

COOK COUNTY
HEALTH



HRO Dashboard

Quality and Patient Safety Committee

July 2021



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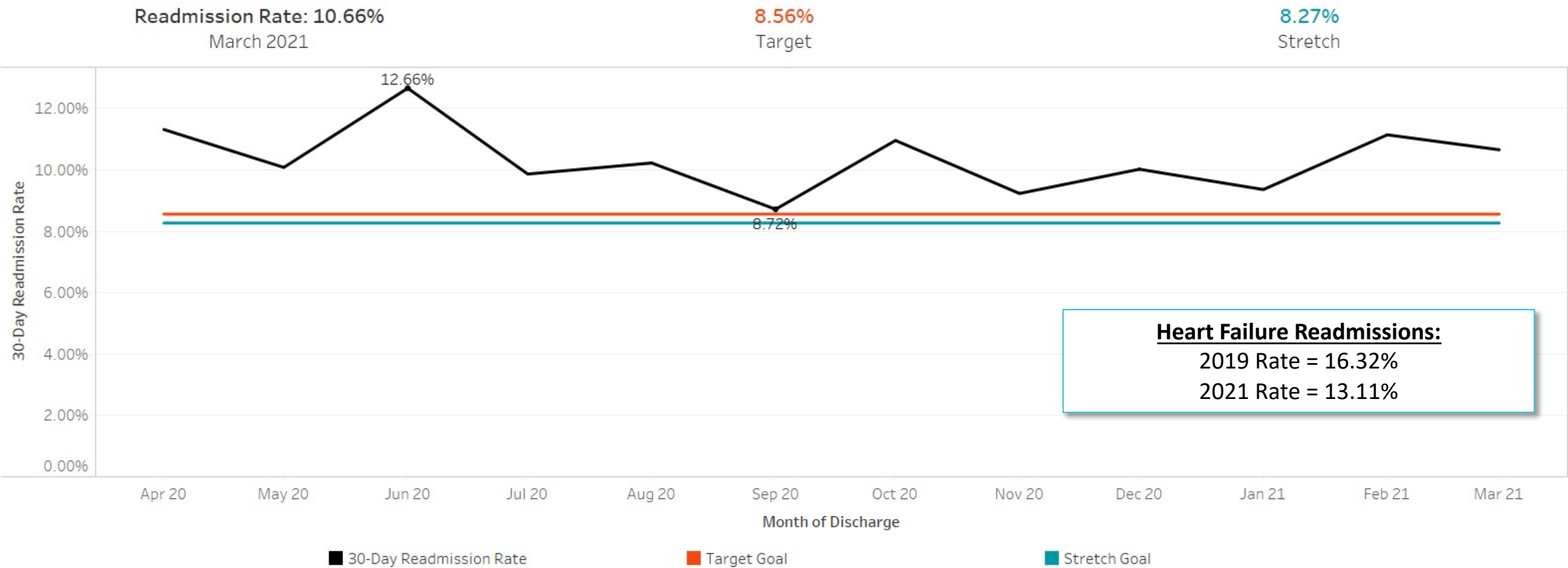
Impact of the HRO Quality Dyads

Comparison of Current Outcomes to Pre-HRO Dyad Launch

HRO Dyad	Measure	Direction	Baseline <i>July 2017 to June 2018</i>	Target Goal	Stretch Goal	2021 YTD
Clinical Documentation	Case Mix Index, Medical	▲	1.2147	1.2460	1.2750	1.2945
	Case Mix Index, Surgical	▲	2.6949	3.0600	3.1300	2.7971
	CC/MCC Capture Rate, Medical	▲	54.7%	71.16%		65.97%
	CC/MCC Capture Rate, Surgical	▲	55.5%	65.70%		63.11%
Mortality	Mortality Index (non-COVID)	▼	1.09	0.90	0.85	0.80
	Mortality Rate (non-COVID)	▼	1.44%			1.62%
	Sepsis Mortality Index	▼	1.93			1.31
	Sepsis Mortality Rate	▼	16.43%			10.63%
Readmissions	30-Day Readmissions	▼	9.73%	8.56%	8.27%	10.36%
	30-Day Readmissions, Heart Failure	▼	13.87%			13.11%
Process of Care	Excess Days	▼	21.71	19.10	18.45	5.17
	Excess Days, Heart Failure	▼	56.47			-5.42
	PSI-90	▼	1.467	1.148	1.000	0.838
Patient Experience	Recommend the Hospital (Stroger)	▲	69.90	71.30	73.70	73.57
	Nurse Communication (Stroger)	▲	66.80	69.10	71.50	72.93
HEDIS	A1c < 8%	▲	49.1%	57.6%		55.1%
	A1c > 9%	▼	37.5%	24.0%		27.8%

30-Day Readmission Rate (Stroger Hospital)

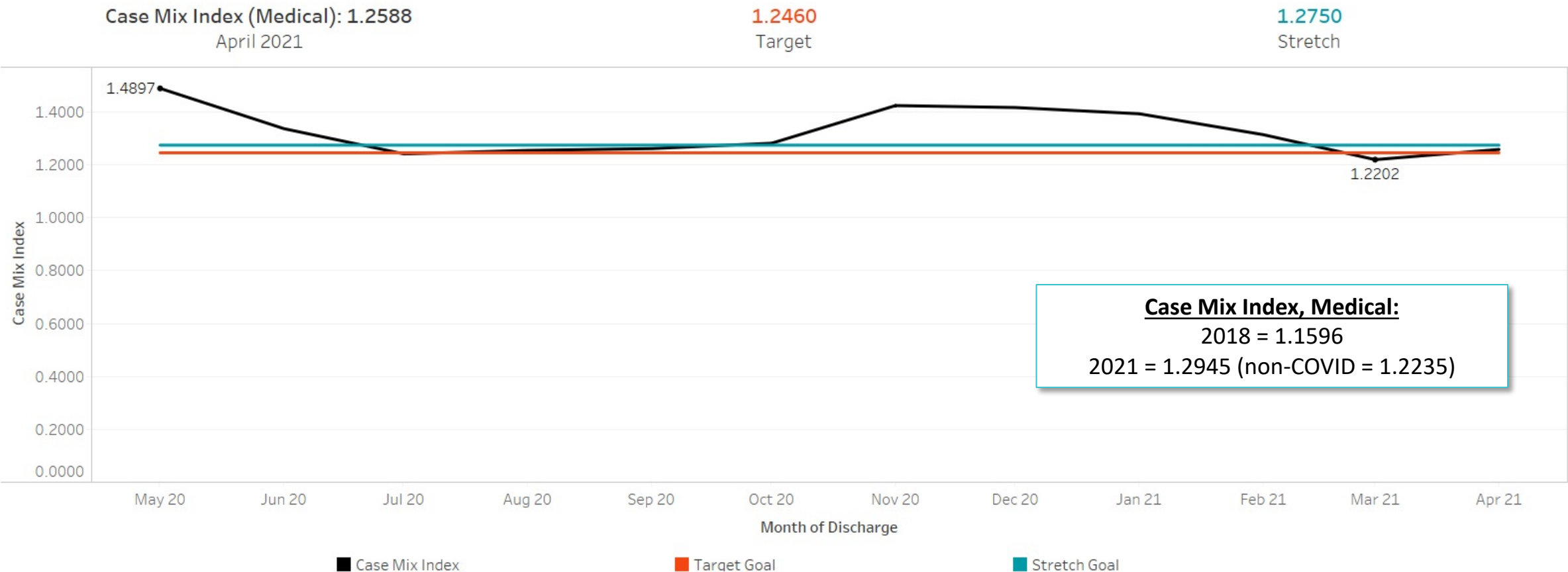
HRO Domain: Readmissions



*Lower readmission rate is favorable

Case Mix Index, Medical MS-DRG (Stroger Hospital)

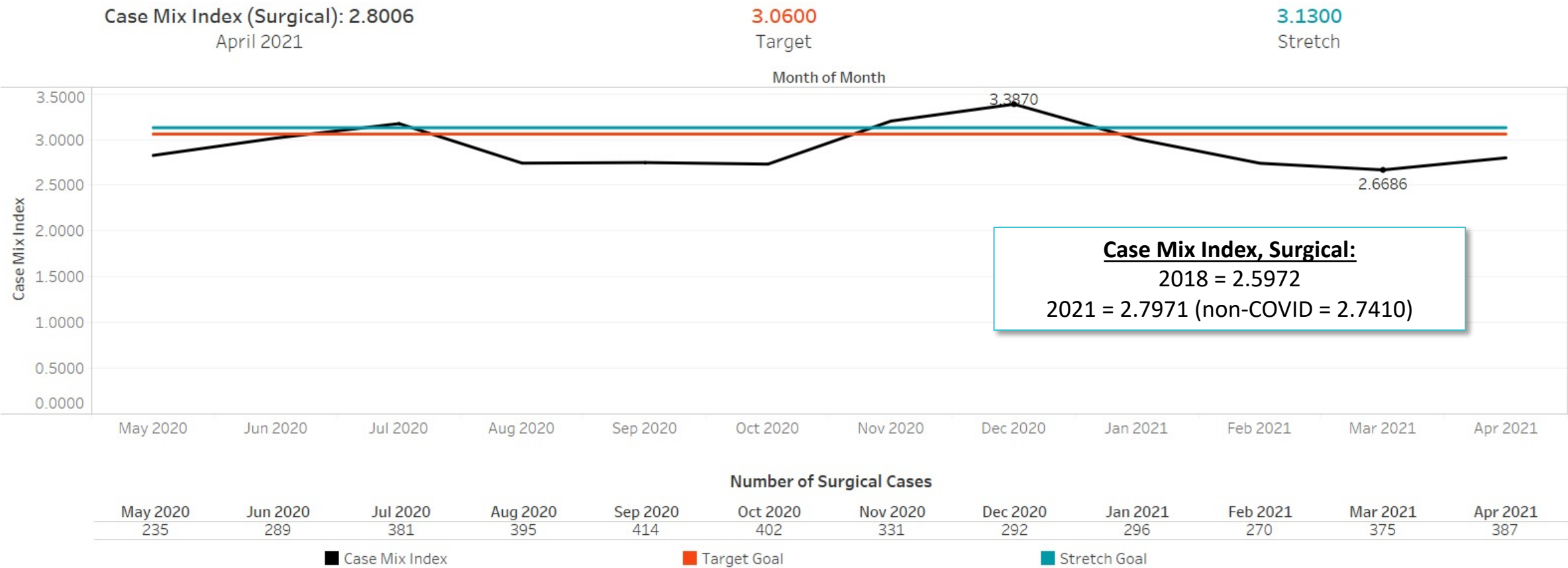
HRO Domain: Clinical Documentation



*Higher case mix index is favorable

Case Mix Index, Surgical MS-DRG (Stroger Hospital)

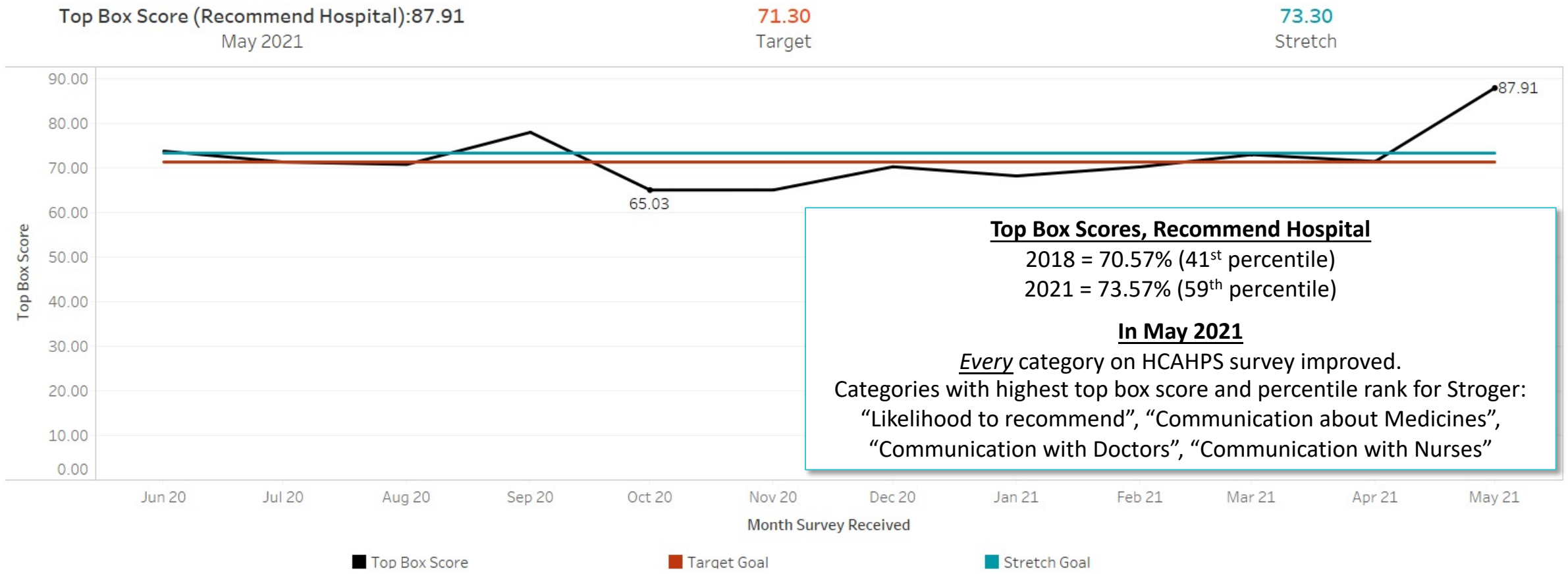
HRO Domain: Clinical Documentation



*Higher case mix index is favorable

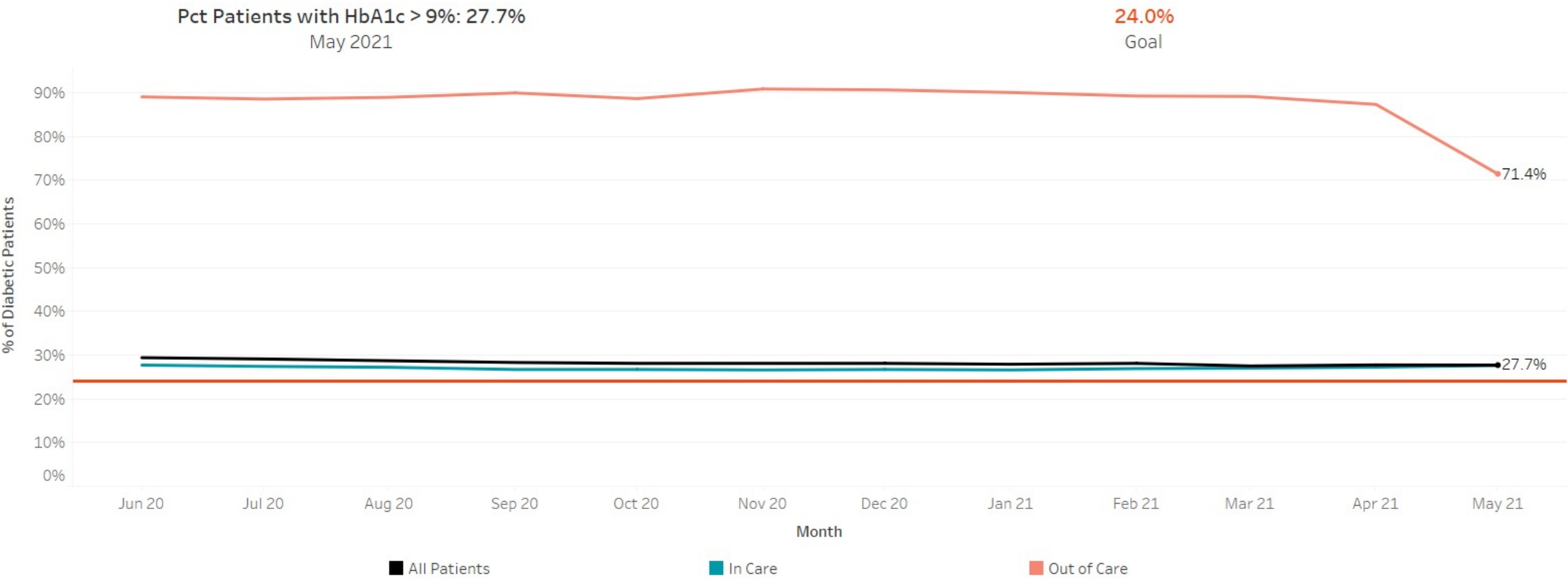
Top Box Score, Recommend the Hospital (Stroger Hospital)

HRO Domain: Patient Experience



HbA1c >9%

HRO Domain: HEDIS



*Lower percent of diabetes patients (>9%) is favorable

Metric	Definition
30-Day Readmission Rate	<ul style="list-style-type: none"> • <i>Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger</i> • Calculation: Raw unplanned readmission rate (# of readmissions / total # of eligible discharges) • Population included: all inpatient discharges from <u>Stroger</u> • Cohort inclusions: any payer; any age; alive at discharge • Cohort exclusions: Admitted for primary psychiatric dx; admitted for rehabilitation; admitted for medical treatment of cancer (chemotherapy, radiation therapy); admitted for dialysis; admitted for delivery/birth • Reporting timeframe: reported monthly with a 1-month lag to allow for 30-day readmission window; reported by month of patient discharge • Data source: Vizient Clinical Data Base
Case Mix Index	<ul style="list-style-type: none"> • <i>Average relative DRG weight of a hospital's inpatient discharges, calculated by summing the Medicare Severity-Diagnosis Related Group (MS-DRG) weight for each discharge and dividing by the total number of discharges</i> • Population included: all inpatient discharges from <u>Stroger</u> • Cohort inclusions: any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (<i>Surgical: an OR procedure is performed</i>) • Cohort exclusions: none • Reporting timeframe: reported monthly by most current month available; reported by month of patient discharge • Data source: Vizient Clinical Data Base
Recommend the Hospital	<ul style="list-style-type: none"> • <i>Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey</i> • Calculation: Percent of patient responses with "Definitely Yes" (top box) / total survey responses • Population included: Stroger; 18 years or older at time of admission; non-psychiatric MS-DRG/principal diagnosis at discharge; alive at discharge; >1 overnight stay in hospital as inpatient • Cohort exclusions: discharged to hospice care; discharged to nursing homes or SNFs; court/law enforcement patients; patients with a foreign home address; "no-publicity" patients"; patients who are excluded because of rules and regulates of state in which hospital is located • Reporting timeframe: reported monthly by most current month available; reported by month of survey received date • Data source: Press Ganey
HbA1c >9%	<ul style="list-style-type: none"> • <i>Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is not in control (>9.0%)</i> • Calculation: Percent of diabetic patients with HbA1c not in control / total diabetic patients • Population included: (Age 18-75 years as of December 31 of current year AND two diabetic Outpatient/ED visits in the current year or previous year) <i>OR</i> (One diabetic Inpatient visit in the current year or previous year) <i>OR</i> (Prescribed insulin or hypoglycemic or anti-hyperglycemics in the current year or previous year) • Cohort exclusions: none • Reporting timeframe: reported monthly by most current month available; reported by month of patient visit • Data source: NCQA, HEDIS