

# UNIVERSITY OF KENTUCKY BOARD OF TRUSTEES

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AN EQUAL OPPORTUNITY UNIVERSITY

# **FY 2027 UK HEALTHCARE (UKHC) GOALS**



# **CURRENT UKHC QUALITY RANKINGS**

## CURRENT UKHC QUALITY RANKINGS

As an academic health system, UK HealthCare is uniquely positioned to provide access to high-quality care, expand education and research, and support community partners.

## FIVE-YEAR QUALITY ASPIRATIONS



Program	Vizient Quality and Accountability Rank	CMS Overall Star Rating	U.S. News and World Report Best Hospitals	Leapfrog Hospital Safety Grade	Medicaid Directed Payment Program
<i>CY24 Baseline</i>	<i>34th</i>	<i>★★★</i>	<i>#1 in Kentucky 5 - Nationally Ranked Programs</i>	<i>B</i>	<i>Achieved threshold on 9 of 14 measures</i>
<i>Five-year Aspiration (CY26-30)</i>	<i>Sustain Top 25</i>	<i>Sustain ★★★★ or better</i>	<i>Sustain #1 in Kentucky</i>	<i>Sustain A</i>	<i>Sustain 12 of 20 measures, or more, at threshold</i>
<i>Aspiration-to- Goal Translation</i>	<i>85<sup>th</sup> %tile</i>	<i>75<sup>th</sup> %tile</i>	<i>Achieve Vizient goals and continue to achieve program requirements</i>	<i>75<sup>th</sup> %tile in Safety Measures and continue to achieve program requirements</i>	<i>Strategically improve measures year-over-year</i>

## CURRENT UKHC QUALITY RANKINGS

UKHC Performance Management System



### Hospital Safety Grade (Leapfrog)

- Chandler **A**
- Good Samaritan **A**



### CMS Star Program (Care Compare)



Overall Star Rating



Patient Survey Rating



"Birthing-Friendly" Designation



Q&A	2025 Ranking	2026 YTD Ranking Estimate
AMC (Adult)	53	27 (out of 122)
Ambulatory	24	15 (out of 70)
Pediatrics	23	33 (out of 88)
Oncology	64	34 (out of 114)



### US News and World Report

- #2 in Kentucky
- Only hospital with ranked or high-performing specialties



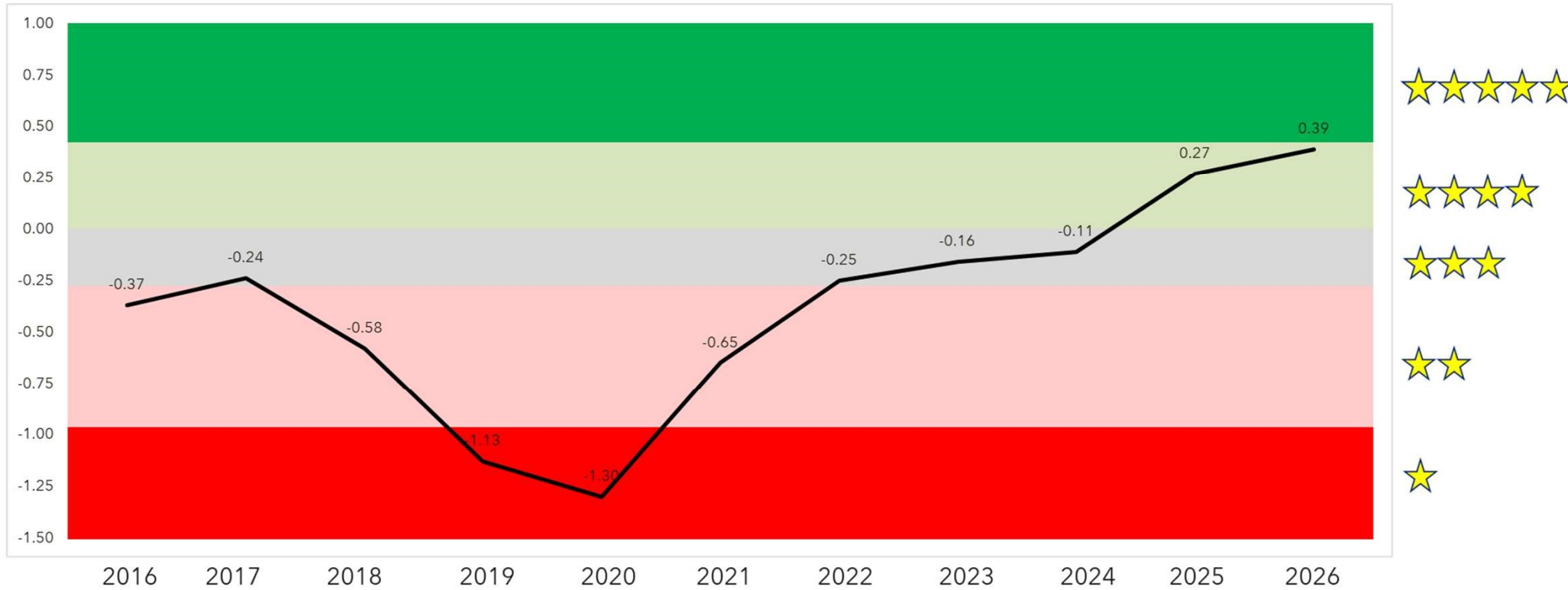
### Newsweek/Statista

- #1 in Kentucky
- #1 in Kentucky for Maternity

## CURRENT UKHC QUALITY RANKINGS

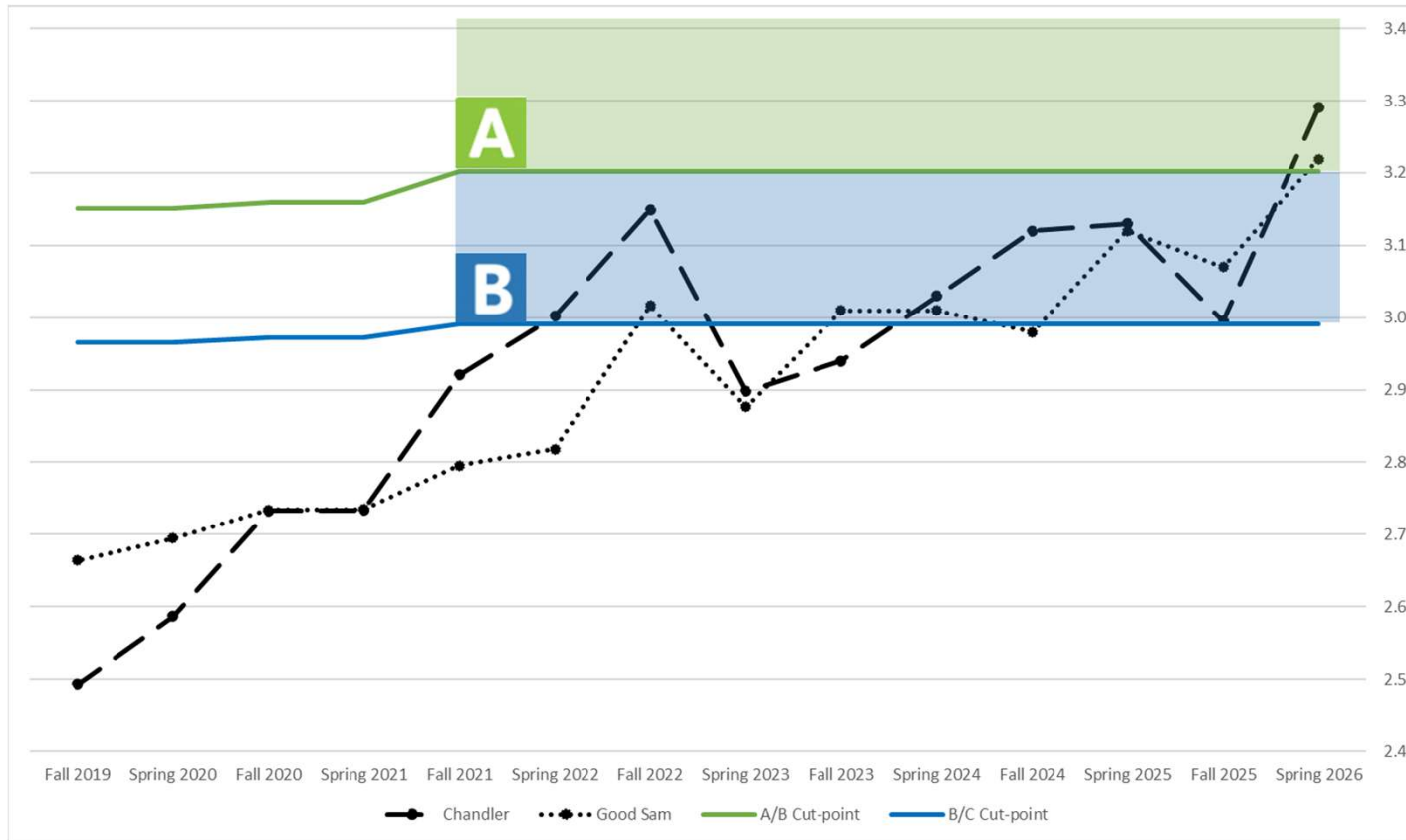
# Centers for Medicare and Medicaid Services (CMS) Star Program Journey

Note: star zones based on 2026 cut-offs



## CURRENT UKHC QUALITY RANKINGS

# Hospital Safety Grade Journey



# **HIGH RELIABILITY (HRO) JOURNEY TO SUPPORT SUSTAINMENT**



## Focus: **Zero Harm** for patients and workforce



Shifting from **reactive fixes** → **proactive, system-wide safety design**

### **Proactive Safety Mindset**

- High reliability organizations focus on anticipating risks and designing safer systems before harm occurs.

### **Everyday Safety Decisions**

- Safety is created through daily decisions by frontline staff and leaders, not just policies or audits.

### **Five Core Principles**

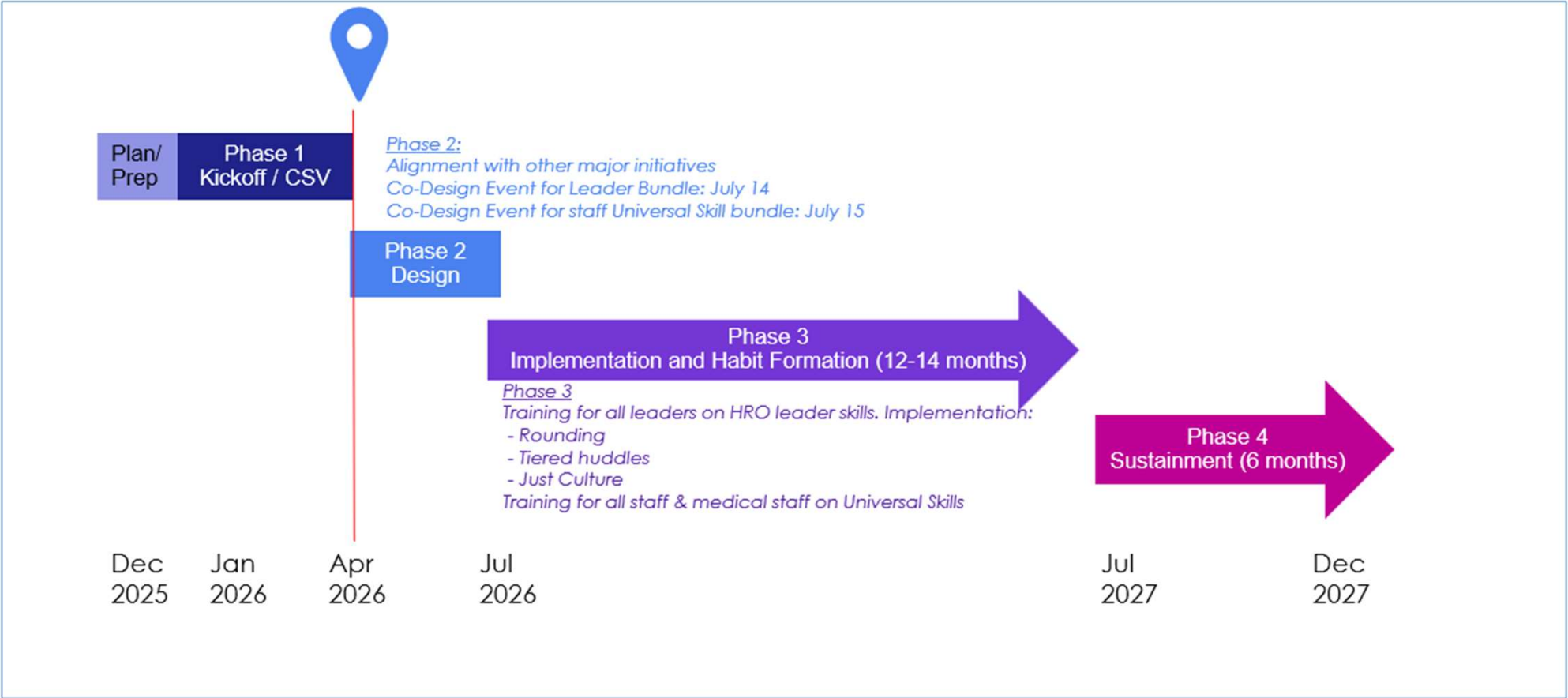
- Anticipate failure early
- Understand complexity (don't oversimplify)
- Stay connected to frontline care
- Respond and recover quickly
- Empower expertise at all levels

### **Leadership Commitment**

- Leadership role modeling and investment foster a culture of learning and continuous improvement for Zero Harm.

**HIGH RELIABILITY JOURNEY TO SUPPORT SUSTAINMENT**

# Roadmap to High Reliability



## HIGH RELIABILITY JOURNEY TO SUPPORT SUSTAINMENT

### Critical Success Factors

Training and education does not change behaviors or sustain culture



**Executive Ownership**



**Meaningful Medical Staff Buy-in and Ownership**



**Operational Leadership Structure Built Around HRO Leader Skills (Standard Work)**

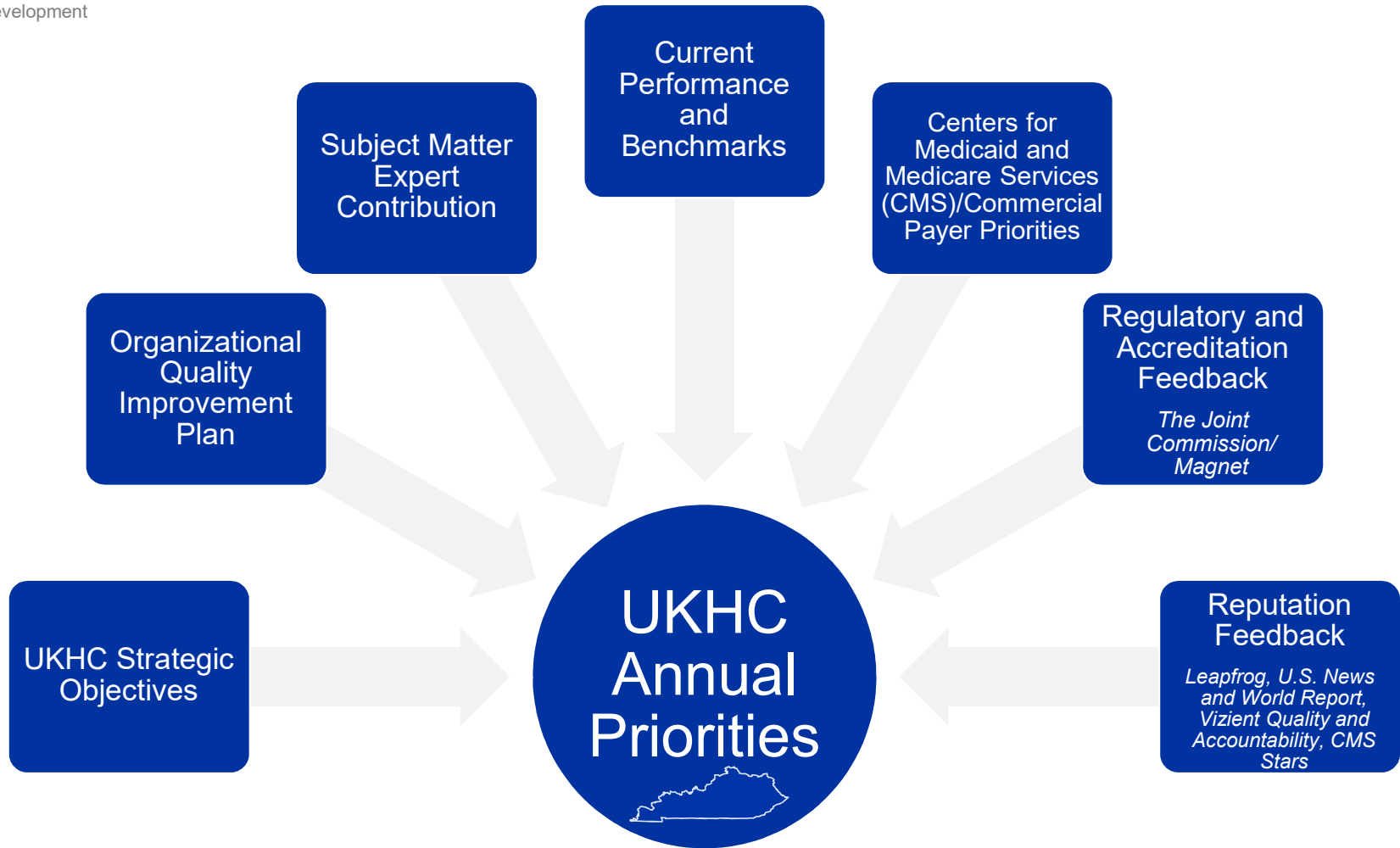


**Front-Line Adoption of Universal Reliability Skills for Error Prevention**

**FY 2027  
UK HEALTHCARE  
GOALS**

## FY 2027 UK HEALTHCARE GOALS

Inputs to Priority Development



## FY 2027 UK HEALTHCARE GOALS

Strategic objectives

Based on Strategy 2030, operational and financial reporting closely align to the broader enterprise strategy.

OUR **MISSION** remains unchanged.

UK HealthCare is committed to serving the entire Commonwealth of Kentucky.



This includes **commitment to the pillars of academic healthcare** — research, education and clinical care — **dedication to improving the health of the people of Kentucky** by providing advanced healthcare, serving as an information resource and **strengthening local healthcare by partnering** with community hospitals and physicians.

### ADVANCING KENTUCKY

#### ADVANCED CARE



Advance subspecialty care for Kentucky and beyond while maintaining a focus on quality, access and value

#### TAKING CARE OF OUR PEOPLE and OUR PARTNERS



Comprehensive care strategy for our employees, the immediate neighborhood and our partners across the Commonwealth

#### DISTINCTION



An academic health system with aligned clinical care, research and education of seven health-related colleges

## SCORECARD ALIGNMENT TO STRATEGIC OBJECTIVES

# STRATEGY 2030

### ADVANCED CARE



Service line development and growth

Advanced sub-specialty care destinations

Culture of excellence

### TAKING CARE OF OUR PEOPLE and OUR PARTNERS



Impactful partnerships

Care progression

Building our teams

### DISTINCTION



Academic discovery

System evolution

Innovation and AI



## SAFETY

Harm reduction



## QUALITY

Clinical effectiveness, evidence-based care



## PEOPLE

Workforce, culture and capability



## SERVICE

Patient experience, access and care coordination



## FINANCE

Financial sustainability and resource stewardship

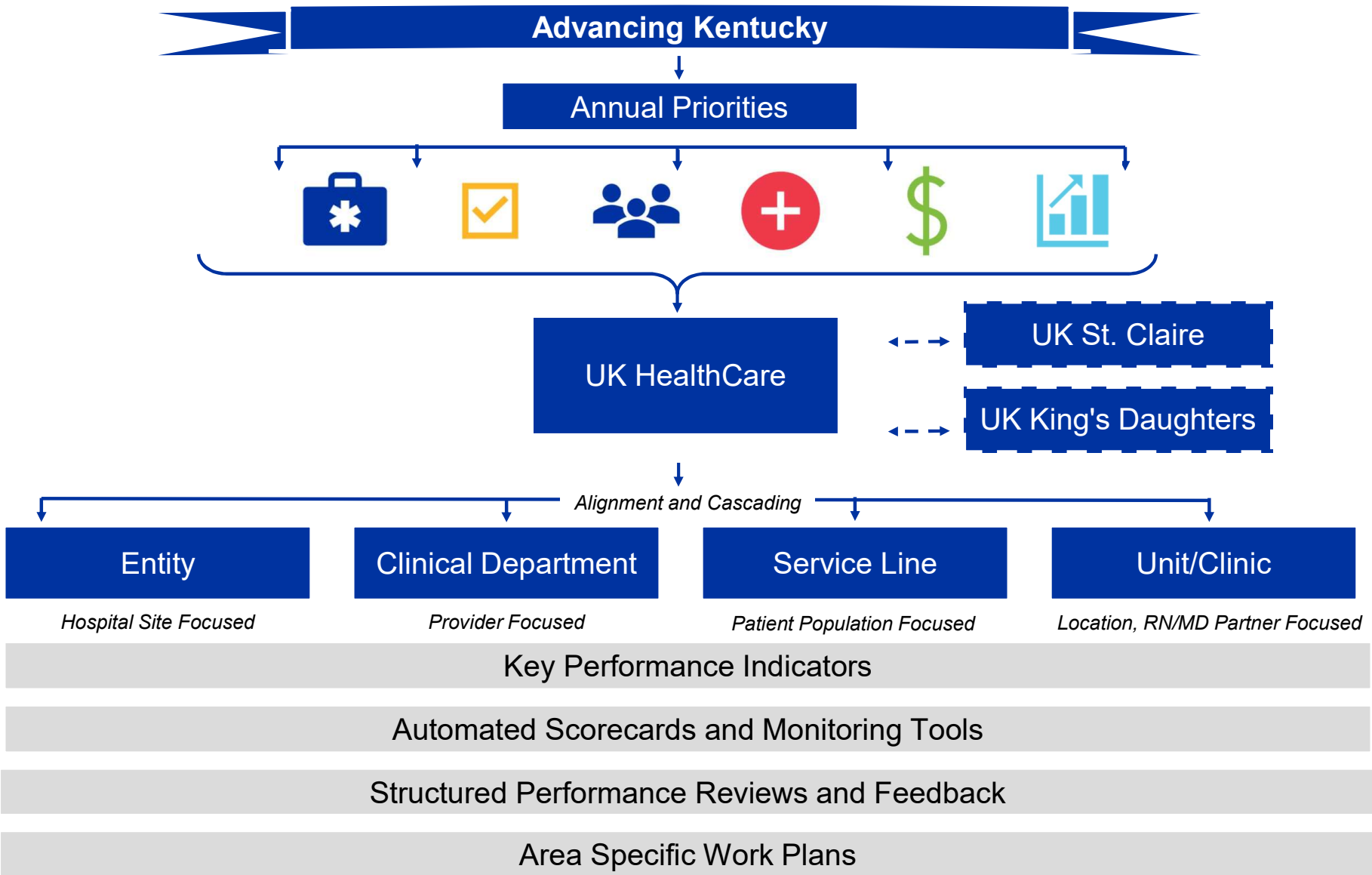


## GROWTH

Reputation, strategic expansion and innovation

High Reliability + Continuous Improvement + Team Empowerment =

# CULTURE THAT ADVANCES CARE FOR KENTUCKY





	<i>Hospital Acquired Infections</i>				
<b>Metric</b>	<b>CAUTI NHSN SIR</b>	<b>CLABSI NHSN SIR</b>	<b>MRSA NHSN SIR</b>	<b>SSI-COLO NHSN SIR</b>	<b>SSI-HYST NHSN SIR</b>
<b>FY27 Baseline</b>	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25
	<b>0.57</b>	<b>0.72</b>	<b>0.87</b>	<b>0.63</b>	<b>1.02</b>
<b>FY27 Target</b>	<b>0.41</b>	<b>0.50</b>	<b>0.64</b>	<b>0.63</b>	<b>0.77</b>
	<b>65<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>	<b>60<sup>th</sup> %tile</b>	<b>75<sup>th</sup> %tile</b>	<b>60<sup>th</sup> %tile</b>
<b>Aspirational Target</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>
<b>Benchmark</b>	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS

NHSN SIR: National Healthcare Safety Network Standardized Infection Ratio

CAUTI: Catheter-Associated Urinary Tract Infection

CLABSI: Central Line-Associated Bloodstream Infection

MRSA: Methicillin-Resistant Staphylococcus Aureus

SSI-COLO: Surgical Site Infection for Colorectal Surgeries

SSI-HYST: Surgical Site Infection for Abdominal Hysterectomy




# SAFETY

<i>Patient Safety Events</i>				
Metric	Pressure Ulcer PSI 03 Rate	Post-Op Sepsis PSI 13 Rate	Hospital Fall with Fracture PSI 08 Rate	Post-Op Respiratory Failure PSI 11 Rate
FY27 Baseline	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25
	<b>0.32</b>	<b>1.03</b>	<b>1.18</b>	<b>1.44</b>
FY27 Target	<b>0.56</b>	<b>0.45</b>	<b>0.51</b>	<b>0.42</b>
	<b>75<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>	<b>60<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>
Aspirational Target	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>
Benchmark	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS	Vizient Q&A Comprehensive AMC 2026 via CMS

PSI: Patient Safety Indicator for AHRQ (Agency for Healthcare Research and Quality)



# QUALITY CLINICAL EFFECTIVENESS


 New benchmark

Metric	Mortality Index			Length of Stay Index (with Outliers)			30 Day Unplanned Readmission Rate	
	<i>Adult</i>	<i>Pediatric</i>	<i>Neonate</i>	<i>Adult</i>	<i>Pediatric</i>	<i>Neonate</i>	<i>Adult</i>	<i>Pediatric</i>
FY27 Baseline	Apr '25 – Mar '26	Apr '25 – Mar '26	Apr '25 – Mar '26	Apr '25 – Mar '26	Apr '25 – Mar '26	Apr '25 – Mar '26	Mar '25 – Feb '26	Mar '25 – Feb '26
	<b>0.71</b>	<b>1.01</b>	<b>0.84</b>	<b>0.99</b>	<b>0.82</b>	<b>0.93</b>	<b>12.67%</b>	<b>6.72%</b>
FY27 Target	<b>0.71</b>	<b>0.66</b>	<b>0.64</b>	<b>0.95</b>	<b>0.97</b>	<b>0.94</b>	<b>10.83%</b>	<b>5.53%</b>
	<b>75<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>	<b>75<sup>th</sup> %tile</b>	<b>70<sup>th</sup> %tile</b>	<b>70<sup>th</sup> %tile</b>	<b>55<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>
Aspirational Target	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>
Benchmark	Vizient Q&A Comprehensive AMC 2026	Vizient Q&A Pediatrics 2026	Vizient Q&A Pediatrics 2026	Vizient Q&A Comprehensive AMC 2026	Vizient Q&A Pediatrics 2026	Vizient Q&A Pediatrics 2026	Vizient Q&A Comprehensive AMC 2026	Vizient Q&A Pediatrics 2026





# QUALITY EVIDENCE-BASED CARE

 New measure



Metric	Colorectal Cancer Screening	Controlling High Blood Pressure	Sepsis Management Bundle	Statin Therapy Cardiovascular Disease	Breast Cancer Screening	Well Child Visit 3-6 Years
FY27 Baseline	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25
	<b>78.77%</b>	<b>74.95%</b>	<b>21.00%</b>	<b>80.34%</b>	<b>77.89%</b>	<b>89.58%</b>
FY27 Target	<b>78.00%</b>	<b>75.00%</b>	<b>56.43%</b>	<b>85.00%</b>	<b>78.00%</b>	<b>90.00%</b>
	<b>Stepped Improvement</b>	<b>Stepped Improvement</b>	<b>65<sup>th</sup> %tile</b>	<b>CY27 MDP Target</b>	<b>Stepped Improvement</b>	<b>CY27 MDP Target</b>
<b>Benchmark</b>	Medicare Merit-based Incentive Payment System (MIPS) Historical Quality Benchmarks	Medicare Merit-based Incentive Payment System (MIPS) Historical Quality Benchmarks	Vizient Q&A Comprehensive AMC 2026	Medicare Merit-based Incentive Payment System (MIPS) Historical Quality Benchmarks	Medicare Merit-based Incentive Payment System (MIPS) Historical Quality Benchmarks	National Committee for Quality Assurance HEDIS (Healthcare Effectiveness Data and Information Set)



Metric	Staff Turnover Rate	OSHA DART Rate	High Reliability Leader Skills Training Completion
FY27 Baseline	Mar '25 – Feb '26		N/A
	15.05%		
FY27 Target	12.07%		
	75 <sup>th</sup> %tile		
Aspirational Target	Top Decile		100%
Benchmark	ODB Q&A Comprehensive AMC 2026		Internal Improvement



★ New measure



Metric	HCAHPS Rate the Hospital	CHILD HCAHPS Rate the Hospital	OAS CAHPS Facility Rating	Med Practice Survey Overall Score	New Patients Seen within 10 Days
FY27 Baseline	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25	Jan '25 – Dec '25
	<b>71.42%</b>	<b>72.44%</b>	<b>86.41%</b>	<b>94.69</b>	<b>42.02%</b>
FY27 Target	<b>76.00%</b>	<b>77.10%</b>	<b>90%</b>	<b>95.3</b>	<b>43.08%</b>
	<b>75<sup>th</sup> %tile</b>	<b>60<sup>th</sup> %tile</b>	<b>65<sup>th</sup> %tile</b>	<b>75<sup>th</sup> %tile</b>	<b>75<sup>th</sup> %tile</b>
<b>Aspirational Target</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>	<b>Top Decile</b>
<b>Benchmark</b>	Press Ganey UHC	Press Ganey UHC	Press Ganey UHC	Press Ganey UHC	Vizient Clinical Practice Solutions Center 2025

HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems

OAS CAHPS: Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems



★ New measure

**\$ FINANCE**

**GROWTH**



<b>Metric</b>	<b>Personnel and Non-Personnel Expenses</b>	<b>Operating Margin (Before Supplementals)</b>	<b>Strategic Volumes</b> Ambulatory Service Visits, Emergency Department Visits, Total Discharges, Operating Room Cases
<b>FY27 Target</b>	<b>Flex Budget</b>	<b>Budget</b>	<b>Static Budget</b>

# **FY2027 ORGANIZATION QUALITY IMPROVEMENT PLAN**

## **ANNUAL ORGANIZATION QUALITY AND PERFORMANCE IMPROVEMENT PLAN REQUIREMENTS**

Joint Commission Standards state:

Leadership Standard LD.11.01.01 states that the governing body is ultimately accountable for the safety and quality of care, treatment and services.

This is accomplished through the use of data and information to guide decisions in performance improvement.

Additionally, the Performance Improvement Standard 11.01.01 states that the hospital has an ongoing quality assessment and performance improvement program.



## **FY2027 ANNUAL QUALITY AND SAFETY PLAN**

- Links mission, vision, values and strategic objectives to our enterprise goals and performance improvement structure and initiatives
- Outlines our processes and structure for performance improvement across the enterprise
- Highlights how data and information are reviewed through our committee structure and governing bodies
- Describes our enterprise performance improvement methodology and sustainment model through high reliability principles
- Identifies the processes and outcomes that will be the focus for improvement
- Provides structure and focus for both leaders and staff that will lead to meaningful and sustainable change.



# QUESTIONS



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