Presentation Overview

About the Leapfrog Hospital Safety Grade

Measure Highlights

Scoring Overview

Details of the Courtesy Safety Grade Review Period

Public Reporting

Important Dates

Questions
ABOUT THE LEAPFROG HOSPITAL SAFETY GRADE
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: April and October. This spring will be the 15th 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 reported data

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

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

- Critical access hospitals
- PPS-exempt hospitals (i.e. cancer)
- VA Hospitals
- Indian Health Services
- Specialty hospitals
MEASURE HIGHLIGHTS
Measure Selection Criteria

Measures are publicly-reported from national data sources, reflecting individual hospital results

- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets
- American Hospital Association’s Annual Survey and HIT Supplement
- Maryland Health Care Commission (for hospitals in MD only)

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
# Process and Structural Measures

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Primary Data Source</th>
<th>Secondary Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Process and Structural Measures (13)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Computerized Physician Order Entry (CPOE)</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2017 AHA Annual Survey IT Supplement ii</td>
</tr>
<tr>
<td>Bar Code Medication Administration (BCMA)</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2017 AHA Annual Survey IT Supplement ii</td>
</tr>
<tr>
<td>ICU Physician Staffing (IPS)</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2017 AHA Annual Survey i</td>
</tr>
<tr>
<td>Safe Practice 1: Leadership Structures and Systems</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 2: Culture Measurement, Feedback &amp; Intervention</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 4: Identification and Mitigation of Risks and Hazards</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 9: Nursing Workforce</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 19: Hand Hygiene</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-1: Nurse Communication</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-2: Doctor Communication</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-3: Staff Responsiveness</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-5: Communication about Medicines</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-6: Discharge Information</td>
<td>CMS</td>
<td>N/A</td>
</tr>
</tbody>
</table>

1 AHA Annual Survey, Health Forum, LLC, a subsidiary of the American Hospital Association
2 AHA Annual Survey © 2016 Health Forum, LLC
## Outcome Measures

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Primary Data Source</th>
<th>Secondary Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreign Object Retained</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>Air Embolism</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>Falls and Trauma</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>CLABSI (ICU and select wards)</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>CAUTI (ICU and select wards)</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>SSI: Colon</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>MRSA</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>C. Diff.</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>PSI 3: Pressure Ulcer Rate</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 4: Death Rate among Surgical Inpatients with Serious Treatable Complications</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 6: Iatrogenic Pneumothorax Rate</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 11: Postoperative Respiratory Failure Rate</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 12: Perioperative PE/DVT Rate</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 14: Postoperative Wound Dehiscence Rate</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
<tr>
<td>PSI 15: Unrecognized Abdominopelvic Accidental Puncture or Laceration</td>
<td>CMS</td>
<td>MHCC*</td>
</tr>
</tbody>
</table>

* The Maryland Health Care Commission will provide HAC and PSI rates for Maryland hospitals only
Reporting Periods by Data Source

Leapfrog Hospital Survey Measures
- The 2018 Leapfrog Hospital Survey includes several reporting periods. Because the data snapshot was February 28*, the reporting periods will be displayed as follows:
  - CPOE, BCMA, ICU Physician Staffing, and the 5 NQF Safe Practices will be displayed as “2018”
  - CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be displayed as 07/01/2017 – 06/30/2018

AHA Annual Survey and IT Supplement Measures
- The reporting period for the 2017 AHA Annual Survey will be displayed as “2017” (only used for hospitals that did not report via the Leapfrog Hospital Survey)
- The reporting period for the 2017 AHA Annual Survey IT Supplement will be displayed as “2018” (only used for hospitals that did not report via the Leapfrog Hospital Survey)

MHCC Measures (for Maryland hospitals only)
- The reporting period for the three HAC measures align with CMS and will be displayed as 10/01/2015 – 06/30/2017
- The reporting period for the seven PSI measures align with CMS and will be displayed as 10/01/2015 – 06/30/2017

CMS Measures
- The reporting period for the Patient Experience measures will be displayed as 04/01/2017 – 03/31/2018
- The reporting period for the 5 infection measures will be displayed as 04/01/2017 – 03/31/2018 (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 10/01/2015 – 06/30/2017

* The dates for the Spring 2019 Hospital Safety Grade have been updated due to CMS' announcement to delay the December 2018 update to Hospital Compare.
Measure Updates Since Fall 2018 –
Process/Structural Measure Domain

CPOE
- For hospitals that (re) submitted Section 2 of the 2018 Leapfrog Hospital Survey after August 31
- AHA HIT Supplement data has NOT been updated

ICU Physician Staffing
- For hospitals that (re) submitted Section 5 of the 2018 Leapfrog Hospital Survey after August 31
- For hospitals that did not submit a 2018 Leapfrog Hospital Survey by December 31, but did submit a 2017 AHA Annual Survey

5 NQF Safe Practices
- For hospitals that (re) submitted Section 6 of the 2018 Leapfrog Hospital Survey after August 31

5 Patient Experience Domains
- For all hospitals receiving a Spring 2019 Hospital Safety Grade
Measure Updates Since Fall 2018 – Outcome Measure Domain

3 HAC Measures
  • Not updated this Spring for any hospital (CMS and MHCC data remains the same)

5 HAI Measures
  • Updated for all hospitals receiving a Spring 2019 Hospital Safety Grade – both Leapfrog and CMS data has been updated

7 PSI Measures
  • Not updated this Spring for any hospital (CMS and MHCC data remains the same)
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 = \([\text{Evidence} + (\text{Opportunity} \times \text{Impact})]\)
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:
  - \((\text{Raw Measure Score} – \text{Mean})/\text{Standard Deviation}\)
- Outcome Measures:
  - \((\text{Mean} – \text{Raw Measure Score})/\text{Standard Deviation}\)
Overall Numerical Score

Summation of z-score for each measure multiplied by the weight for each measure

If measure has missing data, then 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

\[ 3.0 + \text{CPOE z-score} \times \text{CPOE weight} + \text{IPS z-score} \times \text{IPS weight} + \text{CLABSI z-score} \times \text{CLABSI weight} + \ldots \text{etc.} \]
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

*Is the hospital name and address displayed above correct?
- Info above is correct
- Info above is NOT correct

*Is your hospital’s CMS Certification Number (CCN) correct?
- CCN is correct
- CCN is NOT correct (If the CCN is not correct, please contact the Help Desk immediately.)

CEO First Name
CEO Last Name
CEO Email Address
Contact First Name
Contact Last Name
Contact Title
Contact Email Address
Contact Phone Number
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 each of the 28 measures used in the Hospital Safety Grade as of February 28, 2019 (the Data Snapshot Date). Please review this information to ensure that Leapfrog recorded the correct measure score from each publicly available data source.

You will need the following documents to complete the review process:
- Review Instructions
- Spring 2019 Calculator
- Scoring Methodology

The Spring 2019 Safety Grade Town Hall Call will be held on March 12 at 1 PM (Eastern Time). 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.
## Source Data

<table>
<thead>
<tr>
<th>Name of the Measure</th>
<th>Type of Measure</th>
<th>Data Source/Links</th>
<th>Reporting Period</th>
<th>Measure Score</th>
<th>Does the measure score match the public report?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computerized Physician Order Entry (CPOE)</td>
<td>Structure/Process</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2018</td>
<td>40</td>
<td>Yes</td>
</tr>
<tr>
<td>Bar Code Medication Administration (BCMA)</td>
<td>Structure/Process</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2018</td>
<td>50</td>
<td>Yes</td>
</tr>
<tr>
<td>ICU Physician Staffing (IPS)</td>
<td>Structure/Process</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2018</td>
<td>100</td>
<td>Yes</td>
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<tr>
<td>Safe Practice 1: Leadership Structures and Systems</td>
<td>Structure/Process</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2018</td>
<td>120</td>
<td>Yes</td>
</tr>
<tr>
<td>Safe Practice 2: Culture Measurement, Feedback &amp; Intervention</td>
<td>Structure/Process</td>
<td>2018 Leapfrog Hospital Survey</td>
<td>2018</td>
<td>101.54</td>
<td>Yes</td>
</tr>
<tr>
<td>Safe Practice 4: Identification</td>
<td>Structure/</td>
<td>2018 Leapfrog</td>
<td>2018</td>
<td>90.91</td>
<td>Yes</td>
</tr>
</tbody>
</table>
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 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.

- Note that for hospitals that have an “extreme” value for a particular measure (i.e. a value that exceeds the 99th percentile), Leapfrog “trims” the reported value to the 99th percentile (see Note about Extreme Values).
## Hospital Safety Grade Calculator

### March 2023

<table>
<thead>
<tr>
<th>Measure Domain</th>
<th>Measure</th>
<th>Enter Your Hospital’s Score Here (0-100)</th>
<th>Z-Score (^1)</th>
<th>Z-Score (^2)</th>
<th>Z-Score (^3)</th>
<th>Evidence</th>
<th>Opportunity</th>
<th>Impact</th>
<th>Standard Weight</th>
<th>Final Weight (Inkas)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compliance</td>
<td>1.00</td>
<td>0.08</td>
<td>0.3371</td>
<td>0.3371</td>
<td>0.3371</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>0.25</td>
<td>0.25</td>
</tr>
<tr>
<td>Medication</td>
<td>0.00</td>
<td>0.00</td>
<td>0.1181</td>
<td>0.1181</td>
<td>0.1181</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>0.25</td>
<td>0.25</td>
</tr>
<tr>
<td>Falls and Trauma</td>
<td>0.44</td>
<td>0.37</td>
<td>1.1675</td>
<td>1.1675</td>
<td>1.1675</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
</tr>
<tr>
<td>Catheterization</td>
<td>0.77</td>
<td>0.61</td>
<td>1.2515</td>
<td>1.2515</td>
<td>1.2515</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
</tr>
<tr>
<td>Care of Intravenous Catheters (CIVC)</td>
<td>0.83</td>
<td>0.63</td>
<td>1.3261</td>
<td>1.3261</td>
<td>1.3261</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
</tr>
<tr>
<td>Infection</td>
<td>0.88</td>
<td>0.10</td>
<td>1.2480</td>
<td>1.2480</td>
<td>1.2480</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
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<td>Clinical Effectiveness</td>
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<td>1.8133</td>
<td>1.8133</td>
<td>2</td>
<td>1</td>
<td>3</td>
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<td>0.15</td>
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<tr>
<td>Preventable Injuries</td>
<td>0.38</td>
<td>0.36</td>
<td>0.8016</td>
<td>0.8016</td>
<td>0.8016</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
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<tr>
<td>Preventable Death Rate</td>
<td>0.25</td>
<td>0.05</td>
<td>1.0250</td>
<td>1.0250</td>
<td>1.0250</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
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<tr>
<td>Preventable Pressure Ulcer Rate</td>
<td>0.22</td>
<td>0.14</td>
<td>0.8417</td>
<td>0.8417</td>
<td>0.8417</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
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<tr>
<td>Preventable Postoperative UTI Rate</td>
<td>0.84</td>
<td>0.37</td>
<td>2.0774</td>
<td>2.0774</td>
<td>2.0774</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
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<tr>
<td>Preventable Postoperative Wound Care Rate</td>
<td>0.05</td>
<td>0.22</td>
<td>0.3425</td>
<td>0.3425</td>
<td>0.3425</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
</tr>
<tr>
<td>Preventable Postoperative Readmission Rate</td>
<td>0.19</td>
<td>0.25</td>
<td>0.8522</td>
<td>0.8522</td>
<td>0.8522</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0.15</td>
<td>0.15</td>
</tr>
</tbody>
</table>

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**Hospital Safety Grade (Letter Grade):** TEO
Preview Preliminary Numerical Score

<table>
<thead>
<tr>
<th>My Score</th>
<th>My Letter Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.9636</td>
<td>TBD</td>
</tr>
</tbody>
</table>

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

The Leapfrog Hospital Safety Grade scores hospitals on how safe they keep their patients from errors, injuries, accidents, and infections.

Newsroom November 8, 2018
The Nation's Leading Scorecard on Hospital Safety Breaks Down Results Across Red and Blue States

Newsroom November 8, 2018
How safe is your state? See the state rankings for the Fall 2018 Leapfrog Hospital Safety Grade
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

Infections  Problems with Surgery  Practices to Prevent Errors  Safety Problems  Doctors, Nurses & Hospital Staff

Click Each Measure to Learn More

Hospital Performs Below Average  Above Average

Doctors order medications through a computer  Safe medication administration  Handwashing  Communication about medicines  Communication about discharge  Staff work together to prevent errors
Past Grades

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
FALL 2018

Hide Recent Past Grades

More about past grades
### Detailed Table View for Hospitals

#### HSHS St. Mary's Hospital of Green Bay

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

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

<table>
<thead>
<tr>
<th>Measure</th>
<th>The Hospital's Score</th>
<th>Worst Performing Hospital</th>
<th>Avg. Performing Hospital</th>
<th>Best Performing Hospital</th>
<th>Data Source</th>
<th>Time Period Covered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dangerous object left in patient's body</td>
<td>0.000</td>
<td>0.392</td>
<td>0.021</td>
<td>0.000</td>
<td>CMS</td>
<td>10/01/2016 - 06/30/2017</td>
</tr>
<tr>
<td>Air or gas bubble in the blood</td>
<td>0.000</td>
<td>0.045</td>
<td>0.001</td>
<td>0.000</td>
<td>CMS</td>
<td>10/01/2015 - 06/30/2017</td>
</tr>
<tr>
<td>Patient falls</td>
<td>0.000</td>
<td>1.747</td>
<td>0.434</td>
<td>0.000</td>
<td>CMS</td>
<td>10/01/2015 - 06/30/2017</td>
</tr>
<tr>
<td>Infection in the blood</td>
<td>Not Available</td>
<td>2.935</td>
<td>0.789</td>
<td>0.000</td>
<td>CMS</td>
<td>10/01/2016 - 09/30/2017</td>
</tr>
</tbody>
</table>

Remember to print a copy of your Fall 2018 data and Letter Grade.
Measure Scores

Infections | Problems with Surgery | Practices to Prevent Errors | Safety Problems | Doctors, Nurses & Hospital Staff

Click Each Measure to Learn More

Hospital Performs Below Average | Above Average

Doctors order medications through a computer | Safe medication administration | Handwashing | Communication about medicines | Communication about discharge | Staff work together to prevent errors

This Hospital’s Score: 100
Best Hospital’s Score: 100
Average Hospital’s Score: 69.80
Worst Hospital’s Score: 5

Doctors order medications through a computer
Hospitals can use Computerized Physician Order Entry (CPOE) systems to order medications for patients in the hospital, instead of writing out prescriptions by hand. Good CPOE systems alert the doctor if they try to order a medication that could cause harm, such as prescribing an adult dosage for a child. CPOE systems help to reduce medication errors in the hospital.

What safer hospitals do:
Hospitals use CPOE systems in all areas of the hospital and regularly test those systems to ensure they are alerting doctors to potential ordering errors.

THELEAPFROGGROUP
Important Dates

February 28 – Data Snapshot Date

• For hospitals that have submitted a Leapfrog Hospital Survey by December 31 –
  - On or around March 7 – 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 December 31 –
  - On or around March 7 – 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

March 7 to March 25 – Courtesy 3-week Hospital Safety Grade Review Period

March 12 – Hospital Safety Grade Town Hall Call

End of April – 2-week Letter Grade Embargo Period

Mid-May – Letter Grades will be published at [www.HospitalSafetyGrade.org](http://www.HospitalSafetyGrade.org)

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