HRO Dashboard
Quality and Patient Safety Committee
April 2021
30-Day Readmission Rate (Stroger Hospital)

HRO Domain: Readmissions

In December
- COVID accounting for 10% of all readmits
- HF readmits decreased from 19.6% to 12.4%

*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

In February, improvements
- Communication with Nurses*
- Response of Hospital Staff
- Care Transitions
- Cleanliness of Hospital*

*Highest percentile rank for Stroger

*Higher top box score is favorable
HbA1c <8%

HRO Domain: HEDIS

*Higher percent of patients with HbA1c in control (<8%) is favorable
<table>
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<th>Metric</th>
<th>Definition</th>
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| **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 <8%** | • Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is in control (<8.0%)  
• Calculation: Percent of diabetic patients with HbA1c 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 |