicator 1st Qtr 2013				100%	79%	No	No	100%	78%	No	No	100%	80%	N/A	N/A	100%	82%	No	Yes
B13-PCP Progress note/Outside consultant	New indicator 1st Qtr 2013				100%	86%	No	No	100%	96%	No	No	100%	92%	N/A	N/A	100%	95%	No	Yes
B14-Inpatient Hospitalization	New indicator 1st Qtr 2013				100%	80%	No	No	100%	100%	Yes	No	100%		N/A	N/A	100%	67%	No	Yes
B15-Informed Consent	New indicator 1st Qtr 2013				TBD	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Individuals Are Healthy-Monitored by Medical QI on Quarterly Basis, Reported to QI Committee Annually (C)		# Met: 5 of 10		2 Action Plans	# Met: 6 of 13		4 Action Plans	# Met: __ of __		# Action Plans	# Met: __ of __		# Action Plans	# Met: __ of __		# Action Plans				
C1-Treatment of Individuals with intractable epilepsy	0%	20%	No	No	Combined with C5.				Combined with C5.				Combined with C5.							
C2-Rates of Anti-thombotic (A-T) medication used for individuals with moderate to high cardiovascular risks	>90%	0%	Yes	No	Indicator Discontinued				Indicator Discontinued				Indicator Discontinued							
C3-Rates of Antipsychotic Polypharmacy	<14.3%	6.49%	Yes	No	Reported annually.				Reported annually.				Reported annually.							
C4-Rates of Antiepileptic Drug Polytherapy	<30%	50%	No	No	Reported annually.				Reported annually.				Reported annually.							
C5a-Rates of intractable epilepsy and Treatment of Individuals with Intractable Epilepsy		16%	Yes	See C1	Reported annually.				Reported annually.				Reported annually.							
C5b-Rates of Intractable Epilepsy and Treatment of Individuals with Intractable Epilepsy					Reported annually.				Reported annually.				Reported annually.							
C6-Rates of Constipation	<80%	84%	No	No	Indicator Discontinued				Indicator Discontinued				Indicator Discontinued							
C7-Rates of laxative and prokinetic polytherapy for constipation	<1%	33.83%	No	No	Reported annually.				Reported annually.				Reported annually.							
C8-No Indicator	No indicator				No Indicator				No Indicator				No Indicator							
C9-Rates of timely completion of Internal mortality reviews	100%	100%	Yes	No	Reported annually.				Reported annually				Reported annually							
C10-Rates of timely completion of external mortality reviews	100%	N/A	N/A	N/A	Reviews are completed in Lincoln.				Reviews are completed in Lincoln.				Reviews are completed in Lincoln.							
C11-Medical Peer Reviews	95%	90%	No	No	Reported annually.				Reported annually				Reported annually							
C12a-Clinical Peer Review: OT/PT	TBD	N/A	N/A	Yes	Reported annually.				Reported annually				Reported annually							
C12b-Clinical Peer Review: SLP					Reported annually.				Reported annually				Reported annually							
C12c-Clinical Peer Review: RD					Reported annually.				Reported annually				Reported annually							
C12d-Clinical Peer Review: BST (Behavioral)					Reported annually.				Reported annually				Reported annually							
C12e-Clinical Peer Review: BST (Psych Eval)					Reported annually.				Reported annually				Reported annually							

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C12f-Clinical Peer Review: Nursing					Reported annually.												80%	76%	No	Yes
C13-Rates of Falls in Public Health Clinic or Ambulatory Surgical Center	<8%	0%	Yes	No	Indicator Discontinued. Captured in A14				Indicator Discontinued. Captured in A14				Indicator Discontinued. Captured in A14				Indicator Discontinued. Captured in A14			
Individuals Are Supported in Personal Goals to Achieve Independence (D)		# Met: 6 of 10		5 Action Plans		# Met: 6 of 12		# of Action Plans		# Met: 6 of 11		1 Action Plan		# Met: 6 of 11		5 Action Plans		# Met: 6 of 11		4 Action Plans
D1-Recreational Integration	100%	100%	Yes	No	Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level				80%	92%	Yes	No
D2-Community Employment	40%	49%	Yes	Yes	Reviewed at departmental level				Reviewed at departmental level				Reviewed at departmental level				40%	62%	Yes	Yes
D3-Increased Employment Hours	10%	5%	No	No	75%	63%	No	Yes	75%	99%	Yes	No	75%	89%	Yes	Yes	75%	92%	Yes	No
D4-Communication (language assistance)	100%	100%	Yes	No	100%	100%	Yes	No	100%	94%	Yes	No	100%	96%	No	No	100%	93%	No	No
D5-Progress toward goals/objectives	65%	37%	No	Yes	65%	41%	No	No	65%	38%	No	No	65%	45%	No	No	65%	45%	No	No
D6a-Person Centered (goals and supports)	80%	100%	Yes	Yes	100%	100%	Yes	Yes	100%	100%	Yes	No	31%	100%	Yes	No	31%	100%	Yes	No
D6b-Person Centered (goals and supports)	D6, a2 new 2nd Qtr 2013				D6, a2 new 2nd Qtr 2013				100%	95%	No	No	82%	100%	Yes	No	82%	95%	No	No
D6c-Person Centered (goals and supports)	100%	100%	Yes	Yes	100%	100%	Yes	Yes	94%	100%	Yes	No	94%	100%	Yes	No	94%	100%	Yes	No
D7-No indicator	No indicator				No indicator				No indicator				No indicator				No indicator			
D8-BSP Competency	20%	33%	Yes	Yes	90%	98%	Yes	No	90%	92%	Yes	Yes	90%	92%	Yes	Yes	90%	99%	Yes	No
D9-Reduction of Psych Meds due to Beh Improvement	20%	16%	No	No	20%	3%	No	No	20%	14%	No	No	20%	7%	No	Yes	80% annual 20% qtrly	27%	No	Yes
D10-Choice of Service Providers	80%	86%	Yes	No	80%	88%	Yes	No	80%	89%	Yes	No	80%	86%	Yes	No	80%	84%	Yes	No
D11-Audit of Home Room	New indicator 1st Qtr 2013				100%	87%	No	No	100%	86%	No	No	100%	100%	Yes	Yes	100%	93%	No	Yes
D12-Five Hours off residence skills training	New indicator 1st Qtr 2013				100%	78%	No	No	100%	87%	No	No	100%	90%	No	Yes	100%	83%	No	Yes
Individuals Are Treated With Dignity and Respect (E)		# Met: 1 of 3		1 Action Plan		# Met: 2 of 5		2 Action Plans		# Met: 2 of 5		1 Action Plan		# Met: 2 of 5		1 Action Plan		# Met: 2 of 5		1 Action Plan
E1-Individuals are treated with dignity and respect	100%	92%	No	No	100%	96%	No	No	100%	97%	No	No	100%	95%	No	No	100%	94%	No	No
E2-Respecting the right of a person to have an active social support network	80%	38%	No	Yes	80%	76%	No	Yes	80%	73%	No	No	80%	68%	No	No	80%	47%	No	Yes
E3-BSPs with restrictive procedures	10%	10%	Yes	No	10%	0%	Yes	No	<10%	1%	Yes	No	<10%	17%	Yes	No	<10%	14%	No	No
E4-HLRC Audit and Follow up	New indicator 1st Qtr 2013				100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No
E5-Restrictions have active reduction plan	New indicator 1st Qtr 2013				100%	48%	No	Yes	100%	50%	No	Yes	100%	70%	No	Yes	100%	100%	Yes	No
Employees Are Following Policies and Procedures (F)		# Met: 7 of 8		2 Action Plans		# Met: 2 of 3		1 Action Plan		# Met: 2 of 3		1 Action Plan		# Met: 2 of 3		0 Action Plan		# Met: 2 of 3		2 Action Plan
F1-Zero tolerance re: substantiated abuse/neglect	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No
F2-Zero tolerance regarding neglect (combined with F1)	Combined F1 and F2.				Combined F1.				Combined F1.				Combined F1.				Combined F1.			
F3-Compliance with 5 day review of investigations	100%	100%	Yes	No	Combined with A11.				Combined with A11.				Combined with A11.				Combined with A11.			

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	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?	GOAL	Results	Met?	Action Plan?
F4a-Training CPR	100%	1995	Yes	No	Department indicator.															
F4b-Training RCT Mandt	100%	100%	Yes	No	Department indicator.															
F4c-Training Advanced Mandt	100%	100%	Yes	No	Department indicator.															
F5-Meal Time Points of Service	95%	97.80%	Yes	No	Department indicator.															
F6-Rates of missed clinical appts	<5%	9%	No	Yes	Department indicator.															
F7-Rates of missed medical appts	<5%	1%	Yes	Yes	Department indicator.															
F8-Rates of missed habilitative activities	Monitored by Public Health Clinic.				Department indicator.															
F9-Emergency Restrictions	New indicator 1st Qtr 2013				100%	80%	No	Yes	100%	87%	No	Yes	100%	80%	No	No	100%	96%	No	Yes
F10-Habilitation Record Audit	New indicator 1st Qtr 2013				100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	Yes
Employees are Cared for, Respected, and Supported (G)			# Met: 1 of 3	1 Action Plan			# Met: 1 of 3	0 Action Plans			# Met: 1 of 3	0 Action Plans			# Met: 1 of 3	0 Action Plans			# Met: 2 of 3	0 Action Plans
G1-Adherence/safeguards to non-retaliatory	100%	100%	Yes	No	100%	100%	Yes	No	100%	100%	Yes	No	100%	N/A	Yes	No	100%	100%	Yes	No
G2-Staff feel free from retaliation	100%	95%	No	Yes	Combined with G1															
G3-Staff Injuries	N/A	67%	N/A	No	N/A	62%	N/A	N/A	N/A	72.5%	N/A	N/A	N/A	68.75%	N/A	N/A	N/A	65%	N/A	N/A
G4-Staff are provided necessary training	No indicator				Indicator Discontinued.															
G5-Staff are provided opportunity for training to pursue advancement in their career (No Indicator)	No indicator				Indicator Discontinued.															
G6-Mandatory Overtime Rates (Combined with H5)	Combined with H5.				Combined with H5															
G7-POS Training and Support	New indicator 1st Qtr 2013				95%	87%	No	No	95%	93%	No	No	95%	94%	N/A	N/A	95%	97%	Yes	No
BSDC is the Employer of Choice in Beatrice and Surrounding Area (H)			# Met: 2 of 5	5 Action Plans			# Met: 1 of 4	0 Action Plans			# Met: 2 of 4	0 Action Plans			# Met: 1 of 4	0 Action Plans			# Met: 1 of 4	0 Action Plans
H1-Hiring Rate	45%	25%	No	Yes	45%	25%	No	No	45%	22%	No	No	45%	15%	No	No	45%	16%	No	No
H2-Staff Vacancy Rates	<10%	31.65%	No	Yes	<10%	26%	No	No	<10%	28%	No	No	<10%	28%	No	No	<10%	30%	No	Yes
H3-Staff Turnover	<10%	4.64%	Yes	Yes	<10%	5%	Yes	No	<10%	9%	Yes	No	<10%	11%	Yes	No	<10%	7%	Yes	No
H4-Staff Retention Rates	TBD	41.77%	N/A	No	Reported annually.				Reported annually.				Reported annually.				TBD	23.5%	N/A	No
H5-Staff Overtime Rates and Mandatory Overtime Rates	<10%	14.11%	No	Yes	<10%	11%	No	No	<10%	10%	Yes	No	<10%	14%	No	No	<10%	13.68%	No	No
H6-Image Management	1 per Qtr	Yes	Yes	Yes	Indicator Discontinued															