# Fall 2025 Hospital Safety Grade

# Town Hall Call

The slides and recording will be posted after the presentation at:
https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information

September 2025

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# What is the Leapfrog Hospital Safety Grade?

The Leapfrog Hospital Safety Grade is an A, B, C, D, or F letter grade reflecting how safe hospitals are for patients.

The Leapfrog Hospital Safety Grade launched in June 2012.

The Grade is issued two times per year: Spring and Fall. This fall will be the 28th release.

More information is available at www.HospitalSafetyGrade.org

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# Who is eligible for a Leapfrog Hospital Safety Grade?

General acute care hospitals with enough publicly reported data

- Hospitals missing measure scores for more than **6** process/structural measures OR more than **5** outcome measures or **PSI 90** do not receive a grade. A measure score for PSI 90 is required.

The Leapfrog Group is not able to calculate a Hospital Safety Grade for certain types of hospitals due to missing data:

- Critical Access Hospitals (CAH)
- Rural Emergency Hospitals (REH)
- PPS-exempt hospitals (i.e., cancer)
- VA Hospitals
- Indian Health Services
- Specialty hospitals

# Measures used in the Leapfrog Hospital Safety Grade

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# Measure Selection Criteria

Measures are publicly-reported from national data sources, which reflect individual hospital performance, including:

- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets

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

# Fall 2025 Process and Structural Measures

| Measure Name | Primary Data Source | Reporting Period | Secondary Data Source | Reporting Period |
|---|---|---|---|---|
| Computerized Physician Order Entry (CPOE) | 2025 Leapfrog Hospital Survey | 2025 | Imputation Model Applied | N/A |
| Bar Code Medication Administration (BCMA) | 2025 Leapfrog Hospital Survey | 2025 | Imputation Model Applied | N/A |
| ICU Physician Staffing (IPS) | 2025 Leapfrog Hospital Survey | 2025 | Imputation Model Applied | N/A |
| Safe Practice 1: Culture of Leadership Structures and Systems | 2025 Leapfrog Hospital Survey | 2025 | N/A | N/A |
| Safe Practice 2: Culture Measurement, Feedback & Intervention | 2025 Leapfrog Hospital Survey | 2025 | N/A | N/A |
| Total Nursing Care Hours per Patient Day | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | N/A | N/A |
| Hand Hygiene | 2025 Leapfrog Hospital Survey | 2025 | Imputation Model Applied | N/A |
| H-COMP-1: Nurse Communication | CMS | 10/01/2023 - 09/30/2024 | N/A | N/A |
| H-COMP-2: Doctor Communication | CMS | 10/01/2023 - 09/30/2024 | N/A | N/A |
| H-COMP-3: Staff Responsiveness | CMS | 10/01/2023 - 09/30/2024 | N/A | N/A |
| H-COMP-5: Communication about Medicines | CMS | 10/01/2023 - 09/30/2024 | N/A | N/A |
| H-COMP-6: Discharge Information | CMS | 10/01/2023 - 09/30/2024 | N/A | N/A |

# Fall 2025 Outcome Measures

| Measure Name | Primary Data Source | Reporting Period | Secondary Data Source | Reporting Period |
|---|---|---|---|---|
| **Foreign Object Retained** | CMS | 07/01/2022 - 06/30/2024* | N/A | N/A |
| **Air Embolism** | CMS | 07/01/2022 - 06/30/2024* | N/A | N/A |
| **Falls and Trauma** | CMS | 07/01/2022 - 06/30/2024* | N/A | N/A |
| **CLABSI** | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | CMS | 10/01/2023 - 09/30/2024 |
| **CAUTI** | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | CMS | 10/01/2023 - 09/30/2024 |
| **SSI: Colon** | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | CMS | 10/01/2023 - 09/30/2024 |
| **MRSA** | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | CMS | 10/01/2023 - 09/30/2024 |
| **C. Diff.** | 2025 Leapfrog Hospital Survey | 01/01/2024 - 12/31/2024 | CMS | 10/01/2023 - 09/30/2024 |
| **PSI 4: Death rate among surgical inpatients with serious treatable conditions** | CMS | 07/01/2021 - 06/30/2023 | N/A | N/A |
| **CMS Medicare PSI 90: Patient safety and adverse events composite*** | CMS | 07/01/2021 - 06/30/2023 | N/A | N/A |

**\*See the next slide for more information on the reporting period for the DRA HAC measures**

\*Note: CMS calculates PSI 90 using the ten (10) component PSIs listed above. While scores for each of the 10 component PSIs are NOT used to calculate Hospital Safety Grades, they will be publicly reported on the Hospital Safety Grade website.

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# Fall 2025 Reporting Periods: Leapfrog Hospital Survey Results

❑ CPOE, BCMA, IPS, the 2 NQF Safe Practices, and Hand Hygiene will be displayed as "2025." If you submitted a Survey by August 31, 2024, these measure scores will reflect your performance on the 2025 Leapfrog Hospital Survey.

❑ CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be displayed as 01/01/2024 – 12/31/2024. This data was downloaded from NHSN on August 23.

# Fall 2025 Reporting Periods: CMS Data

- ❑ 3 HAC measures: 07/01/2022 - 06/30/2024

  - ❑ **IMPORTANT NOTE:** This year, CMS was delayed and did not publish the 2025 dataset until September 4.  Due to this delay, updated DRA HAC data was not available by Leapfrog's long-established Data Snapshot Date of August 31. As a result, Leapfrog did not initially include the late CMS HAC data in the fall 2025 Safety Grade Courtesy Review Period.

  - ❑ In response to extensive feedback from hospitals, Leapfrog made an exception and rescored the fall 2025 Safety Grade using the updated CMS DRA HAC data. The Data Review Website was refreshed on September 23 with new DRA HAC data. Due to the change and availability of these measures scores, the preliminary means, standard deviations, and overall numerical scores for all hospitals have also changed from what was originally displayed on the Data Review website on September 17-19.

- ❑ HCAHPS and HAI measures: 10/01/2023 - 09/30/2024 (July 2025 Care Compare Refresh)

- ❑ PSI measures: 07/01/2021 - 06/30/2023 (October 2024 Care Compare Refresh)

  - ❑ Data is the same as the spring 2025 Safety Grade

# Imputation Model

# Overview of Imputation Model
## used for CPOE, BCMA, Hand Hygiene, and IPS

**STEP 1:** Use A Hospital's Most Recent Score on the Measure

- From past two rounds of Safety Grade (i.e., spring 2025 and fall 2024)

- Step 1 imputation has resumed for BCMA (temporarily not used in fall 2024 and spring 2025)

**STEP 2:** Use Imputation Point Assignment

- Point value is equivalent to receiving "Limited Achievement" on the Leapfrog Hospital Survey

- Note about IPS: Only hospitals that operate an adult or pediatric medical and/or surgical ICU or neuro ICU are eligible for Step 2 Imputation of the IPS measure.

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# Step 1: Impute the hospital's most recent score on the measure

If the hospital had a score assigned by Leapfrog in the previous two rounds of grades, the hospital is assigned the most recent score on that measure in the current Hospital Safety Grade.

Example of Step 1 (from fall 2025):
A hospital did not submit a 2025 Leapfrog Hospital Survey by the Data Snapshot Date. The hospital's most recent measure scores for the three measures come from the spring 2025 Hospital Safety Grade, where the hospital's scores for CPOE, HH, and IPS were assigned by Leapfrog based on their 2024 Leapfrog Survey. In spring 2025, the hospital's CPOE score was 70, Hand Hygiene was 40, and IPS score was 100. For the fall 2025 Hospital Safety Grade, the score of 70 is used for CPOE, 40 is used for Hand Hygiene and 100 is used for IPS.

# Step 2: Use Imputation Point Assignment

If the hospital does not have historical data from the last two rounds (i.e., spring 2025, fall 2024) of the Safety Grade, the hospital is assigned a point value that is equivalent to receiving "Limited Achievement" for this measure on the Leapfrog Hospital Survey.

| Measure | Leapfrog Hospital Survey Performance Category | Corresponding Safety Grade Measure Score |
|---------|----------------------------------------------|------------------------------------------|
| CPOE | Limited Achievement | 15 |
| BCMA | Limited Achievement | 25 |
| IPS | Limited Achievement | 5 |
| Hand Hygiene | Limited Achievement | 15 |

Example of Step 2 (from fall 2025):

The hospital is missing scores for CPOE, BCMA, HH, and IPS because they have never submitted a Leapfrog Hospital Survey. In fact, due to missing HCAHPS measures in past rounds, they have never been eligible for a Hospital Safety Grade until this year. In fall 2025, the hospital will be assigned the scores above for the CPOE, BCMA, IPS and HH measures and will receive a Hospital Safety Grade for the first time.

# Step 2: Note about IPS

Only hospitals that operate an adult or pediatric medical and/or surgical ICU or neuro ICU are eligible for Step 2 Imputation of the IPS measure.

- A hospital's ICU designation (i.e., operating a medical ICU, surgical ICU, or pediatric ICU) is determined from the number of medical, surgical and/or pediatric ICU beds reported in Worksheet S-3 Part 1 of the hospital's most recent CMS Cost Report.

- If your hospital does not operate an ICU but shares a CMS Certification Number with a hospital that does, please contact the Help Desk immediately if an IPS score was imputed.

# Scoring Overview

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# Z-Score Methodology

- Standardizes data from individual measures with different scales to allow for comparisons (e.g., a linear mean score of 90 on H-COMP-1: Nurse Communication and a CLABSI SIR of 0.870).

- 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

  - Zero z-score: performance is at the mean

  - Positive z-score: better than the mean

# Calculating Z-Scores

Z-Scores can indicate to a hospital whether their measure score is above, below, or equal to the average hospital.

To calculate each measure's Z-Score:

- Process/structural measures:
    - (Hospital's Measure Score – Mean)/Standard Deviation

- Outcome Measures:
    - (Mean – Hospital Measure Score)/Standard Deviation

# Calculating Standard Measure Weights

Each measure included in the Safety Grade is assigned a standard measure weight using four criteria:

- Strength of evidence (rating of 1 or 2)

- Opportunity (rating of 1-3), 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)

- Number of measures (number of measures equals 1 for all measures except for PSI 90 where the number of measures equals 10)

Measure Weight Score = **[Evidence + (Opportunity x Impact x Number of Measures)]**

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# Dealing with Missing Data

If a hospital is missing a measure score for any measure, the standard weight of that measure is redistributed to the other measures in the same measure domain. The new weight for each measure within the domain is calculated by re-apportioning the standard weight assigned to the measure with the missing score to other measures within the same domain.

For example, if a hospital is missing a measure score for ICU Physician Staffing because the hospital does not operate an adult or pediatric medical and/or surgical ICU, the standard weight will be re-apportioned to the remaining 11 measures within the process/structural measure domain.

To calculate the new weight of each of the remaining 11 measures in the process/structural measure domain, hospitals can use the formula below or use the Leapfrog Hospital Safety Grade Calculator ©, which can be found on the Safety Grade Review Website. Note that each domain contributes to 50% of the overall letter grade.

[Standard measure weight / (sum of standard weights for the remaining 11 measures in the process/structural measure domain)]*50% = updated measure weight

# Calculating the Overall Numerical Score

1. Multiply the z-score for each measure by the measure weight

2. Sum the weighted z-scores from step 1

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

4. Add 3.0 to the final numerical (this step helps to avoid possible confusion with interpreting negative scores)

**3.0 + CPOE z-score X CPOE weight + IPS z-score X IPS weight +**

**CLABSI z-score X CLABSI weight  . . . etc.**

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# 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 | Number of Component Measures | Standard Weight | Final Weight (N/A redistributes) | |
| Process/Structural Measures | Computerized Physician Order Entry (CPOE) | | 85.73 | 22.55 | -3.8022 | -3.8022 | 2 | 1.26 | 3 | 1 | 5.9% | 5.9% | -0.2226 |
| | Bar Code Medication Administration (BCMA) | | 83.21 | 21.58 | -3.8553 | -3.8553 | 2 | 1.26 | 3 | 1 | 5.8% | 5.8% | -0.2253 |
| | ICU Physician Staffing (IPS) | | 62.75 | 43.31 | -1.4488 | -1.4488 | 2 | 1.69 | 3 | 1 | 7.2% | 7.2% | -0.1036 |
| | Safe Practice 1: Culture of Leadership Structures and Systems | | 116.84 | 7.46 | -15.6601 | -5.0000 | 1 | 1.06 | 2 | 1 | 3.2% | 3.2% | -0.1582 |
| | Safe Practice 2: Culture Measurement, Feedback, & Intervention | | 116.54 | 12.74 | -9.1489 | -5.0000 | 1 | 1.11 | 2 | 1 | 3.3% | 3.3% | -0.1628 |
| | Safe Practice 9: Nursing Workforce | | 98.18 | 7.06 | -13.9022 | -5.0000 | 1 | 1.07 | 3 | 1 | 4.3% | 4.3% | -0.2132 |
| | Hand Hygiene | | 74.37 | 32.80 | -2.2677 | -2.2677 | 2 | 1.44 | 2 | 1 | 4.9% | 4.9% | -0.1120 |
| | H-COMP-1: Nurse Communication | | 91.11 | 2.22 | -40.9906 | -5.0000 | 1 | 1.02 | 2 | 1 | 3.1% | 3.1% | -0.1542 |
| | H-COMP-2: Doctor Communication | | 91.00 | 2.11 | -43.0334 | -5.0000 | 1 | 1.02 | 2 | 1 | 3.1% | 3.1% | -0.1541 |
| | H-COMP-3: Staff Responsiveness | | 84.38 | 3.59 | -23.4927 | -5.0000 | 1 | 1.04 | 2 | 1 | 3.1% | 3.1% | -0.1560 |
| | H-COMP-5: Communication about Medicines | | 77.67 | 3.58 | -21.6805 | -5.0000 | 1 | 1.05 | 2 | 1 | 3.1% | 3.1% | -0.1564 |
| | H-COMP-6: Discharge Information | | 86.52 | 3.30 | -26.1921 | -5.0000 | 1 | 1.04 | 2 | 1 | 3.1% | 3.1% | -0.1556 |
| Outcome Measures | Foreign Object Retained | | 0.02 | 0.06 | 0.2977 | 0.2977 | 1 | 3.00 | 2 | 1 | 4.3% | 4.3% | 0.0128 |
| | Air Embolism | | 0.0004 | 0.004 | 0.1071 | 0.1071 | 1 | 3.00 | 1 | 1 | 2.5% | 2.5% | 0.0026 |
| | Falls and Trauma | | 0.42 | 0.38 | 1.1045 | 1.1045 | 2 | 1.91 | 3 | 1 | 4.7% | 4.7% | 0.0523 |
| | CLABSI | | 0.81 | 0.67 | 1.2035 | 1.2035 | 2 | 1.83 | 3 | 1 | 4.6% | 4.6% | 0.0553 |
| | CAUTI | | 0.75 | 0.57 | 1.3160 | 1.3160 | 2 | 1.76 | 3 | 1 | 4.5% | 4.5% | 0.0587 |
| | SSI: Colon | | 0.80 | 0.65 | 1.2292 | 1.2292 | 2 | 1.81 | 2 | 1 | 3.4% | 3.4% | 0.0424 |
| | MRSA | | 0.84 | 0.65 | 1.2856 | 1.2856 | 2 | 1.78 | 3 | 1 | 4.5% | 4.5% | 0.0578 |
| | C. Diff. | | 0.54 | 0.36 | 1.4799 | 1.4799 | 2 | 1.68 | 3 | 1 | 4.3% | 4.3% | 0.0638 |
| | PSI 4: Death rate among surgical inpatients with serious treatable conditions | | 159.71 | 18.33 | 8.7137 | 8.7137 | 1 | 1.11 | 2 | 1 | 2.0% | 2.0% | 0.1725 |
| | CMS Medicare PSI 90: Patient safety and adverse events composite | | 1.00 | 0.19 | 5.1983 | 5.1983 | 1 | 1.19 | 2 | 10 | 15.2% | 15.2% | 0.7919 |

| | |
|---|---|
| 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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# Important Dates and Reviewing Data

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# Data Snapshot Dates

The data snapshot date is the date that Leapfrog will download the data published by CMS or submitted to Leapfrog via the Hospital Survey to calculate Leapfrog Hospital Safety Grades. All data, including Leapfrog Hospital Survey Results, must be finalized by these dates:

- Spring Data Snapshot Date: January 31
- Fall Data Snapshot Date: August 31*

The Leapfrog Hospital Safety Grade relies on publicly available data that hospitals have had the opportunity to review for accuracy. Therefore, Leapfrog **does not allow hospitals to make updates to their data following the Data Snapshot Date.**

*In response to extensive feedback from hospitals, Leapfrog made a one-time exception and rescored the fall 2025 Safety Grade using the updated CMS DRA HAC data, since this data refresh was anticipated to occur before the Data Snapshot Date (August 31). Looking ahead, Leapfrog will evaluate whether to adopt a formal policy beginning with the spring 2026 Safety Grade to address possible future CMS delays.

# Prior to the Data Snapshot Date

❑ Review your Leapfrog Hospital Survey Results

- The Survey is open from April 1 to November 30 of each year. The Submission Deadline is June 30, but new submissions and corrections can be made by November 30

- Survey Results are published monthly on the public website (starting July 25). They are also available on a secure 'Hospital Details' Page (starting July 12).

- Hospitals that identify any data entry or reporting errors are instructed to log back into the Survey to **submit a correction before the Data Snapshot Date.**

- **IMPORTANT NOTE ABOUT HAI DATA:** Leapfrog has four NHSN data download dates per Survey Cycle. We do not download NHSN data outside of these dates, so please review HAI data immediately after the initial June and October download dates.

❑ Utilize CMS preview periods

- CMS provides hospitals with a 30-day confidential preview period **before** publishing performance data at https://data.cms.gov/provider-data. More information is available at https://qualitynet.org.

# Safety Grade Timeline

Following each Data Snapshot Date:

- **Courtesy Review Period**: As a courtesy to hospitals, Leapfrog will hold a Courtesy Safety Grade Review Period before the public release of each Leapfrog Hospital Safety Grade update. The Review Period is an opportunity for hospitals to review the data for accuracy (i.e., identify recording errors, hospital name and address changes, etc.) on a secure website and review changes to the scoring algorithm.

- **Free Town Hall Call**: Hospitals and other stakeholders are invited to a free Town Hall Call to hear about changes to the measures and scoring methodology, as well as details of the Courtesy Safety Grade Review Period and important deadlines.

- **Letter Grade Embargo Period**: Following the close of the Courtesy Safety Grade Review Period, Leapfrog finalizes the data and establishes letter grade cut-points. The Safety Grade Review [website](#) is refreshed, and hospitals can participate in a Letter Grade Embargo Period in which they can preview their letter grade prior to the public announcement.

- **Public Announcement**: Following the Embargo Period, Safety Grades are published on Leapfrog's public [website](#).
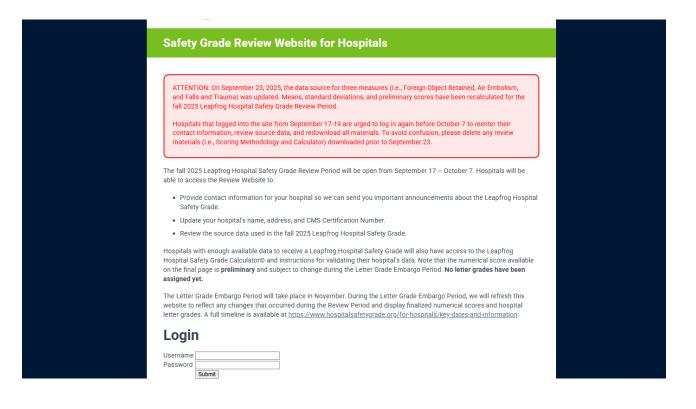
# Courtesy Review and Letter Grade Embargo Period

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# Secure Website for Hospitals to Review their Safety Grade Data

- **Data Review Website:** [http://www.HospitalSafetyGrade.org/data-review](http://www.HospitalSafetyGrade.org/data-review)

- Usernames and passwords are:

  - Emailed to the primary Survey contact and CEO for Leapfrog Hospital Survey participants

  - Mailed to hospital CEO's for hospitals that did not complete the most recent Leapfrog Hospital Survey

- You can also retrieve your username and password via the Help Desk.

# Fall 2025 Courtesy Review Period (Sep. 17 - Oct. 7)

- Hospitals that were not graded due to missing data are now able to login to see what measures are missing.

<span style="color:red">The Review Website was refreshed on September 23:</span> Hospitals that accessed the site prior to September 23 are urged to log back in to:

- Reenter their contact information,

- Review source data, and

- Redownload all materials by October 7.

To avoid confusion, please delete any review materials (i.e., Scoring Methodology and Calculator) downloaded prior to September 23. Additional information about the data update is below.

# Contact Information

# Source Data

## Safety Grade Review Website for Hospitals

## Hospital Source Data

**Information About Source Data**

The information in the table below represents your hospital's performance on 19 of the 22 measures used in the Hospital Safety Grade as of August 31, 2025 (the Data Snapshot Date). Data for three of the measures (Foreign Object Retained, Air Embolism, and Falls and Trauma) was downloaded on September 19, 2025. Please review this information to ensure that Leapfrog recorded the correct measure score from each publicly available data source.

On the following page, you will be able to preview your hospital's preliminary numerical score. Information that you will need to complete the review process is available in the following documents:
- Review Instructions and Scoring Methodology
- Fall 2025 Hospital Safety Grade Calculator

Hospitals and other stakeholders are invited to a free Town Hall Call on September 26 at 2 PM ET to review the measures and scoring methodology, as well as details of the Courtesy Safety Grade Review Period and important deadlines. The Town Hall Call includes a 40-minute presentation and a 20-minute Q&A session. Register here.

# Source Data

*Trim value: The measure score has been trimmed to the 99th percentile. Refer to A Note About Extreme Values in the Review Instructions and Scoring Methodology.

**Imputed score: The measure score has been imputed using historical data or by assigning a score to reflect the lack of information available. Refer to Using Secondary Data Sources in the Review Instructions and Scoring Methodology.

| Name of the Measure | Type of Measure | Data Source/Links | Reporting Period | Measure Score |
|---|---|---|---|---|
| Computerized Physician Order Entry (CPOE) | Structure/ Process | Assigned Score Due to Missing | Not Applicable | 15** |
| Bar Code Medication Administration (BCMA) | Structure/ Process | Assigned Score Due to Missing | Not Applicable | 25** |
| ICU Physician Staffing (IPS) | Structure/ Process | CMS Cost Report | Not Applicable | 5** |

# PSI 90 Components – NOT used in scoring

**PSI 90 Components**

CMS calculates PSI 90 using the ten (10) component PSIs that are listed in the table below. While the scores for each of the component PSIs will NOT be used to calculate the Hospital Safety Grades, they will be publicly reported on the Hospital Safety Grade website. To verify your hospital's PSI 90 Component scores, use the text links in the Data Source/Links column.

| Component PSI | Data Source/Links | Reporting Period | Component Score (not used in numerical score) |
|---|---|---|---|
| PSI 3: Pressure ulcer rate | CMS | 07/01/2021 - 06/30/2023 | 0.41 |
| PSI 6: Iatrogenic pneumothorax rate | CMS | 07/01/2021 - 06/30/2023 | 0.30 |
| PSI 8: In-hospital fall with hip fracture rate | CMS | 07/01/2021 - 06/30/2023 | 0.24 |
| PSI 9: Postoperative hemorrhage or hematoma rate | CMS | 07/01/2021 - 06/30/2023 | 2.89 |

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

Hospitals should 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. You should be using the direct links provided in your Source Data table. 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.

When you contact the Help Desk about a potential discrepancy, you must include a copy of the public report or a screenshot 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. If we find a recording error, we will update the measure score and numerical score before assigning a Letter Grade. You will see an updated numerical score during the Letter Grade Embargo Period.

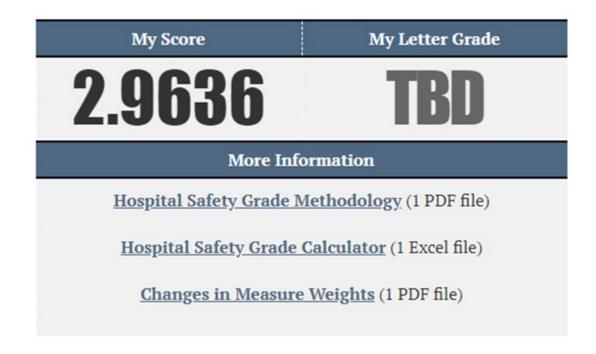Discrepancies must be reported during the Courtesy Review Period.

# Preview Preliminary Numerical Score

Remember that the numerical scores posted during the Safety Grade Review Period are **preliminary** as changes do occur during the Safety Grade Review Period.

Final numerical scores will be posted, along with the letter grade, at least two weeks prior to the public announcement.

Hospitals will be alerted via an email sent to the addresses provided in the Contact and Reviewer Information fields.
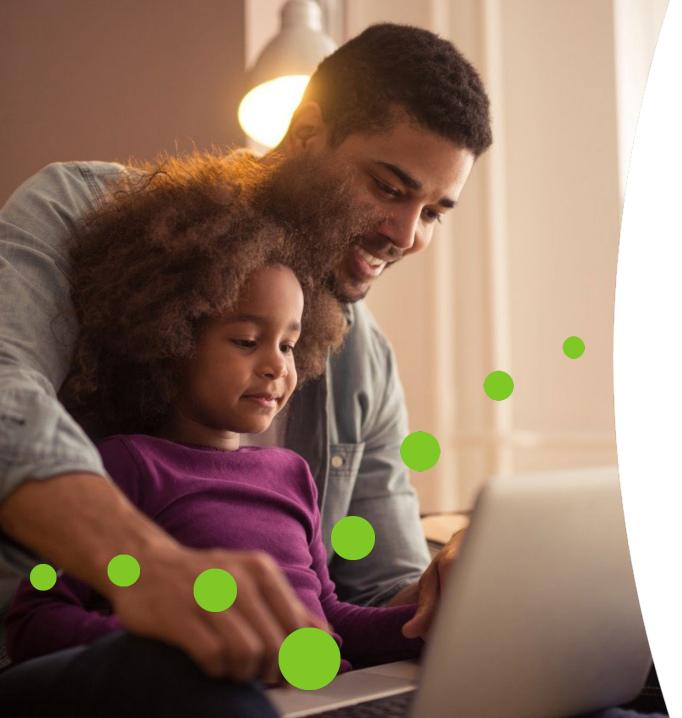
| My Score | My Letter Grade |
|----------|-----------------|
| 2.9636 | TBD |

**More Information**

Hospital Safety Grade Methodology (1 PDF file)

Hospital Safety Grade Calculator (1 Excel file)

Changes in Measure Weights (1 PDF file)

# Hospital Safety Grade Calculator

**September 2025 (UPDATED SEPTEMBER 23, 2025)**

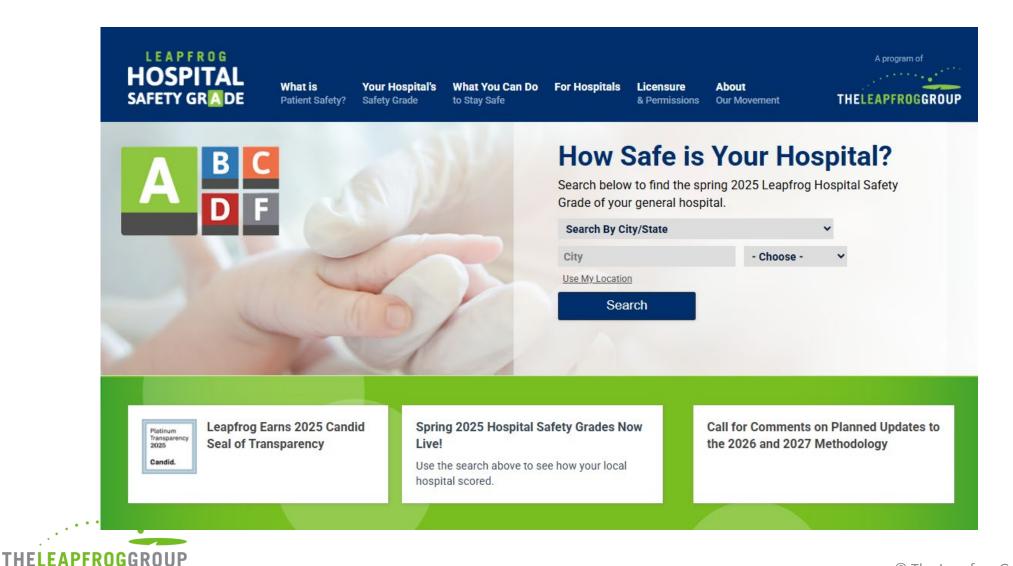| Measure Domain | Measure | Enter Your Hospital's Score Here (Do NOT Leave Blanks) | Mean | Standard Deviation | Z-Score[1] Original Z-Score | Z-Score[1] Modified Z-Score | Inputs to Weighting Individual Measures[2] Evidence | Inputs to Weighting Individual Measures[2] Opportunity | Inputs to Weighting Individual Measures[2] Impact | Number of Component Measures[4] | Weight[3] Standard Weight | Weight[3] Final Weight (N/A redistributes) | Weighted Measure Score (Modified Z-Score x Final Weight) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Process/Structural Measures | Computerized Physician Order Entry (CPOE) | | 82.24 | 32.68 | -2.5163 | -2.5163 | 2 | 1.40 | 3 | 1 | 6.1% | 6.1% | -0.1542 |
| | Bar Code Medication Administration (BCMA) | | 85.15 | 28.59 | -2.9786 | -2.9786 | 2 | 1.34 | 3 | 1 | 5.9% | 5.9% | -0.1770 |
| | ICU Physician Staffing (IPS) | | 67.85 | 42.86 | -1.5832 | -1.5832 | 2 | 1.63 | 3 | 1 | 6.8% | 6.8% | -0.1080 |
| | Safe Practice 1: Culture of Leadership Structures and Systems | | 117.59 | 6.98 | -16.8345 | -5.0000 | 1 | 1.06 | 2 | 1 | 3.1% | 3.1% | -0.1543 |
| | Safe Practice 2: Culture Measurement, Feedback, & Intervention | | 117.26 | 13.36 | -8.7790 | -5.0000 | 1 | 1.11 | 2 | 1 | 3.2% | 3.2% | -0.1597 |
| | Total Nursing Care Hours per Patient Day | | 79.07 | 30.64 | -2.5806 | -2.5806 | 2 | 1.39 | 2 | 1 | 4.7% | 4.7% | -0.1219 |
| | Hand Hygiene | | 76.75 | 35.31 | -2.1737 | -2.1737 | 2 | 1.46 | 2 | 1 | 4.9% | 4.9% | -0.1058 |
| | H-COMP-1: Nurse Communication | | 90.37 | 2.42 | -37.3475 | -5.0000 | 1 | 1.03 | 2 | 1 | 3.0% | 3.0% | -0.1511 |
| | H-COMP-2: Doctor Communication | | 89.99 | 2.38 | -37.7496 | -5.0000 | 1 | 1.03 | 2 | 1 | 3.0% | 3.0% | -0.1510 |
| | H-COMP-3: Staff Responsiveness | | 81.81 | 4.26 | -19.2166 | -5.0000 | 1 | 1.05 | 2 | 1 | 3.1% | 3.1% | -0.1536 |
| | H-COMP-5: Communication about Medicines | | 74.64 | 3.95 | -18.9029 | -5.0000 | 1 | 1.05 | 2 | 1 | 3.1% | 3.1% | -0.1536 |
| | H-COMP-6: Discharge Information | | 85.48 | 3.58 | -23.9037 | -5.0000 | 1 | 1.04 | 2 | 1 | 3.1% | 3.1% | -0.1525 |
| Outcome Measures | Foreign Object Retained | | 0.011 | 0.04 | 0.2679 | 0.2679 | 1 | 3.00 | 2 | 1 | 4.2% | 4.2% | 0.0113 |
| | Air Embolism | | 0.001 | 0.01 | 0.0908 | 0.0908 | 1 | 3.00 | 1 | 1 | 2.4% | 2.4% | 0.0022 |
| | Falls and Trauma | | 0.339 | 0.37 | 0.9219 | 0.9219 | 2 | 2.08 | 3 | 1 | 5.0% | 5.0% | 0.0457 |
| | CLABSI | | 0.585 | 0.50 | 1.1737 | 1.1737 | 2 | 1.85 | 3 | 1 | 4.5% | 4.5% | 0.0532 |
| | CAUTI | | 0.521 | 0.48 | 1.0842 | 1.0842 | 2 | 1.92 | 3 | 1 | 4.7% | 4.7% | 0.0506 |
| | SSI: Colon | | 0.856 | 0.69 | 1.2372 | 1.2372 | 2 | 1.81 | 2 | 1 | 3.4% | 3.4% | 0.0417 |
| | MRSA | | 0.688 | 0.56 | 1.2230 | 1.2230 | 2 | 1.82 | 3 | 1 | 4.5% | 4.5% | 0.0547 |
| | C. Diff. | | 0.369 | 0.30 | 1.2178 | 1.2178 | 2 | 1.82 | 3 | 1 | 4.5% | 4.5% | 0.0546 |
| | PSI 4: Death rate among surgical inpatients with serious treatable | | 177.42 | 24.06 | 7.3752 | 7.3752 | 1 | 1.14 | 2 | 1 | 2.0% | 2.0% | 0.1449 |
| | CMS Medicare PSI 90: Patient safety and adverse events composite | | 1.00 | 0.20 | 5.1337 | 5.1337 | 1 | 1.19 | 2 | 10 | 14.9% | 14.9% | 0.7674 |
| **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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# Public Reporting

*Screenshots taken from Safety Grade website reflect spring 2025 Safety Grades*

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# HospitalSafetyGrade.org

# Search by Hospital Name and Location

# Hospital Grades and Measure Scores

# Detailed Table View

**This Hospital's Grade**

STRAIGHT **A** SPRING 2025

**Massachusetts General Hospital**

55 Fruit Street
Boston, MA 02114
Map and Directions

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 | 0.327 | 0.014 | 0.000 | CMS | 07/01/2021 - 06/30/2023 |
| Air or gas bubble in the blood What's This? | 0.000 | 2.890 | 0.002 | 0.000 | CMS | 07/01/2021 - 06/30/2023 |
| Patient falls and injuries What's This? | 0.199 | 1.926 | 0.384 | 0.000 | CMS | 07/01/2021 - 06/30/2023 |
| Infection in the blood What's This? | 0.552 | 2.782 | 0.651 | 0.000 | 2024 Leapfrog Hospital Survey | 07/01/2023 - 06/30/2024 |
| Infection in the urinary tract What's This? | 0.579 | 2.512 | 0.540 | 0.000 | 2024 Leapfrog Hospital Survey | 07/01/2023 - 06/30/2024 |
| Surgical site infection after colon surgery What's This? | 0.838 | 3.094 | 0.831 | 0.000 | 2024 Leapfrog Hospital Survey | 07/01/2023 - 06/30/2024 |
| MRSA Infection What's This? | 0.691 | 2.850 | 0.719 | 0.000 | 2024 Leapfrog Hospital Survey | 07/01/2023 - 06/30/2024 |
| C. diff. Infection What's This? | 0.804 | 1.607 | 0.401 | 0.000 | 2024 Leapfrog Hospital Survey | 07/01/2023 - 06/30/2024 |

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# Not Graded



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# Important Dates for Fall 2025

**August 31 -** <span style="color:red">Data Snapshot Date*</span>

**Sept. 17 - Oct. 7-** Courtesy Hospital Safety Grade Review Period

**September 26-** Hospital Safety Grade Town Hall Call

**November –** <u>One-week</u> Letter Grade Embargo Period

**November -** Letter grades will be published at [www.HospitalSafetyGrade.org](http://www.HospitalSafetyGrade.org)

<span style="color:red">*DRA HAC data was downloaded on September 19th, 2025, as a one-time exception</span>

For more information about important dates, visit [https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information](https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information)

# Public Comment Period: Planned Updates to the 2026 and 2027 Leapfrog Hospital Safety Grade Methodology

Leapfrog is seeking public comments on proposed updates to the 2026 and 2027 Hospital Safety Grade methodology. These changes will **not** affect the Fall 2025 Safety Grade.

Comments may be submitted through **October 14, 2025**. [Click here](Click here) to download and review the proposed updates. Final methodology updates and responses to public comments will be published by **December 1, 2025**.

<u>Summary</u>
- **Spring and Fall 2026:**
  - CMS' temporary removal of Staff Responsiveness. Leapfrog requests comment on a temporary scoring methodology change to address the absence of Staff Responsiveness (H-COMP-3) for the spring 2026 and fall 2026 Safety Grade cycles.
- **Starting Spring 2027:**
  - CMS' permanent removal of PSI 4: Leapfrog will remove PSI 4 and add Failure-to-Rescue to the Safety Grade Methodology
  - NHSN update to the SIR model: HAI measures will likely be calculated using the NHSN 2022 baseline

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# More Information Regarding the Hospital Safety Grade

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

- Hospital Safety Grade Website: www.HospitalSafetyGrade.org

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