

Hospital Mortality

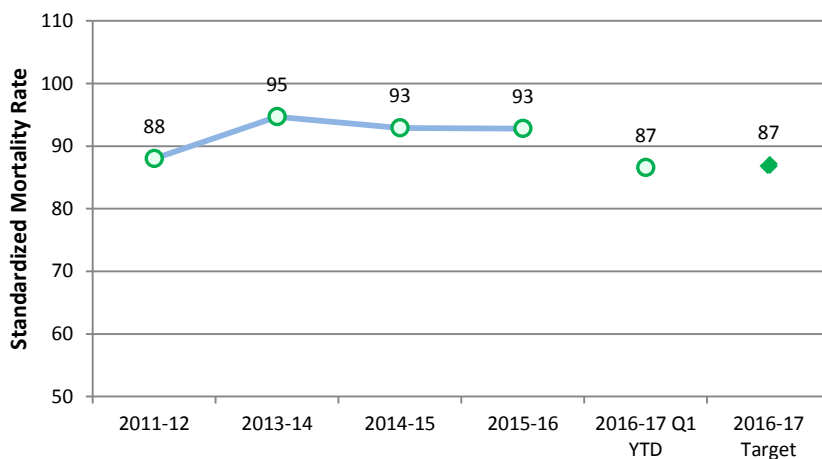
Measure Definition

The ratio of actual number of deaths compared to the expected number of deaths based upon the type of patients admitted to hospitals. This ratio is multiplied by 100 for reporting purposes. The ratio compares actual deaths to expected deaths after adjusting for factors that affect in-hospital mortality, such as patient age, sex, diagnosis and other conditions. The expected deaths are based on comparison to similar patients in national databases.

Understanding this Measure

This measure of quality care shows how successful hospitals have been in reducing patient deaths and improving patient care. A mortality ratio equal to 100 suggests that there is no difference between the hospital's mortality rate and the overall average rate. A mortality ratio greater than 100 suggests that the local mortality rate is higher than the overall average. A mortality ratio less than 100 suggests that the local mortality rate is lower than the overall average.

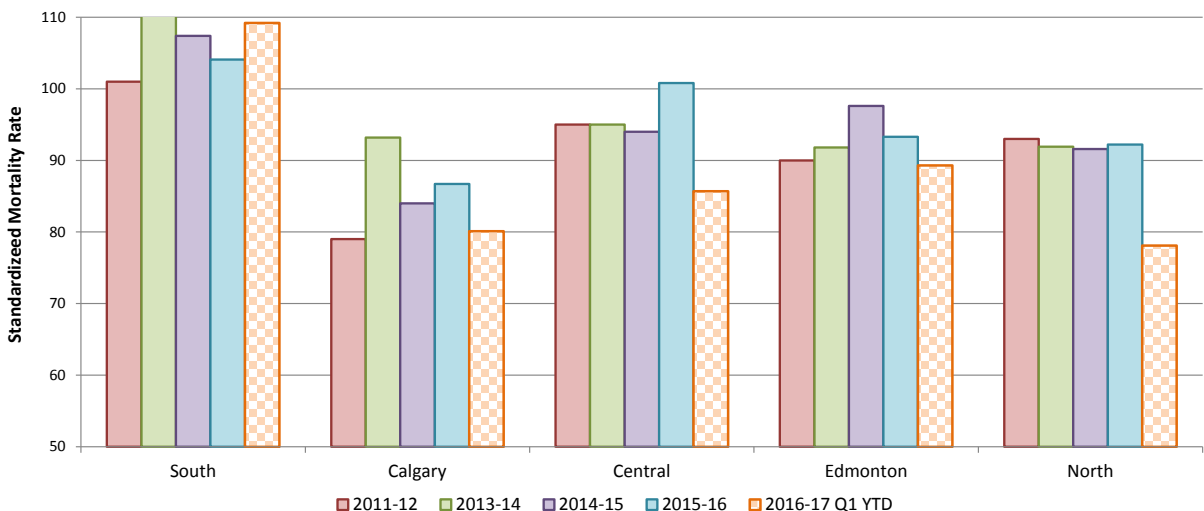
Hospital Standardized Mortality Rate - Annual



How Do We Compare?

Alberta ranked 3rd best nationally out of 10 provinces. Alberta is performing the same as the national rate in 2014-15.

Hospital Standardized Mortality Rate - By Zone



NOTE: North Zone data for Q1 has been impacted due to the wildfires in Q1 resulting in the temporary closure of a hospital.

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ACTIONS

Zones have implemented several strategies proven to reduce mortality, including, but not limited to, multidisciplinary rounds, Rapid Response Teams, and the Ventilator Bundle (a group of interventions designed to improve care of patients on ventilators). Use of these strategies reduces the number of “code calls” — that is, “code blue,” cardiopulmonary arrest — per thousand discharges and the incidence of ventilator-associated pneumonia. Mortality can be consistently reduced through the use of a combination of evidence-based interventions.

Zones are conducting pressure ulcer assessments on admission and re-assess at regular intervals, provide education to clients and families and, evaluate and use results to make improvements.

Zones are implementing infection, prevention and control and hand hygiene initiatives to reduce CDI and other infection rates.

SCNs are implementing National Surgical Quality Improvement Program / Trauma Quality Improvement Program (NSQIP/TQIP) to improve surgical and trauma care.

The Fragility & Stability Program, Hip Fracture Acute Care Pathway is an initiative that is reducing Hospital Mortality in orthopedics – e.g., getting patients to the operating room within 48 hours significantly reduces postoperative mortality.

SUMMARY

Provincial, Central and Edmonton Zones achieved targets in Q1 2016-17.

Also, South and Calgary Zones are performing at or above the same period as last year.

North Zone results have been impacted by the temporary closure of Northern Lights Regional Hospital and displacement of the population in Fort McMurray due to the wildfires in Q1.

DID YOU KNOW

Trending HSMR results for several years has proven very useful: stable reporting year after year helps show how our HSMR has changed in relation to our quality improvement efforts – where we’ve made progress and where we can continue to improve.

Medication incidents are one of the leading causes of patient injury. **Medication Reconciliation** plays a key role in patient safety. This process ensures the medication history is comprehensive and accurate, and that all the discrepancies are addressed.

AHS has training on pressure ulcer prevention, assessment and treatment teams in all settings (hospital, long term care, designated supportive living, and home living) and specialized teams available to help staff.

Hospital Mortality

The ratio of actual number of deaths compared to the expected number of deaths based upon the type of patients admitted to hospitals. This ratio is multiplied by 100 for reporting purposes.

Hospital Standardized Mortality Rate	2013-14	2014-15	2015-16	Q1 YTD		Trend	2016-17 Target
				2015-16 Last Year	2016-17 Current		
Trend: ★ Achieved Target, ✓ Stable or better than prior period, ✗ Area requires additional focus							
Provincial	95	93	93	94	87	★	90
South Zone Total	116	107	104	108	109	✓	102
Chinook Regional Hospital	123	106	106	104	130	✗	97
Medicine Hat Regional Hospital	118	109	111	115	91	★	105
All Other Hospitals	104	110	94	108	92	★	105
Calgary Zone Total	93	84	87	87	80	✓	78
Foothills Medical Centre	97	92	94	97	89	✓	80
Peter Lougheed Centre	86	83	84	78	93	✗	80
Rockyview General Hospital	91	74	78	85	66	★	74
South Health Campus	N/A	74	75	69	53	★	74
All Other Hospitals	102	93	91	75	83	★	85
Central Zone Total	95	94	101	100	86	★	90
Red Deer Regional Hospital Centre	100	96	99	95	81	★	93
All Other Hospitals	92	93	102	102	88	★	89
Edmonton Zone Total	92	98	93	94	89	★	91
Grey Nuns Community Hospital	90	94	87	93	87	★	88
Misericordia Community Hospital	89	108	90	105	94	★	95
Royal Alexandra Hospital	92	98	92	101	93	✓	92
Sturgeon Community Hospital	94	81	91	92	86	✓	79
University of Alberta Hospital	94	101	102	93	93	★	94
All Other Hospitals	82	86	75	71	60	★	87
North Zone Total	92	92	92	94	78	★	88
Northern Lights Regional Health Centre ⁺	72	40	88	84	N/A	N/A	85
Queen Elizabeth II Hospital	83	93	97	89	81	★	93
All Other Hospitals	96	96	91	96	77	★	88

N/A: No results available - South Health Campus opened February 2013.

⁺North Zone results have been impacted by the temporary closure of Northern Lights Regional Hospital and displacement of the population in Fort McMurray due to the wildfires in Q1.

Eligible Cases	2013-14	2014-15	2015-16	Q1 YTD	
				2015-16 Last Year	2016-17 Current
Provincial	99,583	102,378	103,525	23,349	23,674
South Zone	8,154	8,321	8,149	2,073	2,090
Calgary Zone	32,933	34,027	34,619	8,700	8,678
Central Zone	12,400	12,945	12,845	3,334	3,252
Edmonton Zone	35,407	36,086	37,245	9,242	9,654
North Zone ⁺	10,689	10,999	10,667	N/A	N/A

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