



Indiana University Health

CTL TEAM MEETING

12/2023

CTL Metrics

IU Health Cellular Therapy
 550 N University Bld Rm 3453
 Indianapolis, IN 46202 v3.2022

2023 QUALITY INDICATORS DASHBOARD IU Health Cellular Therapy

CLIA # 15D0902829
 CAP # 7195447

Policy Code #	Cellular Therapy Quality Indicator	Threshold	Frequency	Percent / Number per Indicated Frequency												
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
3.a	Occurrence Investigation: Assigned/Log/Short Term Action	100% Complete	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
3.b	Occurrence Investigation: Long Term Action Plan	100% Complete	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
3.c	Occurrence Investigation: CAPA Effectiveness	100% Complete	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
16	Equipment PM and Function Checks	100% Compliance	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
22.a	Data Integrity Audits - Electronic Record (June and December)	100% Data Retrieval	SA						100%							
22.b	Data Integrity Audits - Instrument Backup (June and December)	100% Data Retrieval	SA						100%							
7.b	BCP Scenario Drill (April and October)	100% Performed	SA				100%							100%		
7.a	Business Continuity Plan Audit (January and July)	100% Performed	SA	100%							100%					
2	Product Labeling	0 Products	M	0	0	0	0	0	0	0	0	0	0	0		
19	CTL Analyzer Quality Control Verification	100% Compliance	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
13	Specimen Submission, Handling, Referral	≤ 2%	M	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%		
14	Test Systems, Equip, Reagents, Supplies	100% Reviewed	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
17	Calibration and Calibration Verification	100% Reviewed	M	N/A	N/A	100%	100%	100%	N/A	N/A	N/A	100%	N/A			
20	Comparison of Test Results	100% Complete	M	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
18.a	Sterility Reporting (January)	100% Compliance	M	100%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			
11	Environmental Monitoring	100% Complete	Q			100%			100%			100%				
21	Test Formats (January)	100% Complete	A	100%												
4	Personnel Competency (December)	100% Complete	A													
6	Agreement Audit (July)	100% Complete	A							100%						

Data Submitted by: _____ Signature: _____

Date: _____

Discussion/Corrective Action/Technical Supervisor Comments: Sterility Reporting for April and May were incorrectly entered as 100%. Results were updated to "n/a" 08/15/2023 -ds



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Pillar Metrics – October 2023



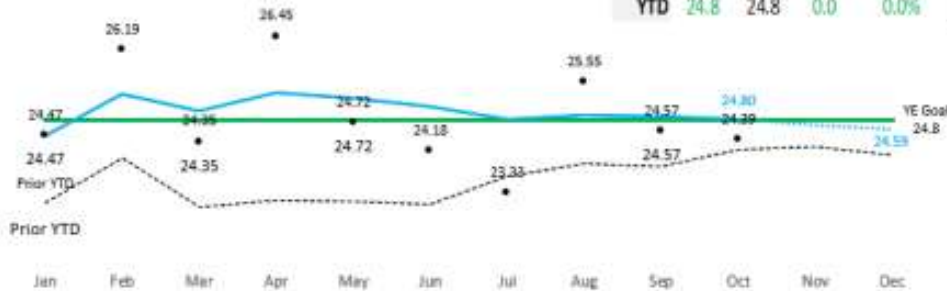
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Improving Quality and Safety (Red Blood Cell Units / 1K Adj Patient Days)

Metric Owner = J. Isaac



Oct - 2023				
	Actual	Target	Var	% Var
MTD	24.4	24.8	-0.4	-1.7%
YTD	24.8	24.8	0.0	0.0%



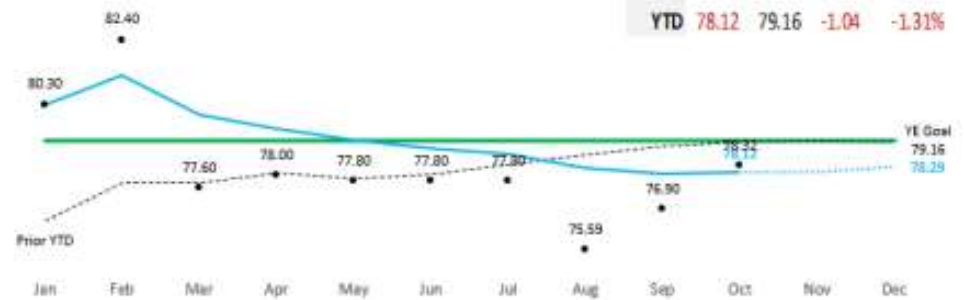
- Early negative trend driven by high number of mass transfusion protocols.
- Launched Computerized Provider Order Entry (CPOE) in October for ease of order and error reduction.
- Modeling Nov-Dec at 95% run rate due to CPOE go-live.

Great Patient Experiences (Net Promoter Score)

Metric Owner = M. Jordan



Oct - 2023				
	Actual	Target	Var	% Var
MTD	78.32	79.16	-0.84	-1.06%
YTD	78.12	79.16	-1.04	-1.31%



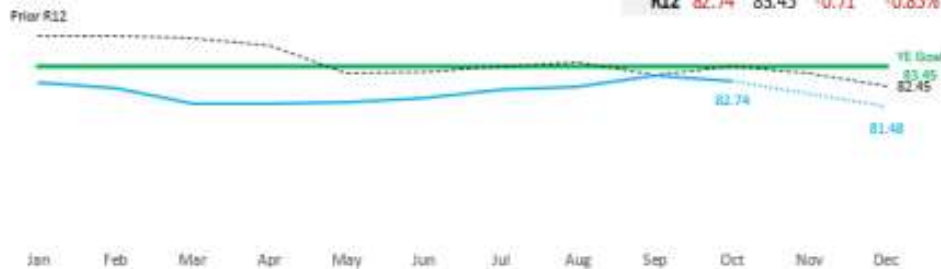
- Improvement continued in October (+1.4 pts over September)
- Mitigating staffing challenges with cross-site coverage; utilizing waiting room rounding in South Central region.
- Modeling Nov-Dec at Nov MTD Actual (79.09).

Great Team Member Experiences (Rolling 12 mo Retention %)

Metric Owner = M. Sobolowski



Oct - 2023				
	Actual	Target	Var	% Var
YTD	84.52	86.21	-1.69	-1.96%
R12	82.74	83.45	-0.71	-0.85%



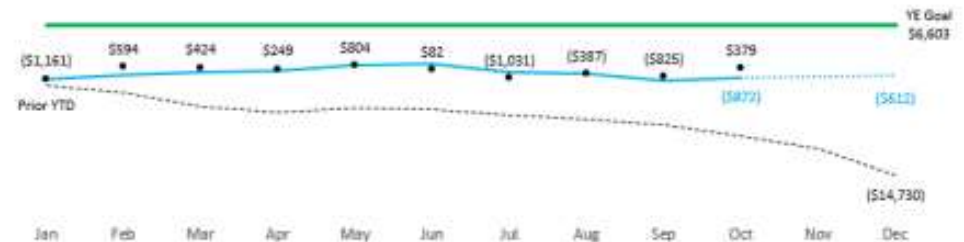
- 16 separations in October (9 in Oct 22); 224 YTD (223 in 2022 YTD).
- KOT Pareto/AA; Interview process changes.
- Modeling Nov-Dec terminations on current headcount and '23 YTD avg monthly separations.

Funding Our Vision (Operating Income in \$ Thousands)

Metric Owner = C. Day



Oct - 2023				
	Actual	Target	Var	% Var
MTD	\$179	\$658	-\$279	-42%
YTD	-\$872	\$6,094	-\$6,966	-114%



- Material improvement in Q4 2023 vs. 2022 on Chargeback adjustments and FTE holds.
- OI negative Jul-Sept on 1.85% CDM adjustment. Supply and Contract Expense management; OT clamp down.
- Modeling current run rate plus known factors and adjusted for pat

Housekeeping Items

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- Self-Evaluations Due 12/29/23
- MediaLab – There are only a few things outstanding. Please finish prior to 1/1
- UKG go-live delayed until February.
- We are trying to get new versions of forms into place but it looks like it will not happen by 1/1/24 like I hoped.
 - I will let you know when they go into effect.
 - Minor changes for the most part (removed Elaine and Dr. Goebel where not necessary)
- We have validated the ISBT printer at Riley.
 - Not in use due to SOP and training for nurses.
 - CTL ISBT validation will be following soon.



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Staffing updates

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- We are fully staffed.
 - Welcome Chandler!
 - We need to be mindful to not get overtime and to use extra time for the projects we have been delaying.

- Jennifer has agreed to take over the duties of Safety Officer.



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Values Acknowledgments: Purpose, Excellence, Compassion, Team

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Thanks to the entire lab for coming together to get through the DxH being down.



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- FACT Inspection coming Jan-March 2024



Questions???



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