Release of Leapfrog Group Hospital Safety Scores

Talking Points

October 28, 2014

**Background**
CHA expects the Leapfrog Group to refresh its Hospital Safety Scorecard with updated data from hospitals Wednesday, October 29. Leapfrog assigns a letter grade (A to F) to hospitals calculated from a group of 28 measures. Of the 28 measures used to calculate the scores, 15 are process — or structure-related — and 13 are outcome-based. Leapfrog uses several sources of data – the Leapfrog Hospital Survey, certain measures on Hospital Compare and AHA Annual Survey information. Hospital surveys are voluntary and free, and results are publicly reported at www.LeapfrogGroup.org/cp.

Hospitals can review the data, the methodology document and the letter grade by logging into Leapfrog’s data review website at www.leapfroggroup.org/data-validation/validation-login.

The measures are not simply averaged to calculate the final score. Instead, Leapfrog says each measure’s contribution to the score is weighted on:
- Strength of evidence of the measure
- Opportunity for use of the measure
- Potential for the measure to impact the care for many patients

More specifically, hospital performance on each measure is converted to a ‘z-score’ and then aggregated using the above-mentioned, measure-specific weights. The score is converted to the Hospital Safety Score based on assessments of preventable medical errors, injuries, accidents and infections. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score. Grades A, B, C, D or F are determined by a number of standard deviations above or below a mean score.

The Hospital Safety Scores do not include critical access, specialty, mental health, pediatric or federal hospitals, or hospitals in Maryland. They also do not include hospitals missing data for more than nine process measures or four outcome measures.

A more detailed analysis of California hospital performance will be available soon.

**Talking Points**
The updated scorecard might prompt media attention, so below are a number of talking points that might be useful.

- Hospitals were the first providers to share safety and quality data with the public and have been doing so for more than a decade. We believe that hospitals should be transparent with their quality and safety information and should share with the communities they serve the improvements they are making.
• When making health care decisions, patients should use all available tools at their disposal, such as talking with friends and family and consulting with doctors, nurses and other health care providers. The latest Leapfrog rating system is just one tool of many patients can use when making health care decisions such as choosing a hospital.

• As with any report card, the Leapfrog grades must be interpreted in context. For example, some of the data used to calculate hospital grades are more than two years old and may not reflect more recent performance improvement efforts. In addition, not all measures apply to all patients, which can matter when report cards are used as the primary tool to select a hospital for a specific procedure.

• Leapfrog is one of numerous organizations that provide reports and rankings of hospital performance. These organizations use different quality measures, performance data and methodologies to calculate scores. As a result, a hospital may perform well on one report card and poorly on another.

• Variation among numerous reports and rankings of hospital performance has caused confusion for health care professionals and patients.

  o CHA has developed a set of principles for public reporting that help hospitals evaluate each report card. CHA’s principles are available at www.calhospital.org/sites/main/files/file-attachments/scorecard_guidelines_110912_3.pdf.

  o In addition, the Association of American Medical Colleges (AAMC) convened a panel of quality reporting experts to develop a set of guiding principles for evaluating publicly reported provider performance data. The document, Guiding Principles for Public Reporting of Provider Performance, serves as a framework to help the nation’s hospitals evaluate reports of provider performance data and respond to questions from their governing boards, media and the general public. To access the document, visit http://aamc.org/publicreporting.