



**BAPTIST
HEALTH**

Quality and Safety Strategic Plan

FY 2026

(October 2025-September 2026)

Introduction

The Quality and Safety Strategic Plan describes Baptist Health's system-wide, multidisciplinary, and data-informed approach to supporting safe, high-quality care in alignment with its Mission, Vision, and Values and in support of the goal of Zero Preventable Harm. The program is designed to support continuous improvement across the organization and reflects the intent of applicable federal and state regulatory frameworks, including CMS Conditions of Participation related to Quality Assessment and Performance Improvement.

The program provides a framework for prioritizing, implementing, monitoring, and evaluating improvement activities across the health system while accounting for the diversity of patient populations and services provided.

Mission

The mission of Baptist Health is "To make hope, healing and well-being accessible to every person as an expression of God's love."

Vision

Baptist Health is continually striving to improve the quality of services to exceed the needs and expectations of our patients, families, and community through excellence in quality, safety, service, and affordability. Our vision is "A lifetime of health, together."

Values

Community Advocacy

Contribute to the well-being of all community members and improve health equity through partnership, civic involvement, responsible action, and charitable service

Respect

Foster a welcoming culture of inclusiveness and belonging that treats those we serve and each other with dignity, compassion, integrity, and respect

Excellence

Achieve the highest quality of care and service in all we do through continuous improvement and innovation

Stewardship

Be accountable for managing resources responsibly, efficiently, and equitably

Guiding Principles

- We are guided by the healing ministry of Christ.
- We believe in the dignity of every person.
- We promote physical, mental, and spiritual well-being.

Strategy

Strategic Objectives are grouped within three domains: People, Quality, and Stewardship. Initiatives are determined or modified annually to support and align with the strategic objectives for the overall Strategic Plan.

Scope and Activities

All departments across Baptist Health, including clinical and non-clinical areas, participate in ongoing quality improvement and patient safety activities appropriate to their roles and functions. Improvement efforts are supported through leadership and board oversight structures and interdisciplinary collaboration.

Team members and medical staff receive education and training related to patient safety principles, reporting safety concerns, and performance improvement methodologies as part of orientation and ongoing training and development.

Patient Safety Organization

Baptist Health, including all licensed hospitals, is a member of the Florida Patient Safety Organization (PSO). Participation in a PSO supports Baptist Health's efforts to advance patient safety and quality improvement through structured review and learning processes, consistent with the Patient Safety and Quality Improvement Act of 2005.

Collaborative Culture of Safety

Baptist Health promotes a collaborative culture of safety that emphasizes learning, communication, and continuous improvement. The organization encourages the identification of safety risks, near misses, and opportunities for improvement to support safer care environments for patients, visitors, and team members.

Safety culture assessments are regularly conducted to assess provider and staff perceptions of patient safety and identify opportunities for internal communication, education, and evaluation.

Performance Improvement Priorities

The system's approach to performance improvement is continuously assessed and revised to support improved patient outcomes and the delivery of safe care. The criteria used to prioritize opportunities for improvement include, but are not limited to:

- Aligning with mission/vision
- Supporting strategic plan goals/objectives
- Improving patient safety
- Enhancing patient outcomes
- Increasing operational efficiency of care
- Reducing healthcare disparities
- Advancing efforts to reduce patient harm

Performance Improvement Priorities are established through a collaborative process involving executive leadership, with input from clinical leadership, and the Board of Directors.

Baptist Health utilizes recognized quality improvement methodologies appropriate to the scope and complexity of identified opportunities. Improvement activities focus on strengthening care processes, reducing variation where appropriate, and supporting reliable, patient-centered care.

Performance improvement priorities are reviewed and adjusted as needed based on organizational goals, patient populations, and regulatory requirements.

Approach to Achieving Health Equity

Baptist Health is committed to advancing equitable care and improving health outcomes for the communities it serves. When available and appropriate, performance data is stratified by various demographic and other health equity related indicators to better understand opportunities to reduce disparities and support equitable access to safe, high-quality care.

Governance and Leadership

Quality and patient safety are foundational components of Baptist Health's strategic plan. Oversight of the Quality Improvement and Patient Safety Program is provided through established governance structures, including executive leadership and Board-level committees. These bodies support the program by providing appropriate resources, promoting leadership engagement, and reinforcing accountability for system-wide improvement efforts.

Measurement & Monitoring

Performance is monitored using a variety of Key Performance Indicators (KPIs) designed to support organizational learning and improvement. Indicator categories may include, but are not limited to:

- Patient safety outcomes
- Clinical quality measures
- Patient experiences scores
- Patient-flow metrics
- Health equity-related measures

Data are reviewed at appropriate intervals to identify trends and inform improvement priorities.

Baptist Health

FY 2026 System Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 System Performance Improvement Priorities

Priority	Facility
Severe Obstetrical Complications Overall	BCH, JAX
Disparity: Severe Obstetrical Complications Black/African American patients	BCH, JAX
Assisted Falls %	BCH
Mobility Initiative	CLY, NAS, STH
Transfers to Higher Level of Care (THLC)	CLY
Disparity: Pediatric Baker Act Identification	CLY
Surgical Never Events	JAX
Sepsis Order Set Usage – Severe Sepsis and Septic Shock	JAX
Disparity: CMS Heart Failure Readmissions in Black/African American patients	NAS
Disparity: Food Insecurity in Seniors	STH
Medication Errors	STH
Unplanned Extubation	WCH
Campus Falls	WCH
CLABSI	WCH
Disparity: Access to Medicaid	WCH
PIVIE	WCH
Disparity: Adolescent program readmissions	Behavioral Health (PHP/IOP)

Baptist Medical Center Beaches

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Severe Obstetrical Complications Overall
Disparity: Severe Obstetrical Complications Black/African American patients
Assisted Falls %

Baptist Medical Center Clay

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Mobility Initiative
Transfers to Higher Level of Care (THLC)
Disparity: Pediatric Baker Act Identification

Baptist Medical Center Jacksonville

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Surgical Never Events
Severe Obstetrical Complications Overall
Disparity: Severe Obstetrical Complications Black/African American patients
Sepsis Order Set Usage – Severe Sepsis and Septic Shock

Baptist Medical Center Nassau

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Mobility Initiative
Disparity: CMS Heart Failure Readmissions in Black/African American patients

Baptist Medical Center South

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Disparity: Food Insecurity in Seniors
Mobility Initiative
Medication Errors

Wolfson Children's Hospital

FY 2026 Facility Key Performance Indicators

KPI
Falls with Injury
Serious Safety Event Rate
Telemetry Utilization
Hospital Wide Readmissions
Near Miss Event Percentage
Hospital Onset Bloodstream Infections

FY 2026 Facility Performance Improvement Priorities

Priority
Unplanned Extubation
Campus Falls
CLABSI
Disparity: Access to Medicaid
PIVIE

Behavioral Health Partial Hospitalization/ Intensive Outpatient Program

FY 2026 Performance Improvement Priorities

Priority

Disparity: Adolescent program readmissions