Spring 2024 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

February 20, 2024
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 25th 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 (regardless of Leapfrog Hospital Survey Participation)

- 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
- PPS-exempt hospitals (i.e., cancer)
- VA Hospitals
- Indian Health Services
- Specialty or Pediatric hospitals
New in Spring 2024

Military Treatment Facilities (MTF) will be eligible for Leapfrog Hospital Safety Grades

• Only those located in the United States
• Includes about 30 hospitals
Measures used in the Leapfrog Hospital Safety Grade
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
<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Primary Data Source</th>
<th>Reporting Period</th>
<th>Secondary Data Source</th>
<th>Reporting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computerized Physician Order Entry (CPOE)</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>Imputation Model Applied</td>
<td>N/A</td>
</tr>
<tr>
<td>Bar Code Medication Administration (BCMA)</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>Imputation Model Applied</td>
<td>N/A</td>
</tr>
<tr>
<td>ICU Physician Staffing (IPS)</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>Imputation Model Applied</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 1: Culture of Leadership Structures and Systems</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Safe Practice 2: Culture Measurement, Feedback &amp; Intervention</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total Nursing Care Hours per Patient Day</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Hand Hygiene</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>2023</td>
<td>Imputation Model Applied</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-1: Nurse Communication</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-2: Doctor Communication</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-3: Staff Responsiveness</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-5: Communication about Medicines</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>H-COMP-6: Discharge Information</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## Spring 2024 Outcome Measures

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Primary Data Source</th>
<th>Reporting Period</th>
<th>Secondary Data Source</th>
<th>Reporting Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreign Object Retained</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Air Embolism</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Falls and Trauma</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>CLABSI</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>07/01/2022 - 06/30/2023</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
</tr>
<tr>
<td>CAUTI</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>07/01/2022 - 06/30/2023</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
</tr>
<tr>
<td>SSI: Colon</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>07/01/2022 - 06/30/2023</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
</tr>
<tr>
<td>MRSA</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>07/01/2022 - 06/30/2023</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
</tr>
<tr>
<td>C. Diff.</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>07/01/2022 - 06/30/2023</td>
<td>CMS</td>
<td>04/01/2022 - 03/31/2023</td>
</tr>
<tr>
<td>PSI 4: Death rate among surgical inpatients with serious treatable conditions</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>CMS Medicare PSI 90: Patient safety and adverse events composite*</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

*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](https://www.hospital-safety-grade.org).
Summary of Spring 2024 Reporting Periods

2023 Leapfrog Hospital Results

- CPOE, BCMA, IPS, the 2 NQF Safe Practices, Total Nursing Care Hours per Patient Day, and Hand Hygiene will be displayed as “2023”
- CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be: 07/01/2022 - 06/30/2023

CMS Data

- 5 Patient Experience measures and 5 infection measures (for hospitals that did not report via the Leapfrog Hospital Survey): 04/01/2022 - 03/31/2023
- 3 HAC measures (same data used in fall 2023 Safety Grade): 07/01/2020 - 06/30/2022
- PSI 4 and PSI 90 (updated since fall 2023 Safety Grade): 07/01/2020 - 06/30/2022
Imputation Model

Used for Hospitals that did not submit a Leapfrog Hospital Survey by November 30, 2023
Overview

- Imputation Method for CPOE, BCMA, Hand Hygiene, and IPS
  
  - **STEP 1**: Use A Hospital’s Most Recent Score on the Measure from past four rounds of Safety Grade (i.e., fall 2023, spring 2023, fall 2022, spring 2022)
  
  - **STEP 2**: Use the Mean of the Scores Assigned to Other Similar Hospitals in the U.S. (does not apply to IPS)
Step 1: Impute the hospital’s most recent score on the measure
Applies to CPOE, BCMA, HH and IPS

If the hospital had a score assigned by Leapfrog in the previous four 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 spring 2024):
A hospital did not submit a 2023 Leapfrog Hospital Survey by the Data Snapshot Date. The hospital’s most recent measure scores for the four measures come from the spring 2022 Hospital Safety Grade, where the hospital’s scores for CPOE, BCMA, HH, and IPS were assigned by Leapfrog based on their 2021 Leapfrog Survey. In the spring 2022 Hospital Safety Grade, the hospital’s CPOE score was 70, BCMA score was 50, Hand Hygiene was 100, and IPS score was 100. For the spring 2024 Hospital Safety Grade, the score of 70 is used for CPOE, 50 is used for BCMA, 100 is used for Hand Hygiene and 100 is used for IPS.
Step 2: Use of the mean of the scores assigned to similar hospitals
Applies to CPOE, BCMA, and HH (not IPS)

The hospital is assigned to a cohort of other similar hospitals using three or four hospital characteristics obtained from the most recent CMS Impact File and Leapfrog Hospital Survey:

1. Urban/rural status (CMS Impact File)
2. Safety net status (CMS Impact File)
3. Number of beds (CMS Impact File)
4. Teaching status (only used for urban cohorts; Leapfrog Hospital Survey Results are the primary data source and CMS Impact File is the secondary data source)
The hospital is then assigned the lower of two possible mean scores based on their cohort’s performance:

- Mean of current and recent scores
- Mean of scores obtained in each hospital’s first year of reporting via the Leapfrog Hospital Survey

The mean current and recent scores are calculated based on hospitals that have a score in the current round (i.e., spring 2024) from either Leapfrog’s publicly reported Survey Results or Step 1 of the imputation model. The first means score only includes past and current performance on the Leapfrog Hospital Survey, without imputation.

Example of Step 2 (from spring 2024):
The hospital is missing scores for CPOE, BCMA, and HH because they have never submitted a Leapfrog Hospital Survey. In fact, due to missing HCAHPS measures and the IPS measure in past rounds, they have never been eligible for a Hospital Safety Grade in past rounds. Therefore, in the spring 2024 Hospital Safety Grade, the hospital will be assigned scores based on the mean CPOE, HH and BCMA scores of other similar hospitals in the U.S. and may receive a Hospital Safety Grade for the first time.
Mean scores for each of the 12 cohorts are published in the Safety Grade Methodology document each round (fall 2023 example in the table below – all cohort scores will be updated for spring 2024).

Table 2: Cohort Scores

<table>
<thead>
<tr>
<th>Cohort #</th>
<th>Urban/Rural Status</th>
<th>Safety Net Status</th>
<th>Number of Beds</th>
<th>Teaching Status</th>
<th>Step 2 CPOE Score (Mean of Cohort)</th>
<th>Step 2 BCMA Score (Mean of Cohort)</th>
<th>Step 2 Hand Hygiene Score (Mean of Cohort)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cohort 1</td>
<td>Rural</td>
<td>Non-Safety Net</td>
<td>Fewer than 100 beds</td>
<td>N/A</td>
<td>75</td>
<td>79</td>
<td>49</td>
</tr>
<tr>
<td>Cohort 2</td>
<td>Rural</td>
<td>Non-Safety Net</td>
<td>100 or more beds</td>
<td>N/A</td>
<td>79</td>
<td>82</td>
<td>52</td>
</tr>
<tr>
<td>Cohort 3</td>
<td>Rural</td>
<td>Safety Net</td>
<td>Fewer than 100 beds</td>
<td>N/A</td>
<td>85</td>
<td>81</td>
<td>45</td>
</tr>
<tr>
<td>Cohort 4</td>
<td>Rural</td>
<td>Safety Net</td>
<td>100 or more beds</td>
<td>N/A</td>
<td>71</td>
<td>80</td>
<td>62</td>
</tr>
<tr>
<td>Cohort 5</td>
<td>Urban</td>
<td>Non-Safety Net</td>
<td>Fewer than 100 beds</td>
<td>Non-Teaching</td>
<td>84</td>
<td>85</td>
<td>57</td>
</tr>
<tr>
<td>Cohort 6</td>
<td>Urban</td>
<td>Non-Safety Net</td>
<td>100 or more beds</td>
<td>Non-Teaching</td>
<td>86</td>
<td>84</td>
<td>59</td>
</tr>
<tr>
<td>Cohort 7</td>
<td>Urban</td>
<td>Non-Safety Net</td>
<td>Fewer than 100 beds</td>
<td>Teaching</td>
<td>79</td>
<td>87</td>
<td>61</td>
</tr>
<tr>
<td>Cohort 8</td>
<td>Urban</td>
<td>Non-Safety Net</td>
<td>100 or more beds</td>
<td>Teaching</td>
<td>88</td>
<td>85</td>
<td>56</td>
</tr>
<tr>
<td>Cohort 9</td>
<td>Urban</td>
<td>Safety Net</td>
<td>Fewer than 100 beds</td>
<td>Non-Teaching</td>
<td>76</td>
<td>81</td>
<td>62</td>
</tr>
<tr>
<td>Cohort 10</td>
<td>Urban</td>
<td>Safety Net</td>
<td>100 or more beds</td>
<td>Non-Teaching</td>
<td>77</td>
<td>80</td>
<td>58</td>
</tr>
<tr>
<td>Cohort 11</td>
<td>Urban</td>
<td>Safety Net</td>
<td>Fewer than 100 beds</td>
<td>Teaching</td>
<td>82</td>
<td>81</td>
<td>48</td>
</tr>
<tr>
<td>Cohort 12</td>
<td>Urban</td>
<td>Safety Net</td>
<td>100 or more beds</td>
<td>Teaching</td>
<td>88</td>
<td>81</td>
<td>56</td>
</tr>
</tbody>
</table>
Step 2 Imputation for IPS

- The CMS Cost Report is used as a secondary data source for the ICU Physician Staffing (IPS) measure among hospitals eligible for Step 2 Imputation.

- This applies to hospitals that have not submitted a 2023, 2022, or 2021 Leapfrog Hospital Survey.

- ICU designation (i.e., operating a medical ICU, surgical ICU, or pediatric ICU) is determined by Leapfrog based on 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. Hospitals that are determined to have one or more medical, surgical, and/or pediatric ICU beds are assigned the same point value (5 points) as those hospitals that earned Limited Achievement on Leapfrog’s IPS Standard.
Scoring Overview
Calculating Z-Scores

• 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).

• 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:**
    \[
    \frac{\text{Hospital’s Measure Score} - \text{Mean}}{\text{Standard Deviation}}
    \]
  • **Outcome Measures:**
    \[
    \frac{\text{Mean} - \text{Hospital’s Measure Score}}{\text{Standard Deviation}}
    \]
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)]
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.

\[
\text{[Standard measure weight / (sum of standard weights for the remaining 11 measures in the process/structural measure domain)]*50% = updated measure weight}
\]
Calculating the Overall Numerical Score

1. Measure Weights are calculated
   • If a measure score is missing, the weight for that measure is re-apportioned to other measures within the same domain

2. Measure weights are multiplied by the z-score

3. All weighted z-scores are added together

4. Add 3.0 to the numerical score (which avoids possible confusion with negative scores)

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

Each round, letter grade cut-points are reassessed and are not released until the Letter Grade Embargo Period.
Important Dates
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 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.
Reviewing Leapfrog Hospital Survey Results

• The Leapfrog Hospital Survey is open from April 1 to November 30 of each year.

• Following the Submission Deadline on June 30, Survey Results are published monthly on a secure ‘Hospital Details’ page and a public website.
  • Hospitals are urged to review their Survey Results immediately (starting July 12)
  • Corrections: Hospitals that identify any data entry or reporting errors are instructed to log back into the Survey to submit a correction.
  • Resolve Data Verification Messages

• Leapfrog has four NHSN data download dates per Survey Cycle. We do not download NHSN data outside of these dates.
  • June 23
  • August 24
  • October 24
  • December 21*

*Due to a technical error impacting all NHSN Group Administrators, Leapfrog was not able to download the HAI data on December 21, 2023, as scheduled, and instead, used the HAI data that was downloaded on Oct 24 in the 2023 Hospital Survey year-end results.
Reviewing CMS Data

CMS administers several hospital-based reporting and payment programs including the Inpatient Quality Reporting Program, HAC Reduction Program, the DRA HAC Program, and Value-based Purchasing Program. Several measures collected and calculated by CMS via its various hospital-based programs are used in the Leapfrog Hospital Safety Grade (HAIs, HCAHPS, HAC, and PSI measures).

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.
Following each Data Snapshot Date:

- **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.

- **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.
  - **Spring 2024: February 26 - March 15**

- **1-Week 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.
  - The dates are announced after the close of the Review Period.
  - **Spring 2024: April**

- **Public Announcement**: Following the Embargo Period, Safety Grades are published on Leapfrog’s public [website](#).
Participating in the Courtesy Review Period

Screenshots taken from spring 2023 Safety Grade Review Website
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. You can also retrieve your username and password via the Help Desk.
Contact Information

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

- Is the hospital’s CMS Certification Number (CCN) 01-0139 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
CE0 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 22 measures used in the Hospital Safety Grade as of January 31, 2023 (the Data). The Data is sourced from publicly available sources or calculated by The Leapfrog Group.

Information that you will need to complete the [Review Instructions and Scoring Methodology](#) - [Spring 2023 Hospital Safety Grade Calculator](#)

<table>
<thead>
<tr>
<th>Measure Description</th>
<th>Outcome</th>
<th>Data Source</th>
<th>Date Range</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. Diff.</td>
<td>Outcome</td>
<td>2022 Leapfrog Hospital Survey</td>
<td>07/01/2021 - 06/30/2022</td>
<td>2.066</td>
</tr>
<tr>
<td>PSI 4: Death rate among surgical inpatients with serious treatable conditions</td>
<td>Outcome</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 06/30/2021</td>
<td>Not Available</td>
</tr>
<tr>
<td>CMS Medicare PSI 90: Patient safety and adverse events composite</td>
<td>Outcome</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 06/30/2021</td>
<td>1.06</td>
</tr>
</tbody>
</table>

**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 based on historical data or data from similar hospitals. Refer to Using Secondary Data Sources in the [Review Instructions and Scoring Methodology](#).
**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 10 component PSIs will NOT be used to calculate spring 2023 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.

<table>
<thead>
<tr>
<th>Component PSI</th>
<th>Data Source/Links</th>
<th>Reporting Period</th>
<th>Component Score (not used in numerical score)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSI 3: Pressure ulcer rate</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 6/30/2021</td>
<td>0.42</td>
</tr>
<tr>
<td>PSI 6: Iatrogenic pneumothorax rate</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 6/30/2021</td>
<td>0.22</td>
</tr>
<tr>
<td>PSI 8: In-hospital fall with hip fracture rate</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 6/30/2021</td>
<td>0.07</td>
</tr>
</tbody>
</table>
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 screenshot.
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 1 week prior to the public announcement.

Hospitals will be alerted via an email sent to the addresses provided in the Contact and Reviewer Information fields.
## Hospital Safety Grade Calculator

![Image of the Hospital Safety Grade Calculator](https://via.placeholder.com/150)

<table>
<thead>
<tr>
<th>Measure Domain</th>
<th>Measure</th>
<th>Enter Your Hospital’s Score Here (Do NOT Leave Blank)</th>
<th>Z-Score</th>
<th>Inputs to Weighting Individual Measures</th>
<th>Weight</th>
<th>Weighted Measure Score (Modified Z-Score x Final Weight)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventable/Infectious Errors</td>
<td>Computerized Physician Order Entry (CPOE)</td>
<td>90.26</td>
<td>-3.0450</td>
<td>2</td>
<td>2.17</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Bac Code-Nebulization Administration (BCNA)</td>
<td>91.95</td>
<td>2.12</td>
<td>-0.3790</td>
<td>-1.0000</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>ICU Physician Staffing (IPS)</td>
<td>62.33</td>
<td>44.29</td>
<td>-1.0408</td>
<td>-1.0408</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Safe Practice 1: Culture of Leadership Structures and Systems</td>
<td>117.45</td>
<td>6.50</td>
<td>-18.0590</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Safe Practice 2: Culture Measurement, Feedback, &amp; Intervention</td>
<td>115.74</td>
<td>6.66</td>
<td>-6.0627</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Total Nursing Care Hours per Patient Day</td>
<td>70.88</td>
<td>31.67</td>
<td>-2.2223</td>
<td>-2.2223</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Hand Hygiene</td>
<td>77.49</td>
<td>26.69</td>
<td>-2.0003</td>
<td>-2.0003</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>H-COPP-3: Nurse Communication</td>
<td>89.55</td>
<td>2.57</td>
<td>-14.3435</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>H-COPP-2: Doctor Communication</td>
<td>86.48</td>
<td>2.84</td>
<td>-18.3588</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>H-COPP-1: Staff Registered Professional Nurse Ratio</td>
<td>80.97</td>
<td>4.98</td>
<td>-18.3588</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>H-COPP-5: Communication about Medicines</td>
<td>79.85</td>
<td>3.96</td>
<td>-18.6502</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>H-COPP-4: Discharge Information</td>
<td>84.80</td>
<td>3.80</td>
<td>-22.2800</td>
<td>-5.0000</td>
<td>1</td>
</tr>
<tr>
<td>Clinical Measures</td>
<td>Foreign Object Retained</td>
<td>0.024</td>
<td>0.05</td>
<td>0.2789</td>
<td>0.2786</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Air Intubation</td>
<td>0.001</td>
<td>0.05</td>
<td>0.0717</td>
<td>0.0717</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Falls and Trauma</td>
<td>0.480</td>
<td>0.60</td>
<td>0.9988</td>
<td>0.9988</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>CLABSI</td>
<td>0.889</td>
<td>0.71</td>
<td>1.2374</td>
<td>1.2374</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>CAUTI</td>
<td>0.734</td>
<td>0.62</td>
<td>1.3985</td>
<td>1.3985</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>SSI: C-Section</td>
<td>0.822</td>
<td>0.65</td>
<td>1.4023</td>
<td>1.4023</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>MRSA</td>
<td>0.026</td>
<td>0.05</td>
<td>1.3774</td>
<td>1.3774</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>C. Diff</td>
<td>0.488</td>
<td>0.07</td>
<td>1.3292</td>
<td>1.3292</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>SSI: 41. Death among surgical inpatients with serious treatable conditions</td>
<td>145.38</td>
<td>17.45</td>
<td>8.3123</td>
<td>8.3123</td>
<td>1</td>
</tr>
</tbody>
</table>

**Note:**
- **Process/Outcome Measure Domain Score:** Will populate after entering all data.
- **Process/Outcome Measure Domain Score:** Will populate after entering all data.
- **Process/Outcome Domain Score:** Will populate after entering all data.
- **Process/Outcome Numerical Score:** Will populate after entering all data.
- **Hospital Safety Grade (Better Grade):** Will not be calculated until after the next Safety Grade Review Period. Hospitals will be notified via email where the letter grades are posted.
Public Reporting

Screenshots taken from Safety Grade website reflect fall 2023 Safety Grades
HospitalSafetyGrade.org

How Safe is Your Hospital?
Search below to find the fall 2023 Leapfrog Hospital Safety Grade of your general hospital.

Search By City/State
City
Use My Location
Search

Now Live! Fall 2023 Hospital Safety Grades
Use the search above to see how your local hospital scored.
Search by Hospital Name and Location
Hospital Details and Past Grades

Brigham And Women's Hospital

75 Francis Street
Boston, MA 02115-6110
Map and Directions

View this hospital’s Leapfrog Hospital Survey Results

Learn how to use the Leapfrog Hospital Safety Grade

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

© The Leapfrog Group 2024
Measure Scores

Infections

- MRSA Infection
- C. diff Infection
- Infection in the blood
- Infection in the urinary tract
- Surgical site infection after colon surgery
- Sepsis infection after surgery

Hospital Performs Worse Than Average  Better Than Average

This Hospital's Score: 0.509
Best Hospital's Score: 0.000
Average Hospital's Score: 1.095
Worst Hospital's Score: 3.918

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.

For details on sources, click here.
### Detailed Table View for Hospitals

**Brigham And Women's Hospital**

75 Francis Street
Boston, MA 02115-6110
[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 PeriodCovered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dangerous object left in patient's body</td>
<td>0.099</td>
<td>0.340</td>
<td>0.014</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
</tr>
<tr>
<td>Air or gas bubble in the blood</td>
<td>0.000</td>
<td>0.308</td>
<td>0.001</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
</tr>
<tr>
<td>Patient falls and injuries</td>
<td>0.193</td>
<td>2.006</td>
<td>0.429</td>
<td>0.000</td>
<td>CMS</td>
<td>07/01/2020 - 06/30/2022</td>
</tr>
<tr>
<td>Infection in the blood</td>
<td>0.714</td>
<td>3.512</td>
<td>0.888</td>
<td>0.000</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>01/01/2022 - 12/31/2022</td>
</tr>
<tr>
<td>Infection in the urinary tract</td>
<td>0.542</td>
<td>3.026</td>
<td>0.735</td>
<td>0.000</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>01/01/2022 - 12/31/2022</td>
</tr>
<tr>
<td>Surgical site infection after colon surgery</td>
<td>1.413</td>
<td>2.868</td>
<td>0.832</td>
<td>0.000</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>01/01/2022 - 12/31/2022</td>
</tr>
<tr>
<td>MRSA Infection</td>
<td>0.389</td>
<td>3.653</td>
<td>0.927</td>
<td>0.000</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>01/01/2022 - 12/31/2022</td>
</tr>
<tr>
<td>C. diff. Infection</td>
<td>0.603</td>
<td>1.876</td>
<td>0.488</td>
<td>0.000</td>
<td>2023 Leapfrog Hospital Survey</td>
<td>01/01/2022 - 12/31/2022</td>
</tr>
<tr>
<td>Death from treatable serious complications</td>
<td>163.30</td>
<td>186.71</td>
<td>143.25</td>
<td>73.88</td>
<td>CMS</td>
<td>07/01/2019 - 12/31/2019 and 07/01/2020 - 06/30/2022</td>
</tr>
</tbody>
</table>
Not Graded

This Hospital's Grade

**NOT GRADED**

**NG**

**FALL 2023**

Ascension River District Hospital

4100 River Road
East China, MI 48054-2909
Map and Directions

View this hospital’s Leapfrog Hospital Survey Results
Important Dates for Spring 2024

January 31 - Data Snapshot Date

February 26 - March 15- Courtesy Hospital Safety Grade Review Period

April- One week Letter Grade Embargo Period

Late April- Letter grades will be published at www.HospitalSafetyGrade.org

For more information about important dates, visit:

https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information