Leapfrog ASC Survey
Town Hall Call

April 24 and May 26, 2020
About The Leapfrog Group
About The Leapfrog Group

- Premier purchaser-driven nonprofit born out the movement for health care transparency
- Founded by purchasers in 2000 in response to 1999 IOM Report To Err is Human
- Informs health care decisions of employers, purchasers, and consumers
- Our data is used by health plans, researchers, transparency organizations, and others
Find a Regional Leader Near You on Leapfrog’s Website
Leapfrog’s Historic Ratings Programs

**Leapfrog Hospital Survey**

- For the past 19 years, Leapfrog has asked hospitals to voluntarily report on the safety and quality of inpatient care
  - Over 2,100 hospitals across the U.S. voluntarily report to the Leapfrog Hospital Survey

**Leapfrog Hospital Safety Grade**

- Since 2012, Leapfrog has been assigning A, B, C, D, or F grades to general acute care hospitals in the U.S.
  - Leapfrog Hospital Safety Grades are assigned to over 2,600 hospitals across the U.S., whether or not they submit a Leapfrog Hospital Survey
Ambulatory Surgical Center Quality Reporting Program

About the program

The Ambulatory Surgical Center Quality Reporting (ASCQR) Program is a quality reporting program implemented by the Centers for Medicare & Medicaid Services (CMS). For this program, ambulatory surgical centers (ASCs) providing care to people with Medicare must report data on certain measures of clinical quality. These quality measures reflect CMS priorities including safety, and readmissions to align with National Quality Strategy and CMS Quality Strategy priorities.

Data collected through the ASCQR program is publicly reported so people with Medicare and other consumers can find and compare the quality of care provided at ambulatory surgical centers. Publishing this data can improve facility performance by providing benchmarks for selected clinical areas and public view of data on facility data.

Measuring quality

- **Ambulatory surgical measure data – by facility**

To sort or filter the data, select the three-line menu icon for that particular column header.

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**Patient Fall in the ASC**

Falls are an important issue for patients having outpatient procedures or surgery because as patients receive sedatives, anesthetics and pain medications as a major part of their care. The use of these medications increases the likelihood of a fall. The frequency of ASC admissions experiencing a fall while in the confines of participating ASCs is shown below as a rate per 1000 admissions. Current rates are below.

<table>
<thead>
<tr>
<th>Rate of patient falls in the ASC</th>
<th>0.132 per 1000 admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Represents the experience of 2,095,696 ASC admissions at 1,549 facilities between April 1 and June 30, 2019. The data shown for this measure over the last four quarters are presented below in both graphical format.</td>
<td></td>
</tr>
</tbody>
</table>

**Data Summary: Patient Fall in the ASC**

<table>
<thead>
<tr>
<th>Reporting Period</th>
<th>2Q2018</th>
<th>1Q2018</th>
<th>2Q2019</th>
<th>1Q2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Participating ASCs</td>
<td>1,576</td>
<td>1,592</td>
<td>1,589</td>
<td>1,641</td>
</tr>
<tr>
<td>Number of ASC Admissions</td>
<td>1,615</td>
<td>1,615</td>
<td>1,628</td>
<td>1,628</td>
</tr>
<tr>
<td>Patient Fall Rate per 1000 ASC Admissions</td>
<td>0.112</td>
<td>0.118</td>
<td>0.146</td>
<td>0.153</td>
</tr>
</tbody>
</table>

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**Contact Us**

- Quality Initiative
- Legal Information

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**We continually strive to improve the highest quality in a safe environment. Our organization is involved in the following areas and national healthcare quality initiatives and groups:**

- AVMA and CMS Healthcare Quality Alliance
- Association of periOperative Registered Nurses (AORN)
- Association for Professionals in Infection Control and Epidemiology (APIC)
- ASC Quality Collaborative

Within the facility are utilized healthcare provider’s tangible improvements in the following areas:

- National Patient Safety Goals
- Performance Management
- Patient Care Efficiency Throughout the Center
- Infection Control
- Patient Satisfaction

Falls are a primary area to evaluate and track outcomes. Some examples include:

- Surgical Aperiodesis
- Sedation of Instruments
- Pre-procedure Time-Outs
- Medication Administration Safety
- Preventive Healthcare: Required Interventions
- Thrombolysis Risk Assessment

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**The Leapfrog Group**

**THE LEAPFROG GROUP**

**Data.Medicare.gov**

**ERY CENTER AT NORTHBAY VACA VALLEY**

<table>
<thead>
<tr>
<th>Facility</th>
<th>NPI</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
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**SURGERY CENTER LLC**

<table>
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<tbody>
<tr>
<td>SURGERY CENTER LLC</td>
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**ENDOSCOPY CENTER LLC**

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<tr>
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**SURGICAL CARE OF BATON ROUGE LLC**

<table>
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</tr>
</thead>
<tbody>
<tr>
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**DBA WOOSTER AMBULATORY SURGERY**

<table>
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<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>DBA WOOSTER AMBULATORY SURGERY</td>
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<td>1003079187</td>
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</table>
Employers, purchasers, and health plans challenged Leapfrog to solve these issues:

<table>
<thead>
<tr>
<th>What they had:</th>
<th>What they needed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance data at the national level</td>
<td>Performance data at the facility level</td>
</tr>
<tr>
<td>State-wide data</td>
<td>National data</td>
</tr>
<tr>
<td>Facility-specific measures</td>
<td>Nationally standardized measures</td>
</tr>
<tr>
<td>Hard to find information</td>
<td>Easy to search information</td>
</tr>
<tr>
<td>Different measures for ASCs and HOPDs</td>
<td>Similar measures for ASCs and HOPDs</td>
</tr>
</tbody>
</table>
Initiatives launched on April 1, 2019

Section 10: Outpatient Procedures
Goals for the ASC and HOPD Surveys

• Collect data that is meaningful to purchasers and consumers
  - Use evidence-based, nationally standardized measures of patient safety and quality
  - Ensure proper risk adjustment, when appropriate
  - Run a top-notch Help Desk to provide technical assistance

• Publicly report data to inform purchasing and care decisions
  - Highlight performance gaps where choice really matters
  - Make Survey Results searchable by procedure

• Build on our work with purchasers, employers, health plans, and others to incorporate Survey Results into member tools, benefit design, direct contracting decisions, and value-based purchasing strategies
  - Initiate pilots designed by the Employer Innovation Panel
  - Continue to leverage Regional Leaders, members, partners, and data licensees

• Maintain the highest level of data integrity by implementing rigorous data verification protocols
  - CEO affirmation
  - Online data warnings
  - Extensive monthly data verification
  - Monthly documentation requirements
  - On-site verification
Participation in 2019

Over 350 ASCs and over 1,200 HOPDs submitted surveys.
About the Leapfrog ASC Survey
Always Free to Participate

The Leapfrog ASC Survey is a free, annual survey that assesses ASC performance on national measures of safety, quality, and efficiency of patient care. These measures are of specific interest to health care purchasers and consumers, and cover a broad spectrum of ASC processes, outcomes, and structures in various aspects of care.

The Leapfrog ASC Survey is closely aligned to Section 10 of the Leapfrog Hospital Survey, which is focused on outpatient surgeries and procedures in hospital outpatient departments (HOPDs).

Several of the measures included on Leapfrog’s ASC Survey are aligned with national accreditation standards from organizations such as the Accreditation Association for Ambulatory Health Care (AAAHC) and The Joint Commission (TJC), as well as national reporting entities such as the Centers for Disease Control and Prevention (CDC) and the Centers for Medicare and Medicaid Services (CMS).

The Leapfrog ASC Survey provides facilities with the opportunity to benchmark their performance on these national measures against other ASCs and HOPDs in their state and across the nation. Results from the 2020 Leapfrog ASC Survey will be scored and publicly reported at https://ratings.leapfroggroup.org/.

Applicable to surgery centers that care for adults and children.
### Aligned with other national organizations

<table>
<thead>
<tr>
<th>Survey Section</th>
<th>Measure</th>
<th>Endorsed or Aligned with other National Reporting Entities</th>
<th>Applicable to Pediatric Facilities?</th>
<th>Included in HOPD Section of Leapfrog Hospital Survey</th>
<th>How responses will be publicly reported at <a href="https://ratings.leapfroggroup.org">ratings.leapfroggroup.org</a></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong> Basic Facility Information</td>
<td>General Information</td>
<td>NHSN OPC Annual Facility Survey</td>
<td>✓</td>
<td></td>
<td>Not scored but details will be publicly reported</td>
</tr>
<tr>
<td></td>
<td>Accreditation</td>
<td>NISN OPC Annual Facility Survey</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transfer Policies and Agreements</td>
<td>AAAMC</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong> Medical, Surgical, and Clinical Staff</td>
<td>Certified Clinicians Present While Patients Are Recovering</td>
<td>AAAMC</td>
<td>✓</td>
<td>✓</td>
<td>Summary score plus detail publicly reported</td>
</tr>
<tr>
<td></td>
<td>Board Certification</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>Not scored but details will be publicly reported</td>
</tr>
<tr>
<td><strong>3</strong> Volume and Safety of Procedures</td>
<td>Volume of Procedures</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>Volume of each procedure performed on adult or pediatric patients: Not scored but details will be publicly reported</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Gastroenterology</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td>General Surgery</td>
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<td></td>
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<td>Ophthalmology</td>
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<td>Urology</td>
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<td></td>
<td>Dermatology**</td>
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<td></td>
<td></td>
<td>Neurological Surgery**</td>
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<td></td>
<td></td>
<td>Obstetrics and Gynecology**</td>
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<tr>
<td></td>
<td></td>
<td>Plastic and Reconstructive Surgery**</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Patient Follow-up</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>Not scored or publicly reported</td>
</tr>
<tr>
<td></td>
<td>Patient Selection</td>
<td>AAAMC, TJC</td>
<td>✓</td>
<td>✓</td>
<td>Not scored but details will be publicly reported</td>
</tr>
</tbody>
</table>
Helps to fulfill CMS requirements for an ongoing quality program

<table>
<thead>
<tr>
<th>Survey Section</th>
<th>Measure</th>
<th>Endorsed or Aligned with other National Reporting Entities*</th>
<th>Applicable to Pediatric Facilities?</th>
<th>Included in HIPOD Section of Leapfrog Hospital Survey</th>
<th>How responses will be publicly reported at <a href="https://ratings.leapfroggroup.org/">https://ratings.leapfroggroup.org/</a></th>
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</thead>
<tbody>
<tr>
<td>Consent to Treat</td>
<td>AAAHC, TJC</td>
<td>✅ ✅</td>
<td>✅ ✅</td>
<td>Not scored but details will be publicly reported</td>
<td></td>
</tr>
<tr>
<td>Safe Surgery Checklist</td>
<td>WHO, AORN, TJC</td>
<td>✅ ✅</td>
<td></td>
<td>Summary score plus details publicly reported</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Patient Safety Practices</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication Safety</td>
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<td></td>
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<td></td>
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<tr>
<td>Medication and Allergy Documentation</td>
<td>NQF #0019 and #0020, TJC, AAAHC</td>
<td>✅</td>
<td>✅</td>
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<td>Summary score plus details publicly reported</td>
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<td>Antimicrobial Stewardship Practices</td>
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<td></td>
<td></td>
<td>Not scored or publicly reported</td>
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<tr>
<td>Opioid Prescribing-Monitoring</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not scored or publicly reported</td>
</tr>
<tr>
<td>Opioid Prescribing – Adherence to Prescribing Guidelines for Surgical Patients</td>
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<td></td>
<td></td>
<td>Not scored or publicly reported</td>
</tr>
<tr>
<td>NHSN Outpatient Procedure Component Module</td>
<td>CDC/NHSN, NQF #3025 (5th Breast only)</td>
<td>✅</td>
<td></td>
<td></td>
<td>Summary score plus details publicly reported</td>
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<tr>
<td>Hand Hygiene Practices</td>
<td>AAAHC</td>
<td>✅</td>
<td>✅</td>
<td></td>
<td>Summary score plus details publicly reported</td>
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<tr>
<td>National Quality Forum (NQF) Safe Practices</td>
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<td></td>
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<tr>
<td>NQF SP 1: Culture of Safety Leadership Structures and Systems</td>
<td>NQF Safe Practice</td>
<td>✅</td>
<td>✅</td>
<td></td>
<td>Summary score plus details publicly reported</td>
</tr>
<tr>
<td>NQF SP2: Culture Measurement, Feedback, and Intervention</td>
<td>NQF Safe Practice</td>
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<td>✅</td>
<td></td>
<td>Summary score plus details publicly reported</td>
</tr>
<tr>
<td>Never Events Policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Summary score plus details publicly reported</td>
</tr>
</tbody>
</table>
In some cases, allows surgery centers to utilize existing data

<table>
<thead>
<tr>
<th>Survey Section</th>
<th>Measure</th>
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<th>Applicable to Pediatric Facilities?</th>
<th>Included in HOPD Section of Leapfrog Hospital Survey</th>
<th>How responses will be publicly reported at <a href="https://ratings.leapfroggroup.org/">https://ratings.leapfroggroup.org/</a></th>
</tr>
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<tbody>
<tr>
<td>5</td>
<td>Patient Experience (OAS CAHPS)</td>
<td></td>
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<tr>
<td></td>
<td>Patient Experience (OAS CAHPS)</td>
<td>NQF #1741, ASCQR, OQR</td>
<td></td>
<td>✓</td>
<td>Summary score plus detail publicly reported</td>
</tr>
</tbody>
</table>

*AAAHC= Accreditation Associated for Ambulatory Health Care; AORN= Association of periOperative Registered Nurses; CDC NHSN= Centers for Disease Control and Prevention National Healthcare Safety Network; NQF= National Quality Forum; TJC= The Joint Commission; WHO= World Health Organization.

**Adult procedures only.
Eligibility

Leapfrog Ambulatory Surgery Center Survey

For ASCs

• A distinct entity that exclusively provides same-day surgical services to patients not requiring hospitalization
• If certified by Medicare, the facility is certified as an ASC and has a 10-digit CCN; not required
• Provides surgical services that do not exceed 24 hours
• May or may not be affiliated with a hospital
• Often specialty-specific

Section 10: Outpatient Procedures

For Hospital Outpatient Departments (HOPD)

• A location that provides hospital outpatient services and operates under the license of a hospital
• If certified by Medicare, the facility is certified as a hospital and has a 6-digit CCN
• Provides outpatient hospital services, meaning preventive, diagnostic, therapeutic, rehabilitative, or palliative services that are furnished to outpatients
• May be co-located with a hospital (e.g., a unit within the building) or separately located (e.g., separate on/off campus location)
Leapfrog’s Response
to COVID-19
One-time-only changes to the Leapfrog ASC Survey

To uphold our shared vision for quality, safety, and transparency, while allowing surgery centers to devote their time to the urgent needs of the moment, Leapfrog is implementing several one-time-only changes to the 2020 Leapfrog ASC Survey:

• Extended Deadlines for the 2020 Survey
• Changes to Measures
• Change Summary Released on April 13
• Suspension of On-Site Data Verification for the 2020 Survey

Read Leapfrog’s full statement on COVID-19 here.
Extended deadlines for the 2020 Survey

• **Submission Deadline** extended 60 days from June 30 to August 31.

• **Public Reporting** will begin in the first 5 days of September with Surveys submitted by August 31 (previously started on July 25 with Surveys submitted by June 30).

• **Late Submission Deadline** extended 30 days from November 30 to December 31.

• **Corrections Period** from January 1 to January 31. Online Survey Tool will go offline at midnight EST on January 31.
Measure changes for the 2020 Survey

• Section 4C: Only surgery centers that scored as “Achieved the Standard” (four out of four bars) or “Considerable Achievement” (three out of four bars) on Hand Hygiene will have their Results publicly reported.

• Section 4D: The reporting period for administering a culture of safety survey has been updated from 24 months to 36 months.
Change Summary Released on April 13

- Section 4A Medication and Allergy Documentation - Updated the definition of a ‘sufficient sample size’ from 60 to 30 cases. This update is intended to ease the burden of data abstraction while facilities are responding to COVID-19.

- Section 4B NHSN Outpatient Procedure Component Module - Updated the reporting period for Leapfrog’s October and December NHSN data downloads from 07/01/2019 – 06/30/2020 to 01/01/2019 – 12/31/2019. This update is based on CMS’ announcement that ASC quality reporting to NHSN is optional for all facilities from January 1 to June 30, 2020. Leapfrog will continue to download SSI and SDOM data from NHSN four times during the 2020 Survey Cycle to account for new ASCs that join our NHSN group and submit the Leapfrog ASC Survey.

Download a hard copy of the 2020 Leapfrog ASC Survey on the Survey Materials webpage.
Suspension of On-Site Data Verification for the 2020 Survey

As part of Leapfrog’s standard protocols to ensure data accuracy, we will suspend On-Site Data Verification of 2020 Leapfrog ASC Survey Results. All other verification protocols will continue.

Learn more about Leapfrog’s verification protocols on our website.
Survey Content Organization

Each section of the Survey is organized in the same format in the hard copy of the Survey and the Online Survey Tool:

**General information** about The Leapfrog Group standard (included in the hard copy only).

**Reporting periods** to provide facilities with specific periods of time for each set of questions.

**Survey questions** which may include references to endnotes. The Survey questions and endnotes match the Online ASC Survey Tool exactly.

**Affirmation of accuracy** by your facility’s administrator or by an individual that has been designated by your facility’s administrator. These statements affirm the accuracy of your ASC’s responses.

**Reference information** which includes ‘What’s New’ and ‘Change Summaries,’ important measure specifications, answers to frequently asked questions, and other notes that must be carefully reviewed before providing responses to any of the Survey questions (included in the hard copy only).
1: Basic Facility Information

ASCs will be asked for general information on their facility.

- Examples of questions:
  - Number of operating rooms
  - Number of endoscopic procedure rooms
  - Number of adult and pediatric discharges
  - Teaching status
  - Ownership
  - Accreditation
  - Transfer policies and agreements
2: Medical, Surgical, and Clinical Staff

- Will include questions pertaining to the training and education of medical, surgical, and clinical staff, including proper resuscitation training and board certification:
  - Advanced Cardiovascular Life Support (ACLS) certification
  - Pediatric Advanced Life Support (PALS) certification
  - Board certification for physicians, anesthesiologists, and certified nurse anesthetists
3: Volume and Safety of Procedures

Asking ASCs to report information on the procedures performed in their centers, including:

• Volume of adult and pediatric procedures: 12-month reporting periods, procedures defined by CPT codes
• Patient follow-up
• Processes to ensure that patients are selected appropriately for the surgery center
• Informed consent
• Structures to support effective use of the Safe Surgery Checklist
Types of Procedures

In 2020, Leapfrog is focusing on a small number of procedures selected using the following criteria:

- High volume in both ambulatory surgery centers and hospital outpatient departments based on an analysis of commercial claims
- Requires moderate to general anesthesia or a nerve block

Specialties Include:

- Gastroenterology
- General surgery
- Ophthalmology
- Orthopedic
- Otolaryngology
- Urology
- Dermatology
- Neurological surgery
- Obstetrics and gynecology
- Plastic and reconstructive surgery
## Types of Procedures included in 2020

<table>
<thead>
<tr>
<th>Specialty</th>
<th># of Adult Procedures</th>
<th># of Pediatric Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gastroenterology</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>General Surgery</td>
<td>9</td>
<td>2</td>
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<tr>
<td>Ophthalmology</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Orthopedic</td>
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<td>7</td>
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<tr>
<td>Otolaryngology</td>
<td>4</td>
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<tr>
<td>Urology</td>
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<tr>
<td>Dermatology</td>
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<td>0</td>
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<tr>
<td>Neurological Surgery</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Obstetrics &amp; Gynecology</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Plastic &amp; Reconstructive Surgery</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
4: Patient Safety Practices

Medication Safety

- Medication and allergy documentation
- Antimicrobial Stewardship Practices
- Opioid Prescribing

NHSN Outpatient Procedure Component (OPC) Module

- Surgical site infections and same day outcomes measures

Hand Hygiene

Select NQF Safe Practices

- Culture of Safety Leadership Structures and Systems
- Culture Measurement, Feedback, and Intervention

Policies related to Never Events

*Facilities that are not yet participating in the OPC or administering the AHRQ Surveys on Patient Safety Culture (SOPS) can still report to the Leapfrog ASC Survey. They will simply answer “no” to the corresponding questions and/or leave the practice unselected.*
5: Patient Experience (OAS CAHPS)

• ASCs will be asked to report domain scores and selected aggregated question responses from the Outpatient and Ambulatory Surgery (OAS) CAHPS Survey
  - Leapfrog will accept responses from ASCs administering the OAS CAHPS Survey regardless of whether they are submitting the data to CMS
  - Leapfrog will accept responses from ASCs administering the OAS CAHPS Survey using modes not yet approved by CMS, such as electronic administration
• Only applicable for facilities with at least 300 eligible discharges (adult patients who had both medically and non-medically necessary surgeries and/or procedures) and at least 100 returned surveys during a 12-month reporting period

*Facilities that are not yet administering the OAS CAHPS Survey can still report to the Leapfrog ASC Survey. They will simply answer “no” to the corresponding questions.*
Submission Overview
Pre-Submission Checklist

Before you complete and submit the Survey via the Online ASC Survey Tool, there are a number of steps you should complete:

☐ Ensure that your facility is currently performing procedures in one or more of the specialties listed in Important Notes about the 2020 Leapfrog ASC Survey.

☐ Visit the ASC Survey website pages at http://www.leapfroggroup.org/asc.

☐ Make sure you have a 16-digit security code. If you don’t download a Security Code Request form.

☐ Download a hard copy of the Survey on the Survey Materials webpage. Then, read through the entire Survey document to ensure that you understand what information is required.

☐ Review the reference information in each section of the Survey document and download other supporting materials for each section. These documents and tools contain information that you will need to accurately respond to the Survey questions.

☐ Join Leapfrog’s NHSN Group. Joining Leapfrog’s NHSN Group for ASCs is one of two options for authenticating your facility for the purposes of requesting a security code to access to Online ASC Survey Tool. Additionally, Ambulatory Surgical Centers (ASCs) are required to join Leapfrog’s NHSN Group (The Leapfrog Group – ASCs Group ID: 57193) in order for Leapfrog to pull data that we collect in Section 4B. NHSN Outpatient Procedure Component Module. Download the instructions and review information about deadlines on the Join NHSN Group webpage.

☐ Identify individuals from your ASC to help you gather the data you will need to complete the various sections of the Survey.

☐ Complete a hard copy of the Survey before you log in to the Online ASC Survey Tool. This will expedite the online completion and help to avoid the Online ASC Survey Tool from “timeing out” after 20 minutes of idle time (a security precaution). Once all of the information has been collected and recorded in the hard copy of the Survey, the Administrator or his/her designee can typically complete the Survey online in less than 60 minutes from the hard copy record. Please note, responses can only be submitted using the Online ASC Survey Tool.

☐ Download and review a copy of the Quick Start Guide on the Get Started webpage. This document includes important instructions on how to navigate the Online ASC Survey Tool.

☐ Check Survey deadlines. Carefully review Survey deadlines before you begin (Leapfrog has made updates for the 2020 Survey Cycle as part of our COVID-19 response). Ensure that you have enough time to collect the data, complete a hard copy of the Survey, and complete and submit via the Online ASC Survey Tool. Make sure you have joined Leapfrog’s NHSN Group by the appropriate deadline.

☐ Download and review the 2020 Leapfrog ASC Survey Scoring Algorithms.

☐ Review Leapfrog’s policies and procedures regarding data accuracy. Detailed information can be found on the Data Accuracy webpage.
How to Request a Security Code

Each ASC will need a 16-digit security code in order to access the Online ASC Survey Tool.

In order to ensure that only authorized individuals have access to the 2019 Leapfrog ASC Survey for each facility, a Security Code Request Form must be completed. There are two options for requesting a security code:

- **Option 1**
  - Join Leapfrog’s NHSN Group
  - Have the individual listed as the “NHSN Administrator” complete and sign the Security Code Request Form
  - Print the Security Code Request Form on letterhead and submit it to the Help Desk.

- **Option 2**
  - Obtain a copy of the facility’s national accreditation letter or certificate, or the facility’s county or state business license
  - Have the Facility Administrator complete and sign the Security Code Request Form
  - Print the Security Code Request Form on letterhead and submit it with the required documentation to the Help Desk.

Note: In addition to the Facility Administrator referenced above, the Nurse Manager, Medical Director, or CEO may also submit a Security Code Request Form on behalf of their facility.
Scoring and Public Reporting
Review the Scoring Algorithms that will be used for Public Reporting of your 2020 Survey Results

Once a facility submits a Leapfrog ASC Survey via the Online ASC Survey Tool, the submitted responses will be scored using the algorithms detailed on our website.

Only those responses that have been submitted will be scored and publicly reported; saved responses will not be scored or publicly reported.

Generally, Leapfrog publicly reports Survey Results beginning on July 25 for facilities that submit by June 30, and these facilities are able to preview their Survey Results on the ASC Details Page on July 12. However, in 2020, as part of Leapfrog’s COVID-19 response, Leapfrog will not publicly report Survey Results until September for ASCs that submit by August 31.

ASCs should review their Survey Results following their submission to ensure accuracy and completeness on our website at https://ratings.leapfroggroup.org.
Two Places to View Survey Results

ASC Details Page
- Link on the Survey Dashboard
- Only available to surgery centers that submit a Survey
- Includes intermediate scoring information for surgery centers that may NOT be included on the public reporting website
- Starting in September, refreshed monthly to within the first 5 business days of the month to reflect new and updated Survey Submissions

Public Reporting Website
- Public and free to view by anyone at https://ratings.leapfroggroup.org
- Staring in September, refreshed monthly within the first 5 business days of the month to reflect new and updated Survey Submissions
Performance Categories Used in Scoring and Public Reporting

For the purposes of public reporting, performance on each measure on the Leapfrog ASC Survey is placed into one of four performance categories:

- **Achieved the Standard** (displayed as four filled bars)
- **Considerable Achievement** (displayed as three filled bars)
- **Some Achievement** (displayed as two filled bars)
- **Limited Achievement** (displayed as one filled bar)

Additional scoring terms include:

- **Does Not Apply**: This term is used for facilities that report not performing a particular procedure or do not have applicable patients and/or units for a particular measure.
- **Unable to Calculate Score**: This term is used for facilities that report a sample size that does not meet Leapfrog’s minimum reporting requirements.
- **Declined to Respond**: This term is used for facilities that do not submit a Survey.
- **Pending Leapfrog Verification**: This term is used for facilities who have Survey responses that are undergoing Leapfrog’s standard verification process.
Public Reporting
https://ratings.leapfroggroup.org/

2020 Leapfrog Hospital and ASC Survey Results will be publicly reported on this website beginning in September 2020.

To find 2019 Leapfrog Hospital Survey Results visit [www.leapfroggroup.org/compare](http://www.leapfroggroup.org/compare).

Information about the 2020 Leapfrog Hospital Survey can be found at [www.leapfroggroup.org/hospital](http://www.leapfroggroup.org/hospital).

Information about the 2020 Leapfrog ASC Survey can be found at [www.leapfroggroup.org/asc](http://www.leapfroggroup.org/asc).

**Progress towards meeting Leapfrog standards:**

- **Achieved the Standard**
- **Considerable Achievement**
- **Some Achievement**
- **Limited Achievement**
- **Due to the COVID-19 pandemic, data for this measure is not available**
- **This measure is not applicable to this facility**
- **Sample size too small to calculate score**
- **This facility’s responses are undergoing Leapfrog’s standard data verification process**
Leapfrog’s Approach to Scoring and Public Reporting

Leapfrog works with national experts to establish standards to which all participating hospitals and ambulatory surgery centers are measured against.

Standard setting creates a goal post for all participating hospitals and ambulatory surgery centers to strive for.

Standard setting allows us to include process, structural, and outcome measures on the hospital and ASC Surveys.
How We Set the Standards

• Peer reviewed literature and expert opinion
• Peer comparisons
• Alignment with existing national standards or targets
Leapfrog’s Safe Surgery Checklist Standard is based on published literature and national safety experts.

You can download the ASC Survey bibliography on our website.
Peer Comparison

OAS CAHPS cut-points used in scoring will be based on Surveys submitted by August 31, 2020.

<table>
<thead>
<tr>
<th>Patient Experience (OAS CAHPS) Score (Performance Category)</th>
<th>Meaning that the facility…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieved the Standard</td>
<td>Scored in top quartile of facilities on 4 out of 4 OAS CAHPS domains.</td>
</tr>
<tr>
<td>Considerable Achievement</td>
<td>Scored in top quartile of facilities on 3 out of 4 OAS CAHPS domains.</td>
</tr>
<tr>
<td>Some Achievement</td>
<td>Scored in top quartile of facilities on 2 out of 4 OAS CAHPS domains.</td>
</tr>
<tr>
<td>Limited Achievement</td>
<td>Scored in top quartile of facilities on 1 or fewer OAS CAHPS domains or the facility did not measure.</td>
</tr>
<tr>
<td>Unable to Calculate Score</td>
<td>The facility did not meet the minimum reporting requirements for the measure (&lt;100 returned OAS CAHPS Surveys).</td>
</tr>
<tr>
<td>Does Not Apply</td>
<td>The facility had too few eligible discharges (n &lt; 300) to administer the OAS CAHPS Survey.</td>
</tr>
<tr>
<td>Declined to Respond</td>
<td>The facility did not submit a Survey.</td>
</tr>
<tr>
<td>Pending Leapfrog Verification</td>
<td>The facility’s responses are undergoing Leapfrog’s standard verification process.</td>
</tr>
</tbody>
</table>

Note: The top quartiles are based on the distribution of ASC and hospital performance from 2020 Leapfrog ASC Surveys and Section 10 of the 2020 Leapfrog Hospital Surveys submitted by August 31, 2020 (updated from June 30, 2020 as part of Leapfrog’s COVID-19 response). These cut-points will remain in place for the entire Survey reporting cycle, unless it is determined that there are compelling reasons to make revisions.
Alignment with existing national standards or targets

The standard for Certified Clinicians being Present While Patients are Recovering is aligned with the AAAHC accreditation standard for surgery centers.

<table>
<thead>
<tr>
<th>Certified Clinicians Present While Patients Are Recovering Score (Performance Category)</th>
<th>Meaning that while adult patients are recovering, the ASC ensures that...</th>
<th>Meaning that while pediatric patients are recovering, the ASC ensures that...</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Achieved the Standard</strong></td>
<td>An ACLS trained clinician, as well as a second clinician (regardless of ACLS training), are present at all times and immediately available in the building while an adult patient is present in the facility; <strong>AND</strong>&lt;br&gt;• A physician or CRNA is present at all times and immediately available in the building until <strong>all</strong> adult patients are physically discharged from the facility</td>
<td>A PALS trained clinician, as well as a second clinician (regardless of PALS training), are present at all times and immediately available in the building while a pediatric patient (infant through 12 years) is present in the facility; <strong>AND</strong>&lt;br&gt;• A physician or CRNA is present at all times and immediately available in the building until <strong>all</strong> pediatric patients are physically discharged from the facility</td>
</tr>
<tr>
<td><strong>Some Achievement</strong></td>
<td>An ACLS trained clinician, as well as a second clinician (regardless of ACLS training), are present at all times and immediately available in the building while an adult patient is present in the facility; <strong>OR</strong>&lt;br&gt;• A physician or CRNA is present at all times and immediately available in the building until <strong>all</strong> adult patients are physically discharged from the facility</td>
<td>A PALS trained clinician, as well as a second clinician (regardless of PALS training), are present at all times and immediately available in the building while a pediatric patient (infant through 12 years) is present in the facility; <strong>OR</strong>&lt;br&gt;• A physician or CRNA is present at all times and immediately available in the building until <strong>all</strong> pediatric patients are physically discharged from the facility</td>
</tr>
</tbody>
</table>
Timeline, Important Dates, & Next Steps
Extended deadlines for the 2020 Survey

- **Submission Deadline** extended 60 days from June 30 to August 31.

- **Public Reporting** will begin in the first 5 days of September with Surveys submitted by August 31 (previously started on July 25 with Surveys submitted by June 30).

- **Late Submission Deadline** extended 30 days from November 30 to December 31.

- **Corrections Period** from January 1 to January 31. Online Survey Tool will go offline at midnight EST on January 31.

Review all 2020 Survey Deadlines on our [website](#).
Technical Assistance

Contact our dedicated Help Desk at https://leapfroghelpdesk.Zendesk.com

Short, pre-recorded technical assistance presentations on the variety of topics ranging from requesting a security code to navigating the Online Survey Tool. Check them out on our website at https://www.leapfroggroup.org/asc-survey-materials/technical-assistance-calls.
Questions?