

Updates from The Leapfrog Group

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Submission Guidelines

Submission Requirements for 2023

Section 1 Basic Hospital Information, as well as Section 2 Medication Safety (which now includes CPOE, BCMA, and Med Rec), Section 4 Maternity Care, Section 5 ICU Physician Staffing, Section 6 Patient Safety Practices, and Section 7 Managing Serious Errors are required to submit a Survey via the Online Hospital Survey Tool.

Hospitals are strongly urged to submit **all** sections of the Leapfrog Hospital Survey and can indicate within a section if a measure does not apply.

The CPOE Evaluation Tool is included in Section 2 of the Leapfrog Hospital Survey for adult and general hospitals and will be accessible from the Survey Dashboard once a hospital has completed the **Profile section**.

Deadlines

June 22 First NHSN Group Deadline

Hospitals that join Leapfrog's NHSN Group by June 22, provide a valid NHSN ID in the Profile, and submit the Leapfrog Hospital Survey by June 30, will have data available prior to public reporting on their Hospital Details Page starting on July 12. Results will be publicly reported on July 25.

More information about deadlines to join Leapfrog's NHSN Group is available on the Join NHSN Group webpage.

June 30 Submission Deadline

Hospitals that submit a Survey by June 30 will have their Survey Results [publicly reported](#) on July 25. After July, Survey Results are updated on the fifth business day of the month to reflect Surveys (re)submitted by the end of the previous month.

Hospitals that do not submit a Survey by June 30 will be publicly reported as "Declined to Respond" until a Survey has been submitted.

Deadlines

July 12 Hospital Details Page Live

Hospitals that submit a Survey by June 30 will be able to view their Survey Results on their confidential [Hospital Details Page](#) on July 12. This includes NHSN Data for the five HAI measures, VON data for the Death or Morbidity measure (if applicable), and CMS outpatient data for OP-32 (if applicable).

After July 12, the Hospital Details Pages are updated on the fifth business day of the month to reflect Surveys (re)submitted by the end of the previous month.

July 25 Survey Results Publicly Reported

Hospitals that submit a Survey by June 30 will have their Survey Results [publicly reported](#) on July 25. After July, Survey Results are updated on the fifth business day of the month to reflect Surveys (re)submitted by the end of the previous month.

Deadlines

August 31 Top Hospital Deadline

Hospitals that would like to be eligible to receive a Leapfrog Top Hospital Award must submit a Survey, including all applicable sections, by August 31.

August 31 Data Snapshot Date for the Fall 2023 Safety Grade

This is the date that Leapfrog will obtain the public data (i.e., download data published by CMS or submitted via the Leapfrog Hospital Survey) to calculate the fall 2023 Hospital Safety Grades. All data, including Survey Results, must be finalized by this date.

Deadlines

November 30 Late Submission & Performance Update Deadline

The 2023 Leapfrog Hospital Survey will close to new submissions, and re-submissions that reflect updates to performance, at midnight ET on November 30. No new Surveys, new Survey sections, or performance updates to previously submitted Surveys can be submitted after this deadline. In addition, the CPOE Evaluation Tool will go offline at midnight ET on November 30.

Only hospitals that have submitted a Survey by November 30 will be able to log in to the Online Survey Tool to make data entry corrections (i.e., correct data entry errors) or reporting corrections (i.e., in response to Leapfrog's Extensive Monthly Data Review) to previously submitted sections during the months of December and January. Performance updates submitted after November 30 will not be scored or publicly reported.

January 31 Corrections Deadline

Hospitals that need to make data entry corrections (i.e., correct data entry errors) or reporting corrections (i.e., in response to Leapfrog's Extensive Monthly Data Verification) to previously submitted 2023 Leapfrog Hospital Surveys must make necessary updates and re-submit the entire Survey by January 31, 2024. Hospitals will not be able to make changes or re-submit their Survey after this date.

More information is available on the [Deadlines webpage](#).

Ensuring Data Accuracy

Leapfrog has several protocols in place to ensure the accuracy of the Survey responses submitted via the Online Survey Tool, including:

- Affirmations
- Warnings in the Online Survey Tool
- Extensive Monthly Data Verification
- Monthly Documentation Requirements
- Virtual On-Site Data Verification

Review Leapfrog's protocols on the Data Accuracy [webpage](#).



Major Survey Changes for 2023

Nursing Workforce

New Nurse Staffing & Skill Mix Standards Publicly Reported

Since 2021, hospitals have been asked to report through the Leapfrog Hospital Survey on the staffing levels of their medical, surgical, and med-surg units, the skill mix of the nurse in these units, and the education levels of registered nurses (RNs) nurses throughout the hospital.

The four measures Leapfrog is using to assess hospital performance include:

- **Total Nursing Hours per Patient Day (NQF #0205)**
 - The number of productive hours worked by employee or contract nursing staff with direct patient care responsibilities (RN, LPN/LVN, and UAP)
- **RN Nursing Hours per Patient Day (NQF #0205)**
 - The number of productive hours worked by RN nursing staff with direct patient care responsibilities per patient day in all inpatient medical, surgical, or med-surgical units
- **Nursing Skill Mix (% of total nursing care hours provided by RNs) (NQF #0204)**
 - Percentage of total productive nursing hours worked by RN (employee and contract) nursing staff with direct patient care responsibilities in all inpatient medical, surgical, or med-surgical units
- **Percentage of RNs who are BSN-prepared (The Future of Nursing: Leading Change, Advancing Health. Washington (DC): National Academies Press (US); 2011. PMID: 24983041.)**
 - Applicable to both hospitals and ASCs

Time for a Change

- The National Quality Forum's *Safe Practices for Better Healthcare* report is now close to 15 years old, with most hospitals "topped out" on the current Nursing Workforce Safe Practice measure
- Evidence continues to build that a hospital's decisions around nursing staffing have a meaningful impact on the quality and safety of care
- Leapfrog sees this as an opportunity to migrate to measures that better capture this impact

Evidence of Relationship Between Nurse Staffing and Clinical Outcomes

- Increased nursing hours per patient day is associated with lower odds of patient mortality, lower rates of nursing sensitive indicators (falls and pressure ulcers), shorter lengths of stay, and higher patient satisfaction.
- Increased use of RNs as a proportion of total nursing hours is associated with lower rates of nursing-related errors and adverse events, shorter lengths of stay, and reduced costs.
- Increased proportion of BSN-prepared RNs in hospital units is linked to reduced patient mortality, length of stay, and readmissions.

[More information is available in the Nurse Staffing and Skill Level bibliography](#)

Choosing Endorsed Measures

Total Nursing Care Hours Per Patient Day (NQF#0205), RN Hours Per Patient Day (NQF#0205) & Nursing Skill Mix (NQF#0204)

- Overwhelmingly recommended for continued endorsement in 2019 NQF review (one unanimous vote, one 18-1 vote)
 - Important performance gaps identified
 - Strong reliability and validity of both measure scores
 - The measures were recognized as being widely used, and feasible for implementation based on hospital electronic staffing systems
- **Expert Panel Input**
 - Limit collection to adult and pediatric medical, surgical, and med-surg units
 - Collect quarterly data
 - Stratify by small teaching, large teaching, and non-teaching hospitals

Aligning with NAM

- In 2010, the IOM (now NAM) released a landmark report: **The Future of Nursing: Leading Change, Advancing Health**
- Goals included residency training for nurses, removing limits on nurses' scope of practice, and **80% of RNs with a BSN by 2020.**
- Currently, 59% of RNs have a BSN (according to the Center to Champion Nursing in America)

Use of New Nurse Staffing and Skill Mix Measures in Other Programs

Leapfrog is including the **total nursing care hours per patient day and RN hours per patient day** measures in the 2023 Leapfrog Value-Based Purchasing Program and the Hospital Safety Grade beginning with the fall 2023 Grades.

All four measures will be scored and publicly reported on Leapfrog's Survey Results website at <https://ratings.leapfroggroup.org>.

The nursing skill mix and proportion of RNs who are BSN-prepared measures will be evaluated for inclusion in Leapfrog's other programs in future years.

2023 Leapfrog Hospital Survey Scoring Algorithms

For Total Nursing Care Hours per Patient Day, RN Hours per Patient Day, and Nursing Skill Mix -

To calculate the 50th, 25th, and 10th percentiles used in scoring, Leapfrog places hospitals into one of five cohorts based on teaching designation reported on in the 2022 Patient Safety Component – Annual Hospital Survey in NHSN and number of staffed beds reported in Section 1A: Basic Hospital Information of the 2023 Leapfrog Hospital Survey:

- small teaching (< 500 staffed beds)
- large teaching (> 499 staffed beds)
- non-teaching (includes hospitals that do not join Leapfrog’s NHSN Group)
- pediatric
- critical access hospitals

Hospitals are only compared to hospitals within the same cohort

2023 Leapfrog Hospital Survey Scoring Algorithms (cont.)

Total Nursing Care Hours per Patient Day Score (Performance Category)	Meaning that...
Achieved the Standard (4 bars)	The hospital's total nursing care hours per patient day is greater than or equal to the 50th percentile (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Considerable Achievement (3 bars)	The hospital's total nursing care hours per patient day is less than the 50th percentile but greater than or equal to the 25th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Some Achievement (2 bars)	The hospital's total nursing care hours per patient day is less than the 25th percentile but greater than or equal to the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). OR The hospital's responses did not pass Leapfrog's Extensive Monthly Data Verification Process.
Some Achievement (alternative) (2 bars)	The hospital's total nursing care hours per patient day is less than the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). AND The hospital achieved Leapfrog's standard for National Quality Forum (NQF) Safe Practice #9 – Nursing Workforce.
Limited Achievement (1 bar)	The hospital's total nursing care hours per patient day is less than the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). OR The hospital did not measure.

2023 Leapfrog Hospital Survey Scoring Algorithms (cont.)

RN Hours per Patient Day Score (Performance Category)	Meaning that...
Achieved the Standard (4 bars)	The hospital's RN hours per patient day is greater than or equal to the 50th percentile (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Considerable Achievement (3 bars)	The hospital's RN hours per patient day is less than the 50th percentile but greater than or equal to the 25th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Some Achievement (2 bars)	The hospital's RN hours per patient day is less than the 25th percentile but greater than or equal to the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). OR The hospital's responses did not pass Leapfrog's Extensive Monthly Data Verification Process.
Some Achievement (alternative) (2 bars)	The hospital's RN hours per patient day is less than the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). AND The hospital achieved Leapfrog's standard for National Quality Forum (NQF) Safe Practice #9 – Nursing Workforce.
Limited Achievement (1 bar)	The hospital's RN hours per patient day is less than the 10th percentile (where higher is better) for that's hospital cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital). OR The hospital did not measure.

2023 Leapfrog Hospital Survey Scoring Algorithms (cont.)

Nursing Skill Mix Score (Performance Category)	Meaning that...
Achieved the Standard (4 bars)	The hospital's percentage of total productive nursing hours worked by RN nursing staff is <u>greater than or equal to the 50th percentile</u> (where a higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Considerable Achievement (3 bars)	The hospital's percentage of total productive nursing hours worked by RN nursing staff is <u>less than the 50th percentile but greater than or equal to the 25th percentile</u> (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital).
Some Achievement (2 bars)	The hospital's percentage of total productive nursing hours worked by RN nursing staff is <u>less than the 25th percentile but greater than or equal to the 10th percentile</u> (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital) OR The hospital's responses did not pass Leapfrog's Extensive Monthly Data Verification Process.
Some Achievement (alternative) (2 bars)	The hospital's percentage of total productive nursing hours worked by RN nursing staff is <u>less than the 10th percentile</u> (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital) AND The hospital achieved Leapfrog's standard for National Quality Forum (NQF) Safe Practice #9 – Nursing Workforce.
Limited Achievement (1 bar)	The hospital's percentage of total productive nursing hours worked by RN nursing staff is <u>less than the 10th percentile</u> (where higher is better) for that hospital's cohort (small teaching, large teaching, non-teaching, pediatric, or critical access hospital) OR The hospital did not measure.

2023 Leapfrog Hospital Survey Scoring Algorithms (cont.)

Percentage of RNs who are BSN-prepared Score (Performance Category)	Percentage of BSN-prepared RNs
Achieved the Standard (4 bars)	$\geq 80\%$
Considerable Achievement (3 bars)	$\geq 50\%$ and $< 80\%$
Some Achievement (2 bars)	$\geq 20\%$ and $< 50\%$
Limited Achievement (1 bar)	$< 20\%$ or the hospital did not measure

Nursing Benchmarks from 2021/2022 Surveys

Total Nursing Care Hours per Patient Day

	Large Teaching Hospitals	Small Teaching Hospitals	Non-Teaching Hospitals	Pediatric Hospitals	Critical Access Hospitals
50 th percentile (meaning these hospitals performed better than 50% of the reporting hospitals)	9.378	9.423	9.449	11.44	11.37
25 th percentile (meaning these hospitals performed better than 25% of reporting hospitals)	8.475	8.216	8.228	9.983	10.24
10 th percentile (meaning these hospitals better than 10% reporting hospitals)	7.371	7.186	7.051	8.775	8.798

Nursing Benchmarks from 2021/2022 Surveys (cont.)

RN Hours per Patient Day

	Large Teaching Hospitals	Small Teaching Hospitals	Non-Teaching Hospitals	Pediatric Hospitals	Critical Access Hospitals
50 th percentile (meaning these hospitals performed better than 50% of the reporting hospitals)	6.557	6.478	6.378	9.713	7.271
25 th percentile (meaning these hospitals performed better than 25% of reporting hospitals)	5.857	5.527	5.237	8.296	6.761
10 th percentile (meaning these hospitals better than 10% reporting hospitals)	5.245	4.762	4.443	7.825	5.409

Nursing Benchmarks from 2021/2022 Surveys (cont.)

Nursing Skill Mix (% of total nursing care hours provided by RNs)

	Large Teaching Hospitals	Small Teaching Hospitals	Non-Teaching Hospitals	Pediatric Hospitals	Critical Access Hospitals
50 th percentile (meaning these hospitals performed better than 50% of the reporting hospitals)	70.89%	69.13%	69.14%	80.46%	64.29%
25 th percentile (meaning these hospitals performed better than 25% of reporting hospitals)	65.61%	63.51%	62.10%	74.33%	59.75%
10 th percentile (meaning these hospitals better than 10% reporting hospitals)	61.48%	57.84%	56.46%	70.32%	54.05%

Nursing Benchmarks from 2021/2022 Surveys (cont.)

Percentage of RNs who are BSN-prepared

	Percentage of hospitals that reported on the measure
80% or more of RNs are BSN-prepared	19.07%
50% - 79% of RNs are BSN-prepared	51.95%
20% - 49% of RNs are BSN-prepared	26.57%
Less than 19% of RNs are BSN-prepared	2.41%

Informed Consent

Performance Gap

- National focus on improving the informed consent process
 - Patient-centered care requires an informed consent process that is respectful of patients' right to understand their care and to make appropriate choices
 - Patients often do not have enough time or information to review and understand consent documents
- Research on current practice
 - Rothberg et al (2015) "Of 59 conversations conducted by 23 cardiologists, 2 (3%) included all 7 elements of informed decision making"
 - Spatz et al (2019) "All hospitals performed poorly on a measure of informed consent document quality"

Developing the Questions

- Published literature identifying best practices
 - James et al (2019) surveyed patients to identify what patients want out of the informed consent process
 - AHRQ Training: Making Informed Consent an Informed Choice identified specific training elements
 - NQF Safe Practice 5: Informed Consent, highlighting the teach back method and reading level
 - Spatz et al (2019) identified crucial elements of consent forms
- Leapfrog's Patient and Family Caregiver Expert Panel
 - Co-chaired by Marty Hatlie, President & CEO of Project Patient Care, and Sue Sheridan, former Director of Patient Engagement at PCORI
- Direct feedback from hospitals and ASCs via our public comment process and national pilot of the 2022 Surveys

Informed Consent

The following six questions were identified by the expert panel as being most relevant for use in scoring and public reporting:

- One (1) question from the Policies and Training domain that focuses on staff training on the hospital's informed consent policies
- Three (3) questions from the Content of the Informed Consent Forms domain that focus on: detailing expected difficulties with the procedure; naming individuals who will be involved with the procedure, including trainees; and ensuring informed consent forms are at a 6th grade reading level
- Two (2) questions from the Processing for Gaining Informed Consent domain that focus on providing medical interpretation in the patient/legal guardian's preferred language, where needed, when discussing informed consent and using the "teach back method" with patients to ensure they understand what is being explained to them.

Will be scored and publicly reported for both hospitals and ASCs and included in Leapfrog's VBP Program.

Informed Consent 2023 Scoring Algorithm

Informed Consent Score (Performance Category)	Meaning that...
Achieved the Standard (4 bars)	The hospital responded “yes, all forms are written at a 6th grade reading level or lower” to question #4 and then “yes” to the remaining five questions in Policies and Training (question #1), Content of Informed Consent Forms (questions #2-3), and Process for Gaining Informed Consent (questions #5-6).
Considerable Achievement (3 bars)	<p>The hospital responded “yes, all forms are written at a 6th grade reading level or lower” and then “yes” to at least four additional questions in Policies and Training (question #1), Content of Informed Consent Forms (questions #2-3), and Process for Gaining Informed Consent (questions #5-6).</p> <p>OR</p> <p>The hospital responded that “at least one form is written at a 6th grade reading level or lower” and then “yes” to the five remaining questions in Policies and Training (question #1), Content of Informed Consent Forms (questions #2-3), and Process for Gaining Informed Consent (questions #5-6).</p>
Some Achievement (2 bars)	<p>The hospital responded “yes, all forms are written at a 6th grade reading level or lower” OR “at least one form is written at a 6th grade reading level or lower” and then “yes” to at least three additional questions in Policies and Training (question #1), Content of Informed Consent Forms (questions #2-3), and Process for Gaining Informed Consent (questions #5-6).</p> <p>OR</p> <p>The hospital responded “No forms are written at a 6th grade reading level or lower” but responded “yes” to at least four questions in Policies and Training (question #1), Content of Informed Consent Forms (questions #2-4), and Process for Gaining Informed Consent (questions #5-6).</p>
Limited Achievement (1 bar)	The hospital responded to all the questions in this section, but it does not yet meet the criteria for Some Achievement.

Informed Consent Benchmarks from 2022 Surveys

At least 50% of hospitals responded “yes” to each of the six questions included in scoring and public reporting for 2023.

Over 35% of hospitals would achieve the standard based on 2022 Survey responses.





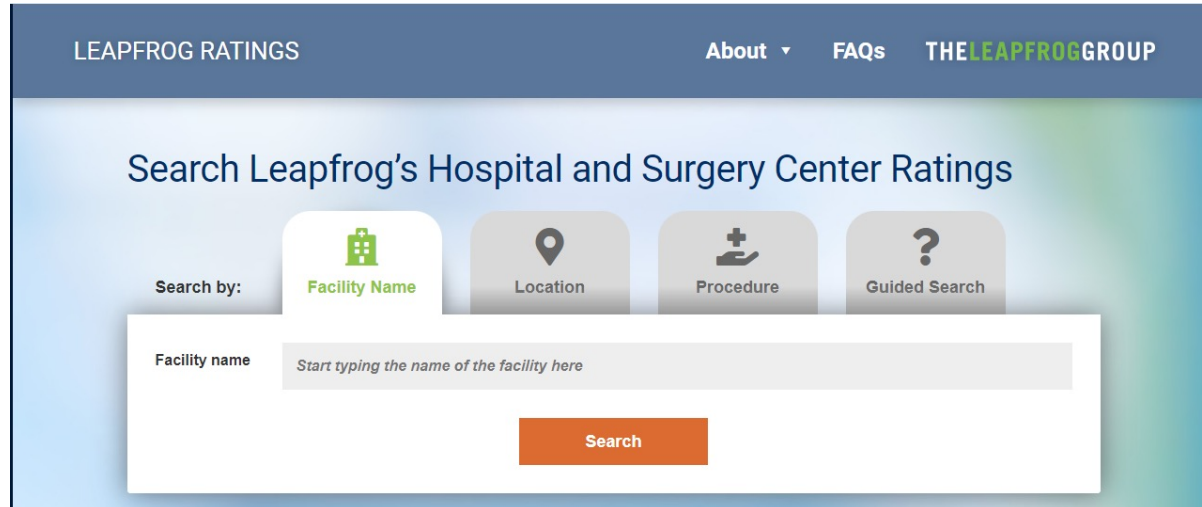
How Survey Results are Used

Public reporting

- Leapfrog's purchaser and employer members use the Survey Results to:
 - Educate and inform their health plan enrollees
 - Recognize and acknowledge hospitals and ASCs that achieve our national standards
 - Negotiate contracts with their health plans (i.e., ensure Survey Results will be embedded in member tools) and hospitals and ASCs (i.e., direct contracting)
- Consumers use Leapfrog's free public reporting website to compare hospitals and ambulatory surgery centers.
- Health plans, transparency vendors, and others that use Survey Results to design consumer education tools, perform market analysis, or inform contracting decisions, must license the data from The Leapfrog Group for a fee.
- The revenue from data licenses is used to support the ongoing administration of the Leapfrog Surveys and Leapfrog's data dissemination efforts.

Public Reporting – ratings.leapfroggroup.org

- Users can search for hospitals and surgery centers by name, location, procedure type, or use the guided search function
- As a reminder, hospitals and ASCs that don't submit a Survey by June 30 will be publicly reported as Declined to Respond starting in July



The screenshot shows the Leapfrog Ratings website interface. At the top, there is a dark blue navigation bar with the text "LEAPFROG RATINGS" on the left and "About", "FAQs", and "THE LEAPFROG GROUP" on the right. Below the navigation bar, the main heading reads "Search Leapfrog's Hospital and Surgery Center Ratings". Underneath this heading, there are four search options represented by icons in rounded rectangular buttons: "Facility Name" (with a building icon), "Location" (with a location pin icon), "Procedure" (with a plus sign and a hand icon), and "Guided Search" (with a question mark icon). The "Facility Name" option is currently selected. Below these options is a search form with a label "Facility name" and a text input field containing the placeholder text "Start typing the name of the facility here". A blue "Search" button is positioned below the input field.

Public Reporting – Procedure Search

- Users can search for hospitals and/or ASCs that perform the adult and pediatric same day surgeries included on the Surveys

The screenshot displays the Leapfrog Ratings website's search interface. At the top, there is a dark blue navigation bar with the text "LEAPFROG RATINGS" on the left and "About", "FAQs", and "THELEAPFROGGROUP" on the right. Below the navigation bar, the main heading reads "Search Leapfrog's Hospital and Surgery Center Ratings". Underneath this heading, there are four search options: "Facility Name" (with a building icon), "Location" (with a location pin icon), "Procedure" (with a green plus sign and hand icon, highlighted with a red box), and "Guided Search" (with a question mark icon). Below the search options, a white box contains the following text: "Leapfrog collects information about certain common same-day surgeries (that do not require an overnight stay) from both hospitals and surgery centers. Search for procedures using the options below." This box is divided into two columns: "ADULT patients" and "PEDIATRIC patients". Each column has a green dropdown menu with the text "-- Choose One --". The word "or" is placed between the two dropdown menus. Below these columns, there is a question: "Do you want to only show facilities near you?" followed by a green button labeled "No".

Public Reporting – Select Facilities




The Leapfrog Group | 2021 Survey Results

Compare selected facilities

Edmonds Center for Outpatient Surgery ✕

Eastside Surgery Center ✕

St. Michael Medical Center ✕

<input checked="" type="checkbox"/>		Edmonds Center for Outpatient Surgery 7320 216th St Sw, Suite 320 Edmonds, Washington 98026 View Surgery Center Ratings	13.6 miles
<input checked="" type="checkbox"/>		Eastside Surgery Center 1301 4th Ave Nw, Suite 201 Issaquah, Washington 98027-8985 View Surgery Center Ratings	14.2 miles
<input checked="" type="checkbox"/>		St. Michael Medical Center 1800 NW Myhre Rd Silverdale, Washington 98383 View Hospital Ratings	16.3 miles

- Users can also compare up to three hospitals and/or ASCs at a time

Public Reporting – Compare Results

The Leapfrog Group | 2021 Survey Results










 [Edmonds Center for Outpatient Surgery](#)
 [Eastside Surgery Center](#)
 [St. Michael Medical Center](#)

+ Show all

+ Elective Outpatient Surgery - Adult

+ Elective Outpatient Surgery - Pediatric

– Care for Elective Outpatient Surgery Patients

Measure name	Facility's progress toward meeting Leapfrog's standard		
Elective Outpatient Surgery Recovery Staffing - Adult	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD
Elective Outpatient Surgery Recovery Staffing - Pediatric	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD
Safe Surgery Checklist - Elective Outpatient Surgery	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD	 ACHIEVED THE STANDARD

Competitive Benchmarking Reports

- Hospitals that submit a Leapfrog Hospital Survey by the **June 30** Submission Deadline will receive a Free Summary Competitive Benchmarking Report.
- Obtain more information about Competitive Benchmarking Reports, the Leapfrog Value-Based Purchasing Program Methodology, and more detailed performance reports on the [Competitive Benchmarking webpage](#).

LEAPFROG VBP PROGRAM POWERED BY THE LEAPFROG HOSPITAL SURVEY

BREAKDOWN BY MEASURE BREAKDOWN BY DOMAIN THIS HOSPITAL'S VBP VALUE SCORE PAST PERFORMANCE VBP PROGRAM OVERVIEW HOW TO USE THIS REPORT

Breakdown by Measure (Page 1 of 2)

VBP Measure Scores and VBP Measure Weights for each of the measures that apply to this hospital are shown here, alongside national, state, and cohort averages for benchmarking.

Each measure on the Leapfrog Hospital Survey is scored according to the Leapfrog VBP Program™ methodology. The measures within each domain are weighted based on the following criteria: **Volume** (number of patients impacted by the measure), **Harm** (severity of harm being measured or resulting from hospitals not adhering to the clinical guidelines being measured), and **Resource Use** (process costs related to the measure). Weights for each measure and each domain are specific to this hospital based on the data available from this Survey.

VBP MEASURE SCORE COMPARED TO NATIONAL AVERAGE

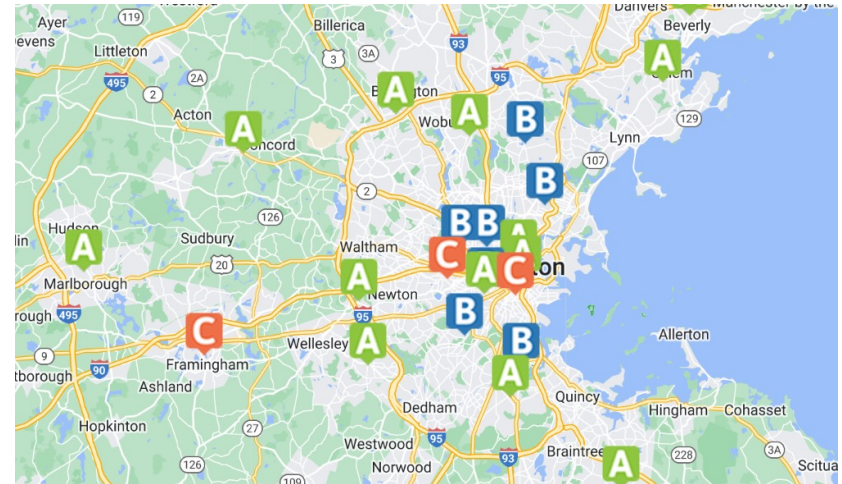
- > 10 Points Better or Top Performance
- ± 10 Points
- > 10 Points Worse
- Not Analyzable

PENDING VERIFICATION Pending Leapfrog Verification
State: SAMPLE STATE
Cohort: SAMPLE COHORT

DOMAIN	DOMAIN WEIGHT	MEASURE WEIGHT	MEASURE	2021 VBP MEASURE SCORE	BENCHMARKS		
					NATIONAL N=570	STATE N=28	COHORT N=31
Medication Safety	15.00%	5.87%	Computerized Physician Order Entry (CPOE)	100	96	96	100
		5.22%	Bar Code Medication Administration (BCMA)	100	89	92	89
		3.91%	Medication Reconciliation	65	62	77	67
Inpatient Care Management	17.00%	3.97%	ICU Physician Staffing	100	77	86	100
		2.83%	Culture of Safety Leadership Structures and Systems	100	82	76	88
		2.83%	Culture Measurement, Feedback, and Intervention	35	87	93	89
		2.83%	Nursing Workforce	100	91	92	97
		2.83%	Hand Hygiene	100	71	83	71
Infections	22.00%	1.70%	Never Events Policy	100	85	80	76
		4.89%	CLABSI	74	48	43	46
		4.28%	CAUTI	58	51	55	48
		3.06%	SSI: Colon	67	50	45	42
		4.89%	MRSA	30	50	52	46
Outpatient Procedures	8.00%	4.89%	C.Diff.	68	52	34	42
		1.67%	Patient Recovery - Adult	100	75	73	69
		1.67%	Patient Recovery - Pediatric	100	73	72	68
		2.00%	Safe Surgery Checklist	29	73	73	61
		1.33%	Medication and Allergy Documentation	44	57	54	47
		1.33%	Patient Experience (OAS CAHPS)	83	64	65	58

Hospital Safety Grade

- The Hospital Safety Grade is a letter grade that represents a hospital's performance on up to 22 different measures of patient safety (i.e., measure of accidents, injuries, harm, and errors).
- Only general, acute care hospitals are eligible to receive a Hospital Safety Grade.
- While the Hospital Safety Grade is a separate program administered by Leapfrog, it does use some data from the Leapfrog Hospital Survey, in addition to data that is publicly available from CMS.
- For more information on the Leapfrog Hospital Survey measures included in the Hospital Safety Grade, download copy of the 2022 Leapfrog Hospital Survey Overview on the [Survey Overview webpage](#).



Top Hospital

- The highest performing hospitals on the Leapfrog Hospital Survey are recognized annually with the prestigious Leapfrog Top Hospital award.
- Top Hospitals are publicized in a national press announcement and invited to participate in an awards ceremony.
- Hear from 2022 Top Hospital awardees on our [website](#).



Top General Hospitals



Top Children's Hospitals



Top Rural Hospitals



Top Teaching Hospitals

Media Partnership with Money.com

Hospital	NICU Availability	C-Section Rate	High-Risk Delivery	Early Elective Deliveries	Area
Adena Regional Medical Center Chillicothe, Ohio	No	19.5%	Does Not Apply	N/A	Rural
AdventHealth Central Texas Killeen, Texas	No	19.3%	Does Not Apply	N/A	Urban
AdventHealth GlenOaks Glen Dale Heights, Illinois	No	19.4%	Does Not Apply	N/A	Urban
AdventHealth Shawnee Mission Shawnee Mission, Kansas	Yes	18.2%	Considerable Achievement	N/A	Urban
AdventHealth Wesley Chapel Wesley Chapel, Florida	No	18.6%	Does Not Apply	1.1%	Urban
AdventHealth Zephyrhills Zephyrhills, Florida	No	16.6%	Does Not Apply	3.3%	Urban
Alamance Regional Medical Center Burlington, North Carolina	No	17.2%	Does Not Apply	1.0%	Urban



Best Hospitals for Maternity Care

- Adena Regional Medical Center
Chillicothe, Ohio
- AdventHealth Central Texas
Killeen, Texas
- AdventHealth GlenOaks
Glen Dale Heights, Illinois

[VIEW ALL 289 HOSPITALS](#)

Best Hospitals and Surgery Centers for Billing Ethics

- Andalusia Health
Andalusia, Alabama
- Riverview Regional Medical Center
Gadsden, Alabama
- St Vincent's Chilton
Clanton, Alabama

[VIEW ALL 675 HOSPITALS](#)

Best Hospitals for Bariatric Surgery

- Baptist Health Medical Center-Little Rock
Little Rock, Arkansas
- Saline Memorial Hospital
Benton, Arkansas
- Enloe Medical Center
Chico, California

[VIEW ALL 101 HOSPITALS](#)

Best Ambulatory Surgery Centers (ASCs)

- Connecticut Orthopedic Surgery Center
Milford, Connecticut
- Glastonbury Surgery Center, LLC
Glastonbury, Connecticut
- HHC Hartford Surgery Center
Hartford, Connecticut

[VIEW ALL 28 ASCS](#)

Best Hospitals for Pediatrics

- Children's Hospital of Orange County
Orange, California



Get Ready for 2023

Questions

Request a 16-digit security code at <http://www.leapfroggroup.org/survey-materials/get-hospital-security-code>

Review the full Summary of Changes and Nurse Benchmarking Report at <https://www.leapfroggroup.org/survey-materials/summary-changes-2023-leapfrog-hospital-survey>

Download Survey Materials at <http://www.leapfroggroup.org/survey-materials/survey-and-cpoe-materials>

Download the Scoring Algorithms at <https://www.leapfroggroup.org/survey-materials/scoring-and-results>

Submit a question to the Help Desk at <https://leapfroghelpdesk.zendesk.com>

Resources for Hospitals

FREE RESOURCES

- **Help Desk** - The Help Desk is staffed from 9:00 a.m. to 5:00 p.m. ET on all regular business days. Help Desk tickets are responded to within 1-2 business days.
- **Town Hall Calls** - Free general information sessions offered at the beginning of each Survey Cycle. Register on our [website](#).
- **Case Studies** - Leapfrog has [published](#) a number of case studies featuring examples of how hospitals have achieved Leapfrog's standards.
- **Leapfrog Survey Binder** – Available to collect, organize, and record information during the completion of the Survey. Download [here](#).

PAID RESOURCES

- **Monthly Webinar Series** – Held monthly from March to December, the Webinar Series is designed for hospitals that would benefit from a more interactive presentation of Survey materials and information. Each month focuses on a new topic, includes a live Q&A session, and monthly office hours with Leapfrog's Help Desk. More info available [here](#).
- **Health System Support** – Data subscription designed to help Survey coordinators and health system leaders become in-house experts on the Leapfrog Hospital Survey and the Hospital Safety Grade and make it easy to monitor, compare, and analyze your hospitals' Leapfrog Hospital Survey Results, Hospital Safety Grades, and Competitive Benchmarking scores. More info available [here](#).

Other Questions?