



## THA Hospital Improvement Innovation Network (HIIN) Measures

Data is due monthly before the end of the following month (i.e. January data due by end of February). To enter data via Report Distributor, a login and password is required. These can be obtained from the TCPS Data Manager, Jennifer McIntosh, who is also available to help with data questions: [jmcintosh@tha.com](mailto:jmcintosh@tha.com), 615-401-7421.

Measure	Report Distributor	NHSN	Claims Data	Quarterly Survey	THA Contact
Adverse Drug Events (Anticoagulants, Hypoglycemics, Opioids)	X				<b>Jackie Moreland</b> jmoreland@tha.com 615-401-7439
CAUTI		X			<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
CLABSI		X			<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
C Difficile		X			<b>Jackie Moreland</b> jmoreland@tha.com 615-401-7439
Falls	X				<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
MRSA		X			<b>Jackie Moreland</b> jmoreland@tha.com 615-401-7439
Pressure Injuries	X		X		<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
Readmissions			X		<b>Rhonda Dickman</b> rdickman@tha.com 615-401-7404
Sepsis			X		<b>Rhonda Dickman</b> rdickman@tha.com 615-401-7404
Surgical Site Infections		X			<b>Jackie Moreland</b> jmoreland@tha.com 615-401-7439
Patient & Family Engagement				X	<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
Post-op Venous Thromboembolism			X		<b>Jackie Moreland</b> jmoreland@tha.com 615-401-7439
Ventilator-Associated Events		X			<b>Patrice Mayo</b> pmayo@tha.com 615-401-7434
Worker Safety	X				<b>Rhonda Dickman</b> rdickman@tha.com 615-401-7404

## HIIN Measure – Quick Reference

Measure	Numerator	Denominator	Comments
<b>Adverse Drug Events: Anticoagulants</b>	Number of adult inpatients on Warfarin/Coumadin with a post-admission INR $\geq$ 4.0	Number of adult inpatients on Warfarin/Coumadin therapy	
<b>Adverse Drug Events: Hypoglycemics</b>	Number of adult inpatients receiving insulin with a post-admission blood glucose $\leq$ 70	Number of adult inpatients receiving insulin	
<b>Adverse Drug Events: Opioids</b>	Number of patients treated with opioids who received naloxone	Number of patients treated with opioids	Excludes Emergency Department
<b>CAUTI – Use RD if Non-NHSN User</b>	Number of healthcare- associated CAUTI per NHSN criteria in ICU, step-down, medical/surgical units.	Number of indwelling urinary catheter days for inpatients in each numerator department	Also report total patient days for each numerator department.
<b>CLABSI – Use RD if Non-NHSN User</b>	Number of healthcare- associated CLABSI per NHSN criteria in ICU, step-down, medical/surgical units.	Number of central line days for inpatients in each numerator department	Also report total patient days for each numerator department.
<b>C Difficile – Use RD if Non-NHSN User</b>	Number of hospital acquired <i>C. Diff</i> lab-identified events among all inpatients except well-baby nurseries.	Facility-wide inpatient days, excluding well-baby nursery days.	
<b>Falls</b>	Number of adult inpatient falls with injury of minor or greater. (Report by unit type.)	Adult inpatient days.	Process measure: RCA completed for any fall with major injury or death
<b>MRSA – Use RD if Non-NHSN User</b>	Number of hospital-acquired MRSA bacteremia events per NHSN criteria.	Inpatient days.	
<b>Pressure Injuries</b>	1. Number of adult inpatients with one or more hospital-acquired stage 2, 3, or 4 pressure injuries on prevalence measurement by unit type.	1. All adult inpatients surveyed for the prevalence measurement. (Use adult inpatient admissions if reporting all HAPU for the month instead of prevalence.)	Process measure: RCA completed for any HAPU stage 3 or 4
	Hospital-acquired pressure injuries as defined in AHRQ PSI 03		
<b>Readmissions</b>	<ol style="list-style-type: none"> <li>All-payor, all-cause, 30-day readmissions to same facility</li> <li>Medicare, all-cause, 30-day readmissions to same facility</li> </ol>		
<b>Sepsis</b>	<ol style="list-style-type: none"> <li>Post-op sepsis as defined in AHRQ PSI 13</li> <li>Hospital-onset sepsis mortality</li> <li>Overall sepsis mortality</li> </ol>		
<b>Surgical Site Infections</b>	NHSN criteria for Surgical Site Infections for: colon, abdominal hysterectomy, total hip, and total knee surgeries		
<b>Patient &amp; Family Engagement</b>	<ol style="list-style-type: none"> <li>Planning checklist for patients being admitted</li> <li>Shift change huddles and bedside reporting</li> <li>Designated person or functional area responsible for patient/family engagement (PFE)</li> <li>Active PFE committee or other committee with patient/family representation</li> <li>Patient representative on governing board or other leadership committee</li> </ol>		
<b>Post-op Venous Thromboembolism</b>	Number of surgery patients that develop a post-op PE or DVT	Number of adult patients undergoing surgery as defined in AHRQ PSI-12	
<b>Ventilator-Associated Events</b>	<ol style="list-style-type: none"> <li>VAC per NHSN criteria</li> <li>IVAC per NHSN criteria</li> </ol>	Ventilator days	
<b>Worker Safety: Patient Handling</b>	Number of worker harm events related to patient handling	Number of worked full-time equivalents (FTE)	
<b>Worker Safety: Workplace Violence</b>	Number of worker harm events related to workplace violence	Number of worked full-time equivalents (FTE)	