

Leapfrog Hospital Safety Grades

Leapfrog releases its hospital safety grades twice annually in the spring and fall

Overview

Leapfrog assigns more than 2,600 general acute-care hospitals a letter grade from A through F in the spring, and then updates these ratings in the fall when hospitals report newer data.

Fall 2020 Distribution

Grade	Safety Grade Criteria Cut-Point	Count of Hospitals	Percentage of Hospitals
A	≥ 3.159	895	34%
B	≥ 2.972	631	24%
C	≥ 2.506	910	35%
D	≥ 2.040	170	7%
F	< 2.040	16	$< 1\%$

Eligibility

Leapfrog considers all acute-care hospitals with sufficient, publicly-available data. They are unable to provide grades for:

- Critical access hospitals;
- Long-term care and rehabilitation facilities;
- Mental health facilities;
- Federal hospitals;
- Specialty hospitals and free-standing pediatric hospitals;
- Hospitals in U.S. territories; and
- Hospitals that are missing data for more than six process/structural measures or more than five outcome measures.

Data Collection

Leapfrog uses 27 national performance measures to produce their composite safety grade. The data is collected from Leapfrog's Hospital Survey as well as data from CMS. When a hospital doesn't have available data on a particular measure, Leapfrog uses secondary data from the **American Hospital Association's** Annual Survey as well as their Health Care IT (HIT) supplement. For Maryland hospitals, they use data from the **Maryland Hospital Commission**.

Leapfrog's Annual Hospital Survey

Leapfrog's survey is free for hospitals to complete and is open from April 1 to December 31. It includes 10 sections encompassing medication safety, safety practice adherence, response to serious errors, staffing in the ICU/ surgical units, maternity care, and outpatient care.

In January of each year, Leapfrog publishes a timeline of when it will extract data from their survey results as well as pull it from CMS. They also provide dates for a 3-week courtesy review, during which hospitals can review the data that's been collected for accuracy and raise any concerns with their help desk.

Scoring methodology

Safety grades are based on 27 evidence-based measures which are divided into two groups: process/structural measures and outcome measures, each of which account for 50% of the total score



Source: The Leapfrog Group. "[Scoring Methodology](#)." Web. 14 December 2020. The Leapfrog Group. "[Explanation of Hospital Safety Grades](#)." Web. 14 December 2020. advisory.com

Leapfrog Hospital Safety Grades

Leapfrog releases its hospital safety grades twice annually in the spring and fall

Measures

Leapfrog assesses hospitals' data on every included measure and calculates a z-score for each based on the measure's mean and standard deviation for all hospitals. Each measure's z-score is then multiplied by the weight assigned to that measure and totaled (plus 3.0) to find each hospital's overall Safety Grade Score. This numerical score is then translated to a letter grade using the cut-offs outlined on the previous page.

Measure Group	Measures Included	Measure Weight	Overall Weight
Process and Structure (12)	Computerized Physician Order Entry (CPOE)*	6.0%	50%
	ICU Physician Staffing (IPS)	7.3%	
	Safe Practice 1: Leadership Structures and Systems	3.2%	
	Safe Practice 2: Culture Measurement, Feedback & Intervention	3.3%	
	Bar Code Medication Administration	6.0%	
	Safe Practice 9: Nursing Workforce	4.3%	
	Hand Hygiene	4.2%	
	H-COMP-1: Nurse Communication	3.1%	
	H-COMP-2: Doctor Communication	3.1%	
	H-COMP-3: Staff Responsiveness	3.2%	
	H-COMP-5: Communication about Medicines	3.2%	
	H-COMP-6: Discharge Information	3.1%	
Outcomes (15)	Foreign Object Retained	4.3%	50%
	Air Embolism	2.5%	
	Falls and Trauma	4.6%	
	CLABSI (Central Line-associated Bloodstream Infection)	4.6%	
	CAUTI (Catheter-Associated UTI)	4.4%	
	SSI: Colon	3.4%	
	MRSA	4.5%	
	C. Diff	4.1%	
	PSI 3: Pressure Ulcer Rate	4.1%	
	PSI 4: Death Rate among Surgical Inpatients with Serious Treatable Conditions	2.0%	
	PSI 6: Iatrogenic Pneumothorax Rate	2.1%	
	PSI 11: Postoperative Respiratory Failure Rate	2.2%	
	PSI 12: Perioperative PE/DVT Rate	2.2%	
	PSI 14: Postoperative Wound Dehiscence Rate	2.0%	
	PSI 15: Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	2.9%	

*Scoring methodology changed for fall 2020