

# HRO Dashboard

## Quality and Patient Safety Committee

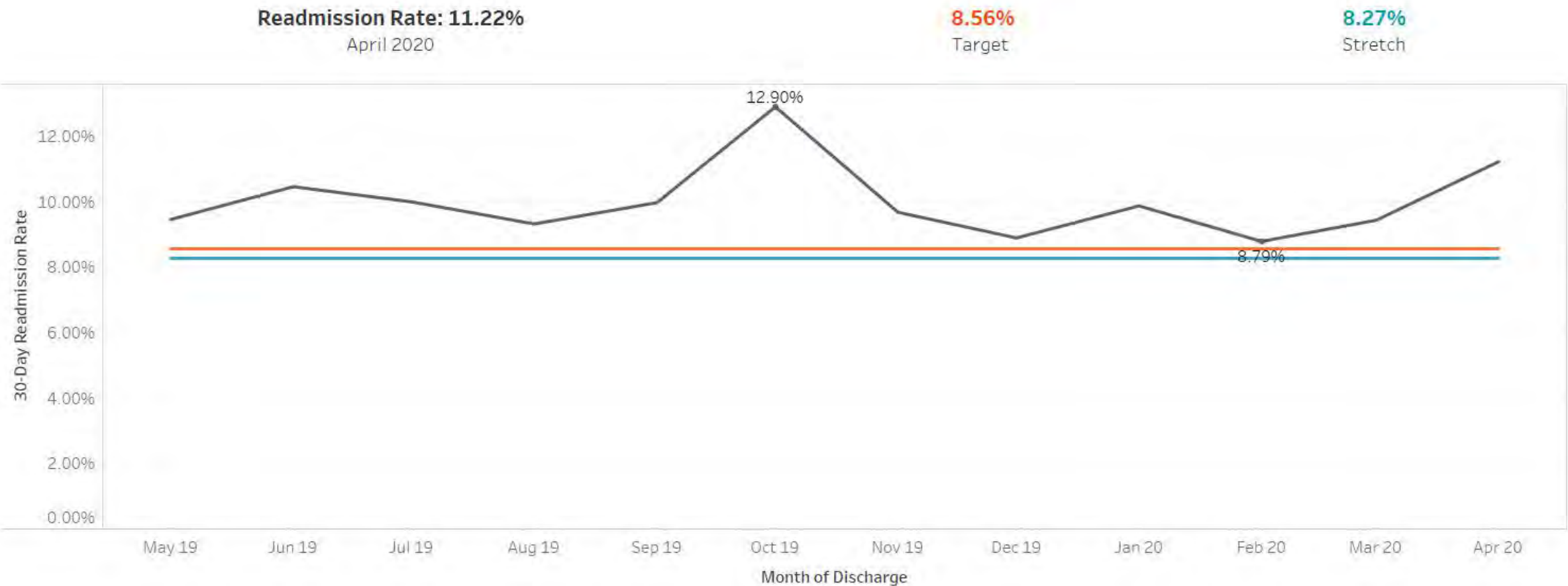
August 2020



COOK COUNTY  
**HEALTH**

# 30-Day Readmission Rate (Stroger Hospital)

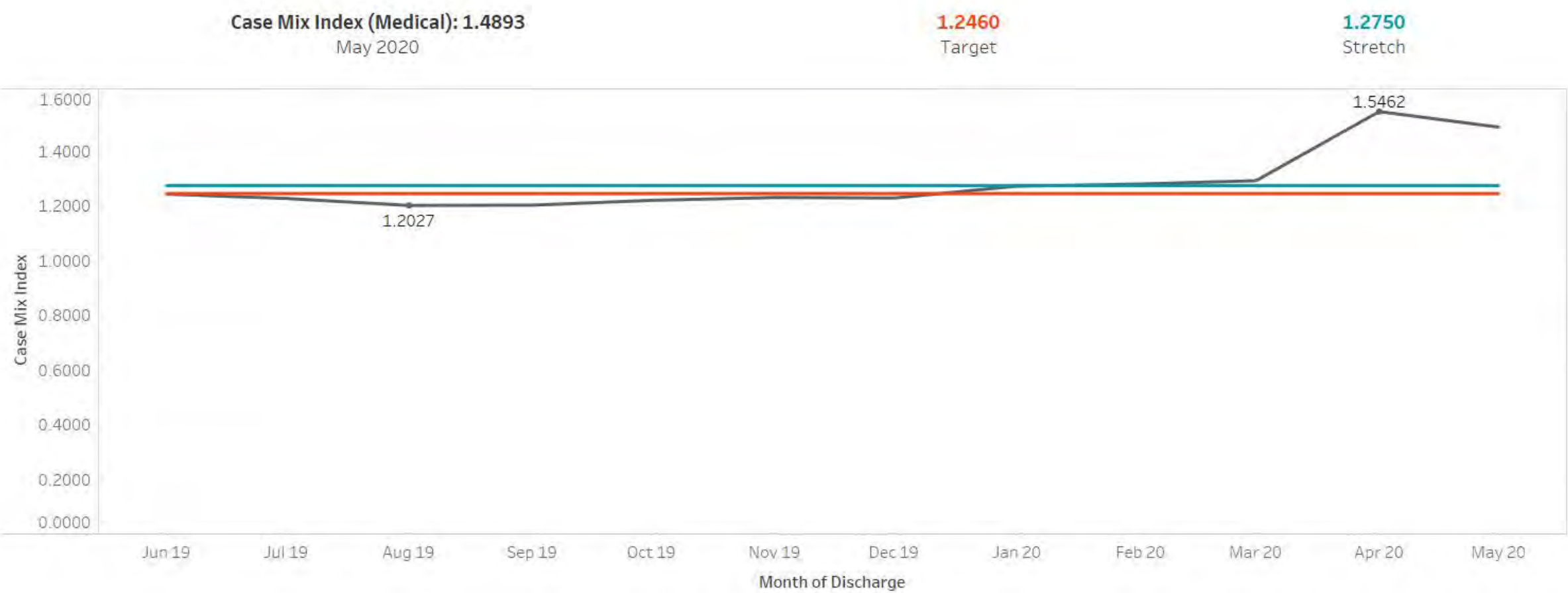
HRO Domain: Readmissions



\*Lower readmission rate is favorable

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

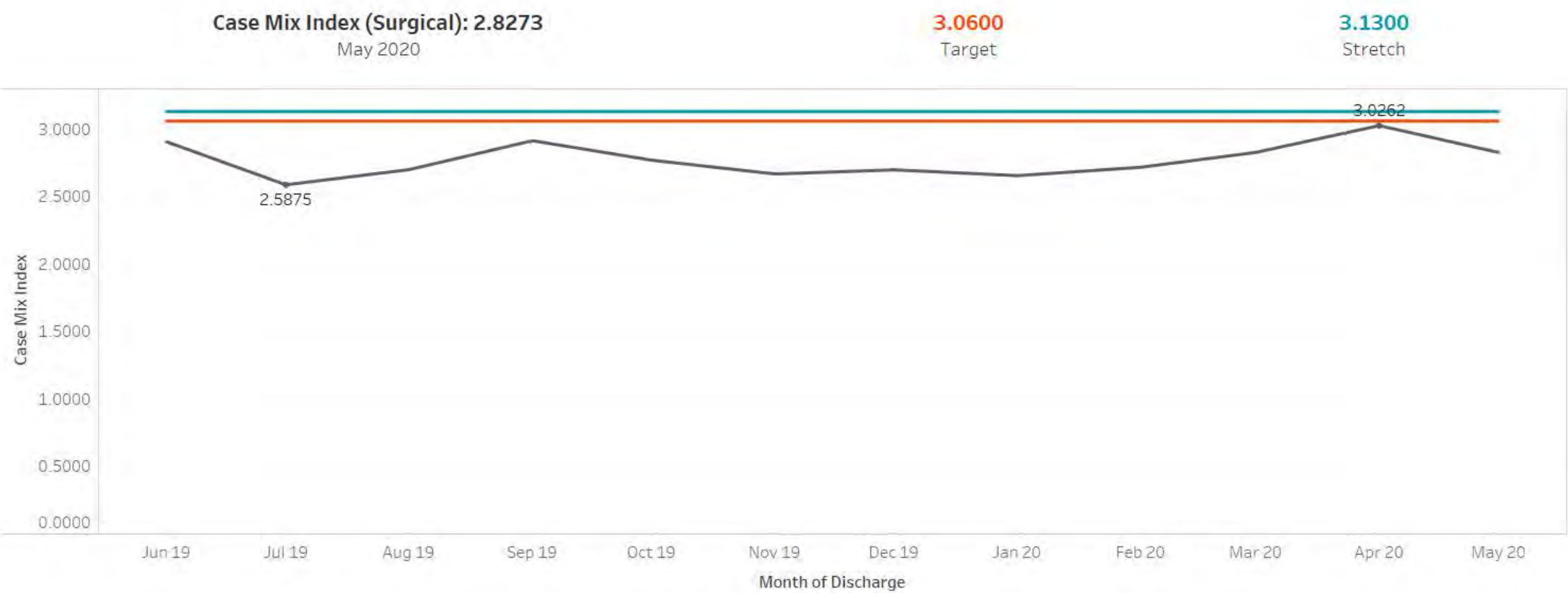
HRO Domain: Clinical Documentation



\*Higher case mix index is favorable

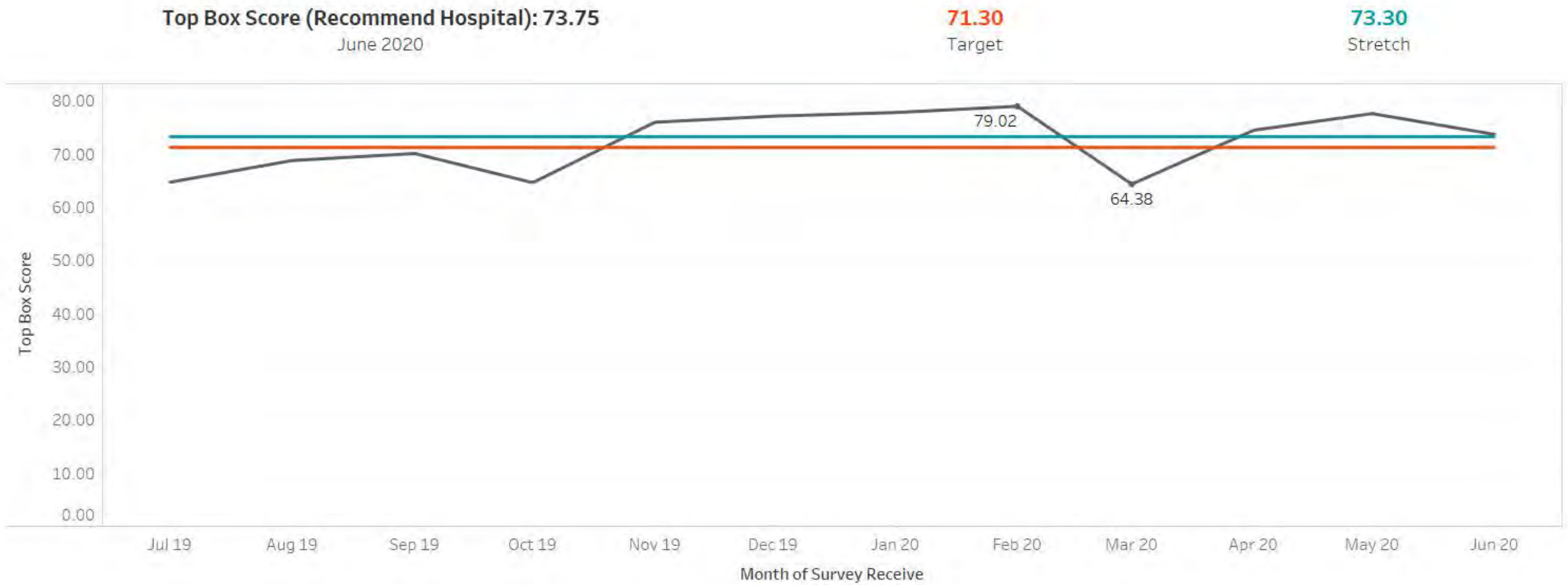
# Case Mix Index, Surgical MS-DRG (Stroger Hospital)

HRO Domain: Clinical Documentation



# Top Box Score, Recommend the Hospital (Stroger Hospital)

HRO Domain: Patient Experience

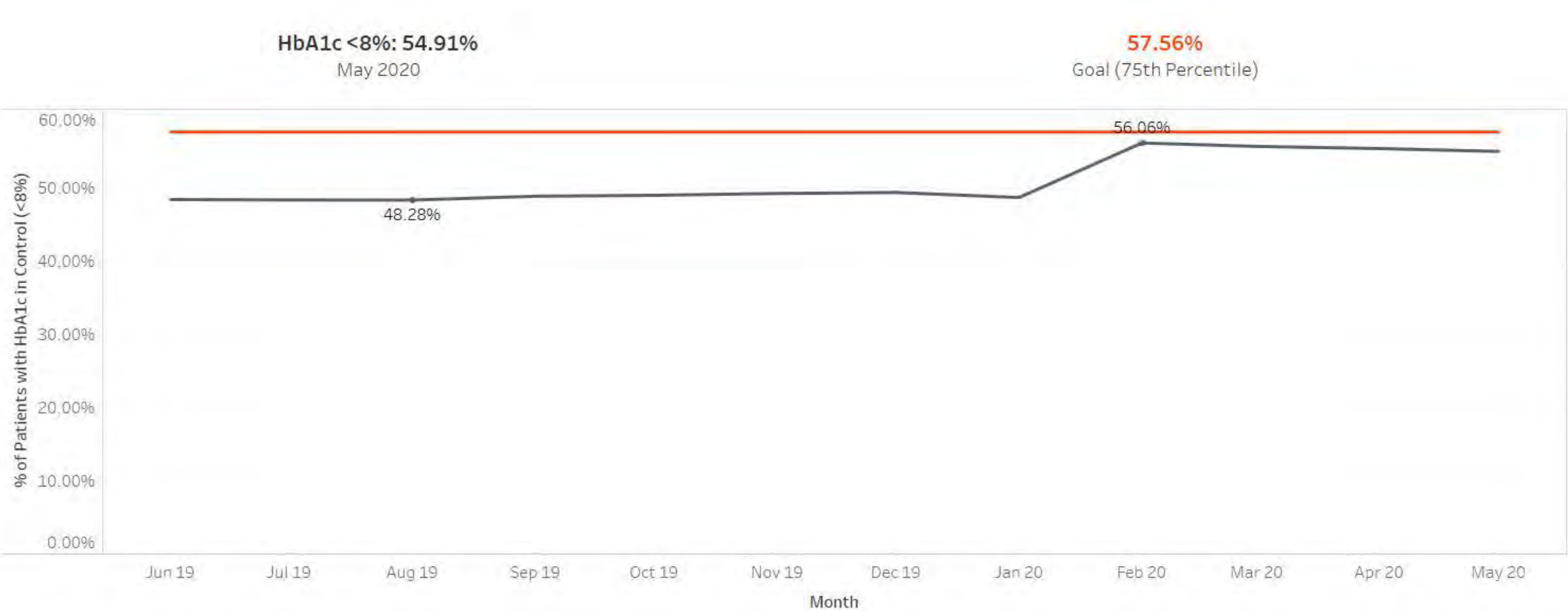


\*Higher top box score is favorable



# HbA1c <8%

HRO Domain: HEDIS



\*Higher percent of patients with HbA1c in control (<8%) is favorable

Metric	Definition
30-Day Readmission Rate	<ul style="list-style-type: none"> <li>• <i>Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger</i></li> <li>• <b>Calculation:</b> Raw unplanned readmission rate (# of readmissions / total # of eligible discharges)</li> <li>• <b>Population included:</b> all inpatient discharges from <u>Stroger</u></li> <li>• <b>Cohort inclusions:</b> any payer; any age; alive at discharge</li> <li>• <b>Cohort exclusions:</b> Admitted for primary psychiatric dx; admitted for rehabilitation; admitted for medical treatment of cancer (chemotherapy, radiation therapy); admitted for dialysis; admitted for delivery/birth</li> <li>• <b>Reporting timeframe:</b> reported monthly with a 1-month lag to allow for 30-day readmission window; reported by month of patient discharge</li> <li>• <b>Data source:</b> Vizient Clinical Data Base</li> </ul>
Case Mix Index	<ul style="list-style-type: none"> <li>• <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></li> <li>• <b>Population included:</b> all inpatient discharges from <u>Stroger</u></li> <li>• <b>Cohort inclusions:</b> any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (<i>Surgical: an OR procedure is performed</i>)</li> <li>• <b>Cohort exclusions:</b> none</li> <li>• <b>Reporting timeframe:</b> reported monthly by most current month available; reported by month of patient discharge</li> <li>• <b>Data source:</b> Vizient Clinical Data Base</li> </ul>
Recommend the Hospital	<ul style="list-style-type: none"> <li>• <i>Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey</i></li> <li>• <b>Calculation:</b> Percent of patient responses with "Definitely Yes" (top box) / total survey responses</li> <li>• <b>Population included:</b> Stroger; 18 years or older at time of admission; non-psychiatric MS-DRG/principal diagnosis at discharge; alive at discharge; &gt;1 overnight stay in hospital as inpatient</li> <li>• <b>Cohort exclusions:</b> 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</li> <li>• <b>Reporting timeframe:</b> reported monthly by most current month available; reported by month of survey received date</li> <li>• <b>Data source:</b> Press Ganey</li> </ul>
HbA1c <8%	<ul style="list-style-type: none"> <li>• <i>Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is in control (&lt;8.0%)</i></li> <li>• <b>Calculation:</b> Percent of diabetic patients with HbA1c in control / total diabetic patients</li> <li>• <b>Population included:</b> (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)</li> <li>• <b>Cohort exclusions:</b> none</li> <li>• <b>Reporting timeframe:</b> reported monthly by most current month available; reported by month of patient visit</li> <li>• <b>Data source:</b> NCQA, HEDIS</li> </ul>