WHAT'S NEW IN 2016

THE CONTENT CHANGES TO THE PRIOR YEAR'S SURVEY (2015 V 6.2) ARE AS FOLLOWS

SECTION	UPDATE
1 **BASIC HOSPITAL INFORMATION**	Section 1 asks hospitals to provide information about hospital size and teaching status. The Profile section is now a separate button in the online survey that asks you to provide certain identifying and demographic information, as well as contact information. The profile section is be accessed and updated anytime by logging into the survey dashboard with your hospital's security code.
2 **COMPUTERIZED PHYSICIAN ORDER ENTRY (CPOE)**	No substantive changes to this section.
3 **EVIDENCE-BASED HOSPITAL REFERRAL**	No substantive changes to this section.
4 **MATERNITY CARE**	No substantive changes to this section.
5 **ICU PHYSICIAN STAFFING**	Leapfrog has added an additional response type for questions #5 and #6 in Section 5: ICU Physician Staffing (IPS). The new response type will give hospitals the opportunity to report 24/7 intensivist coverage in an applicable ICU.
6 **NQF SAFE PRACTICES**	Earlier this year, Leapfrog convened a national expert panel to update the wording of the safe practice elements included in Section 6 NQF Safe Practices Score to provide greater clarity to hospitals, and ensure accurate, standard responses across all hospitals. In addition to wording updates, the panel also recommended changes to be consistent with the NQF Safe Practices for Better Healthcare – 2010 Update and the 2010 Safe Practices Audit completed by NQF in 2014.

	In addition, the Culture of Safety national expert panel performed a comprehensive review of Safe Practice 2 Culture Measurement, Feedback, and Intervention and has identified gaps in this practice. The panel is recommending the addition of four (4) safe practice elements. In response to questions about which safety culture surveys meet the intent of Safe Practice 2, the panel has also developed a set of Guidelines for a Culture of Safety Survey that Demonstrates Validity, Consistency, and Reliability.
7 **MANAGING SERIOUS ERRORS**	In response to requests from hospitals, Leapfrog will include three additional hospital-acquired infection measures on the survey: MRSA, CDI, and SSI after Major Colon Surgery. These measures come directly from the NHSN and are in use in one or more CMS inpatient programs. In order to support national efforts around the responsible use of antibiotics in hospitals, Leapfrog will be publicly reporting hospital compliance with the CDC's standards for Antibiotic Stewardship Programs. To collect this information regarding hospital adoption of these seven Core Elements, Leapfrog will use a set of 12 questions from the NHSN Annual Hospital Survey on antibiotic stewardship programs
8 **BAR CODE MEDICATION ADMINISTRATION (BCMA)**	In 2015, Leapfrog introduced this as a new standard focused on hospital use of BCMA systems in administering medications at the bed side to better recognize hospitals for effective efforts to prevent medication errors. Results for this section of the survey will now be publicly reported in 2016.
9 **RESOURCE USE FOR COMMON ACUTE CONDITIONS**	In 2015, Leapfrog asked hospital to report on both risk-adjusted lengths of stay and readmission rates for three common acute conditions (AMI, Heart Failure, and Pneumonia). In 2016, due to the national transition to ICD-10 administrative coding and the challenges of updating the risk adjustment model given the scarcity of published ICD-10 administrative data sets, Leapfrog will remove the length of stay measures from this section of the survey. We will add three additional readmission measures to this section to better align with the CMS Readmission Reduction Program: CABG, COPD, and THA/TKA. Leapfrog will continue to calculate a volume-weighted composite score for hospital readmissions. The composite will be made up of six, rather than three measures. Hospitals will no longer need to look up the volume and readmission rate for each measure on the CMS Hospital Compare Website. This information will be pre-populated in each survey based on the hospital's Medicare Provider Number.