Spring 2025 Hospital Safety Grade Town Hall Call

The slides and recording will be posted after the presentation at:
https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information

March 2025

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What is the Leapfrog Hospital Safety Grade?

The Leapfrog Hospital Safety Grade is an A, B, C, D, or F letter grade reflecting how safe hospitals are for patients.

The Leapfrog Hospital Safety Grade launched in June 2012.

The Grade is issued two times per year: Spring and Fall. This spring will be the 27th release.

More information is available at www.HospitalSafetyGrade.org

Who is eligible for a Leapfrog Hospital Safety Grade?

General acute care hospitals with enough publicly reported data

- Hospitals missing measure scores for more than **6** process/structural measures OR more than **5** outcome measures or **PSI 90** do not receive a grade. A measure score for PSI 90 is required.

The Leapfrog Group is not able to calculate a Hospital Safety Grade for certain types of hospitals due to missing data:

- Critical Access Hospitals (CAH)
- Rural Emergency Hospitals (REH)
- PPS-exempt hospitals (i.e., cancer)
- VA Hospitals
- Indian Health Services
- Specialty hospitals

Measures used in the Leapfrog Hospital Safety Grade

Measure Selection Criteria

Measures are publicly-reported from national data sources, which reflect individual hospital performance, including:

- Leapfrog Hospital Survey
- Centers for Medicare and Medicaid Services data sets

Measures are endorsed or in use by a national measurement entity

Measures are linked to patient safety ("freedom from harm")

- Directly quantifying patient safety events
- Assessing processes that lead to better outcomes
- Identified by experts as important to patient safety

Spring 2025 Process and Structural Measures

Measure Name	Primary Data Source	Reporting Period	Secondary Data Source	Reporting Period
Computerized Physician Order Entry (CPOE)	2024 Leapfrog Hospital Survey	2024	Imputation Model Applied	N/A
Bar Code Medication Administration (BCMA)	2024 Leapfrog Hospital Survey	2024	Imputation Model Applied	N/A
ICU Physician Staffing (IPS)	2024 Leapfrog Hospital Survey	2024	Imputation Model Applied	N/A
Safe Practice 1: Culture of Leadership Structures and Systems	2024 Leapfrog Hospital Survey	2024	N/A	N/A
Safe Practice 2: Culture Measurement, Feedback & Intervention	2024 Leapfrog Hospital Survey	2024	N/A	N/A
Total Nursing Care Hours per Patient Day	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023 or 07/01/2023 - 06/30/2024	N/A	N/A
Hand Hygiene	2024 Leapfrog Hospital Survey	2024	Imputation Model Applied	N/A
H-COMP-1: Nurse Communication	CMS	01/01/2023 - 12/31/2023	N/A	N/A
H-COMP-2: Doctor Communication	CMS	01/01/2023 - 12/31/2023	N/A	N/A
H-COMP-3: Staff Responsiveness	CMS	01/01/2023 - 12/31/2023	N/A	N/A
H-COMP-5: Communication about Medicines	CMS	01/01/2023 - 12/31/2023	N/A	N/A
H-COMP-6: Discharge Information	CMS	01/01/2023 - 12/31/2023	N/A	N/A

Spring 2025 Outcome Measures

Measure Name	Primary Data Source	Reporting Period	Secondary Data Source	Reporting Period
Foreign Object Retained	CMS	07/01/2021 - 06/30/2023	N/A	N/A
Air Embolism	CMS	07/01/2021 - 06/30/2023	N/A	N/A
Falls and Trauma	CMS	07/01/2021 - 06/30/2023	N/A	N/A
CLABSI	2024 Leapfrog Hospital Survey	07/01/2023 - 06/30/2024	CMS	01/01/2023 - 12/31/2023
CAUTI	2024 Leapfrog Hospital Survey	07/01/2023 - 06/30/2024	CMS	01/01/2023 - 12/31/2023
SSI: Colon	2024 Leapfrog Hospital Survey	07/01/2023 - 06/30/2024	CMS	01/01/2023 - 12/31/2023
MRSA	2024 Leapfrog Hospital Survey	07/01/2023 - 06/30/2024	CMS	01/01/2023 - 12/31/2023
C. Diff.	2024 Leapfrog Hospital Survey	07/01/2023 - 06/30/2024	CMS	01/01/2023 - 12/31/2023
PSI 4: Death rate among surgical inpatients with serious treatable conditions	CMS	07/01/2021 - 06/30/2023	N/A	N/A
CMS Medicare PSI 90: Patient safety and adverse events composite*	CMS	07/01/2021 - 06/30/2023	N/A	N/A

*Note: CMS calculates PSI 90 using the ten (10) component PSIs listed above. While scores for each of the 10 component PSIs are NOT used to calculate Hospital Safety Grades, they will be publicly reported on the Hospital Safety Grade website.

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Spring 2025 Reporting Periods

2024 Leapfrog Hospital Results

- CPOE, BCMA, IPS, the 2 NQF Safe Practices, and Hand Hygiene will be displayed as "2024." If you did not submit updates after August 31, 2024, these measures will not change from fall 2024.

- Total Nursing Care Hours per Patient Day has two reporting periods depending on when your Survey was submitted (01/01/2023 - 12/31/2023 prior to September 1 or 07/01/2023 - 06/30/2024 on or after September 1)

- CLABSI, CAUTI, MRSA, C. Diff, and SSI Colon will be displayed as 07/01/2023 - 06/30/2024, which has been updated from fall 2024 (CY2023).

CMS Data

- The CMS Care Compare data was not refreshed in January 2025 (it was refreshed on February 19, 2025).

- As a result, the CMS HAI and HCAHPS data used in the spring 2025 Safety Grade have the reporting period of 01/01/2023-12/31/2023. This data, downloaded on January 31, 2025, was released by CMS in the last quarterly update in October 2024.

- 3 HAC measures: 07/01/2021 - 06/30/2023 (same data used in fall 2024 Safety Grade)

- PSI measures: 07/01/2021 - 06/30/2023 (released by CMS in October 2024)

Imputation Model

Updated in Fall 2024

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Overview of Imputation Model
used for CPOE, BCMA, Hand Hygiene, and IPS

STEP 1: Use A Hospital's Most Recent Score on the Measure

- From past two rounds of Safety Grade (i.e., fall 2024 or spring 2024)

- Due to changes on the measure, Step 1 imputation will be paused until fall 2025 for BCMA

STEP 2: Use Imputation Point Assignment

- Point value is equivalent to receiving "Limited Achievement" on the Leapfrog Hospital Survey

- Note about IPS: Only hospitals that operate an adult or pediatric medical and/or surgical ICU or neuro ICU are eligible for Step 2 Imputation of the IPS measure.

Step 1: Impute the hospital's most recent score on the measure
Applies to CPOE, HH and IPS (not BCMA)

If the hospital had a score assigned by Leapfrog in the previous two rounds of grades, the hospital is assigned the most recent score on that measure in the current Hospital Safety Grade.

Example of Step 1 (from spring 2025):

A hospital did not submit a 2024 Leapfrog Hospital Survey by the Data Snapshot Date. The hospital's most recent measure scores for the three measures come from the spring 2024 Hospital Safety Grade, where the hospital's scores for CPOE, HH, and IPS were assigned by Leapfrog based on their 2023 Leapfrog Survey. In fall 2023, they were not scored due to missing too much data. In fall 2024, the hospital's CPOE score was 70, Hand Hygiene was 40, and IPS score was 100. For the spring 2025 Hospital Safety Grade, the score of 70 is used for CPOE, 40 is used for Hand Hygiene and 100 is used for IPS.

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Step 2: Use Imputation Point Assignment
Applies to CPOE, BCMA, HH, and IPS

If the hospital does not have historical data from the last two rounds (i.e., fall 2024, spring 2024) of the Safety Grade, the hospital is assigned a point value that is equivalent to receiving "Limited Achievement" for this measure on the Leapfrog Hospital Survey.

Measure	Leapfrog Hospital Survey Performance Category	Corresponding Safety Grade Measure Score
CPOE	Limited Achievement	15
BCMA	Limited Achievement	25
IPS	Limited Achievement	5
Hand Hygiene	Limited Achievement	15

Example of Step 2 (from spring 2025):

The hospital is missing scores for CPOE, BCMA, HH, and IPS because they have never submitted a Leapfrog Hospital Survey. In fact, due to missing HCAHPS measures in past rounds, they have never been eligible for a Hospital Safety Grade until this year. In spring 2025, the hospital will be assigned the scores above for the CPOE, BCMA, IPS and HH measures and will receive a Hospital Safety Grade for the first time.

Step 2: Note about IPS

Only hospitals that operate an adult or pediatric medical and/or surgical ICU or neuro ICU are eligible for Step 2 Imputation of the IPS measure.

- A hospital's ICU designation (i.e., operating a medical ICU, surgical ICU, or pediatric ICU) is determined from the number of medical, surgical and/or pediatric ICU beds reported in Worksheet S-3 Part 1 of the hospital's most recent CMS Cost Report.

- If your hospital does not operate an ICU but shares a CMS Certification Number with a hospital that does, please contact the Help Desk immediately if an IPS score was imputed.

Scoring Overview

Z-Score Methodology

- Standardizes data from individual measures with different scales to allow for comparisons (e.g., a linear mean score of 90 on H-COMP-1: Nurse Communication and a CLABSI SIR of 0.870).

- Counts how many standard deviations a hospital's score on the measure is away from the mean

- Mean is set to 0
    - Negative z-score: worse than the mean
    - Zero z-score: performance is at the mean
    - Positive z-score: better than the mean

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Calculating Z-Scores

Z-Scores can indicate to a hospital whether their measure score is above, below, or equal to the average hospital.

To calculate each measure's Z-Score:

- Process/structural measures:
  - (Hospital's Measure Score – Mean)/Standard Deviation

- Outcome Measures:
  - (Mean – Hospital Measure Score)/Standard Deviation

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Calculating Standard Measure Weights

Each measure included in the Safety Grade is assigned a standard measure weight using four criteria:

- Strength of evidence (rating of 1 or 2)
- Opportunity (rating of 1-3), based on coefficient of variation
- Impact (rating of 1, 2, 3) based on:
  - number of patients possibly affected by the event (0, 1, 2, 3)
  - severity of harm to individual patients (1, 2, 3)
- Number of measures (number of measures equals 1 for all measures except for PSI 90 where the number of measures equals 10)

Measure Weight Score = **[Evidence + (Opportunity x Impact x Number of Measures)]**

Dealing with Missing Data

If a hospital is missing a measure score for any measure, the standard weight of that measure is redistributed to the other measures in the same measure domain. The new weight for each measure within the domain is calculated by re-apportioning the standard weight assigned to the measure with the missing score to other measures within the same domain.

For example, if a hospital is missing a measure score for ICU Physician Staffing because the hospital does not operate an adult or pediatric medical and/or surgical ICU, the standard weight will be re-apportioned to the remaining 11 measures within the process/structural measure domain.

To calculate the new weight of each of the remaining 11 measures in the process/structural measure domain, hospitals can use the formula below or use the Leapfrog Hospital Safety Grade Calculator ©, which can be found on the Safety Grade Review Website. Note that each domain contributes to 50% of the overall letter grade.

[Standard measure weight / (sum of standard weights for the remaining 11 measures in the process/structural measure domain)]*50% = updated measure weight

Calculating the Overall Numerical Score

1. Multiply the z-score for each measure by the measure weight

2. Sum the weighted z-scores from step 1

3. If a measure score is missing, the weight for that measure is re-apportioned to other measures within the same domain

4. Add 3.0 to the final numerical (this step helps to avoid possible confusion with interpreting negative scores)

3.0 + CPOE z-score X CPOE weight + IPS z-score X IPS weight +

CLABSI z-score X CLABSI weight . . . etc.

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Hospital Safety Grade Calculator

Measure Domain	Measure	Enter Your Hospital's Score Here (Do NOT Leave Blanks)	Mean	Standard Deviation	Z-Score[1] Original Z-Score	Modified Z-Score	Inputs to Weighting Individual Measures[2] Evidence	Opportunity	Impact	Number of Component Measures	Weight[3] Standard Weight	Final Weight (N/A redistributes)	Weighted Measure Score (Modified Z-Score x Final Weight)
Process/Structural Measures	Computerized Physician Order Entry (CPOE)		85.73	22.55	-3.8022	-3.8022	2	1.26	3	1	5.9%	5.9%	-0.2226
	Bar Code Medication Administration (BCMA)		83.21	21.58	-3.8553	-3.8553	2	1.26	3	1	5.8%	5.8%	-0.2253
	ICU Physician Staffing (IPS)		62.75	43.31	-1.4488	-1.4488	2	1.69	3	1	7.2%	7.2%	-0.1036
	Safe Practice 1: Culture of Leadership Structures and Systems		116.84	7.46	-15.6601	-5.0000	1	1.06	2	1	3.2%	3.2%	-0.1582
	Safe Practice 2: Culture Measurement, Feedback, & Intervention		116.54	12.74	-9.1489	-5.0000	1	1.11	2	1	3.3%	3.3%	-0.1628
	Safe Practice 9: Nursing Workforce		98.18	7.06	-13.9022	-5.0000	1	1.07	3	1	4.3%	4.3%	-0.2132
	Hand Hygiene		74.37	32.80	-2.2677	-2.2677	2	1.44	2	2	4.9%	4.9%	-0.1120
	H-COMP-1: Nurse Communication		91.11	2.22	-40.9906	-5.0000	1	1.02	2	2	3.1%	3.1%	-0.1542
	H-COMP-2: Doctor Communication		91.00	2.11	-43.0334	-5.0000	1	1.02	2	2	3.1%	3.1%	-0.1541
	H-COMP-3: Staff Responsiveness		84.38	3.59	-23.4927	-5.0000	1	1.04	2	2	3.1%	3.1%	-0.1560
	H-COMP-5: Communication about Medicines		77.67	3.58	-21.6805	-5.0000	1	1.05	2	2	3.1%	3.1%	-0.1564
	H-COMP-6: Discharge Information		86.52	3.30	-26.1921	-5.0000	1	1.04	2	2	3.1%	3.1%	-0.1556
Outcome Measures	Foreign Object Retained		0.02	0.06	0.2977	0.2977	1	3.00	2	1	4.3%	4.3%	0.0128
	Air Embolism		0.0004	0.004	0.1071	0.1071	1	3.00	1	1	2.5%	2.5%	0.0026
	Falls and Trauma		0.42	0.38	1.1045	1.1045	2	1.91	3	1	4.7%	4.7%	0.0523
	CLABSI		0.81	0.67	1.2035	1.2035	2	1.83	3	1	4.6%	4.6%	0.0553
	CAUTI		0.75	0.57	1.3160	1.3160	2	1.76	3	1	4.5%	4.5%	0.0587
	SSI: Colon		0.80	0.65	1.2292	1.2292	2	1.81	2	1	3.4%	3.4%	0.0424
	MRSA		0.84	0.65	1.2856	1.2856	2	1.78	3	1	4.5%	4.5%	0.0578
	C. Diff.		0.54	0.36	1.4799	1.4799	2	1.68	3	1	4.3%	4.3%	0.0638
	PSI 4: Death rate among surgical inpatients with serious treatable conditions		159.71	18.33	8.7137	8.7137	1	1.11	2	1	2.0%	2.0%	0.1725
	CMS Medicare PSI 90: Patient safety and adverse events composite		1.00	0.19	5.1983	5.1983	1	1.19	2	10	15.2%	15.2%	0.7919

Process Measure Domain Score:	Will populate after entering all data.
Outcome Measure Domain Score:	Will populate after entering all data.
Process/Outcome Domains - Combined Score:	Will populate after entering all data.
Normalized Numerical Score:	Will populate after entering all data.
Hospital Safety Grade (Letter Grade):	Will not be calculated until after the Safety Grade Review Period. Hospitals will be notified via email when the letter grades are posted.

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Important Dates and Reviewing Data

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Data Snapshot Dates

The data snapshot date is the date that Leapfrog will download the data published by CMS or submitted to Leapfrog via the Hospital Survey to calculate Leapfrog Hospital Safety Grades. All data, including Leapfrog Hospital Survey Results, must be finalized by these dates:

- Spring Data Snapshot Date: January 31
- Fall Data Snapshot Date: August 31

Updates to any of the data published after these dates are not used to calculate the Safety Grade.

The Leapfrog Hospital Safety Grade relies on publicly available data that hospitals have had the opportunity to review for accuracy. Therefore, Leapfrog **does not allow hospitals to make updates to their data following the Data Snapshot Date.**

Safety Grade Timeline

Following each Data Snapshot Date:

- **Courtesy Review Period**: As a courtesy to hospitals, Leapfrog will hold a Courtesy Safety Grade Review Period before the public release of each Leapfrog Hospital Safety Grade update. The Review Period is an opportunity for hospitals to review the data for accuracy (i.e., identify recording errors, hospital name and address changes, etc.) on a secure website and review changes to the scoring algorithm.

- **Free Town Hall Call**: Hospitals and other stakeholders are invited to a free Town Hall Call to hear about changes to the measures and scoring methodology, as well as details of the Courtesy Safety Grade Review Period and important deadlines.

- **Letter Grade Embargo Period**: Following the close of the Courtesy Safety Grade Review Period, Leapfrog finalizes the data and establishes letter grade cut-points. The Safety Grade Review [website](#) is refreshed, and hospitals can participate in a Letter Grade Embargo Period in which they can preview their letter grade prior to the public announcement.

- **Public Announcement**: Following the Embargo Period, Safety Grades are published on Leapfrog's public [website](#).

Reviewing Leapfrog Hospital Survey Results

- The Leapfrog Hospital Survey is open from April 1 to November 30 of each year.

- Following the Submission Deadline on June 30, Survey Results are published monthly on a secure 'Hospital Details' [page](#) (starting July 12) and a public [website](#) (starting July 25). Hospitals are urged to review their Survey Results immediately.

- Hospitals that identify any data entry or reporting errors are instructed to log back into the Survey to submit a correction. **Corrections must be submitted prior to the Data Snapshot Date of January 31.**

NHSN Data Downloads

- Leapfrog has four NHSN data download dates per Survey Cycle. We do not download NHSN data outside of these dates.

- 2024 Leapfrog Hospital Survey NHSN Data Download Dates:
  - June 26
  - August 23
  - October 24
  - December 19 *(this data was used in the spring 2025 Safety Grade)*

- Hospitals are required to complete the following to ensure Leapfrog obtains the appropriate SIRs:

  - Review and accept the Data Rights Template annually and ensure that any locations that were active during the reporting period, even if they are currently inactive, are included

  - Regenerate NHSN data and download copies of your CMS IQR reports and NHSN Annual Hospital Survey on the **same dates as Leapfrog** to save to your own records and to compare to the NHSN data Leapfrog uses for scoring.

  - Instructions for generating datasets and downloading these reports from NHSN are available here: https://www.leapfroggroup.org/survey-materials/join-nhsn

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Reviewing CMS Data

CMS administers several hospital-based reporting and payment programs including the Inpatient Quality Reporting Program, HAC Reduction Program, the DRA HAC Program, and Value-based Purchasing Program. Several measures collected and calculated by CMS via its various hospital-based programs are used in the Leapfrog Hospital Safety Grade (HAIs, HCAHPS, HAC, and PSI measures).

CMS provides hospitals with a 30-day confidential preview period **<u>before</u>** publishing performance data at https://data.cms.gov/provider-data.

More information is available at https://qualitynet.org.

Courtesy Review and Letter Grade Embargo Period

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Secure Website for Hospitals to Review their Safety Grade Data

http://www.HospitalSafetyGrade.org/data-review

Usernames and passwords are emailed to Leapfrog Hospital Survey participants and mailed to hospital CEO's. You can also retrieve your username and password via the Help Desk.

Spring 2025 Review Period:
Monday, February 24, 2025, to
Friday, March 14, 2025

Contact Information

*Is the hospital name and address displayed above correct?
- ⦿ Info above is correct
- ◯ Info above is NOT correct

*Is the hospital's CMS Certification Number (CCN) **01-0139** correct?
- ⦿ CCN is correct
- ◯ CCN is NOT correct *(If the CCN is not correct, please contact the Help Desk immediately.)*

CEO First Name	
CEO Last Name	
CEO Email Address	
Contact First Name	
Contact Last Name	
Contact Title	
Contact Email Address	
Contact Phone Number	

Source Data

Safety Grade Review Website for Hospitals

Hospital Source Data

Information About Source Data

The information in the table below represents your hospital's performance on each of the 22 measures used in the Hospital Safety Grade as of January 31, 2025 (the Data Snapshot Date). Please review this information to ensure that Leapfrog recorded the correct measure score from each publicly available data source.

Information that you will need to complete the review process is available in the following documents:
- Review Instructions and Scoring Methodology
- Spring 2025 Hospital Safety Grade Calculator

Hospitals and other stakeholders are invited to a free Town Hall Call on March 5 at 2 PM ET to review the measures and scoring methodology, as well as details of the Courtesy Safety Grade Review Period and important deadlines. The Town Hall Call includes a 40-minute presentation and a 20-minute Q&A session. Register here.

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Source Data

*Trim value: The measure score has been trimmed to the 99th percentile. Refer to A Note About Extreme Values in the Review Instructions and Scoring Methodology.

**Imputed score: The measure score has been imputed using historical data or by assigning a score to reflect the lack of information available. Refer to Using Secondary Data Sources in the Review Instructions and Scoring Methodology.

Name of the Measure	Type of Measure	Data Source/Links	Reporting Period	Measure Score
Computerized Physician Order Entry (CPOE)	Structure/Process	Assigned Score Due to Missing	Not Applicable	15**
Bar Code Medication Administration (BCMA)	Structure/Process	Assigned Score Due to Missing	Not Applicable	25**
ICU Physician Staffing (IPS)	Structure/Process	CMS Cost Report	Not Applicable	5**

PSI 90 Components – NOT used in scoring

PSI 90 Components

CMS calculates PSI 90 using the ten (10) component PSIs that are listed in the table below. While the scores for each of the component PSIs will NOT be used to calculate the Hospital Safety Grades, they will be publicly reported on the Hospital Safety Grade website. To verify your hospital's PSI 90 Component scores, use the text links in the Data Source/Links column.

Component PSI	Data Source/Links	Reporting Period	Component Score (not used in numerical score)
PSI 3: Pressure ulcer rate	CMS	07/01/2021 - 06/30/2023	0.73
PSI 6: Iatrogenic pneumothorax rate	CMS	07/01/2021 - 06/30/2023	0.22
PSI 8: In-hospital fall with hip fracture rate	CMS	07/01/2021 - 06/30/2023	0.37
PSI 9: Postoperative hemorrhage or hematoma rate	CMS	07/01/2021 - 06/30/2023	2.66
PSI 10: Postoperative acute kidney	CMS	07/01/2021	1.60

What if the Measure Score Doesn't Match the Public Report?

Hospitals must **contact the Help Desk immediately** if they suspect a measure score is incorrect.

However, they should double check the following information before contacting the [Help Desk](#):

- **Data source** - the data source listed on the Safety Grade Review Website is what you are referring to when verifying your measure score. You should be using the direct links provided in your Source Data table. For example, if Leapfrog Hospital Survey is listed as the data source for the HAI measures, and you are referring to the CMS HAI data when verifying your measure score, it will not match because that data was not used.

- **Measure** - the measure listed on the Safety Grade Review Website is what you are referring to when verifying your measure score.

- **Reporting period** - the reporting period listed on the Safety Grade Review Website is what you are referring to when verifying your measure score.

When you contact the Help Desk about a potential discrepancy, you must include a copy of the public report or a screenshot that shows a different score for the measure. Please be sure the data source, measure name, and reporting period are visible in the screen shot. If we find a recording error, we will update the measure score and numerical score before assigning a Letter Grade. You will see an updated numerical score during the Letter Grade Embargo Period.

Preview Preliminary Numerical Score

Remember that the numerical scores posted during the Safety Grade Review Period are **preliminary** as changes do occur during the Safety Grade Review Period.

Final numerical scores will be posted, along with the letter grade, at least two weeks prior to the public announcement.

Hospitals will be alerted via an email sent to the addresses provided in the Contact and Reviewer Information fields.

My Score	My Letter Grade
2.9636	TBD

More Information

Hospital Safety Grade Methodology (1 PDF file)

Hospital Safety Grade Calculator (1 Excel file)

Changes in Measure Weights (1 PDF file)

Hospital Safety Grade Calculator

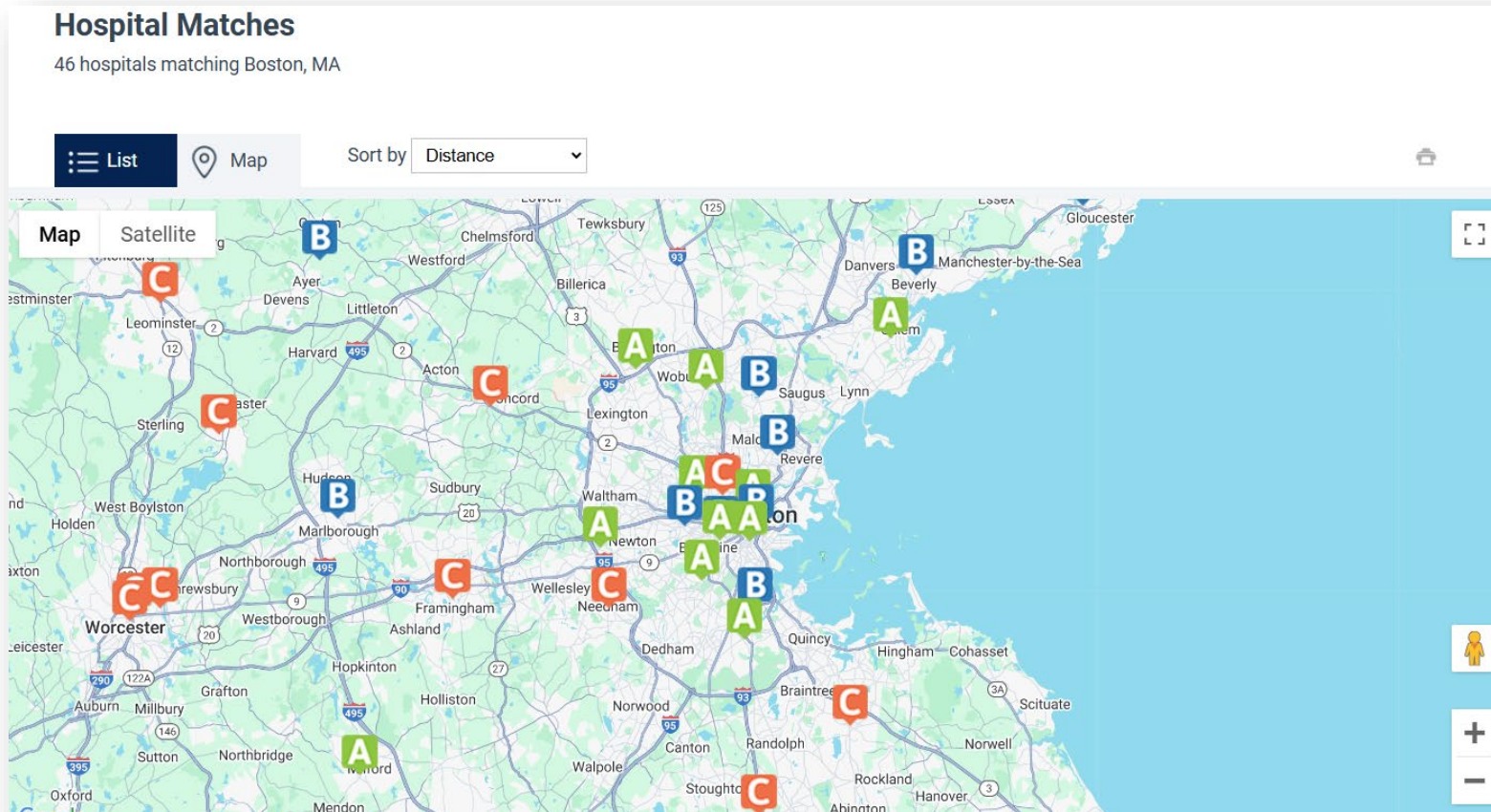| Measure Domain	Measure	Enter Your Hospital's Score Here (Do NOT Leave Blanks)	Mean	Standard Deviation	Z-Score[1]		Inputs to Weighting Individual Measures[2]				Weight[3]		Weighted Measure Score (Modified Z-Score x Final Weight)
					Original Z-Score	Modified Z-Score	Evidence	Opportunity	Impact	Number of Component Measures	Standard Weight	Final Weight (N/A redistributes)	
Process/Structural Measures	Computerized Physician Order Entry (CPOE)		85.73	22.55	-3.8022	-3.8022	2	1.26	3	1	5.9%	5.9%	-0.2226
	Bar Code Medication Administration (BCMA)		83.21	21.58	-3.8553	-3.8553	2	1.26	3	1	5.8%	5.8%	-0.2253
	ICU Physician Staffing (IPS)		62.75	43.31	-1.4488	-1.4488	2	1.69	3	1	7.2%	7.2%	-0.1036
	Safe Practice 1: Culture of Leadership Structures and Systems		116.84	7.46	-15.6601	-5.0000	1	1.06	2	1	3.2%	3.2%	-0.1582
	Safe Practice 2: Culture Measurement, Feedback, & Intervention		116.54	12.74	-9.1489	-5.0000	1	1.11	2	1	3.3%	3.3%	-0.1628
	Safe Practice 9: Nursing Workforce		98.18	7.06	-13.9022	-5.0000	1	1.07	3	1	4.3%	4.3%	-0.2132
	Hand Hygiene		74.37	32.80	-2.2677	-2.2677	2	1.44	2	1	4.9%	4.9%	-0.1120
	H-COMP-1: Nurse Communication		91.11	2.22	-40.9906	-5.0000	1	1.02	2	1	3.1%	3.1%	-0.1542
	H-COMP-2: Doctor Communication		91.00	2.11	-43.0334	-5.0000	1	1.02	2	1	3.1%	3.1%	-0.1541
	H-COMP-3: Staff Responsiveness		84.38	3.59	-23.4927	-5.0000	1	1.04	2	1	3.1%	3.1%	-0.1560
	H-COMP-5: Communication about Medicines		77.67	3.58	-21.6805	-5.0000	1	1.05	2	1	3.1%	3.1%	-0.1564
	H-COMP-6: Discharge Information		86.52	3.30	-26.1921	-5.0000	1	1.04	2	1	3.1%	3.1%	-0.1556
Outcome Measures	Foreign Object Retained		0.02	0.06	0.2977	0.2977	1	3.00	2	1	4.3%	4.3%	0.0128
	Air Embolism		0.0004	0.004	0.1071	0.1071	1	3.00	1	1	2.5%	2.5%	0.0026
	Falls and Trauma		0.42	0.38	1.1045	1.1045	2	1.91	3	1	4.7%	4.7%	0.0523
	CLABSI		0.81	0.67	1.2035	1.2035	2	1.83	3	1	4.6%	4.6%	0.0553
	CAUTI		0.75	0.57	1.3160	1.3160	2	1.76	3	1	4.5%	4.5%	0.0587
	SSI: Colon		0.80	0.65	1.2292	1.2292	2	1.81	2	1	3.4%	3.4%	0.0424
	MRSA		0.84	0.65	1.2856	1.2856	2	1.78	3	1	4.5%	4.5%	0.0578
	C. Diff.		0.54	0.36	1.4799	1.4799	2	1.68	3	1	4.3%	4.3%	0.0638
	PSI 4: Death rate among surgical inpatients with serious treatable conditions		159.71	18.33	8.7137	8.7137	1	1.11	2	1	2.0%	2.0%	0.1725
	CMS Medicare PSI 90: Patient safety and adverse events composite		1.00	0.19	5.1983	5.1983	1	1.19	2	10	15.2%	15.2%	0.7919
Process Measure Domain Score:		Will populate after entering all data.											
Outcome Measure Domain Score:		Will populate after entering all data.											
Process/Outcome Domains - Combined Score:		Will populate after entering all data.											
Normalized Numerical Score:		Will populate after entering all data.											
Hospital Safety Grade (Letter Grade):		Will not be calculated until after the Safety Grade Review Period. Hospitals will be notified via email when the letter grades are posted.											

Public Reporting

Screenshots taken from Safety Grade website reflect fall 2024 Safety Grades

THE LEAPFROG GROUP
Giant Leaps for Patient Safety

HospitalSafetyGrade.org

Search by Hospital Name and Location

Hospital Details

This Hospital's Grade
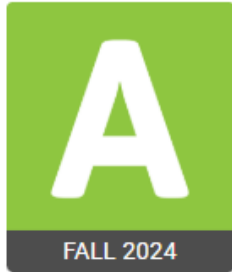
A

FALL 2024

Boston Medical Center

1 Boston Medical Center Place
Boston, MA 02118-2908
Map and Directions

View this hospital's Leapfrog Hospital Survey Results

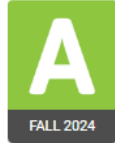▶ Show Recent Past Grades

Detailed table view

NEW Order 2½ years of detailed scoring for this hospital for $2.95

Learn how to use the Leapfrog Hospital Safety Grade

Past Grades

Detailed Table View for Hospitals

This Hospital's Grade

A

FALL 2024

Boston Medical Center
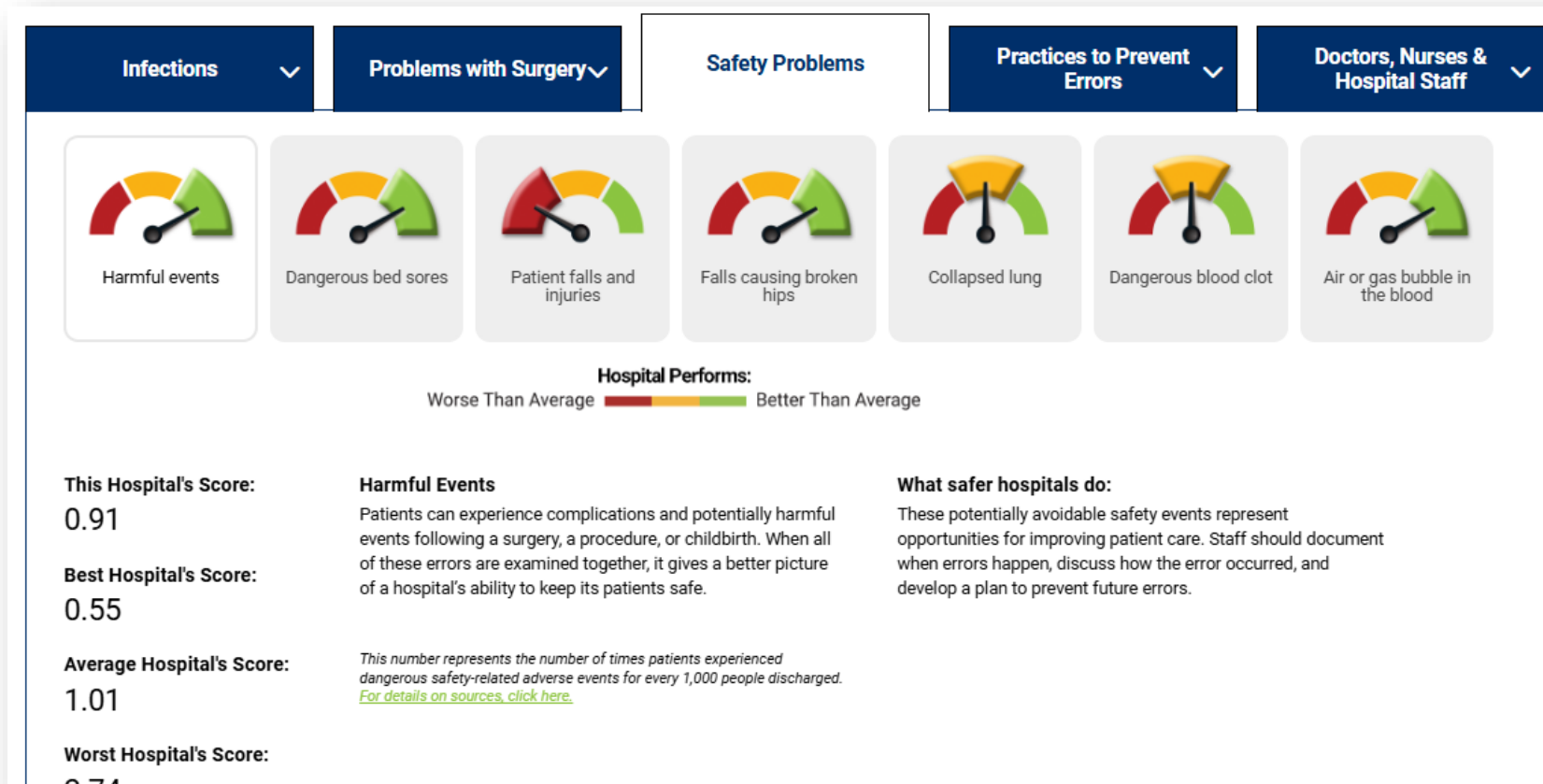
1 Boston Medical Center Place
Boston, MA 02118-2908
Map and Directions

Outcomes measures include errors, accidents, and injuries that this hospital has publicly reported.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Dangerous object left in patient's body What's This?	0.000	0.327	0.014	0.000	CMS	07/01/2021 - 06/30/2023
Air or gas bubble in the blood What's This?	0.000	2.890	0.002	0.000	CMS	07/01/2021 - 06/30/2023
Patient falls and injuries What's This?	0.883	1.942	0.385	0.000	CMS	07/01/2021 - 06/30/2023
Infection in the blood What's This?	0.546	2.534	0.687	0.000	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
Infection in the urinary tract What's This?	0.742	2.550	0.577	0.000	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
Surgical site infection after colon surgery What's This?	0.716	3.534	0.852	0.000	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
MRSA Infection What's This?	1.046	2.696	0.746	0.000	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
C. diff. Infection What's This?	0.601	1.699	0.418	0.000	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
Death from treatable serious complications What's This?	171.82	222.68	168.34	86.68	CMS	07/01/2020 - 6/30/2022
Harmful Events What's This?	0.91	2.74	1.01	0.55	CMS	07/01/2020 - 6/30/2022

Measure Scores

Not Graded

Important Dates for Spring 2025

January 31 - Data Snapshot Date

February 24 - March 14 - Courtesy Hospital Safety Grade Review Period

March- Hospital Safety Grade Town Hall Call

April – One-week Letter Grade Embargo Period

May - Letter grades will be published at www.HospitalSafetyGrade.org

For more information about important dates, visit https://www.hospitalsafetygrade.org/for-hospitals/key-dates-and-information

More Information Regarding the Hospital Safety Grade

- Leapfrog Help Desk: https://leapfroghelpdesk.zendesk.com

- Hospital Safety Grade Website: www.HospitalSafetyGrade.org

New Deep Dive Session Announced

Deep Dive into the Leapfrog Hospital Safety Grade

April 23 from 1:00 – 4:00 PM EST

Have questions about the differences between the Leapfrog Hospital Survey and Hospital Safety Grade? Need help figuring out how Safety Grade scores are assigned to Leapfrog Hospital Survey Results?

This session will provide an in-depth review of the differences between the Survey and Safety Grades and the measures from the Survey that are used to calculate the Safety Grade, including CPOE, BCMA, ICU Physician Staffing, Nursing Workforce, the NQF Safe Practices, and NHSN infection data.

This session will also include a review of the Safety Grade methodology and key dates, and overview of the Hospital Safety Grade calculator.

Register at: https://www.leapfroggroup.org/2025-deep-dive-sessions