Fall 2021 Leapfrog Hospital Safety Grade

September 22, 2021



ABOUT THE LEAPFROG HOSPITAL SAFETY GRADE



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 20th release.

More information is available at www.HospitalSafetyGrade.org



Who is eligible for a Leapfrog Hospital Safety Grade?

General acute care hospitals with enough publicly reported data

Hospitals missing measure scores for more than 6 process/structural measures OR more than 5 outcome measures or PSI 90 do not receive a grade (updated for Fall 2021). A measure score for PSI 90 is required to receive a fall 2021 Safety Grade.

The Leapfrog Group is not able to calculate a Hospital Safety Grade for certain types of hospitals due to missing data:

- Critical access hospitals
- PPS-exempt hospitals (i.e., cancer)
- VA Hospitals
- Indian Health Services
- Specialty hospitals



ABOUT THE MEASURES



Measure Selection Criteria

Measures are publicly-reported from national data sources, which reflect individual hospital results, including:

- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets

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



Methodology Changes for Fall 2021

- Scoring for the Hand Hygiene measure from the Leapfrog Hospital Survey
- Reporting period for the NHSN HAI measures from the Leapfrog Hospital Survey and CMS
- Replacing 6 individual PSI measures with PSI 90
- New standard weight calculation to account for the use of composite measures (i.e., PSI 90)
- Missing data threshold for outcome measures
- Reporting period for DRA HAC measures



Scoring for the Hand Hygiene measure from the Leapfrog Hospital Survey

- 100 points will be assigned to hospitals that score in the top two performance categories (i.e., Achieved the Standard and Considerable Achievement) based on their Results from the 2021 Leapfrog Hospital Survey.
- N/A will be assigned to hospitals that score in the bottom two performance categories (i.e., Some Achievement and Limited Achievement) meaning that the Hand Hygiene measure will <u>not</u> be used to calculate the fall 2021 Hospital Safety Grade.
- However, the mean and standard deviation for the measures will be calculated using all four performance categories, where:
 - Achieved the standard = 100
 - Considerable achievement = 100
 - . . Some achievement = 40

Reporting period for the NHSN HAI measures from the Leapfrog Hospital Survey and CMS

- To align with CMS, Leapfrog updated the reporting period for the July and August NHSN data pulls for the five HAI measures on the 2021 Leapfrog Hospital Survey to match the reporting period for the five HAI measures that CMS published in July 2021.
- Therefore, the reporting period for the HAI measures from the 2021 Leapfrog Hospital Survey and CMS will be **04/01/2019 12/31/2019** AND **07/01/2020 09/30/2020** (2019Q2-2019Q4 AND 2020Q3).
- In addition, Leapfrog will provide a footnote on the Survey Results <u>website</u> and the Leapfrog
 Hospital Safety Grade <u>website</u> for each of the five HAI measure scores to indicate that the
 standardized infection ratio (SIR) includes some data collected during the COVID-19 pandemic.



Replacing 6 individual PSI measures with PSI 90

- To align with CMS' efforts to reduce harm to patients from medical and surgical complications, Leapfrog will replace six of the seven individual PSIs in the Leapfrog Hospital Safety Grade with the CMS Medicare PSI 90: Patient Safety and Adverse Events Composite measure, which is made up of 10 component PSIs.
- Therefore, starting this fall, the Hospital Safety Grade will include two PSIs:
 - PSI 4: Death Rate among Surgical Inpatients with Serious Treatable Conditions
 - CMS PSI 90: Patient Safety and Adverse Events Composite
- For the purposes of public reporting on the Hospital Safety Grade website, Leapfrog will display performance on each of the 10 component PSIs included in PSI 90, along with performance on PSI 90.



New standard weight calculation to account for the use of composite measures (i.e., PSI 90)

• Starting with the fall 2021 Safety Grade, the number of component measures (i.e., 10 component measures for PSI 90) will be included in the weight score calculation.

Measure Weight Score = ((Evidence + (Impact x Opportunity x Number of Component Measures))

- For PSI 90, the number of component measures is 10.
- For all other measures, the number of component measures is 1.



Missing data threshold for outcome measures

- Leapfrog originally planned to update the missing data threshold for outcome measures from "missing scores for more than 5 outcome measures or PSI 90" to "missing scores for more than 4 outcome measures or PSI 90."
- Hospitals must have a PSI 90 score to receive a Hospital Safety Grade.
- However, following a preliminary analysis of hospitals excluded due to missing data, we
 determined that this change would exclude hospitals that have historically received a grade
 based on a similar number of measures.
- Therefore, we have not updated the missing data threshold for outcome measures. Hospitals missing scores for more than <u>5</u> outcome measures or <u>PSI 90</u> will not receive a fall 2021 Hospital Safety Grade.



Reporting Period for DRA HAC Measures

- Leapfrog anticipated that CMS would publish updated DRA HAC rates on data.cms.gov for the reporting period of 07/01/2018-12/31/2019 by August 31, 2021.
- Unfortunately, CMS did not update the DRA HAC rate on <u>data.cms.gov</u> by August 31.
 Therefore, the reporting period for the DRA HAC measures is unchanged from spring 2021: 07/01/2017-06/30/2019.
- CMS did publish the updated data on September 20, 2021, which will be used in the spring 2022 Hospital Safety Grade.



Fall 2021 Process and Structural Measures

Measure Name	Primary Data Source	Secondary Data Source					
Process and Structural Measures (12)							
Computerized Physician Order Entry (CPOE)	2021 Leapfrog Hospital Survey	Imputation Model Applied					
Bar Code Medication Administration (BCMA)	2021 Leapfrog Hospital Survey	Imputation Model Applied					
ICU Physician Staffing (IPS)	2021 Leapfrog Hospital Survey	Imputation Model Applied					
Safe Practice 1: Leadership Structures and Systems	2021 Leapfrog Hospital Survey	N/A					
Safe Practice 2: Culture Measurement, Feedback & Intervention	2021 Leapfrog Hospital Survey	N/A					
Safe Practice 9: Nursing Workforce	2021 Leapfrog Hospital Survey	N/A					
Hand Hygiene	2021 Leapfrog Hospital Survey	N/A					
H-COMP-1: Nurse Communication	CMS	N/A					
H-COMP-2:Doctor Communication	CMS	N/A					
H-COMP-3: Staff Responsiveness	CMS	N/A					
H-COMP-5: Communication about Medicines	CMS	N/A					
H-COMP-6: Discharge Information	CMS	N/A					



Spring 2021 Outcome Measures

Measure Name	Primary Data Source	Secondary Data Source					
Outcome Measures (10)							
Foreign Object Retained	CMS	N/A					
Air Embolism	CMS	N/A					
Falls and Trauma	CMS	N/A					
CLABSI (ICU and select wards)	2021 Leapfrog Hospital Survey	CMS					
CAUTI (ICU and select wards)	2021 Leapfrog Hospital Survey	CMS					
SSI: Colon	2021 Leapfrog Hospital Survey	CMS					
MRSA	2021 Leapfrog Hospital Survey	CMS					
C. Diff.	2021 Leapfrog Hospital Survey	CMS					
PSI 4: Death Rate among Surgical Inpatients with Serious Treatable Complications	CMS	N/A					
PSI 90: Patient Safety and Adverse Events Composite	CMS	N/A					



Reporting Periods for Leapfrog Hospital Survey Measures

2021 Leapfrog Hospital Results

- CPOE, BCMA, ICU Physician Staffing, the 3 NQF Safe Practices, and Hand Hygiene will be displayed as "2021"
- CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be 04/01/2019 12/31/2019 AND 07/01/2020 09/30/2020



Reporting Periods for CMS Measures

- The reporting period for the 5 Patient Experience measures will be 01/01/2019 12/31/2019
- The reporting period for the 5 infection measures will be 04/01/2019 12/31/2019 AND 07/01/2020 09/30/2020 (only used for hospitals that did not report via the 2021 Leapfrog Hospital Survey)
- The reporting period for the three HAC measures will be 07/01/2017 12/31/2019
- The reporting period for PSI 4 and PSI 90 will be 07/01/2018 12/31/20109



Summary of Measure Updates Since spring 2021 – Process/Structural Measure Domain

CPOE and BCMA

- Updated for hospitals that submitted a 2021 Leapfrog Hospital Survey by August 31
- Imputation model applied for hospitals missing a measure score
- No updates to points assigned to Survey Results

ICU Physician Staffing

- Updated for hospitals that submitted a 2021 Leapfrog Hospital Survey by August 31
- Imputation model applied for hospitals with a recent past score (Step 1 only).
- No updates to points assigned to Survey Results

NQF Safe Practices and Hand Hygiene

- Updated for hospitals that submitted a 2021
 Leapfrog Hospital Survey by August 31
- N/A for hospitals missing a measure score
- Update to points assigned to Survey Results

5 Patient Experience Domains

 Not updated for any hospital as CMS did not update these data since spring 2021



Summary of Measure Updates Since Spring 2021 – Outcome Measure Domain

3 HAC Measures

Not updated for any hospital as CMS did not update these data by the August 31 Data Snapshot Date.

5 HAI Measures

 Updated for all hospitals (both Leapfrog Hospital Survey Results and CMS data have been updated since spring 2021)

PSI Measures

Updated for all hospitals (PSI 4 and PSI 90)



SCORING OVERVIEW



Weighting Process

Two measure domains, each weighted 50%:

- Process/structural measures
- Outcome measures

Three criteria for weighting individual measures:

- Strength of evidence (rating of 1 or 2)
- Opportunity (rating of 1-3), 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

Measure Weight Score = [Evidence + (Opportunity x Impact x Number of Measures*)]

*Number of measures equals 1 for all but PSI 90 where number of measures equals 10



Z-Score Methodology

Standardizes data from individual measures with different scales

Counts how many standard deviations a hospital's score on the measure is away from the mean

Mean is set to 0

- Negative z-score: worse than the mean
- Positive z-score: better than the mean

How to Calculate Z-Score from Raw Measure Score:

- Process/structural measures:
 - (Raw Measure Score Mean)/Standard Deviation
- Outcome Measures:
 - (Mean Raw Measure Score)/Standard Deviation



Overall Numerical Score

Sum the z-score for each measure multiplied by the weight for each measure

If a measure score is missing, the weight for that measure is re-apportioned to other measures within the same domain

3.0 is added to each hospital's final numerical score to avoid possible confusion with interpreting negative patient safety scores

3.0 + CPOE z-score X CPOE weight + IPS z-score X IPS weight + CLABSI z-score X CLABSI weight . . . etc.



Dealing with Missing Data

If a hospital is missing a measure score for any measure (except for PSI 90; hospitals missing PSI 90 are not graded), 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.

[Standard measure weight / (sum of standard weights for the remaining 11 measures in the process/structural measure domain)]*50% = updated measure weight



DETAILS OF THE COURTESY SAFETY GRADE REVIEW PERIOD



Secure Website for Hospitals to Review their Safety Grade Data

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

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

Fall 2021 Review Period September 20 – October 10



Safety Grade Review Website for Hospitals The fall 2021 Leapfrog Hospital Safety Grade Review Period will be open from September 20 - October 10, 2021. By accessing the Review Website, you will be able to: 1. Provide contact information for your hospital so we can send you important announcements about the Leapfrog Hospital Update your hospital's name, address, and CMS Certification Number. 3. Review the source data used to calculate your hospital's preliminary numerical score and validate that we have recorded the correct information using the Review Instructions and Scoring Methodology. 4. Download a copy of the Leapfrog Hospital Safety Grade Calculator®. 5. Preview your hospital's preliminary numerical score. Following the Review Period, we will refresh this website to reflect any changes that occurred during the Review Period and finalize numerical scores. Hospital letter grades will be available during the Letter Grade Embargo Period following the close of the Review Period. Login Username Password Usernames and passwords have not changed since spring 2021. If you need your facility's username and password, provide the following information to the Help Desk: Hospital Name Hospital Address CMS Certification Number (xx-xxxx)

Contact Information

*Is the hospital name and add ● Info above is correct ● Info above is NOT correct	ress displayed above correct?
 CCN is correct 	cation Number (CCN) correct? CCN is not correct, please contact the Help Desk immediately.)
CEO First Name	
CEO Last Name	
CEO 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 August 31, 2021 (the <u>Data Snapshot Date</u>). Please review this information to ensure that Leapfrog recorded the correct measure score from each publicly available data source.

Information that you will need to complete the review process is available in the following documents:

- Review Instructions and Scoring Methodology
- Fall 2021 Hospital Safety Grade Calculator

*Trim value: data for the measure has been trimmed. Refer to A Note about Extreme Values in the <u>Review Instructions and Scoring Methodology.</u>

**Imputed score: data for the measure has been imputed based on historical data and/or data from similar hospitals. Refer to Using Secondary Data Sources in the Review Instructions and Scoring Methodology.



Source Data

Name of the Measure	Type of Measure	Data Source/Links	Reporting Period	Measure Score
Computerized Physician Order Entry (CPOE)	Structure/ Process	2021 Leapfrog Hospital Survey	2021	100
Bar Code Medication Administration (BCMA)	Structure/ Process	2021 Leapfrog Hospital Survey	2021	100
ICU Physician Staffing (IPS)	Structure/ Process	2021 Leapfrog Hospital Survey	2021	100
Safe Practice 1: Culture of Leadership Structures and Systems	Structure/ Process	2021 <u>Leapfrog</u> <u>Hospital Survey</u>	2021	110.77
Safe Practice 2: Culture Measurement, Feedback & Intervention	Structure/ Process	2021 <u>Leapfrog</u> <u>Hospital Survey</u>	2021	120.00
Safe Practice 9: Nursing Workforce	Structure/ Process	2021 Leapfrog Hospital Survey	2021	100.00
Hand Hygiene	Structure/ Process	2021 Leapfrog Hospital Survey	2021	Not Available



PSI 90 Components – NOT used in scoring

PSI 90 Components

CMS calculates PSI 90 using the ten (10) component PSIs in the table below. Scores for each of the component PSIs will NOT be used to calculate your fall 2021 Hospital Safety Grade. For the purposes of public reporting on the Hospital Safety Grade website, Leapfrog will display performance on each of the 10 component PSIs included in PSI 90.

Component PSI	Data Source/Links	Reporting Period	Component Score (not used in numerical score)
PSI 3: Pressure ulcer rate	<u>CMS</u>	07/01/2018 - 12/31/2019	0.20
PSI 6: latrogenic pneumothorax rate	<u>CMS</u>	07/01/2018 - 12/31/2019	0.25
PSI 8: In-hospital fall with hip fracture rate	<u>CMS</u>	07/01/2018 - 12/31/2019	0.11
PSI 9: Perioperative hemorrhage and hematoma rate	<u>CMS</u>	07/01/2018 - 12/31/2019	2.52
PSI 10: Postoperative acute kidney injury rate	<u>CMS</u>	07/01/2018 - 12/31/2019	1.37
PSI 11: Postoperative respiratory failure rate	<u>CMS</u>	07/01/2018 - 12/31/2019	6.31
PSI 12: Perioperative pulmonary embolism or deep vein thrombosis rate	<u>CMS</u>	07/01/2018 - 12/31/2019	4.44
PSI 13: Postoperative sepsis rate	<u>CMS</u>	07/01/2018 - 12/31/2019	4.47
PSI 14: Postoperative wound dehiscence rate	<u>CMS</u>	07/01/2018 - 12/31/2019	0.82
PSI 15: Unrecognized abdominopelvic accidental puncture/laceration rate	<u>CMS</u>	07/01/2018 - 12/31/2019	0.99



What if the Measure Score Doesn't Match the Public Report?

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

However, they should double check the following information before contacting the Help Desk:

- Data source the data source listed on the Safety Grade Review Website is what you are referring to when verifying your measure score. You should be using the direct links provided in your Source Data table. For example, if Leapfrog Hospital Survey is listed as the data source for the HAI measures, and you are referring to the CMS HAI data when verifying your measure score, it will not match because that data was not used.
- **Measure** the measure listed on the Safety Grade Review Website is what you are referring to when verifying your measure score.
- **Reporting period** the reporting period listed on the Safety Grade Review Website is what you are referring to when verifying your measure score.

When you contact the Help Desk about a potential discrepancy, you must include a copy of the public report or a screenshot that shows a different score for the measure. Please be sure the data source, measure name, and reporting period are visible in the screen shot.

If we find a recording error, we will update the measure score and numerical score before assigning a Letter Grade. You will see an updated numerical score during the Letter Grade Embargo Period.



Preview Preliminary Numerical Score

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 two weeks prior to the public announcement.

Hospitals will be alerted via an email sent to the addresses provided in the Contact and Reviewer Information fields. My Score

2.9636
TBD

More Information

Hospital Safety Grade Methodology (1 PDF file)

Hospital Safety Grade Calculator (1 Excel file)

Changes in Measure Weights (1 PDF file)



Letter Grade Embargo Period Scheduled for late October

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

Explanation of Letter Grades includes cut-points and distribution of grades.



Hospital Safety Grade Calculator

		Enter Your Z-Score ¹ Inputs to Weighting Individual Measures ²			Weight ³		Weighted Measure						
Measure Domain	Measure	Hospital's Score Here (Do NOT Leave Blanks)	Mean	Standard Deviation	Original Z- Score	Modified Z- Score	Evidence	Opportunity	Impact	Number of Component Measures	Standard Weight	Final Weight (N/A redistributes)	Score (Modified Z- Score x Final Weight)
	Computerized Physician Order Entry (CPOE)		85.73	22.55	-3.8022	-3.8022	2	1.26	3	1	5.9%	5.9%	-0.2226
es	Bar Code Medication Administration (BCMA)		83.21	21.58	-3.8553	-3.8553	2	1.26	3	1	5.8%	5.8%	-0.2253
sure	ICU Physician Staffing (IPS)		62.75	43.31	-1.4488	-1.4488	2	1.69	3	1	7.2%	7.2%	-0.1036
l e	Safe Practice 1: Culture of Leadership Structures and Systems		116.84	7.46	-15.6601	-5.0000	1	1.06	2	1	3.2%	3.2%	-0.1582
Σ	Safe Practice 2: Culture Measurement, Feedback, & Intervention		116.54	12.74	-9.1489	-5.0000	1	1.11	2	1	3.3%	3.3%	-0.1628
ura	Safe Practice 9: Nursing Workforce		98.18	7.06	-13.9022	-5.0000	1	1.07	3	1	4.3%	4.3%	-0.2132
l de	Hand Hygiene		74.37	32.80	-2.2677	-2.2677	2	1.44	2	1	4.9%	4.9%	-0.1120
ss/Str	H-COMP-1: Nurse Communication		91.11	2.22	-40.9906	-5.0000	1	1.02	2	1	3.1%	3.1%	-0.1542
ess,	H-COMP-2: Doctor Communication		91.00	2.11	-43.0334	-5.0000	1	1.02	2	1	3.1%	3.1%	-0.1541
§	H-COMP-3: Staff Responsiveness		84.38	3.59	-23.4927	-5.0000	1	1.04	2	1	3.1%	3.1%	-0.1560
<u> </u>	H-COMP-5: Communication about Medicines		77.67	3.58	-21.6805	-5.0000	1	1.05	2	1	3.1%	3.1%	-0.1564
	H-COMP-6: Discharge Information		86.52	3.30	-26.1921	-5.0000	1	1.04	2	1	3.1%	3.1%	-0.1556
	Foreign Object Retained		0.02	0.06	0.2977	0.2977	1	3.00	2	1	4.3%	4.3%	0.0128
	Air Embolism		0.0004	0.004	0.1071	0.1071	1	3.00	1	1	2.5%	2.5%	0.0026
Ires	Falls and Trauma		0.42	0.38	1.1045	1.1045	2	1.91	3	1	4.7%	4.7%	0.0523
Measure	CLABSI		0.81	0.67	1.2035	1.2035	2	1.83	3	1	4.6%	4.6%	0.0553
Σ	CAUTI		0.75	0.57	1.3160	1.3160	2	1.76	3	1	4.5%	4.5%	0.0587
Je l	SSI: Colon		0.80	0.65	1.2292	1.2292	2	1.81	2	1	3.4%	3.4%	0.0424
Outcol	MRSA		0.84	0.65	1.2856	1.2856	2	1.78	3	1	4.5%	4.5%	0.0578
no	C. Diff.		0.54	0.36	1.4799	1.4799	2	1.68	3	1	4.3%	4.3%	0.0638
	PSI 4: Death rate among surgical inpatients with serious treatable conditions		159.71	18.33	8.7137	8.7137	1	1.11	2	1	2.0%	2.0%	0.1725
	CMS Medicare PSI 90: Patient safety and adverse events composite		1.00	0.19	5.1983	5.1983	1	1.19	2	10	15.2%	15.2%	0.7919
Process N	easure Domain Score:	Will populate a	fter entering al	l data.									
Outcome	Measure Domain Score:	Will populate after entering all data.											
Process/C	utcome Domains - Combined Score:	Will populate a	fter entering al	l data.									
	Normalized Numerical Score: Will populate after entering all data.												
Hospital S	afety Grade (Letter Grade):	Will not be calc	ulated until aft	er the Safety Gr	ade Review Per	iod. Hospitals w	ill be notified v	ia email when th	ne letter grades	are posted.			



PUBLIC REPORTING

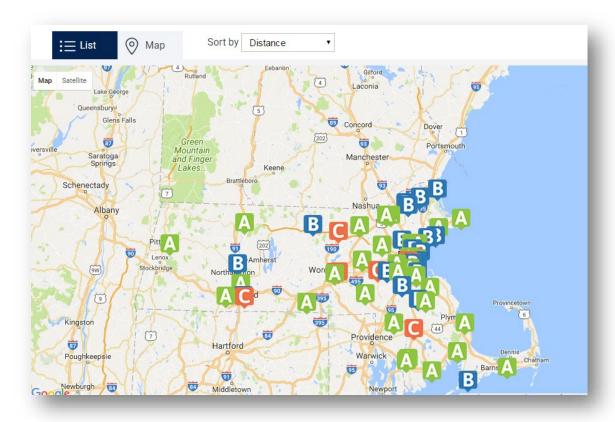


HospitalSafetyGrade.org





Search by Hospital Name and Location





Hospital Details

This Hospital's Grade



Virginia Mason Medical Center

1100 Ninth Avenue Seattle, WA 98101-2756 <u>Map and Directions</u>

View this hospital's Leapfrog Hospital Survey Results

Learn how to use the Leapfrog Hospital Safety Grade



► Show Recent Past Grades

Detailed table view



Past Grades



Virginia Mason Medical Center

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

View this hospital's Leapfrog Hospital Survey Results







More about past grades

Detailed table view

Learn how to use the Leapfrog Hospital Safety Grade





Detailed Table View for Hospitals

This Hospital's Grade

Virginia Mason Medical Center



Outcomes measures include errors, accidents, and injuries that this hospital has publicly reported.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Dangerous object left in patient's body What's This?	0.000	0.359	0.017	0.000	CMS	07/01/2017 - 06/30/2019
Air or gas bubble in the blood What's This?	0.000	0.037	0.000	0.000	CMS	07/01/2017 - 06/30/2019
Patient falls and injuries What's This?	0.694	1.727	0.432	0.000	CMS	07/01/2017 - 06/30/2019
Infection in the blood What's This?	0.202	2.716	0.670	0.000	2020 Leapfrog Hospital Survey	01/01/2019 - 12/31/2019
Infection in the urinary tract What's This?	0.215	2.491	0.721	0.000	2020 Leapfrog Hospital Survey	01/01/2019 - 12/31/2019
Surgical site infection after colon surgery What's This?	0.297	2.817	0.809	0.000	2020 Leapfrog Hospital Survey	01/01/2019 - 12/31/2019
MRSA Infection What's This?	0.170	2.927	0.798	0.000	2020 Leapfrog Hospital Survey	01/01/2019 - 12/31/2019

Remember to print a copy of your spring 2021 data and letter grade.



Measure Scores





Important Dates

August 31 - Data Snapshot Date

- For hospitals that have submitted a 2021 Survey by August 31 E-mail sent to the hospital CEO and primary survey contact listed in the profile section of the online Leapfrog Hospital Survey
- For Hospitals that did not submit a 2021 Survey Letter sent to CEO via USPS
- Both e-mails and letters will include:
 - Information about the Leapfrog Hospital Safety Grade
 - Username/password to a secure website where hospitals can review the source data that Leapfrog used to calculate their numerical score
 - Links to the Hospital Safety Grade Help Desk and other helpful documents

September 20 - October 10 - Courtesy 3-week Hospital Safety Grade Review Period

September 28 – Hospital Safety Grade Town Hall Call

Late October – Letter Grade Embargo Period

Mid-November – 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



More Information

Leapfrog Help Desk: https://leapfroghelpdesk.zendesk.com

Hospital Safety Grade Website: www.HospitalSafetyGrade.org

