Champions:
1. Please identify the Executive Leadership Team Member: Associate Director Patient Care Services
2. Please identify the Performance Measures champion - individual(s): XXXX
3. Please identify the Facility Committee who is responsible for this measure: Clinical Performance Measures Committee FW

Action Plan (indicate due dates and who is responsible for each action):
Conclusion: Data for 4 out of 5 months reported indicates performance below target. A review of outliers found staff documentation to be inconsistent – patients with secondary diagnosis of CHF were included.

Recommendations: Reinforce performance measure guidelines and nursing responsibilities.

Action: A review of concurrent monitor by Nurse Managers found performance improvement for the week of April 27 when compared with March (up 63.1% form 51.8% in March). The Nurse Managers also identified the need for significant improvements in discharge documentation. Discharge documentation needs to include all patients with a primary and secondary admission diagnosis of CHF. A problem check list was established. Updates to reminders were made by Nursing ADPAC to further encourage compliance; until discharge note can be changed to reminder dialog discharge note (no date for the change has been established).

Follow-up: CPG Coordinator to continue to review monthly EPRP data and share fallout cases with Nurse Managers. Nursing staff will continue to monitor all CHF admissions/discharges to ensure compliance with performance measure. Nurse Managers will follow-up with individual fallouts for corrective action.