Overview of the Spring 2020 Leapfrog Hospital Safety Grade

Presented by:
Missy Danforth, Vice President of Health Care Ratings, The Leapfrog Group

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ABOUT THE LEAPFROG HOSPITAL SAFETY GRADE

What is the Leapfrog Hospital Safety Grade?

The Safety Grade uses up to 28 national patient safety measures from the Centers for Medicare & Medicaid Services (CMS) and the Leapfrog Hospital Survey, and information from other supplemental data sources, to produce a single letter grade (A, B, C, D, or F) representing a hospital's overall performance in keeping patients safe from preventable harm and medical errors.

The Leapfrog Hospital Safety Grade launched in June 2012.

The Grade is issued two times per year: Spring (April/May) and Fall (October/November). This spring will be the 17th release.

More information is available at www.HospitalSafetyGrade.org

Who is eligible for a Leapfrog Hospital Safety Grade?

General acute care hospitals with enough publicly available data

- Hospitals missing measure scores for more than **7** process measures OR more than **5** outcome measures do not receive a grade

Due to the limited availability of public data, The Leapfrog Group is not able to calculate a Safety Grade for the following types of hospitals:

- Critical access hospitals (CAH)
- Long-term care and rehabilitation facilities
- Mental health facilities
- Federal hospitals (e.g., Veterans Affairs, Indian Health Services, etc.)
- Some specialty hospitals, such as surgery centers and cancer hospitals
- Free-standing pediatric hospitals
- Hospitals in U.S. territories

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MEASURE HIGHLIGHTS

Measure Selection Criteria

Measures are publicly available from national data sources, reflecting individual hospital results
- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets
- Supplemental data from the American Hospital Association's Annual Survey and IT Supplement

Measures are endorsed or in use by a national measurement entity

Measures are linked to patient safety ("freedom from harm")
- Directly quantifying patient safety events
- Assessing processes that lead to better outcomes
- Identified by experts as important to patient safety

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13 Process and Structural Measures

Measure Name	Primary Data Source	Secondary Data Source
Process and Structural Measures (13)		
Computerized Physician Order Entry (CPOE)	2019 Leapfrog Hospital Survey	2018 AHA Annual Survey IT Supplement [ii]
Bar Code Medication Administration (BCMA)	2019 Leapfrog Hospital Survey	2018 AHA Annual Survey IT Supplement [ii]
ICU Physician Staffing (IPS)	2019 Leapfrog Hospital Survey	2018 AHA Annual Survey [i]
Safe Practice 1: Leadership Structures and Systems	2019 Leapfrog Hospital Survey	N/A
Safe Practice 2: Culture Measurement, Feedback & Intervention	2019 Leapfrog Hospital Survey	N/A
Safe Practice 4: Identification and Mitigation of Risks and Hazards	2019 Leapfrog Hospital Survey	N/A
Safe Practice 9: Nursing Workforce	2019 Leapfrog Hospital Survey	N/A
Safe Practice 19: Hand Hygiene	2019 Leapfrog Hospital Survey	N/A
H-COMP-1: Nurse Communication	CMS	N/A
H-COMP-2:Doctor Communication	CMS	N/A
H-COMP-3: Staff Responsiveness	CMS	N/A
H-COMP-5: Communication about Medicines	CMS	N/A
H-COMP-6: Discharge Information	CMS	N/A

[i] AHA Annual Survey, Health Forum, LLC, a subsidiary of the American Hospital Association
[ii] AHA Annual Survey © 2018 Health Forum, LLC

15 Outcome Measures

Measure Name	Primary Data Source	Secondary Data Source
Outcome Measures (15)		
Foreign Object Retained	CMS	N/A
Air Embolism	CMS	N/A
Falls and Trauma	CMS	N/A
CLABSI (ICU and select wards)	2019 Leapfrog Hospital Survey	CMS
CAUTI (ICU and select wards)	2019 Leapfrog Hospital Survey	CMS
SSI: Colon	2019 Leapfrog Hospital Survey	CMS
MRSA	2019 Leapfrog Hospital Survey	CMS
C. Diff.	2019 Leapfrog Hospital Survey	CMS
PSI 3: Pressure Ulcer Rate	CMS	N/A
PSI 4: Death Rate among Surgical Inpatients with Serious Treatable Complications	CMS	N/A
PSI 6: Iatrogenic Pneumothorax Rate	CMS	N/A
PSI 11: Postoperative Respiratory Failure Rate	CMS	N/A
PSI 12: Perioperative PE/DVT Rate	CMS	N/A
PSI 14: Postoperative Wound Dehiscence Rate	CMS	N/A
PSI 15: Unrecognized Abdominopelvic Accidental Puncture or Laceration	CMS	N/A

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Reporting Periods by Data Source for January 31 Data Snapshot Date

<u>Leapfrog Hospital Survey Measures</u>

- The 2019 Leapfrog Hospital Survey includes several reporting periods. Because the data snapshot was January 31, 2020 the reporting periods will be displayed as follows:
  - CPOE, BCMA, ICU Physician Staffing, and the 5 NQF Safe Practices will be displayed as "2019"
  - CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be displayed as 07/01/2018 - 06/30/2019

<u>AHA Annual Survey and IT Supplement Measures</u>

- The reporting period for the 2018 AHA Annual Survey will be displayed as "2018" (**only used for hospitals that did not report via the Leapfrog Hospital Survey**)

- The reporting period for the 2018 AHA Annual Survey IT Supplement will be displayed as "2019" (**only used for hospitals that did not report via the Leapfrog Hospital Survey**)

<u>CMS Measures</u>

- The reporting period for the Patient Experience measures will be displayed as 04/01/2018 - 03/31/2019

- The reporting period for the 5 infection measures will be displayed as 04/01/2018 - 03/31/2019 (**only used for hospitals that did not report via the Leapfrog Hospital Survey**)

- The reporting period for the three HAC measures and seven PSI measures will be displayed as 07/01/2016 - 06/30/2018

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Measure Updates Since Fall 2019 – Process/Structural Measure Domain

CPOE
- Updated for hospitals that submitted/re-submitted a Leapfrog Hospital Survey after August 31, 2019
- No updates to AHA IT Supplement

BCMA
- Updated for hospitals that submitted/re-submitted a Leapfrog Hospital Survey after August 31, 2019
- No updates to AHA IT Supplement

ICU Physician Staffing
- Updated for hospitals submitted/re-submitted a Leapfrog Hospital Survey after August 31, 2019
- Updated for hospitals that use the 2018 AHA Annual Survey data

5 NQF Safe Practices
- Updated for hospitals that submitted/re-submitted a Leapfrog Hospital Survey after August 31, 2019
- Other hospitals will be reported as "Declined to Report"

5 Patient Experience Domains
- Updated for **all** hospitals receiving a Spring 2020 Hospital Safety Grade

Measure Updates Since Fall 2019 – Outcome Measure Domain

3 HAC Measures

- No updates for any hospital; HAC measures are updated annually by CMS in July

5 HAI Measures

- Updated for all hospitals receiving a Spring 2020 Hospital Safety Grade
  - 2019 Leapfrog Hospital Survey Results from Section 7B submitted by November 30
  - CMS Hospital Compare data published in January 2020

7 PSIs

- No updates for any hospital; PSIs are updated annually by CMS in July

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SCORING OVERVIEW

Weighting Process

Two measure domains, each weighted 50%:

- Process/structural measures
- Outcome measures

Three criteria for weighting individual measures:

- Strength of evidence (rating of 1 or 2)
- Opportunity (rating of 1, 2, 3), based on coefficient of variation
- Impact (rating of 1, 2, 3) based on:
  - number of patients possibly affected by the event (0, 1, 2, 3)
  - severity of harm to individual patients (1, 2, 3)

Weight Score = **[Evidence + (Opportunity x Impact)]**

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Z-Score Methodology

Standardizes data from individual measures with different scales

Counts how many standard deviations a hospital's score on the measure is away from the mean

Mean is set to 0
- Negative z-score: worse than the mean
- Positive z-score: better than the mean

How to Calculate Z-Score from Raw Measure Score:
- Process/structural measures:
  - (Raw Measure Score – Mean)/Standard Deviation
- Outcome Measures:
  - (Mean – Raw Measure Score)/Standard Deviation

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Overall Numerical Score

Sum the z-score for each measure multiplied by the weight for each measure

If a measure score is missing, the weight for that measure is re-apportioned to other measures within the same domain

3.0 is added to each hospital's final numerical score to avoid possible confusion with interpreting negative patient safety scores

3.0 + CPOE z-score X CPOE weight + IPS z-score X IPS weight + CLABSI z-score X CLABSI weight . . . etc.

DETAILS OF THE COURTESY SAFETY GRADE REVIEW PERIOD

Secure Website for Hospitals to Review their Safety Grade Data

http://www.HospitalSafetyGrade.org/data-review

Contact Information

Source Data

Hospital Source Data

Information About Source Data

The information in the table below represents your hospital's performance on each of the 28 measures used in the Hospital Safety Grade as of January 31, 2020 (the Data Snapshot Date). Please review this information to ensure that Leapfrog recorded the correct measure score from each publicly available data source.

Information that you will need to complete the review process is available in the following documents:
- Review Instructions
- Spring 2020 Calculator
- Scoring Methodology

Important Notes:

1. Only select the "No" radio button if the measure score Leapfrog has recorded for your hospital does not match the public report after you've completed the steps noted in item 4 of the "Complete the Review Process" section of the Review Instructions.

2. An asterisk next to a measure score means that data for the measure has been trimmed. Please refer to "A Note about Extreme Values" in the Review Instructions.

3. If "Supplemental Data Source" is listed for Computerized Physician Order Entry (CPOE), Bar Code Medication Administration (BCMA), and/or ICU Physician Staffing (IPS), review the "Using Secondary Data Sources" section in the Scoring Methodology document for more information about this source.

4. The Spring 2020 Safety Grade Town Hall Call will be held on February 24 at 1:00 PM ET. The purpose of the call will be to provide hospitals and other stakeholders with information on changes to the measures and Scoring Methodology. Register for the meeting using this link.

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Source Data

Name of the Measure	Type of Measure	Data Source/Links	Reporting Period	Measure Score	Does the measure score match the public report?
Computerized Physician Order Entry (CPOE)	Structure/ Process	Supplemental Data Source	2019	45	● Yes ○ No
Bar Code Medication Administration (BCMA)	Structure/ Process	Supplemental Data Source	2019	45	● Yes ○ No
ICU Physician Staffing (IPS)	Structure/ Process	2019 Leapfrog Hospital Survey	2019	Declined to Report	● Yes ○ No
Safe Practice 1: Leadership Structures and Systems	Structure/ Process	2019 Leapfrog Hospital Survey	2019	Declined to Report	● Yes ○ No

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What if the Measure Score Doesn't Match the Public Report?

Hospitals are asked to **contact the Help Desk immediately** once they have confirmed the data source, measure, and reporting period.

Please double check the following information **before** contacting the Help Desk:

- **Data source** - the data source listed on the Safety Grade Review Website is what you are referring to when verifying your measure score. For example, if Leapfrog Hospital Survey is listed as the data source for the HAI measures, and you are referring to the CMS HAI data when verifying your measure score, it will not match because that data was not used.

- **Measure** - the measure listed on the Safety Grade Review Website is what you are referring to when verifying your measure score.

- **Reporting period** - the reporting period listed on the Safety Grade Review website is what you are referring to when verifying your measure score.

- The Help Desk will need to know which measure and score you are inquiring about. We will also need and a copy of the public report (screen shot) that shows a different score for the measure. Please be sure the data source, measure name, and reporting period are visible in the screen shot.

Hospital Safety Grade Calculator

Measure Domain	Measure	Enter Your Hospital's Score Here (Do NOT Leave Blanks)	Mean	Standard Deviation	Z-Score[1]		Inputs to Weighting Individual Measures[2]			Weight[3]		Weighted Measure Score (Modified Z-Score x Final Weight)
					Original Z-Score	Modified Z-Score	Evidence	Opportunity	Impact	Standard Weight	Final Weight (N/A redistributes)	
Process/Structural Measures	Computerized Physician Order Entry (CPOE)		79.13	26.55	-2.9810	-2.9810	2	1.34	3	5.7%	5.7%	-0.1706
	Bar Code Medication Administration (BCMA)		82.30	24.21	-3.3998	-3.3998	2	1.29	3	5.6%	5.6%	-0.1906
	ICU Physician Staffing (IPS)		57.47	44.13	-1.3022	-1.3022	2	1.77	3	7.0%	7.0%	-0.0906
	SP 1: Culture of Safety Leadership, Structures & Systems		117.44	7.31	-16.0769	-5.0000	1	1.06	2	3.0%	3.0%	-0.1489
	SP 2: Culture Measurement, Feedback, & Intervention		117.14	11.00	-10.6491	-5.0000	1	1.09	2	3.0%	3.0%	-0.1519
	SP 4: Identification & Mitigation of Risks & Hazards		97.86	7.94	-12.3321	-5.0000	1	1.08	2	3.0%	3.0%	-0.1507
	SP 9: Nursing Workforce		98.21	7.16	-13.7099	-5.0000	1	1.07	3	4.0%	4.0%	-0.2010
	SP 19: Hand Hygiene		57.59	7.07	-8.1444	-5.0000	2	1.12	2	4.0%	4.0%	-0.2023
	H-COMP-1: Nurse Communication		91.04	2.14	-42.5435	-5.0000	1	1.02	2	2.9%	2.9%	-0.1452
	H-COMP-2: Doctor Communication		90.93	1.97	-46.1481	-5.0000	1	1.02	2	2.9%	2.9%	-0.1450
	H-COMP-3: Staff Responsiveness		84.39	3.47	-24.3028	-5.0000	1	1.04	2	2.9%	2.9%	-0.1469
	H-COMP-5: Communication about Medicines		77.87	3.47	-22.4713	-5.0000	1	1.04	2	2.9%	2.9%	-0.1472
	H-COMP-6: Discharge Information		86.53	3.16	-27.3910	-5.0000	1	1.04	2	2.9%	2.9%	-0.1464
Outcome Measures	Foreign Object Retained		0.02	0.06	0.3189	0.3189	1	3.00	2	4.3%	4.3%	0.0137
	Air Embolism		0.001	0.011	0.0881	0.0881	1	3.00	1	2.5%	2.5%	0.0022
	Falls and Trauma		0.44	0.35	1.2502	1.2502	2	1.80	3	4.5%	4.5%	0.0568
	CLABSI		0.70	0.58	1.2060	1.2060	2	1.83	3	4.6%	4.6%	0.0555
	CAUTI		0.77	0.57	1.3617	1.3617	2	1.73	3	4.4%	4.4%	0.0603
	SSI: Colon		0.81	0.65	1.2490	1.2490	2	1.80	2	3.4%	3.4%	0.0430
	MRSA		0.82	0.66	1.2520	1.2520	2	1.80	3	4.5%	4.5%	0.0569
	C. Diff.		0.63	0.36	1.7376	1.7376	2	1.58	3	4.1%	4.1%	0.0718
	PSI 3: Pressure Ulcer Rate		0.49	0.42	1.1526	1.1526	1	1.87	3	4.1%	4.1%	0.0468
	PSI 4: Death Rate, Surg. Inpatients w/ Serious Treatable Complications		162.89	19.36	8.4157	8.4157	1	1.12	2	2.0%	2.0%	0.1674
	PSI 6: Iatrogenic Pneumothorax Rate		0.27	0.06	4.6982	4.6982	1	1.21	2	2.1%	2.1%	0.0989
	PSI 11: Postoperative Respiratory Failure Rate		7.67	2.69	2.8564	2.8564	1	1.35	2	2.3%	2.3%	0.0649
	PSI 12: Perioperative PE/DVT Rate		3.83	1.00	3.8487	3.8487	1	1.26	2	2.2%	2.2%	0.0832
	PSI 14: Postoperative Wound Dehiscence Rate		0.95	0.16	5.8076	5.8076	1	1.17	2	2.1%	2.1%	0.1193
	PSI 15: Abdominopelvic Accidental Puncture/Laceration Rate		1.29	0.32	4.0034	4.0034	1	1.25	3	2.9%	2.9%	0.1168
Process Measure Domain Score:		Will populate after entering all data.										
Outcome Measure Domain Score:		Will populate after entering all data.										
Process/Outcome Domains - Combined Score:		Will populate after entering all data.										
Normalized Numerical Score:		Will populate after entering all data.										
Hospital Safety Grade (Letter Grade):		Will not be calculated until after the Safety Grade Review Period. Hospitals will be notified via email when the letter grades are posted.										

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Preview Preliminary Numerical Score

My Score	My Letter Grade
2.9636	**TBD**

More Information
Hospital Safety Grade Methodology (1 PDF file)
Hospital Safety Grade Calculator (1 Excel file)
Changes in Measure Weights (1 PDF file)

PUBLIC REPORTING

HospitalSafetyGrade.org

Search by Hospital Name and Location
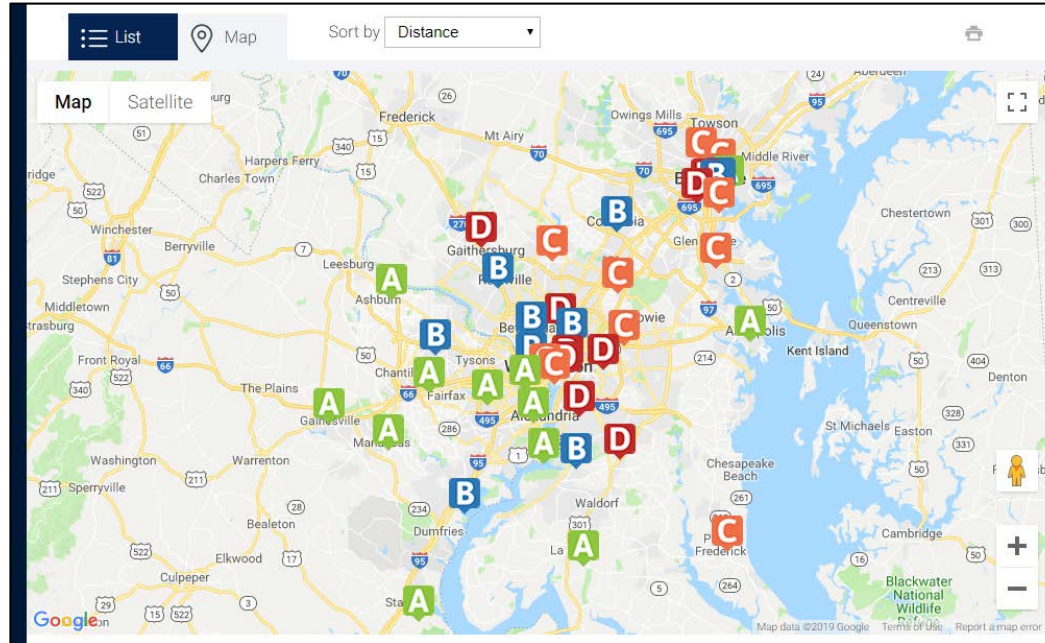
Hospital Details

HSHS St. Mary's Hospital of Green Bay

1726 Shawano Avenue
Green Bay, WI 54303-3282
Map and Directions

Learn how to use the Leapfrog Hospital Safety Grade

This Hospital's Grade

A

SPRING 2019

▶ Show Recent Past Grades

Detailed table view

Past Grades
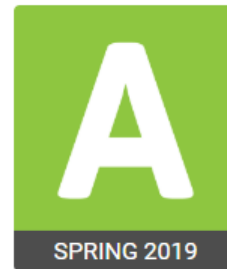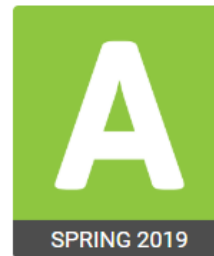

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A

SPRING 2019

▼ Hide Recent Past Grades

2018		2017		2016	
A	A	A	A	A	A
FALL 2018	SPRING 2018	FALL 2017	SPRING 2017	FALL 2016	SPRING 2016

More about past grades

Detailed table view

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Detailed Table View for Hospitals

HSHS St. Mary's Hospital of Green Bay

1726 Shawano Avenue
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Map and Directions

This Hospital's Grade

A

SPRING 2019

Outcomes measures include errors, accidents, and injuries that this hospital has publicly reported.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Dangerous object left in patient's body What's This?	0.000	0.357	0.021	0.000	CMS	10/01/2015 - 06/30/2017
Air or gas bubble in the blood What's This?	0.000	0.045	0.001	0.000	CMS	10/01/2015 - 06/30/2017
Patient falls and injuries What's This?	0.000	1.747	0.435	0.000	CMS	10/01/2015 - 06/30/2017
Infection in the blood What's This?	0.000	2.943	0.765	0.000	CMS	04/01/2017 - 03/31/2018

Remember to print a copy of your Fall 2019 data and letter grade.

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Measure Scores

Important Dates

January 31 – Data Snapshot Date

- For hospitals that have submitted a Leapfrog Hospital Survey by November 30 –
  - On or around February 18 – **E-mail** sent to the hospital CEO and primary survey contact listed in the profile section of the online Leapfrog Hospital Survey.
- For Hospitals that have **not** submitted a Leapfrog Hospital Survey by November 30 –
  - On or around February 18 – **Letter** will arrive to CEOs of hospitals receiving a Leapfrog Hospital Safety Grade.
- Both e-mails and letters will include:
  - Information about the Leapfrog Hospital Safety Grade
  - Username/password to a secure website where hospitals can review the source data that Leapfrog used to calculate their numerical score
  - Links to the Hospital Safety Grade Help Desk and other helpful documents

February 18 – March 9 – Courtesy 3-week Hospital Safety Grade Review Period

February 24 – Hospital Safety Grade Town Hall Call

Mid-April – 2-week Letter Grade Embargo Period

End of April/Beginning of May – Letter grades will be published at www.HospitalSafetyGrade.org

For more information about important dates, visit: http://www.hospitalsafetyscore.org/for-hospitals/updates-and-timelines-for-hospitals

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More Information

Leapfrog Help Desk: https://leapfroghelpdesk.zendesk.com

Hospital Safety Grade Website: www.HospitalSafetyGrade.org

Important Dates:

http://www.hospitalsafetygrade.org/for-hospitals/updates-and-timelines-for-hospitals

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