Leapfrog Hospital Safety Grade

Stroger Hospital, Fall 2021

Fall 2021

C

Metric Improvements

- Increase in bar code medication administration scores
- Met hand hygiene observation goals for all departments
- Decrease in PSI-90 composite, driven by significant decrease in hospital acquired pressure injury

Areas for Opportunity

- Patient experience scores
- Hospital acquired infections
  - Stroger has improved since the Leapfrog reporting period (2019Q2 to 2019Q4, 2020Q3)

HRO Dashboard

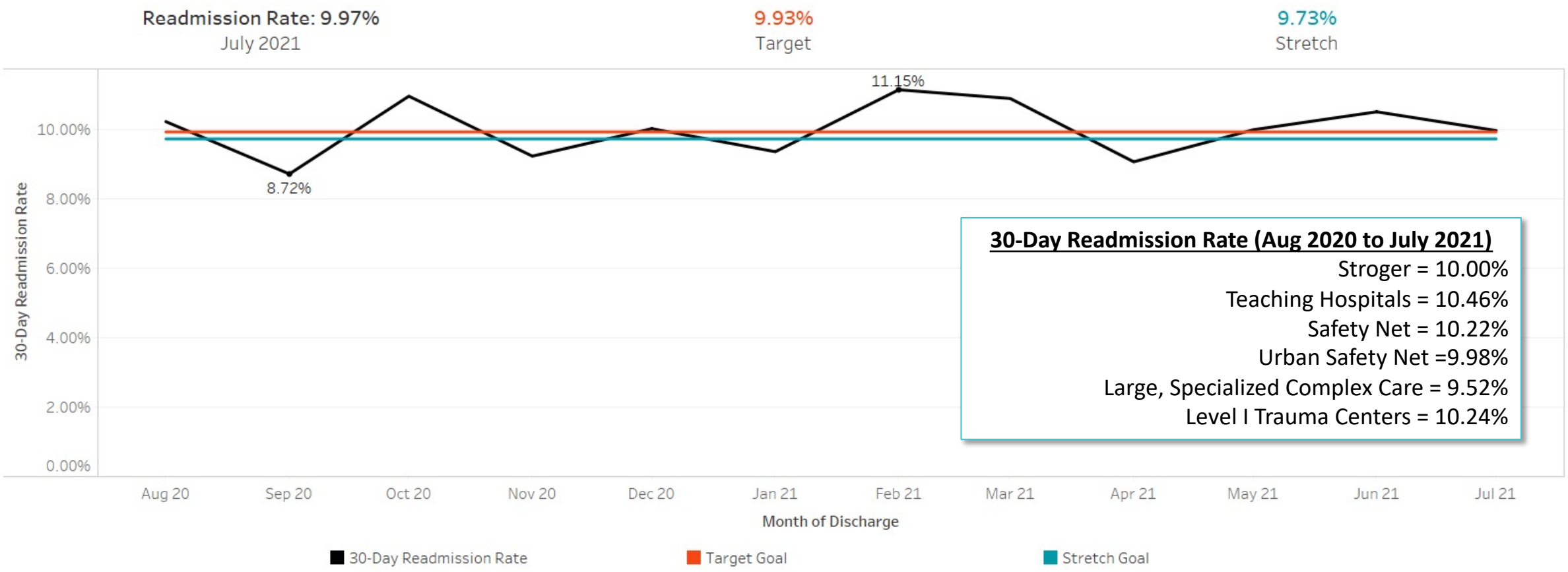
Quality and Patient Safety Committee

November 2021

COOK COUNTY HEALTH

30-Day Readmission Rate (Stroger Hospital)

HRO Domain: Readmissions



30-Day Readmission Rate (Aug 2020 to July 2021)

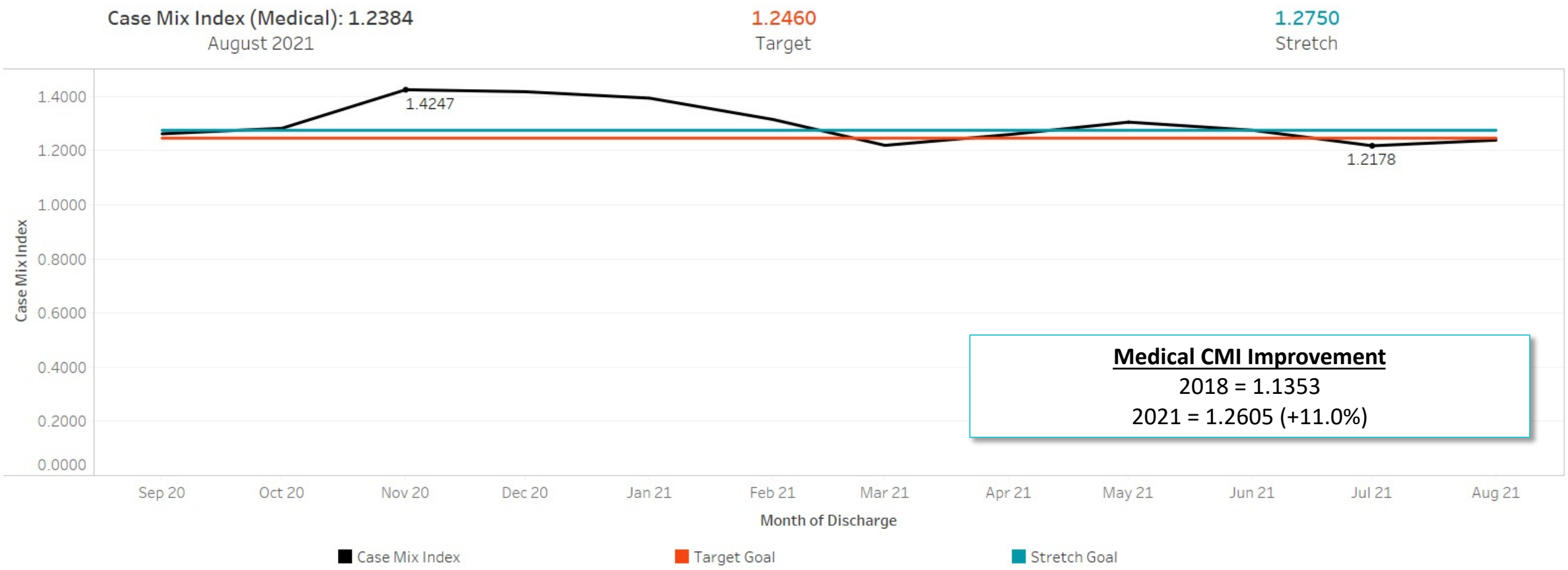
Stroger = 10.00%
Teaching Hospitals = 10.46%
Safety Net = 10.22%
Urban Safety Net =9.98%
Large, Specialized Complex Care = 9.52%
Level I Trauma Centers = 10.24%

COOK COUNTY HEALTH

*Lower readmission rate is favorable

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

HRO Domain: Clinical Documentation



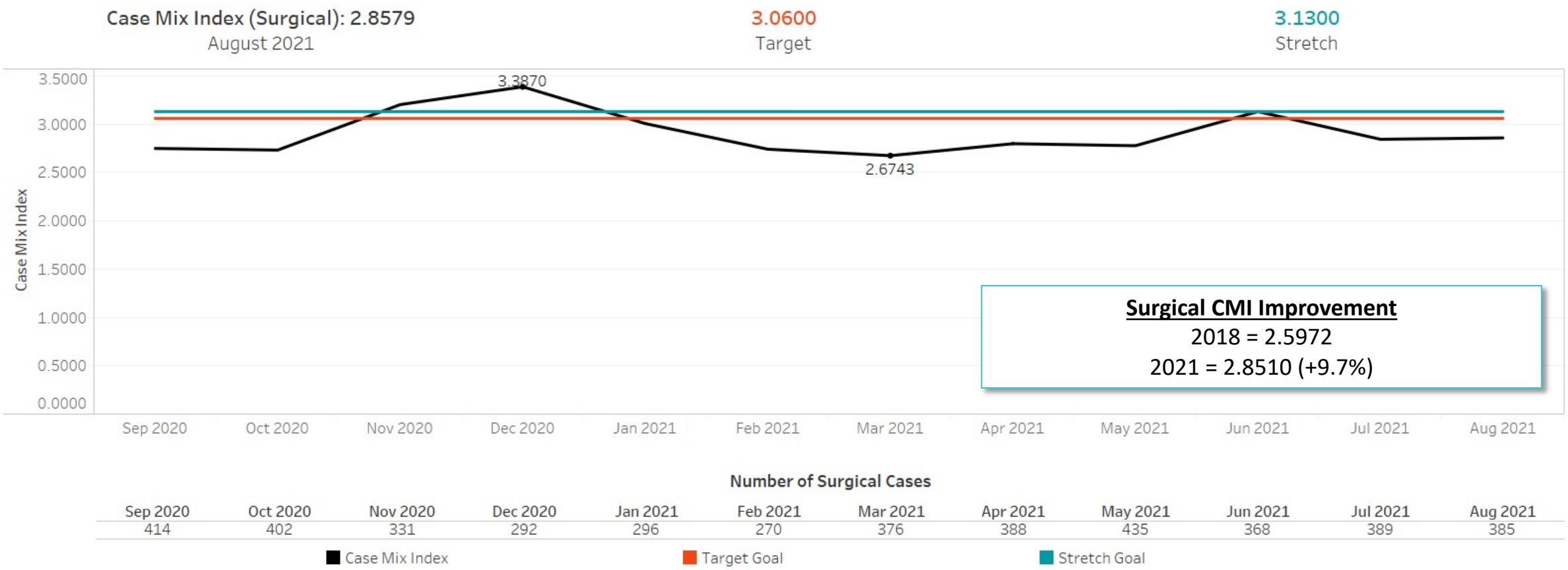
Medical CMI Improvement
2018 = 1.1353
2021 = 1.2605 (+11.0%)

COOK COUNTY HEALTH

*Higher case mix index is favorable

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

HRO Domain: Clinical Documentation



Surgical CMI Improvement
2018 = 2.5972
2021 = 2.8510 (+9.7%)

COOK COUNTY HEALTH

*Higher case mix index is favorable

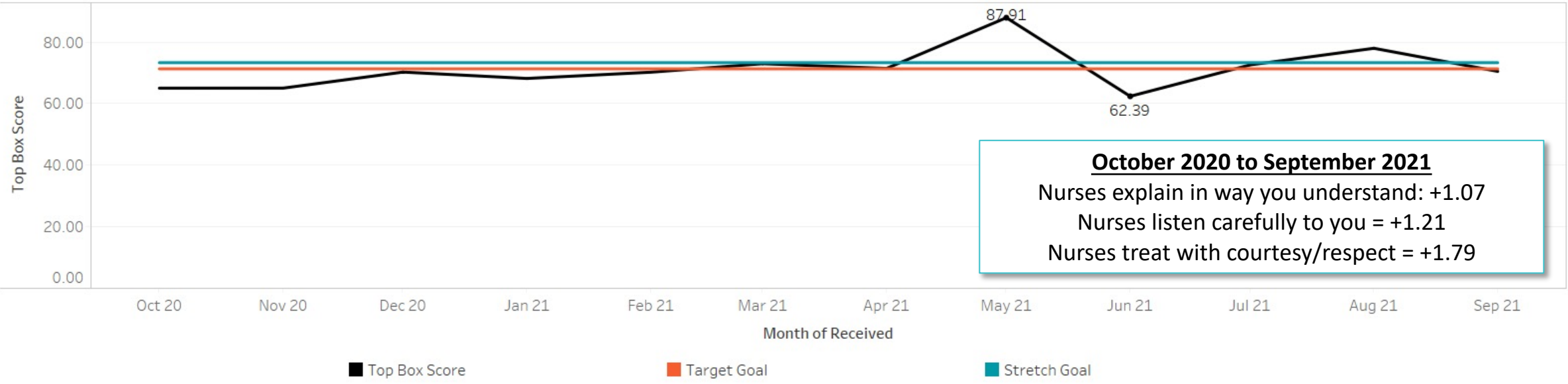
Top Box Score, Recommend the Hospital (Stroger Hospital)

HRO Domain: Patient Experience

Top Box Score (Recommend Hospital): 70.48
September 2021

71.30
Target

73.30
Stretch



October 2020 to September 2021
Nurses explain in way you understand: +1.07
Nurses listen carefully to you = +1.21
Nurses treat with courtesy/respect = +1.79

Total Patient Experience Surveys Received in Month

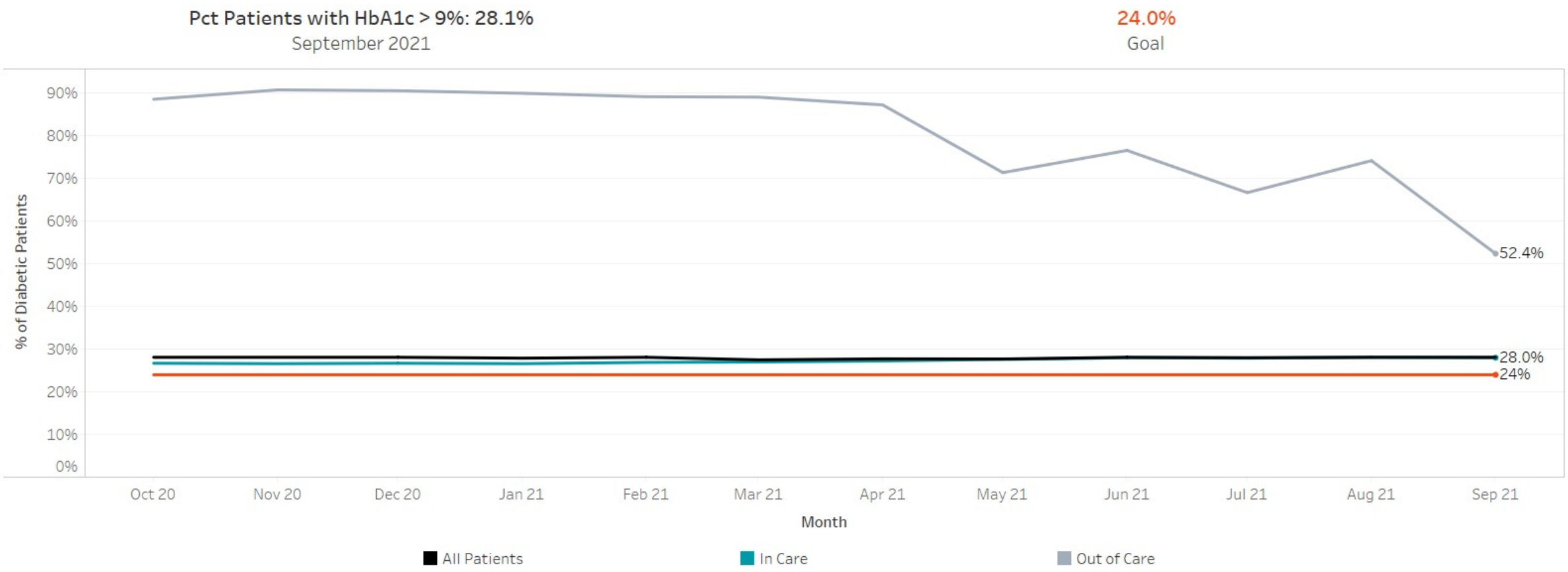
Oct 20	Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21
143	123	158	110	94	159	140	91	117	113	109	105

COOK COUNTY HEALTH

*Higher top box score is favorable

HbA1c >9%

HRO Domain: HEDIS



COOK COUNTY HEALTH

*__Lower__ percent of diabetics patients (>9%) is favorable

Metric	Definition
30-Day Readmission Rate	• *Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger* • **Calculation:** Raw unplanned readmission rate (# of readmissions / total # of eligible discharges) • **Population included:** all inpatient discharges from Stroger • **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	• *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* • **Population included:** all inpatient discharges from Stroger • **Cohort inclusions:** any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (*Surgical: an OR procedure is performed*) • **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	• *Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey* • **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%	• *Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is not in control (>9.0%)* • **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) *OR* (One diabetic Inpatient visit in the current year or previous year) *OR* (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