Overview of the Fall 2020 Leapfrog Hospital Safety Grade

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

October 19, 2020
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 Safety Grade uses up to 27 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 and Fall. This fall will be the 18th 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 6 process/structural measures OR more than 5 outcome measures do not receive a grade (updated for Fall 2020).

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, which reflect individual hospital results, including:

- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets
- Supplemental data from the American Hospital Association’s Annual Survey and HIT 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
Important Update Regarding the Use of AHA Data

The Leapfrog Group was recently notified that the American Hospital Association (AHA) will not renew our data license in December. Therefore, beginning with the Spring 2021 Safety Grade, AHA Survey and IT Supplement data can no longer be used as a secondary data source to calculate scores for the following three measures: ICU Physician Staffing, Computerized Physician Order Entry (CPOE), and Bar Code Medication Administration (BCMA). This change will only affect hospitals that do not submit a Leapfrog Hospital Survey.

Leapfrog’s National Expert Panel and a team at Mathematica are reviewing and testing several alternative methods for scoring the three measures for hospitals that do not submit the Leapfrog Hospital Survey. We will announce the methodology later this year, and it will be used to calculate Spring 2021 Safety Grades for hospitals that have not submitted a Leapfrog Hospital Survey by December 31, 2020, the Late Submission Deadline. Hospitals that would like their current performance on the ICU Physician Staffing, CPOE, and BCMA measures included in the Spring 2021 Hospital Safety Grade, should submit a Leapfrog Hospital Survey by December 31. As a reminder, due to COVID-19, Leapfrog made several one-time-only changes to the Survey that significantly reduced submission requirements this year.

Please contact the Help Desk if you have questions about submitting a Leapfrog Hospital Survey. Please contact the AHA if you have questions about your AHA Annual Survey and/or IT Supplement data.
COVID-19 Updates:
Hospitals maintaining their 2019 Survey Results in lieu of reporting to the 2020 Leapfrog Hospital Survey

Details:

Hospitals that submitted a 2019 Leapfrog Hospital Survey had the option of maintaining last year’s Leapfrog Hospital Survey Results on our public reporting website.

Impact on Fall 2020 Safety Grade:

The measures from the 2019 Leapfrog Hospital Survey that will be included in the Fall 2020 Hospital Safety Grade include: Section 2 CPOE; Section 5 ICU Physician Staffing; Section 6A, 6B, 6D, and 6E (SP1 Leadership Structures and Systems, SP2 Culture of Safety, SP9 Nursing Workforce, and SP19 Hand Hygiene); Section 7B (CLABSI, CAUTI, C.diff., MRSA, SSI Colon); and Section 8A BCMA.

Some items to note about the Hospital Safety Grade if you chose to maintain your 2019 Leapfrog Hospital Survey Results:

1. Even though your Leapfrog Hospital Survey Results for the measures listed above will remain the same, other data such as CMS data has been updated.
2. Therefore, your Fall 2020 Hospital Safety Grade may change even though your Survey Results are staying the same.
3. As a reminder, Leapfrog will use whatever data is public for the 27 measures on the Data Snapshot Dates to calculate the Grade.
COVID-19 Updates: 
Significant reductions to the submission requirements for the 2020 Leapfrog Hospital Survey

Details:

Hospitals can submit the minimum required sections of the 2020 Survey, including Sections 1 Basic Hospital Information, 2 CPOE, 4 Maternity Care, 5 ICU Physician Staffing, and 6 Patient Safety Practices, and be publicly reported as “Not Available” rather than “Declined to Respond” for the remaining Sections.

“Not Available” is described on our public reporting website as unavailable data due to the COVID-19 crisis. Hospitals were encouraged to submit all applicable sections of the Survey.

Impact on Fall 2020 Safety Grade:

In addition to the five (5) required sections listed above, hospitals wanting 2020 Leapfrog Hospital Survey Results for all measures used in the Hospital Safety Grade, also needed to submit Section 7 (in order for Leapfrog to obtain your infection data from NHSN) and Section 8 (in order for Leapfrog to obtain your BCMA data) by the Data Snapshot Date.

Otherwise, Leapfrog will obtain data for the 5 infection measures from CMS and data for BCMA from the AHA IT Supplement.
## Fall 2020 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>Computerized Physician Order Entry (CPOE)</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>2019 AHA Annual Survey IT Supplement ii</td>
</tr>
<tr>
<td>Bar Code Medication Administration (BCMA)</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>2019 AHA Annual Survey IT Supplement ii</td>
</tr>
<tr>
<td>ICU Physician Staffing (IPS)</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>2018 AHA Annual Survey i</td>
</tr>
<tr>
<td>Safe Practice 1: Leadership Structures and Systems</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 2: Culture Measurement, Feedback &amp; Intervention</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 9: Nursing Workforce</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>N/A</td>
</tr>
<tr>
<td>Hand Hygiene (Safe Practice 19 or Leapfrog’s new Hand Hygiene Standard)</td>
<td>2019 or 2020 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 © 2018 Health Forum, LLC
## Fall 2020 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>N/A</td>
</tr>
<tr>
<td>Air Embolism</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>Falls and Trauma</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>CLABSI (ICU and select wards)</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>CAUTI (ICU and select wards)</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>SSI: Colon</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>MRSA</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>C. Diff.</td>
<td>2019 or 2020 Leapfrog Hospital Survey</td>
<td>CMS</td>
</tr>
<tr>
<td>PSI 3: Pressure Ulcer Rate</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>PSI 4: Death Rate among Surgical Inpatients with Serious Treatable</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>Complications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSI 6: Iatrogenic Pneumothorax Rate</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>PSI 11: Postoperative Respiratory Failure Rate</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>PSI 12: Perioperative PE/DVT Rate</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>PSI 14: Postoperative Wound Dehiscence Rate</td>
<td>CMS</td>
<td>N/A</td>
</tr>
<tr>
<td>PSI 15: Unrecognized Abdominopelvic Accidental Puncture or Laceration</td>
<td>CMS</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Reporting Periods for Leapfrog Hospital Survey Measures

2019 Leapfrog Hospital Results

• CPOE, BCMA, ICU Physician Staffing, and the 4 NQF Safe Practices will be displayed as “2019”
• CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be 07/01/2018 – 06/30/2019

2020 Leapfrog Hospital Survey Results Survey Measures

• CPOE, BCMA, ICU Physician Staffing, 3 NQF Safe Practices, and Hand Hygiene will be displayed as “2020”
• CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be 01/01/2019 – 12/31/2019
Reporting Periods for CMS Measures

• The reporting period for the 5 Patient Experience measures will be 10/01/2018 – 09/30/2019

• The reporting period for the 5 infection measures will be 10/01/2018 – 09/30/2019 (only used for hospitals that did not report via the 2019 or 2020 Leapfrog Hospital Survey)

• The reporting period for the three HAC measures and seven PSI measures will be 07/01/2017 – 06/30/2019
**Reporting Periods for Supplemental Data Sources**

**AHA Annual Survey and IT Supplement Measures**

- The reporting period for the 2018 AHA Annual Survey will be displayed as “2018” *(only used for hospitals that did not report via the 2019 or 2020 Leapfrog Hospital Survey)*

- The reporting period for the 2019 AHA Annual Survey IT Supplement will be displayed as “2020” *(only used for hospitals that did not report via the 2019 or 2020 Leapfrog Hospital Survey)*
Summary of Measure Updates Since Spring 2020 – Process/Structural Measure Domain

CPOE and BCMA
- Updated for hospitals that submitted a 2020 Survey by September 30
- Updated for hospitals using the 2019 AHA Annual Survey IT Supplement (i.e. did not submit 2019 or 2020 Leapfrog Hospital Survey)
- No updates for hospitals maintaining 2019 Survey Results
- No updates to scoring

ICU Physician Staffing
- Updated for hospitals that submitted a 2020 Survey by September 30
- No updates for hospitals maintaining 2019 Survey Results
- No updates for hospitals using the 2018 AHA Annual Survey (i.e. did not submit 2019 or 2020 Leapfrog Hospital Survey)
- No updates to scoring

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

NQF Safe Practices and Hand Hygiene
- Removed Safe Practice 4 from the Safety Grade Scoring Methodology
- Updated for hospitals that submitted a 2020 Survey by September 30, including the use of the new Hand Hygiene measure
- No updates for hospitals maintain 2019 Survey Results, Safe Practice 19 score will be used for Hand Hygiene
- Scoring update:
  - Hospitals that maintain their 2019 Leapfrog Hospital Survey Results will have the points earned on Safe Practice 19 used to calculate the Safety Grade.
  - Hospitals that submit a 2020 Leapfrog Hospital Survey will earn 60 points for either of the two publicly reported performance categories on the 2020 Leapfrog Hospital Survey: “Achieved the Standard” or “Considerable Achievement”
  - Hospitals that submit a 2020 Leapfrog Hospital Survey and are publicly reported as “Not Available” for the Hand Hygiene measure (meaning they scored “Some Achievement” or “Limited Achievement” on the measure) will not have the measure used in calculating the Safety Grade. The weight assigned to the Hand Hygiene measure will be redistributed to the other process/structural measures
Summary of Measure Updates Since Spring 2020 – Outcome Measure Domain

3 HAC Measures
  • Updated for all hospitals receiving a Fall 2020 Hospital Safety Grade

5 HAI Measures
  • Updated for hospitals that submitted Section 7 of the 2020 Survey by September 30
  • Updated for hospitals using CMS data (i.e. did not submit Section 7 of the 2019 or 2020 Leapfrog Hospital Survey)
  • No updates for hospitals maintaining 2019 Survey Results

7 PSI Measures
  • Updated for all hospitals receiving a Fall 2020 Hospital Safety Grade
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:
    - (Raw Measure Score – Mean)/Standard Deviation
  • Outcome Measures:
    - (Mean – Raw Measure Score)/Standard Deviation
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.

$$3.0 + \text{CPOE z-score} \times \text{CPOE weight} + \text{IPS z-score} \times \text{IPS weight} + \text{CLABSI z-score} \times \text{CLABSI weight}$$

... etc.
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 of 7.4% 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.

\[
\text{[Standard measure weight / (sum of standard weights for the remaining 12 measures in the process/structural measure domain)]}*50\% = \text{updated measure weight}
\]
DETAILS OF THE COURTESY SAFETY GRADE REVIEW PERIOD
Secure Website for Hospitals to Review their Safety Grade Data

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

Usernames and passwords are emailed to Leapfrog Hospital Survey participants and mailed to hospital CEO’s all others. You can also retrieve your username and password via the Help Desk.

Fall 2020 Review Period opens tomorrow and will close on October 30.
Contact Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Is the hospital name and address displayed above correct?</em></td>
<td>Info above is correct or Info above is NOT correct</td>
</tr>
<tr>
<td><em>Is your hospital's CMS Certification Number (CCN) correct?</em></td>
<td>CCN is correct or CCN is NOT correct (If the CCN is not correct, please contact the Help Desk immediately.)</td>
</tr>
<tr>
<td>CEO First Name</td>
<td></td>
</tr>
<tr>
<td>CEO Last Name</td>
<td></td>
</tr>
<tr>
<td>CEO Email Address</td>
<td></td>
</tr>
<tr>
<td>Contact First Name</td>
<td></td>
</tr>
<tr>
<td>Contact Last Name</td>
<td></td>
</tr>
<tr>
<td>Contact Title</td>
<td></td>
</tr>
<tr>
<td>Contact Email Address</td>
<td></td>
</tr>
<tr>
<td>Contact Phone Number</td>
<td></td>
</tr>
</tbody>
</table>
Information About Source Data

The information in the table below represents your hospital’s performance on each of the 27 measures used in the Hospital Safety Grade as of September 30, 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
- Fall 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 Fall 2020 Safety Grade Town Hall will be held on October 19 from 2-3pm 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.
### 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>2020 Leapfrog Hospital Survey</td>
<td>2020</td>
<td>100</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Bar Code Medication Administration (BCMA)</td>
<td>Structure/Process</td>
<td>2020 Leapfrog Hospital Survey</td>
<td>2020</td>
<td>100</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>ICU Physician Staffing (IPS)</td>
<td>Structure/Process</td>
<td>2020 Leapfrog Hospital Survey</td>
<td>2020</td>
<td>100</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>Safe Practice 1: Leadership Structures and Systems</td>
<td>Structure/Process</td>
<td>2020 Leapfrog Hospital Survey</td>
<td>2020</td>
<td>120.00</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

Click here to verify your measure score.

You must contact the Help Desk if you select No.
What if the Measure Score Doesn’t Match the Public Report?

Hospitals must contact the Help Desk immediately if they suspect a measure score is incorrect.

However, they 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.
## 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)
Letter Grade Embargo Period Scheduled for mid-November

Hospitals can log back into the Data Review Website to review their final numerical score and letter grade.

Explanation of Letter Grades includes cut-points and distribution of grades.
### Hospital Safety Grade Calculator

#### September 2019

<table>
<thead>
<tr>
<th>Measure Domain</th>
<th>Measure</th>
<th>Enter Your Hospital’s Score Here (Do Not Score Here)</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Safety Grades</td>
<td>Computerized Physician Order Entry (CPOE)</td>
<td>100</td>
<td>77.00</td>
<td>27.73</td>
</tr>
<tr>
<td></td>
<td>Safe Code Medication Administration (SCMA)</td>
<td>75</td>
<td>80.23</td>
<td>24.99</td>
</tr>
<tr>
<td></td>
<td>ICU Physician Staffing (IPS)</td>
<td>55</td>
<td>51.43</td>
<td>44.33</td>
</tr>
<tr>
<td></td>
<td>SF-1: Culture of Safety Leadership Structures &amp; Systems</td>
<td>125</td>
<td>117.96</td>
<td>7.99</td>
</tr>
<tr>
<td></td>
<td>SF-2: Culture Measurement, Feedback, &amp; Intervention</td>
<td>125</td>
<td>118.40</td>
<td>13.71</td>
</tr>
<tr>
<td></td>
<td>SF-4: Identification &amp; Mitigation of Risks &amp; Hazards</td>
<td>100</td>
<td>96.98</td>
<td>10.01</td>
</tr>
<tr>
<td></td>
<td>SF-7: Nursing Workforce</td>
<td>100</td>
<td>97.86</td>
<td>8.02</td>
</tr>
<tr>
<td></td>
<td>SF-15: Hand Hygiene</td>
<td>65</td>
<td>57.05</td>
<td>8.63</td>
</tr>
<tr>
<td></td>
<td>H-COMP 1: Nurse Communication</td>
<td>85</td>
<td>80.89</td>
<td>2.18</td>
</tr>
<tr>
<td></td>
<td>H-COMP 2: Doctor Communication</td>
<td>96</td>
<td>90.89</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>H-COMP 3: Staff Responsiveness</td>
<td>87</td>
<td>84.33</td>
<td>3.48</td>
</tr>
<tr>
<td></td>
<td>H-COMP 5: Communication about Medications</td>
<td>92</td>
<td>77.93</td>
<td>5.38</td>
</tr>
<tr>
<td></td>
<td>H-COMP 6: Discharge Information</td>
<td>59</td>
<td>86.19</td>
<td>3.09</td>
</tr>
<tr>
<td></td>
<td>Foreign Object Retained</td>
<td>0</td>
<td>0.01</td>
<td>0.08</td>
</tr>
<tr>
<td></td>
<td>Air Embolism</td>
<td>0</td>
<td>0.001</td>
<td>0.015</td>
</tr>
<tr>
<td></td>
<td>Falls and Trauma</td>
<td>0.032</td>
<td>0.64</td>
<td>0.73</td>
</tr>
<tr>
<td></td>
<td>C. Diff.</td>
<td>0.075</td>
<td>0.71</td>
<td>0.59</td>
</tr>
<tr>
<td></td>
<td>CAUTI</td>
<td>0.124</td>
<td>0.79</td>
<td>0.58</td>
</tr>
<tr>
<td></td>
<td>SSF</td>
<td>0.848</td>
<td>0.84</td>
<td>0.87</td>
</tr>
<tr>
<td></td>
<td>MSSA</td>
<td>0.875</td>
<td>0.84</td>
<td>0.83</td>
</tr>
<tr>
<td></td>
<td>C. Diff.</td>
<td>1.325</td>
<td>0.89</td>
<td>0.37</td>
</tr>
<tr>
<td></td>
<td>PSI 1: Pressure Ulcers Rate</td>
<td>0.517</td>
<td>0.47</td>
<td>0.42</td>
</tr>
<tr>
<td></td>
<td>PSI 4: Death Rate, Surg. Inpatients w/ Serious Treatable Complications</td>
<td>160.75</td>
<td>162.87</td>
<td>19.36</td>
</tr>
<tr>
<td></td>
<td>PSI 7: Postoperative Respiratory Failure Rate</td>
<td>2.58</td>
<td>2.51</td>
<td>2.67</td>
</tr>
<tr>
<td></td>
<td>PSI 8: Iatrogenic Pneumonitis Rate</td>
<td>0.80</td>
<td>0.78</td>
<td>0.06</td>
</tr>
<tr>
<td></td>
<td>PSI 11: Postoperative Respiratory Failure Rate</td>
<td>1.06</td>
<td>1.07</td>
<td>1.15</td>
</tr>
<tr>
<td></td>
<td>PSI 21: Postoperative Intraoperative Deterioration Rate</td>
<td>0.99</td>
<td>0.95</td>
<td>0.26</td>
</tr>
</tbody>
</table>

#### Process Measure Domain Score:

- **Overall Process Measure Domain Score:** 0.101
- **Process/Outcome Domain Combined Score:** 0.059
- **Overall Numerical Score:** 0.028
- **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.
PUBLIC REPORTING
Search by Hospital Name and Location
Hospital Details

Virginia Mason Medical Center
1100 Ninth Avenue
Seattle, WA 98101-2756
Map and Directions

View this hospital's Leapfrog Hospital Survey Results

Learn how to use the Leapfrog Hospital Safety Grade
Past Grades

Virginia Mason Medical Center

1100 Ninth Avenue
Seattle, WA 98101-2756
Map and Directions

View this hospital's Leapfrog Hospital Survey Results

Learn how to use the Leapfrog Hospital Safety Grade

Detailed table view

The Leapfrog Group
Remember to print a copy of your Spring 2020 data and letter grade.

<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>0.562</td>
<td>0.018</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2016 - 06/30/2018</td>
</tr>
<tr>
<td>Air or gas bubble in the blood</td>
<td>0.000</td>
<td>0.204</td>
<td>0.001</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2016 - 06/30/2018</td>
</tr>
<tr>
<td>Patient falls and injuries</td>
<td>0.727</td>
<td>1.625</td>
<td>0.436</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2016 - 06/30/2018</td>
</tr>
<tr>
<td>Infection in the blood</td>
<td>0.292</td>
<td>2.673</td>
<td>0.700</td>
<td>0.000</td>
<td>2019 Leapfrog Hospital Survey</td>
<td>07/01/2018 - 06/30/2019</td>
</tr>
<tr>
<td>Infection in the urinary tract</td>
<td>0.824</td>
<td>2.796</td>
<td>0.774</td>
<td>0.000</td>
<td>2019 Leapfrog Hospital Survey</td>
<td>07/01/2018 - 06/30/2019</td>
</tr>
</tbody>
</table>

Virginia Mason Medical Center
1100 Ninth Avenue
Seattle, WA 98101-2756
Map and Directions
Measure Scores

**Infections**

<table>
<thead>
<tr>
<th>Problem</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRSA Infection</td>
<td>0.158</td>
</tr>
<tr>
<td>C. diff Infection</td>
<td></td>
</tr>
<tr>
<td>Infection in the blood</td>
<td></td>
</tr>
<tr>
<td>Infection in the urinary tract</td>
<td></td>
</tr>
<tr>
<td>Surgical site infection after colon surgery</td>
<td></td>
</tr>
</tbody>
</table>

**Hospital Performs Below Average**

**This Hospital's Score:** 0.158

**Best Hospital's Score:** 0.000

**Average Hospital's Score:** 0.823

**Worst Hospital's Score:** 3.213

**MRSA Infection**

Staph bacteria are common in hospitals, but Methicillin-resistant Staphylococcus aureus (MRSA) is a type of staph bacteria that is resistant to (cannot be killed by) many antibiotics. MRSA can be found in bed linens or medical equipment and can be spread if providers do not properly wash their hands between patients. MRSA can cause life-threatening bloodstream infections, pneumonia, and surgical site infections.

**What safer hospitals do:**

Doctors and nurses should clean their hands after caring for every patient. Hospital rooms and medical equipment should be thoroughly cleaned often. Safer hospitals will also keep MRSA patients separate from other patients and require providers and visitors to wear gloves and gowns around these patients.
Important Dates

**September 30 - Data Snapshot Date**
- For hospitals that have submitted a 2019 Survey or 2020 Survey by September 30 - 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 did not submit a 2019 or 2020 Survey – Letter sent to CEO via USPS
- 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

**October 15 – October 30 – Courtesy 2-week Hospital Safety Grade Review Period**

**October 19 – Hospital Safety Grade Town Hall Call**

**Mid-November – Letter Grade Embargo Period**

**Early December – 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](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