2020 Leapfrog Hospital Survey
Town Hall Call

April 16 and May 20, 2020
Leapfrog’s Response to COVID-19
One-time-only changes to the Leapfrog Hospital Survey

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

• Maintain 2019 Survey Results in Public Reporting
• Reduced Reporting Requirements for the 2020 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.
Maintain 2019 Survey Results in lieu of reporting to the 2020 Leapfrog Hospital Survey

Hospitals that submitted a 2019 Leapfrog Hospital Survey may choose to maintain last year’s Leapfrog Hospital Survey Results on our public reporting website. To select this option, no action is required.

Hospitals that submitted a 2019 Leapfrog Hospital Survey will automatically have their 2019 Survey Results maintained on our public reporting website: www.leapfroggroup.org/compare.

For eligible hospitals, these 2019 Survey Results will also automatically be used in the Fall 2020 Leapfrog Hospital Safety Grade.
FAQs about maintaining 2019 Survey Results

Will Leapfrog rescore our 2019 Survey responses using the 2020 Scoring Algorithm?

NO. The 2019 Survey Results will remain frozen, as is, on our website. Hospitals should carefully review these Results at www.leapfroggroup.org/compare.

Will Leapfrog maintain our Fall 2019 or Spring 2020 Safety Grade, which uses 2019 Leapfrog Hospital Survey Results?

NO. To calculate Hospital Safety Grades, we always use whatever data is public for the 28 measures on the Data Snapshot Dates. This fall, we anticipate updated CMS data and other supplemental data (i.e. AHA data) that will be used to calculate Fall 2020 Grades.
FAQs about maintaining 2019 Survey Results

Will Leapfrog maintain our Fall 2019 or Spring 2020 Safety Grade, which uses 2019 Leapfrog Hospital Survey Results?

NO. To calculate Hospital Safety Grades, we always use whatever data is public for the 28 measures on the Data Snapshot Dates.

Some things to note:

• Even though your Leapfrog Hospital Survey Results for the measures included in the Safety Grade will remain the same, other data such as CMS data is likely to change.

• Even though your Leapfrog Hospital Survey Results for the measures included in the Safety Grade will remain the same, the points assigned for the purposes of calculating a Fall 2020 Safety Grade could change. For example, currently if a hospital earns 3-filled bars or 'Substantial Progress' on the CPOE measure, 70 points are assigned for the purposes of calculating the Hospital Safety Grade. The points assigned to the performance categories used in public reporting Leapfrog Hospital Survey Results for CPOE, BCMA, and ICU Staffing, as well as the Safe Practices could change.

• Therefore, your Fall 2020 Hospital Safety Grade may change even through your Survey Results are staying the same.

• Leapfrog plan to publish proposed changes to the Fall 2020 Hospital Safety Grade in Early May.
FAQs about maintaining 2019 Survey Results

What about NHSN Data?

If your hospital chooses to maintain their 2019 Survey Results (which you should review at www.leapfroggroup.org/compare), then we will not obtain updated infection data from NHSN.

If you want updated NHSN data publicly reported for your hospital AND included in the Hospital Safety Grade, you will need to submit a 2020 Leapfrog Hospital Survey, including Section 7.

What about Top Hospital?

This is Leapfrog's 20 Year Anniversary and we are planning several awards and recognitions for hospitals. We have not determined the criteria for Top Hospital yet but will do everything we can to ensure that hospitals are not penalized if they are not able to submit a 2020 Survey due to the current pandemic.
Reduced reporting requirements for the 2020 Survey

Hospitals choosing to submit the 2020 Leapfrog Hospital Survey must complete the five sections of the Survey that constitute Leapfrog’s minimum requirements for submission:

- Section 1 Basic Hospital Information
- Section 2 CPOE
- Section 4 Maternity Care
- Section 5 ICU Physician Staffing
- Section 6 Patient Safety Practices

Hospitals submitting the minimum required sections will **not** be scored or publicly reported as “Declined to Respond” for any additional Survey sections that are not submitted.

Leapfrog will score and publicly report the remaining sections of the Survey as “Not Available,” which will be described on our public reporting website as unavailable data due to the COVID-19 crisis.

Hospitals are still encouraged to submit all applicable sections of the Survey.
FAQs about reduced reporting requirements for the 2020 Survey

If my hospital submits the 5 required sections, how will Leapfrog get scores for other measures used in the Fall 2020 Hospital Safety Grade?

Hospitals that want Leapfrog Hospital Survey Results used for all measures used in the Hospital Safety Grade, will also need to submit Section 7 and join our NHSN Group (in order for Leapfrog to obtain your infection data from NHSN) and Section 8 (in order for Leapfrog to obtain your BCMA data).

The measures from the 2020 Leapfrog Hospital Survey that will be included in the Fall 2020 Hospital Safety Grade include:

• Section 2 CPOE (required for submission)
• Section 5 ICU Physician Staffing (required for submission)
• Section 6 Patient Safety Practices, including Section 6A Safe Practice 1 Leadership, 6B Safe Practice 2 Culture of Safety, 6C Safe Practice 9 Nursing Workforce, and 6D Hand Hygiene (required for submission)
• Section 7B (CLABSI, CAUTI, C.diff., MRSA, SSI Colon)
• Section 8A BCMA
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.
FAQs about extended deadlines for the 2020 Survey

What deadline should my hospital use if we want to have 2020 Survey Results included in the Hospital Safety Grade?

Hospitals must submit a 2020 Survey by **August 31** to have those Survey Results included in the Fall 2020 Safety Grade.

Hospitals must submit a 2020 Survey by **December 31** to have those Survey Results included in the Spring 2021 Safety Grade.

All updates to previously submitted 2020 Surveys must be made prior to December 31.
Measure changes for the 2020 Survey

- Section 2: The CPOE Evaluation Tool has been removed. **Section 2 CPOE is still required.** Hospitals will need to complete and affirm questions #1-4 via the Online Survey Tool, but you will not take the CPOE Test. All hospitals will be scored based on their implementation status only. The updated Scoring Algorithm can be reviewed on page 10 in the Scoring Algorithms document.

- Section 6B: The reporting period for administering a culture of safety survey has been updated from 24 months to 36 months.

- Section 6D: Only hospitals 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.
Change Summary Released on April 13

• Section 4 Maternity Care: Updated the definition of a ‘sufficient sample size’ from 60 to 30 cases for the following measures:
  • Section 4B Elective Deliveries
  • Section 4C Cesarean Birth
  • Section 4E Process Measures of Quality (both Newborn Bilirubin Screening Prior to Discharge and Appropriate DVT Prophylaxis in Women Undergoing Cesarean Delivery)
  • Section 4F High-Risk Deliveries (Antenatal Steroids Process Measure only)

• Section 7B Healthcare-Associated Infections: 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 hospital reporting of healthcare-associated infection data to NHSN is optional from January 1 to June 30, 2020.

• Section 10E Medication Safety for Outpatient Procedures: Updated the definition of a ‘sufficient sample size’ from 60 to 30 cases.

Download a hard copy of the 2020 Leapfrog Hospital 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 Hospital Survey Results. All other verification protocols will continue.
Annual Survey Process

August - September:
Survey team and expert panelists set goals, review latest measures, review changes to endorsement status, consider member and hospital recommendations from the previous year.

November:
Publish proposed changes for a 30-day public comment period. Hospitals and other stakeholders are invited to share comments and feedback on the proposed changes for the new Survey. This year we received over 150 comments.

January:
Pilot test the new Survey with ~30 hospitals and health systems nationwide. Participating hospitals are asked to test a draft of the Survey and scoring algorithms (hard copies only) and provide feedback.

February – March:
Online Survey Tool is programmed, and Survey materials are updated. Leapfrog publishes a Summary of Changes.

April 1:
Survey launches at leapfroggroup.org/hospital.
Goals for the Hospital Survey

Expand the Survey to more hospitals by including measures that are relevant to rural, urban, and pediatric hospitals.

Keep the reporting burden as low as possible by continuing to align with other national performance measurement initiatives (such as the CDC/NHSN, CMS, The Joint Commission, and applicable registries).

Include cutting-edge measures that improve the safety, quality, and efficiency of care delivery.

Maintain a consistent measurement structure so hospitals can use their Survey Results for benchmarking and for improvement purposes.

Work to ensure that Survey Results are used by employers, purchasers, and payors in value-based payment programs.
The Survey includes 10 sections, and each of the sections is organized in the same format in the hard copy of the Survey and the Online Hospital Survey Tool, unless otherwise noted:

- **General information** about The Leapfrog Group standard [hard copy only].
- **Reporting periods** to provide hospitals 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 Hospital Survey Tool exactly.
- **Affirmation of accuracy** by your hospital’s CEO/Chief Administrative Officer or by an individual that has been designated by the hospital CEO. These statements affirm the accuracy of your hospital’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 [hard copy only].

**SURVEY SECTION**

<table>
<thead>
<tr>
<th>Profile</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Basic Hospital Information</td>
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<tr>
<td>2 Medication Safety - CPOE</td>
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<tr>
<td>3 Inpatient Surgery</td>
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<tr>
<td>4 Maternity Care</td>
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<td>5 ICU Physician Staffing</td>
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<td>6 Patient Safety Practices</td>
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<td>7 Managing Serious Errors</td>
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<td>8 Medication Safety</td>
</tr>
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<td>9 Pediatric Care</td>
</tr>
<tr>
<td>10 Outpatient Procedures</td>
</tr>
</tbody>
</table>
Submission Guidelines
Deadlines for the 2020 Survey

• **August 31** is the Submission Deadline – Hospitals that submit a Survey by August 31 will have their Survey Results publicly reported within the first 5 business days of September at ratings.leapfroggroup.org. Hospitals that did not submit a 2019 Survey and do not submit a 2020 Survey by August 31 will be publicly reported as “Declined to Respond.”

• **December 31** is the Late Submission Deadline – No new Surveys can be submitted after this date. Updates made to reflect a change in performance after December 31 will not be scored or publicly reported.

• **January 31** is the Correction Deadline – Any data entry or reporting corrections to Surveys submitted by December 31 must be submitted by January 31. The Survey goes offline at midnight on January 31.

  More information, including NHSN group deadlines, on the Deadlines webpage.
Ensuring Data Accuracy

Leapfrog has several protocols in place to ensure the accuracy of the Survey responses submitted via the Online Survey Tool, including:

• Affirmations
• Warnings in the Online Survey Tool
• Extensive Monthly Data Verification
• Monthly Documentation Requirements
• On-Site Data Verification (suspended for the 2020 Survey)

Review Leapfrog’s protocols on the Data Accuracy webpage.
What’s New in 2020: Key Updates
General Updates

Online Submission Requirements

Public Reporting
In 2020, in order to submit a Leapfrog Hospital Survey via the Online Hospital Survey Tool, hospitals will be required to complete and affirm all of the following five sections:

- Section 1 Basic Hospital Information
- Section 2 Medication Safety – Computerized Physician Order Entry (CPOE)
- Section 4 Maternity Care
- Section 5 ICU Physician Staffing
- Section 6 Patient Safety Practices (previously named NQF Safe Practices)

In previous years, hospitals were able to submit a Survey via the Online Hospital Survey Tool, by completing and affirming Section 1 Basic Hospital Information, as well as one of the following sections: Section 2 Medication Safety – CPOE, Section 4 Maternity Care, Section 5 ICU Physician Staffing, OR Section 6 NQF Safe Practices. As always, hospitals are expected to submit all sections of the Leapfrog Hospital Survey that are applicable to their facility.
Public Reporting

While Leapfrog originally proposed discontinuing the use of performance category descriptions, based on feedback received we will continue to use descriptions in the scoring and public reporting of Survey Results, but will update to the following terms:

- Achieved the Standard (previously “Fully Meets the Standard”): 4 out of 4 bars
- Considerable Achievement (previously “Substantial Progress”): 3 out of 4 bars
- Some Achievement (previously “Some Progress”): 2 out of 4 bars
- Limited Achievement (previously “Willing to Report”): 1 out of 4 bars

Leapfrog originally proposed adding a new scoring category “Declined to Measure,” which would be used when a hospital reports not measuring their performance on specific measures. Based on the feedback received, Leapfrog has decided to instead report these hospitals as “Limited Achievement” (the category previously used for “Willing to Report”).

Leapfrog will continue to use the scoring terms “Unable to Calculate Score,” “Does Not Apply,” and “Declined to Respond.”

Hospitals and ASC Survey Results will be published at [https://ratings.leapfroggroup.org](https://ratings.leapfroggroup.org) in September.
Section 2 Medication Safety - CPOE

Scoring Algorithm for Adult and General Hospitals
## Medication Safety – CPOE Scoring Algorithm

Used for adult, general, and pediatric hospitals in 2020.

Leapfrog fully intends to bring the CPOE Evaluation Tool back in 2021.

<table>
<thead>
<tr>
<th>CPOE Score (Performance category)</th>
<th>Implementation Status (from Leapfrog Hospital Survey Questions #3-4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieved the Standard</td>
<td>85% or greater of all inpatient medication orders entered through CPOE System</td>
</tr>
<tr>
<td>Considerable Achievement</td>
<td>75-84% of all inpatient medication orders entered through CPOE System</td>
</tr>
<tr>
<td>Some Achievement</td>
<td>50-74% of all inpatient medication orders entered through CPOE System</td>
</tr>
<tr>
<td>Limited Achievement</td>
<td>CPOE implemented in at least one inpatient unit but &lt;50% of all inpatient medication orders entered through CPOE System OR CPOE not implemented in at least one inpatient unit</td>
</tr>
<tr>
<td>Declined to Respond</td>
<td>The hospital did not submit a Survey.</td>
</tr>
<tr>
<td>Pending Leapfrog Verification</td>
<td>The hospital’s responses are undergoing Leapfrog’s standard verification process.</td>
</tr>
</tbody>
</table>
Section 3 Inpatient Surgery

Pediatric Procedure: Norwood

Adult Procedures: Total Hip Replacement and Total Knee Replacement

Outcomes for Mitral Valve Repair and Replacement
Pediatric Procedure: Norwood

The Norwood procedure was selected for inclusion on the Survey for two reasons: (1) it is a high-risk surgery, categorized by The Society of Thoracic Surgeons (STS) in their highest risk category for congenital heart surgery (STAT Mortality Category 5) and; (2) the peer-reviewed literature has identified a strong volume-outcome relationship for the procedure.

The minimum volume standard is 8 cases for hospitals and 5 cases for surgeons.

*Leapfrog will not score or publicly report any information on the Norwood procedure in 2020.*
Adult Procedures: THR and TKR

Leapfrog’s national expert panel has finalized their recommendations for minimum hospital and surgeon volume standards for total knee replacement and total hip replacement procedures.

The minimum volume standards for total knee replacement are 50 cases for hospitals and 25 cases for surgeons.

The minimum volume standards for total hip replacement are 50 cases for hospitals and 25 cases for surgeons.

*Leapfrog will not score or publicly report any information on total knee replacement or total hip replacement procedures in 2020.*

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**THE LEAPFROG GROUP**
Outcomes for Mitral Valve Repair and Replacement

Beginning in 2020, hospitals that electively perform mitral valve repair and replacement (MVRR) procedures are asked to report additional information about their quality, including:

• Whether they participate in The Society of Thoracic Surgeons’ (STS) Adult Cardiac Surgery Database (ACSD)

• One/Two/Three-star ratings for their STS Mitral Valve Repair/Replacement (MVRR) domain scores (Absence of Operative Mortality and Absence of Major Morbidity) and their Overall Composite Score

This additional information for mitral valve repair and replacement will not be scored or publicly reported in 2020. Hospitals will continue to be scored on hospital volume and surgeon privileging processes only.
Summary of Hospital and Surgeon Volume Standards for 2020

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Hospital Volume (minimum per 12-months or 24-month average)</th>
<th>Surgeon Volume (minimum per 12-months or 24-month average)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carotid endarterectomy</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Mitral valve repair and replacement</td>
<td>40</td>
<td>20</td>
</tr>
<tr>
<td>Open aortic procedures</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Lung resection for cancer</td>
<td>40</td>
<td>15</td>
</tr>
<tr>
<td>Esophageal resection for cancer</td>
<td>20</td>
<td>7</td>
</tr>
<tr>
<td>Pancreatic resection for cancer</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Rectal cancer surgery</td>
<td>16</td>
<td>6</td>
</tr>
<tr>
<td>Bariatric surgery for weight loss</td>
<td>50</td>
<td>20</td>
</tr>
<tr>
<td>Total hip replacement*</td>
<td>50</td>
<td>25</td>
</tr>
<tr>
<td>Total knee replacement*</td>
<td>50</td>
<td>25</td>
</tr>
<tr>
<td>Norwood procedure*</td>
<td>8</td>
<td>5</td>
</tr>
</tbody>
</table>

*Not being scored or publicly reported in 2020.
Section 6 Patient Safety Practices

NQF SP4 and SP19

Hand Hygiene
Safe Practice 4 and Safe Practice 19

NQF Safe Practice #4 – Risks and Hazards has been removed due to the changing evidence supporting the impact of this practice on reducing adverse events.

NQF Safe Practice #19 – Hand Hygiene has also been removed and replaced with the new subsection on Hand Hygiene that was added in 2019.

In 2020, Section 6 Patient Safety Practices includes three NQF-endorsed Safe Practices and the new Hand Hygiene standard:

• Section 6A: NQF Safe Practice #1 – Culture of Safety Leadership Structures and Systems
• Section 6B: NQF Safe Practice #2 – Culture Measurement, Feedback, and Intervention
• Section 6C: NQF Safe Practice #9 – Nursing Workforce
• Section 6D: Hand Hygiene

All four subsections will be scored and publicly reported in 2020 using updated scoring algorithms.
The following scoring algorithm applies to each of the following NQF Safe Practices:

- Section 6A: NQF Safe Practice #1 – Culture of Safety Leadership Structures and Systems
- Section 6B: NQF Safe Practice #2 – Culture Measurement, Feedback, and Intervention
- Section 6C: NQF Safe Practice #9 – Nursing Workforce

Each will be scored and performance will be publicly reported individually at https://ratings.leapfroggroup.org/.

<table>
<thead>
<tr>
<th>NQF Safe Practice Score (Performance Category)</th>
<th>Overall Points Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieved the Standard</td>
<td>100% of Points</td>
</tr>
<tr>
<td>Considerable Achievement</td>
<td>80% to 99% of Points</td>
</tr>
<tr>
<td>Some Achievement</td>
<td>50% to 79% of Points</td>
</tr>
<tr>
<td>Limited Achievement</td>
<td>0% to 49% of Points</td>
</tr>
<tr>
<td>Declined to Respond</td>
<td>The hospital did not submit a Survey.</td>
</tr>
<tr>
<td>Pending Leapfrog Verification</td>
<td>The hospital’s responses are undergoing Leapfrog’s standard verification process.</td>
</tr>
</tbody>
</table>
Hand Hygiene

The questions and scoring for Section 6D Hand Hygiene have been significantly updated from what was originally proposed based on feedback from participating hospitals and guidance from Leapfrog’s national Hand Hygiene Expert Panel and others.

The questions and scoring algorithm encourage a multimodal approach and emphasize the importance of monitoring and feedback, which are both required in order to meet Leapfrog’s standard.

This subsection will be scored and publicly reported in 2020, and Results will be included in the Hospital Safety Grade starting with the Fall 2020 release, replacing NQF Safe Practice #19 – Hand Hygiene.

Carefully review the hard copy of the Survey on the Survey Materials webpage and the Scoring Algorithm on the Scoring and Results webpage.
2020 Scoring Algorithm for Hand Hygiene

The hospital responded “yes” to all applicable questions in the Monitoring and Feedback Domains and meets the monthly sample size of 200 observations (or 1.7% of all possible hand hygiene opportunities) for monitoring hand hygiene opportunities:

- **Monitoring Domain:**
  - Question #8: Hospital collects hand hygiene compliance data on at least 200 hand hygiene opportunities, or 1.7% of all possible hand hygiene opportunities, each month in each patient care unit
  - Question #10: Hospital uses hand hygiene coaches or compliance observers to provide individuals who touch patients or who touch items that will be used by patients with feedback on both when they are and are not compliant with performing hand hygiene
- **Feedback Domain:** questions #15-18

**AND**

The hospital responded “yes” to all questions in any 2 of the following domains:

- **Training and Education Domain:** questions #1-3
- **Infrastructure Domain:** questions #4-7
- **Culture Domain:** questions #19-20

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The hospital responded “yes” to all applicable questions in the Monitoring and Feedback Domains and meets the quarterly sample size of 100 observations for monitoring hand hygiene opportunities:

- **Monitoring Domain:**
  - Question #9: Hospital collects hand hygiene compliance data on at least 100 hand hygiene opportunities each quarter in each patient care unit
  - Question #10: Hospital uses hand hygiene coaches or compliance observers to provide individuals who touch patients or who touch items that will be used by patients with feedback on both when they are and are not compliant with performing hand hygiene
- **Feedback Domain:** questions #15-18

**AND**

The hospital responded “yes” to all questions in any 2 of the following domains:

- **Training and Education Domain:** questions #1-3
- **Infrastructure Domain:** questions #4-7
- **Culture Domain:** questions #19-20
Section 8 Medication Safety

Opioid Prescribing
Opioid Prescribing (Optional in 2020)

First, to assess participation in what the Centers for Disease Control and Prevention have identified as a promising practice to improve opioid prescribing and to protect patients, Leapfrog is asking hospitals about their participation in their state or regional prescription drug monitoring program (PDMP) and whether prescribers are required to check the database before writing a new prescription. These questions are applicable to adult and pediatric hospitals and have also been added to the 2020 Leapfrog ASC Survey.

Second, Leapfrog is asking hospitals to report on their adherence to national evidence-based prescribing guidelines for surgical patients and how they monitor adherence to these guidelines. These measures are not applicable to pediatric hospitals but have been added to the 2020 Leapfrog ASC Survey.

Lastly, Leapfrog originally proposed including questions on concurrent prescriptions at discharge but based on the CMS delay in implementing the measure as part of the Inpatient Quality Reporting Program, Leapfrog will delay the addition of these questions until 2021.

*This new subsection will be optional in 2020, and responses will not be scored or publicly reported.*
Section 9 Pediatric Care

2020 Scoring Algorithm for CAHPS Child Hospital Survey

Measure Specifications for Pediatric CT Radiation Dose
Hospitals will be scored based on Top Box Scores from a subset of the domains (5 out of 18) included on the CAHPS Child Hospital Survey:

- Communication with Parent – Communication about your child’s medicines
- Communication with Parent – Keeping you informed about your child’s care
- Communication with Child – How well nurses communicate with your child
- Communication with Child – How well doctors communicate with your child
- Attention to Safety and Comfort – Preventing mistakes and helping you report concerns

Quartile values for each of the 5 domains listed above will be calculated based on the distribution of hospital performance reported in 2020 Leapfrog Hospital Surveys submitted by August 31, 2020. Hospitals will be scored based on the number of domains where the hospital is performing in the top quartile.
## Scoring Algorithm for CAHPS Child Hospital Survey (cont.)

<table>
<thead>
<tr>
<th>Top Quartile for CAHPS Child Hospital Survey Domains (Quartiles [Q])</th>
<th>Communication about child's medicines (%)</th>
<th>Keeping you informed about child's care (%)</th>
<th>Child Communication with nurses (%)</th>
<th>Child Communication with doctors (%)</th>
<th>Preventing mistakes and reporting concerns (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top Quartile (&gt;= Q3)</td>
<td>&gt;= TBD</td>
<td>&gt;= TBD</td>
<td>&gt;= TBD</td>
<td>&gt;= TBD</td>
<td>&gt;= TBD</td>
</tr>
</tbody>
</table>

### Patient Experience (CAHPS Child Hospital Survey) Score (Performance Category) | Meaning that the hospital...

<table>
<thead>
<tr>
<th>Achieved the Standard</th>
<th>Scored in top quartile of hospitals on at least 4 out of 5 Child CAHPS domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>Considerable Achievement</td>
<td>Scored in top quartile of hospitals on 3 out of 5 Child CAHPS domains</td>
</tr>
<tr>
<td>Some Achievement</td>
<td>Scored in top quartile of hospitals on 2 out of 5 Child CAHPS domains</td>
</tr>
<tr>
<td>Limited Achievement</td>
<td>Scored in top quartile of hospitals on 1 or fewer Child CAHPS domains or the hospital did not measure.</td>
</tr>
<tr>
<td>Unable to Calculate Score</td>
<td>The hospital did not meet the minimum reporting requirements for the measure (&lt;100 returned CAHPS Child Hospital Surveys).</td>
</tr>
<tr>
<td>Does Not Apply</td>
<td>The hospital had too few pediatric inpatient admissions (n &lt; 500) to administer the CAHPS Child Hospital Survey, or had fewer than 100 non-NICU pediatric inpatient admissions</td>
</tr>
<tr>
<td>Declined to Respond</td>
<td>The hospital did not respond to the questions in this section of the Survey or did not submit a Survey.</td>
</tr>
<tr>
<td>Pending Leapfrog Verification</td>
<td>The hospital’s responses are undergoing Leapfrog's standard verification process.</td>
</tr>
</tbody>
</table>
Measure Specifications for Pediatric CT Radiation Dose

Based on feedback received throughout the 2019 Survey Cycle, Leapfrog has worked with the measure developer to make several refinements to the measure specifications in 2020:

• First, hospitals will be asked to report on a list of routine head and abdomen/pelvis scans. The list of routine scans accounts for over 85% of all head CT scans and over 95% of all abdomen/pelvis CT scans for pediatric patients. This list was developed with the assistance of the American College or Radiology (ACR).

• Next, hospitals will be asked to standardize head scans to 16cm phantoms and to standardize abdomen/pelvis scans to 32cm phantoms when reporting on their 25th, 50th, and 75th percentile DLP values. This change aligns with how the American College of Radiology (ACR) reports their data.

• Hospitals can report on their dose data one of three ways:
  • Leapfrog-ACR Reports will already have scans standardized to these phantoms
  • The CT Dose Workbook developed by Leapfrog has been updated to automatically standardize scans for hospitals performing manual data collection
  • Dose monitoring software can also be used to standardize data

Due to these refinements, Leapfrog will update the benchmarks for each age stratum and anatomic area based on Leapfrog Hospital Surveys submitted by August 31, 2020.
Section 10 Outpatient Procedures

Scored and Publicly Reported in 2020
Section 10 – Scored and Publicly Reported in 2020

Select measures from Section 10 Outpatient Procedures and the Leapfrog ASC Survey will be scored and publicly reported in 2020.

### Please carefully review the Scoring Algorithm on the Scoring and Results webpage.

<table>
<thead>
<tr>
<th>Section #</th>
<th>Measure</th>
<th>Scored and/or publicly reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>10A</td>
<td>Basic Outpatient Department Information</td>
<td>Not scored but publicly reported</td>
</tr>
<tr>
<td></td>
<td>General Information</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transfer Policies and Agreements</td>
<td></td>
</tr>
<tr>
<td>10B</td>
<td>Medical, Surgical, and Clinical Staff</td>
<td>Scored and Results are publicly reported</td>
</tr>
<tr>
<td></td>
<td>Certified staff present when patients are recovering</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Board certification</td>
<td>Not scored but publicly reported</td>
</tr>
<tr>
<td>10C</td>
<td>Volume of Procedures</td>
<td>Not scored but publicly reported</td>
</tr>
<tr>
<td></td>
<td>Volume of Procedures</td>
<td></td>
</tr>
<tr>
<td>10D</td>
<td>Safety of Procedures</td>
<td>Not scored or publicly reported</td>
</tr>
<tr>
<td></td>
<td>Patient Follow-up</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Patient Selection</td>
<td>Not scored but publicly reported</td>
</tr>
<tr>
<td></td>
<td>Consent to Treat</td>
<td>Not scored but publicly reported</td>
</tr>
<tr>
<td></td>
<td>Safe Surgery Checklist</td>
<td></td>
</tr>
<tr>
<td>10E</td>
<td>Medication Safety for Outpatient Procedures</td>
<td>Scored and Results are publicly reported</td>
</tr>
<tr>
<td></td>
<td>Medication and Allergy Documentation</td>
<td></td>
</tr>
<tr>
<td>10F</td>
<td>Patient Experience (OAS CAHPS)</td>
<td>Scored and Results are publicly reported</td>
</tr>
<tr>
<td></td>
<td>OAS CAHPS</td>
<td></td>
</tr>
</tbody>
</table>
A full summary of Changes to the 2020 Leapfrog Hospital Survey can be found on the Survey and Materials webpage.

All hospitals are advised to carefully review the hard copy of the 2020 Survey, including updates to questions and measure specifications and to review the 2020 Scoring Algorithms.

Visit the Leapfrog Hospital Survey website.
Get Ready for 2020
Questions

Request a 16-digit security code at http://www.leapfroggroup.org/survey-materials/get-hospital-security-code


Download the Scoring Algorithms at https://www.leapfroggroup.org/survey-materials/scoring-and-results

Submit a question to the Help Desk at https://leapfroghelpdesk.zendesk.com

One-on-one technical assistance calls with the Help Desk. To support hospitals in these difficult times, we will offer one-on-one calls with hospitals. Help Desk Coordinators will be available to review 2019 Survey Results and discuss reporting options for 2020, in addition to answering any questions about these changes or addressing any other issues related to submitting the 2020 Leapfrog Hospital Survey. To request a technical assistance call, visit https://leapfroghelpdesk.zendesk.com and select “Technical Assistance Call” from the Leapfrog Hospital Survey related issues drop-down menu. Calls will be scheduled within 24 hours.
How Survey Results are Used
Leapfrog’s purchaser members use the Survey responses to:

- Educate and inform enrollees about patient safety and the importance of comparing provider performance on Leapfrog’s safety, quality, and resource standards, and
- Recognize and acknowledge providers that have met the standards. This means that purchasers will share the Survey Results with their employees and use the Survey Results in their contracting discussions with health plans and providers. The Leapfrog Group will share the results from all hospitals at https://ratings.leapfroggroup.org/.

The Web display of hospitals’ results is made available to aid consumers in their decisions about where to receive care.

External organizations that wish to use the data, for other purposes such as consumer education tools, market analysis, or contracting decisions, must license the data from The Leapfrog Group for a fee.

The revenue from data licenses is used to support the ongoing administration of the Leapfrog Hospital Survey and Leapfrog’s data dissemination efforts.
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.
Information about the 2020 Leapfrog Hospital Survey can be found at www.leapfroggroup.org/hospital.
Information about the 2020 Leapfrog ASC Survey can be found at www.leapfroggroup.org/asc.
Competitive Benchmarking Reports

Hospitals that submit a Leapfrog Hospital Survey by the **August 31** Submission Deadline will receive a Free Summary Competitive Benchmarking Report.

These Summary Reports illustrate how a hospital compares to others in the nation on those measures included in the Leapfrog Hospital Survey.

The reports are generated by applying the Leapfrog Value-Based Purchasing Program Methodology to 2020 Leapfrog Hospital Survey responses.

The Summary Reports are emailed in September to the hospital CEO using the contact information provided by the hospital in the Profile section of their Survey.

Obtain more information about Competitive Benchmarking Reports, the Leapfrog Value-Based Purchasing Program Methodology, and more detailed performance reports at [http://www.leapfroggroup.org/ratings-reports/competitive-benchmarking](http://www.leapfroggroup.org/ratings-reports/competitive-benchmarking).
Hospital Safety Grade

The Hospital Safety Grade is a letter grade that represents a hospital’s performance on up to 28 different measures of patient safety (i.e. measure of accidents, injuries, harm, and errors).

Only general, acute care hospitals are eligible to receive a Hospital Safety Grade.

While the Hospital Safety Grade is a separate program administered by Leapfrog, it does use some data from the Leapfrog Hospital Survey, in addition to data from other publicly available sources such as the American Hospital Association and Centers for Medicare and Medicaid Services.

For more information on the measures included and to download a copy of the methodology, visit [https://www.hospitalsafetygrade.org/for-hospitals](https://www.hospitalsafetygrade.org/for-hospitals).

Hospitals that would like Leapfrog Hospital Survey Results included in the Fall 2020 Hospital Safety Grade must submit a Survey by August 31.
Questions?