Healthcare Quality Reporting Program

HOSPITAL SUMMARY REPORT

Methods

The Hospital Summary Report is published on the Department of Health website as part of the Healthcare Quality Reporting Program. The Summary Report summarizes information from the Department of Health and Medicare, among other places. This report is updated to reflect the most recently available data for each column. Reports with more information are available at those websites.

This Methods Report provides additional details about the measures in the Summary Report, including where they come from and why they are important.

Definitions	
30-Day Readmission	Measures of 30-day readmission show when patients who have had a recent hospital stay need to go back into a hospital again within 30 days of their discharge.
Catheter-Associated Urinary Tract Infections (CAUTI)	A catheter is a plastic medical tube inserted in the bladder through the urinary tract to drain urine from a patient. They are used when a patient is unable to urinate on their own.
	A Catheter-Associated Urinary Tract Infection (CAUTI) is a urinary tract infection caused by germs or bacteria traveling through the catheter to the bladder or other parts of the urinary tract.
Central Line-Associated Bloodstream Infections (CLABSI)	A "central line" is a special kind of IV or flexible tube that connects directly to a patient's heart or a major blood vessel. It can be used to draw blood or give patients medication or nutrition.
	A bloodstream infection occurs when bacteria enter patients' blood. A Central Line-Associated Bloodstream Infection (CLABSI) happens when a patient gets a bloodstream infection as a result of bacteria traveling through their central line.
Clostridium Difficile	Clostridium Difficile is a type of bacteria that causes diarrhea. It can stay in a patient's system for a long time and is hard to treat with antibiotics. It is commonly considered a healthcare associated infection.
MRSA Bloodstream Infections	Methicillin-resistant Staphylococcus aureus (MRSA) is a bacterium that is most known for causing skin infections. It is very difficult to treat because it is resistant (cannot be treated by) many types of antibiotics. MRSA bloodstream infections happen when this type of bacteria enters a person's bloodstream.

Summary Report Measures

Quality Measures

Rate of Readmission after Discharge	Reflects the rate of 30-day all-cause unplanned readmissions. Unplanned readmissions soon after discharge are often due to inadequate care during a patient's hospital stay, or poor discharge planning. It is the hospital's responsibility to ensure that patients are healthy enough to leave the hospital and that there is an appropriate discharge plan in place.
	This measure is collected by Medicare and is reported on Medicare's Hospital Compare website. The data comes from Medicare enrollment and claims data, as submitted by the facilities. The rates take into account how sick patients were before they were admitted to the hospital. This measure is updated annually.
Serious Surgical Complications	Reflects a composite measure of serious complications during surgery; including, but not limited to, pressure sores rate, perioperative hemorrhage or hematoma rate, postoperative respiratory failure rate and postoperative sepsis rate.
	This measure is collected by Medicare and is reported on Medicare's Hospital Compare website. The data comes from Medicare enrollment and claims data, as submitted by the facilities. This measure is updated annually.

Emergency Department Measures

Average time spent in the ED before being seen by a healthcare professional	Reflects the average amount of time between when a patient enters the Emergency Department (ED) and when they are seen by a healthcare professional. It is important to know how quickly a hospital is able to see a patient once they have come in for emergency care.
	This measure is collected by Medicare and is reported on Medicare's Hospital Compare website. The data comes from the outpatient Quality Reporting (OQR) program, as submitted by the facilities. This measure is updated quarterly.
Average time spent in ED after the doctor decided to admit them before being taken to their inpatient room	Reflects the average amount of time it takes for a hospital to transfer an admitted patient from the ED to their inpatient room. It is important that admitted patients be taken to their inpatient room so that they can receive the appropriate level of care.
	This measure is collected by Medicare and is reported on Medicare's Hospital Compare website. The data comes from the Outpatient Quality Reporting (OQR) program, as submitted by the facilities. This measure is updated quarterly.

Infections Measures

Catheter-Associated Urinary Tract Infections (CAUTI)	Reflects whether the number of CAUTI infections in a facility's Intensive Care Unit (ICU) and select wards was worse than, the same as or better than the national average, based on a standardized infection ratio (SIR). This data set only includes infections identified by a lab. These infections can make people very sick and even cause death. These infections can be avoided though the use of good hygiene

practices and through the reduction of unnecessary catheterization. Hospitals should have policies and practices in place to help avoid this type of infection.

The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN) tool. This information is reported on Medicare's Hospital Compare website. This measure is updated quarterly.

Central Line-Associated Bloodstream Infections (CLABSI)	Reflects whether the number of CLABSI infections in a facility's Intensive Care Unit (ICU) and select wards was worse than, the same as or better than the national average, based on a standardized infection ratio (SIR). This data set only includes infections identified by a lab. These infections can make people very sick and even cause death. These infections can be avoided through good hygiene practices and through the proper care of patients with central lines or other medical tubing. Hospitals should have policies and practices in place to help avoid this type of infection. The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN) tool; hospitals are required to submit data for this measure. This information is reported on Medicare's Hospital Compare website. This measure is updated quarterly.
Clostridium Difficile Infections	Reflects whether the number of C. Difficile infections at a facility was worse than, the same as or better than the national average, based on a standardized infection ratio (SIR). This data set only includes infections identified by a lab and patients may or may not display clinical symptoms. These infections can make people very sick and even cause death. They can be avoided by using good hygiene practices and good antimicrobial stewardship. Hospitals should have policies and practices in place to help avoid this type of infection. The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN) tool. This information is reported on Medicare's Hospital Compare website. This measure is updated quarterly.
Healthcare Workers Who Received Flu Vaccination	This measure looks at the percentage of healthcare workers that receive an influenza vaccination during the influenza season (October-March). Vaccinating healthcare workers against the flu helps patients to avoid getting the flu. This measure comes from data collected by the Department of Health's Immunization Program and is published by the Department of Health's Healthcare Quality Reporting Program. This information is updated annually and is submitted by the facility.
Central Line-Associated MRSA Bloodstream Infections	Reflects whether the number of MRSA (Methicillin-resistant Staphylococcus aureus) Bloodstream Infections at a facility was worse than, the same as or better than the national average, based on a standardized infection ratio (SIR). This data set only includes infections identified by a laboratory test. MRSA Bloodstream Infections are extremely hard to treat because they are resistant to many antibiotics. These infections can make people very sick and

even cause death. These infections can be avoided through good hygiene practices and by taking appropriate care of patients receiving intravenous medications or fluids.

The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN) tool. This information is reported on Medicare's Hospital Compare website. This measure is updated quarterly.

Satisfaction Measures

Patients who Reported The Hospital Was Clean	Reflects the percentage of surveyed patients who said that their hospital room and bathroom were "Always" clean. Cleanliness and hygiene are important for patient care and safety. Poor hygiene and cleanliness can lead to serious infections and complications.
	This measure is collected through the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey conducted by hospitals, and is reported on Medicare's Hospital Compare website. Although this measure is reported on the Medicare Hospital Compare website, this survey is not restricted to Medicare beneficiaries. This measure is updated quarterly.
Patients who Gave Their Hospital a 9 or 10	Reflects the percentage of surveyed patients who would rate the hospital where they received care as a 9 or a 10 on a scale of 0 (lowest) to 10 (highest). This measure is meant to encompass a patient's overall perception of their treatment and care while in the hospital.
	This measure is collected through the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey conducted by hospitals, and is reported on Medicare's Hospital Compare website. Although this measure is reported on the Medicare Hospital Compare website, this survey is not restricted to Medicare beneficiaries. This measure is updated quarterly.
Patients who Would Recommend the Hospital	Reflects the percentage of surveyed patients who reported that they would recommend the hospital where they received care to others. Many people find peer recommendations helpful when deciding where they wish to receive care.
	This measure is collected through the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey conducted by hospitals, and is reported on Medicare's Hospital Compare website. Although this measure is reported on the Medicare Hospital Compare website, this survey is not restricted to Medicare beneficiaries. This measure is updated quarterly.

Missing Data

Not all data is available for all facilities. This could be due to the data collection process or because the facility did not submit data for a particular report. It could also be because the facility had an insufficient number of responses for a particular category. For more information about missing information in a specific category see the report or the additional information section.

Data Collection Period

This report is updated to reflect the most current information for each column. Due to varying data collection methods (see individual measures above for more information) the data in this report were not all collected during the same time period. Current data collection periods are as follows:

Measure	Data Collection Period for Current Report
Readmission	7/1/15 – 6/30/16
Surgical complications	7/1/14 – 9/30/15
ED Measures	7/1/16 – 6/30/17
Satisfaction Measures	7/1/16 – 6/30/17
CLABSI	7/1/16 – 6/30/17
C. diff	7/1/16 – 6/30/17
CAUTI	7/1/16 – 6/30/17
MRSA CLABSI	7/1/16 – 6/30/17
Vaccination	2016 – 2017 flu season

Additional Information

Additional information is available about the data categories in this report. For more information, please visit the following links:

Medicare Hospital Compare Measures
www.medicare.gov/hospitalcompare/search.html

MRSA Bloodstream Infections
http://www.health.ri.gov/publications/qualityreports/hospitals/MRSABloodstreamInfections.pdf