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

HRO Domain: Readmissions

**In January**
- COVID dropped from 9.5% to 4.5%
- Heart failure improved from 12.4% to 9.2%

*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 March
- Stroger ranked in 56th percentile for Recommending Hospitals
- “Staff describe medicine side effect” showing continued improvement (2017 rank = 18th; 2021 rank = 45th)

*Higher top box score is favorable
HbA1c <8%

HRO Domain: HEDIS

*Higher percent of patients with HbA1c in control (<8%) is favorable
HbA1c >9%

HRO Domain: HEDIS

*Lower* percent of diabetics patients (>9%) is favorable
### Metric | Definition
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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 >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