

VHHA Quality and Patient Safety Dashboard



Executive Summary

Of **24** measures tracked, Virginia has made progress in **12**, remained neutral in **3**, and declined in **9**. There are **5** measures flagged where Virginia is performing worse than the national average | Last Updated: April 23, 2025

Healthcare-Associated Infections (HAI)

CLABSI HAI 1	CAUTI HAI 2	SSI Colon HAI 3	SSI TAH HAI 4	MRSA HAI 5	SEP 1
0.64 ▼ Virginia Rank 22 of 51 National SIR 0.69	0.50 ▼ Virginia Rank 15 of 51 National SIR 0.56	0.73 ▲ Virginia Rank 08 of 51 National SIR 0.88	0.92 ▲ Virginia Rank 13 of 51 National SIR 1.07	0.68 ▲ Virginia Rank 24 of 51 National SIR 0.74	0.65 ▲ Virginia Rank 13 of 51 National Avg. 0.62

Readmissions

AMI	CABG	COPD	HF	Hip/Knee ▲	PN
0.14 ▼ Virginia Rank 21 of 51 National Avg. 0.14	0.10 ▼ Virginia Rank 12 of 51 National Avg. 0.11	0.18 ▼ Virginia Rank 15 of 51 National Avg. 0.19	0.20 ▼ Virginia Rank 26 of 51 National Avg. 0.20	0.04 ▲ Virginia Rank 24 of 51 National Avg. 0.04 ▲	0.17 ▼ Virginia Rank 36 of 51 National Avg. 0.17

Mortality

AMI	CABG	COPD	HF	PN
0.12 ▲ Virginia Rank 14 of 51 National Avg. 0.13	0.02 ▼ Virginia Rank 10 of 51 National Avg. 0.03	0.09 ▲ Virginia Rank 19 of 51 National Avg. 0.09	0.12 ▲ Virginia Rank 27 of 51 National Avg. 0.12	0.18 ▼ Virginia Rank 28 of 51 National Avg. 0.18

Safety and Patient Experience

Patient Safety PSI90	Employee Safety TCIR ▲	HCAHPS Overall Rating ▲	HCAHPS Nurse Comm. ▲	HCAHPS Doctor Comm. ▲
0.96 ▼ Virginia Rank 07 of 51 National Avg. 1.00	5.80 ▼ Virginia Rank N/A National Avg. 5.20 ▲	0.70 ● Virginia Rank 33 of 51 National Avg. 0.72 ▲	0.79 ● Virginia Rank 34 of 51 National Avg. 0.80 ▲	0.79 ● Virginia Rank 33 of 51 National Avg. 0.80 ▲

External Hospital Ratings

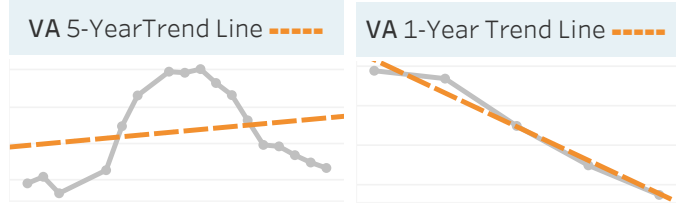
Leapfrog Safety Grades 							CMS Star Rating Count 						
	A	B	C	D	F	Total	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆	Total	
September 2024	39	15	15	0	0	69	2023	2	13	16	30	13	74
April 2025	31	23	14	0	0	68	2024	1	10	22	32	7	72

Data Sources: Aggregate Hospital data from DataGen, Leapfrog Survey, and CMS | Timeframes vary by data source and data release schedules. For additional details, refer to the detailed report | ▼ ▲ indicate the change in rate (not ranking) from the previously recorded value | ▲ indicates a measure is performing unfavorably when compared to the national average | ● indicates no change from the previous recorded value | Data subject to change | Produced by VHHA Analytics

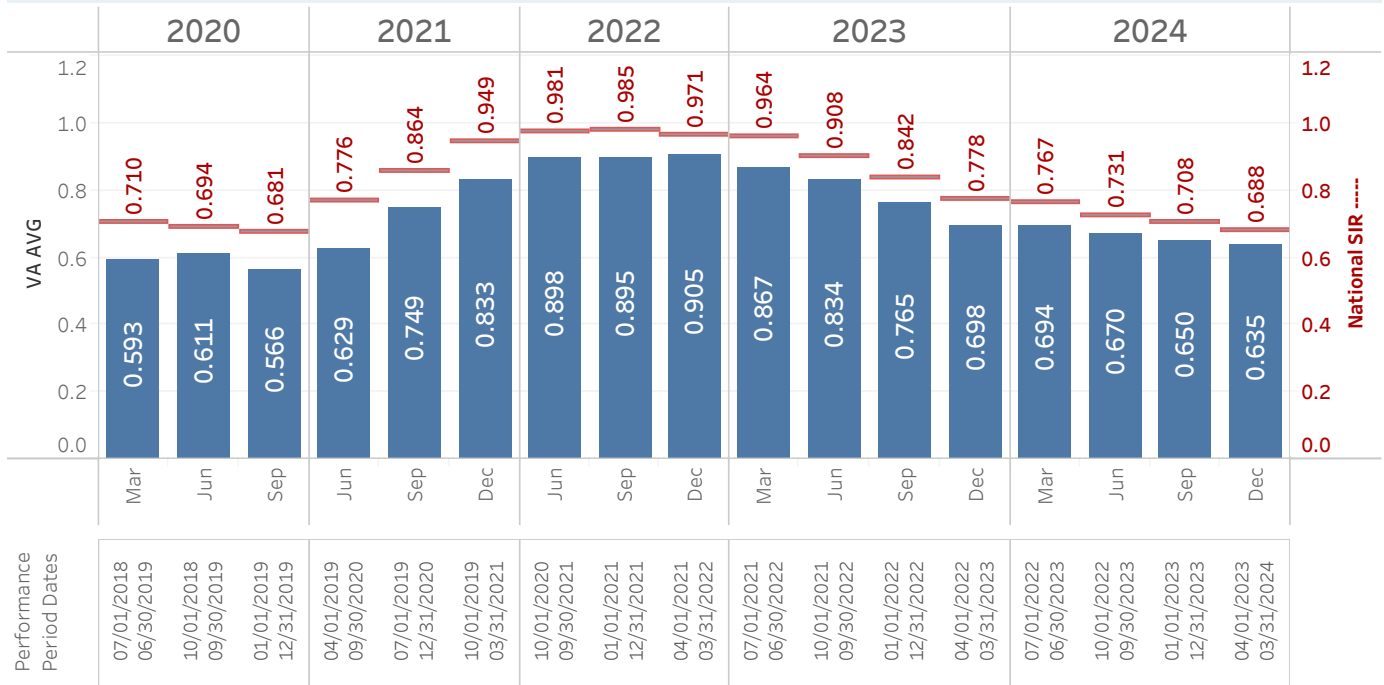
VHHA Quality and Patient Safety Dashboard

Measure Detail

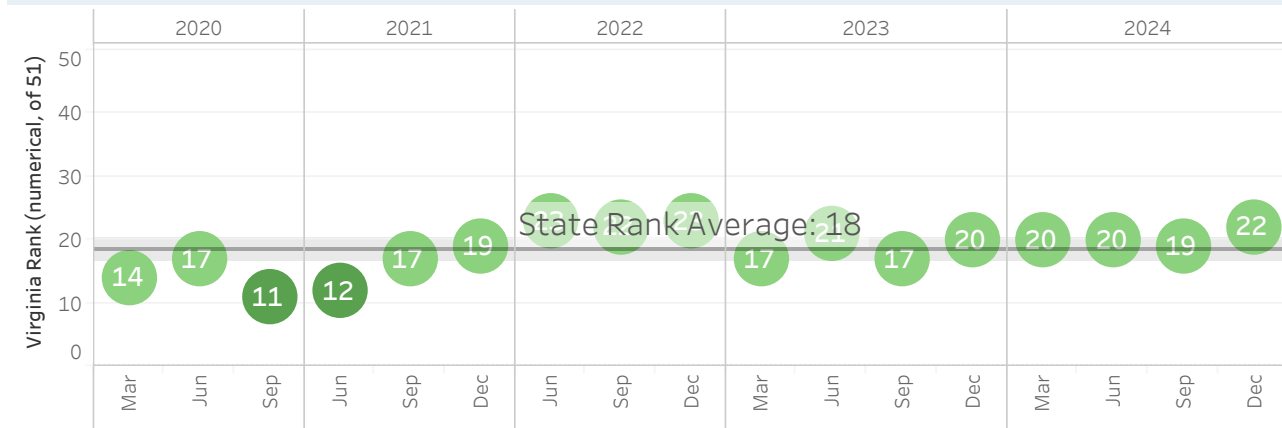
HAI 1: Central Line-Associated Bloodstream Infections CLABSI



CLABSI | HAI 1 - Virginia SIR Trend
Care Compare Release Date



CLABSI | HAI 1 - State Rank Trend

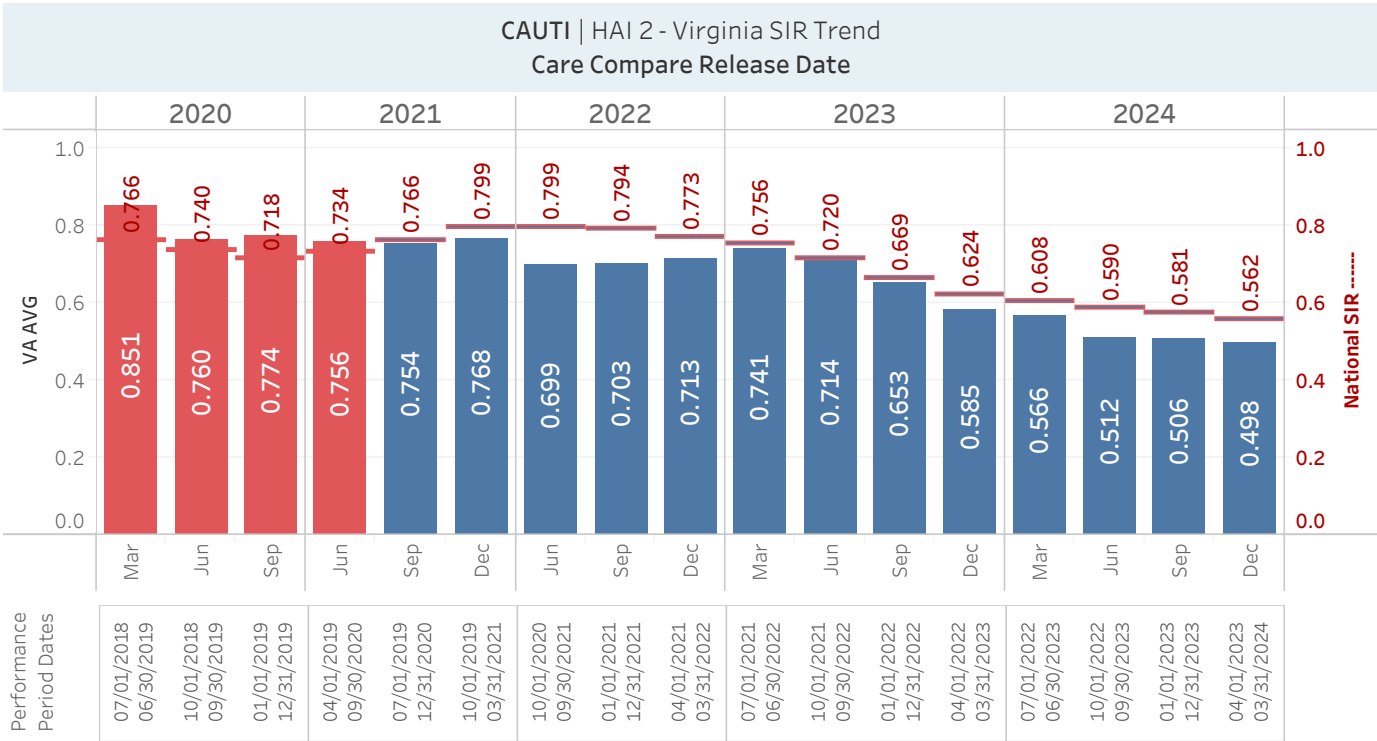
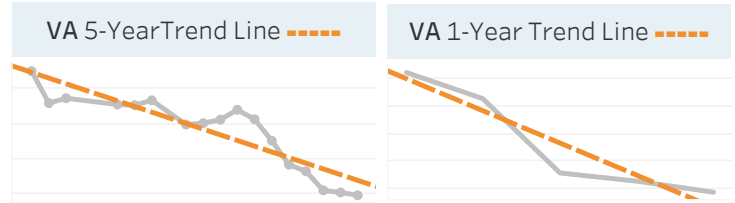


Data Source: DataGen Care Compare Data | Produced by VHHA Analytics

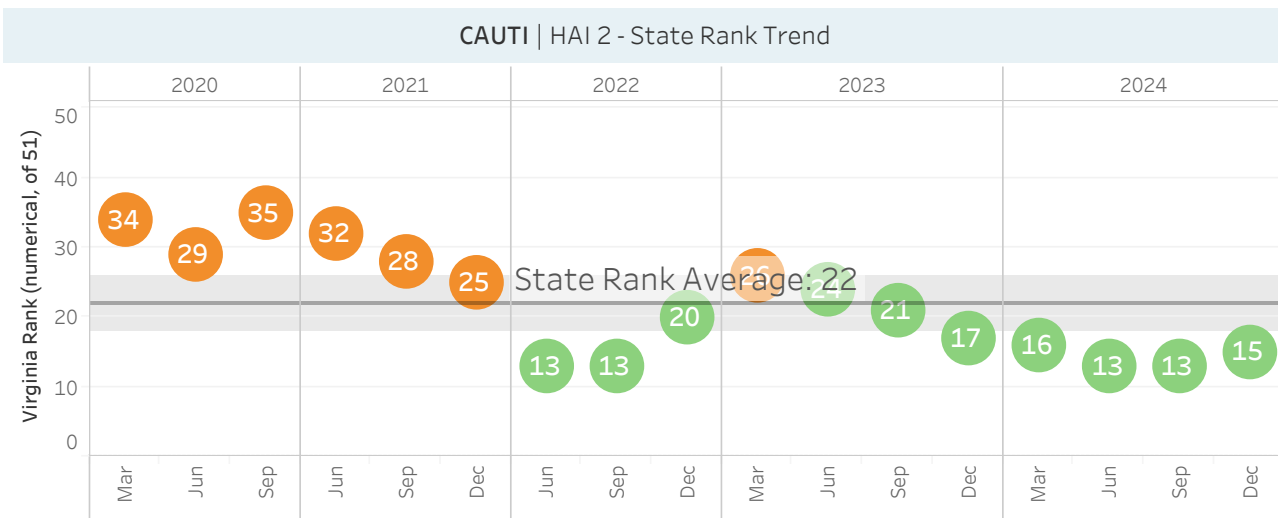
VHHA Quality and Patient Safety Dashboard

Measure Detail

HAI 2: Catheter-associated urinary tract infection CAUTI



Legend: Above National Rate (red square), Below National Rate (blue square)



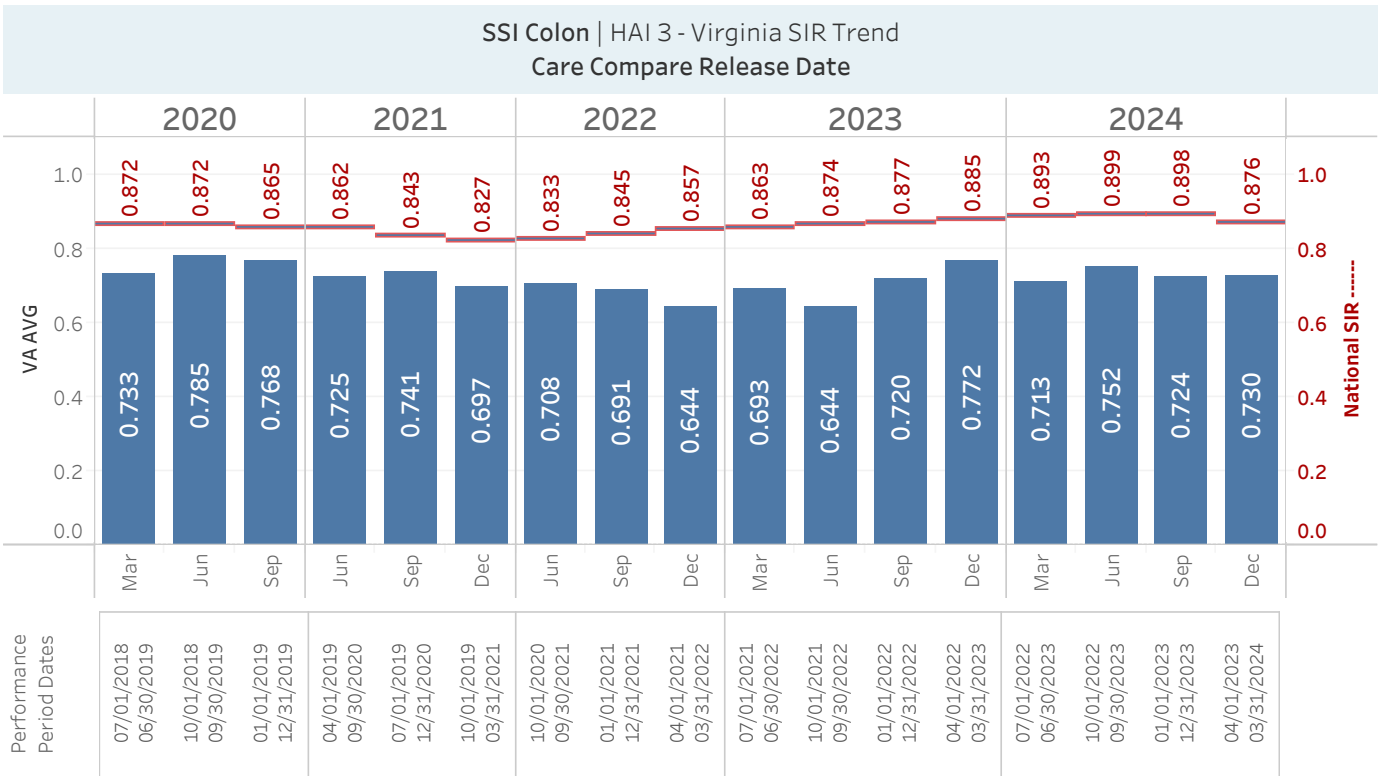
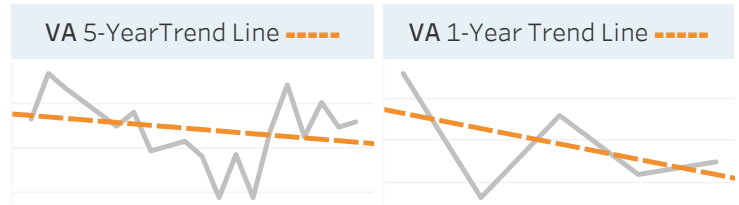
Legend: 2nd Quartile (green square), 3rd Quartile (orange square)

Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

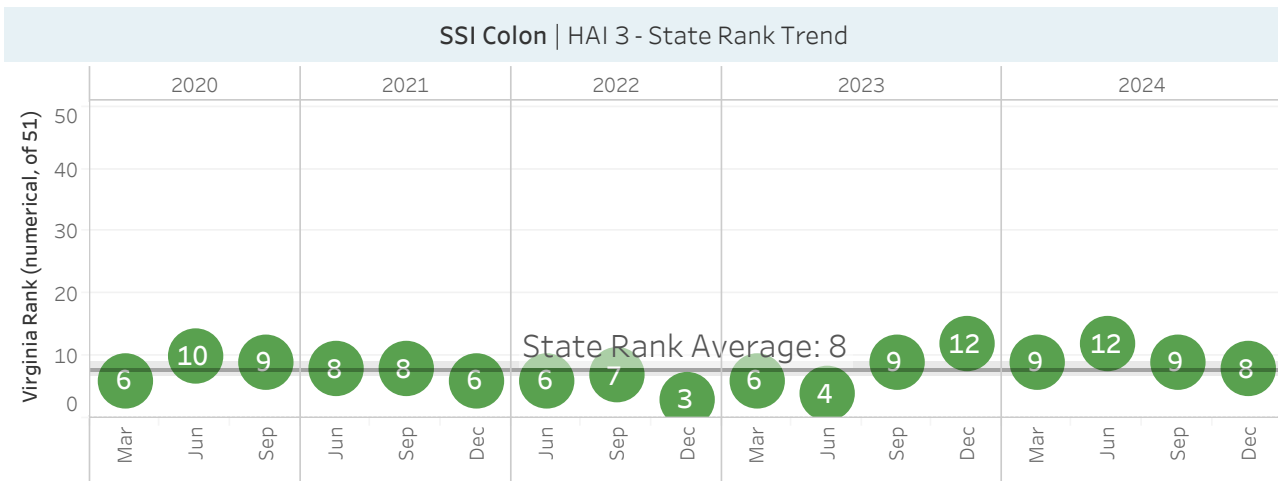
VHHA Quality and Patient Safety Dashboard

Measure Detail

HAI 3: Surgical Site Infections
Colorectal Surgery | SSI Colon



Legend Below National Rate



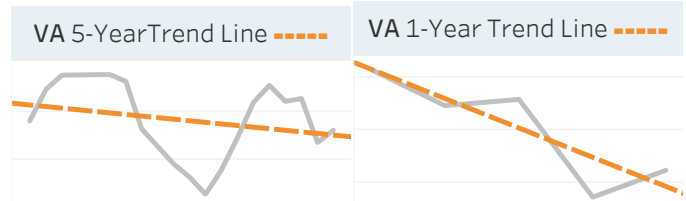
Legend 1st Quartile

Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

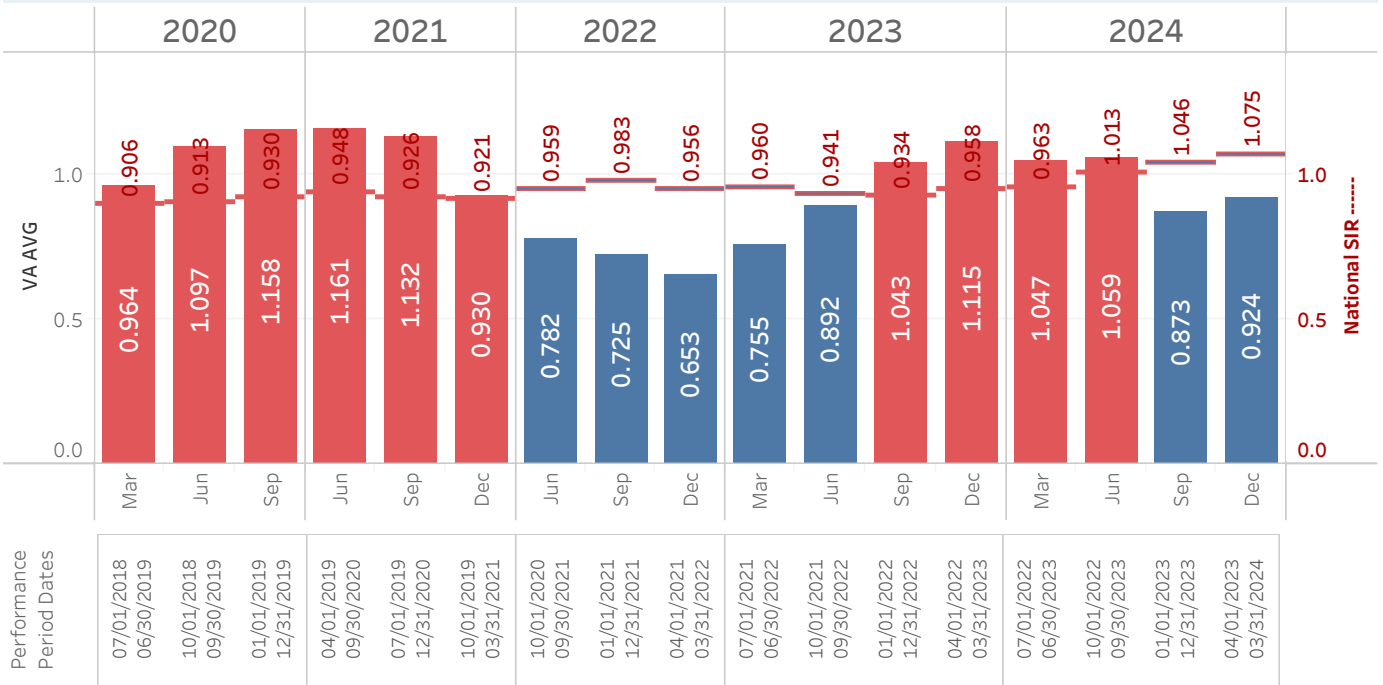
VHHA Quality and Patient Safety Dashboard

Measure Detail

HAI 4: Surgical Site Infections
Abdominal Hysterectomy | SSI TAH

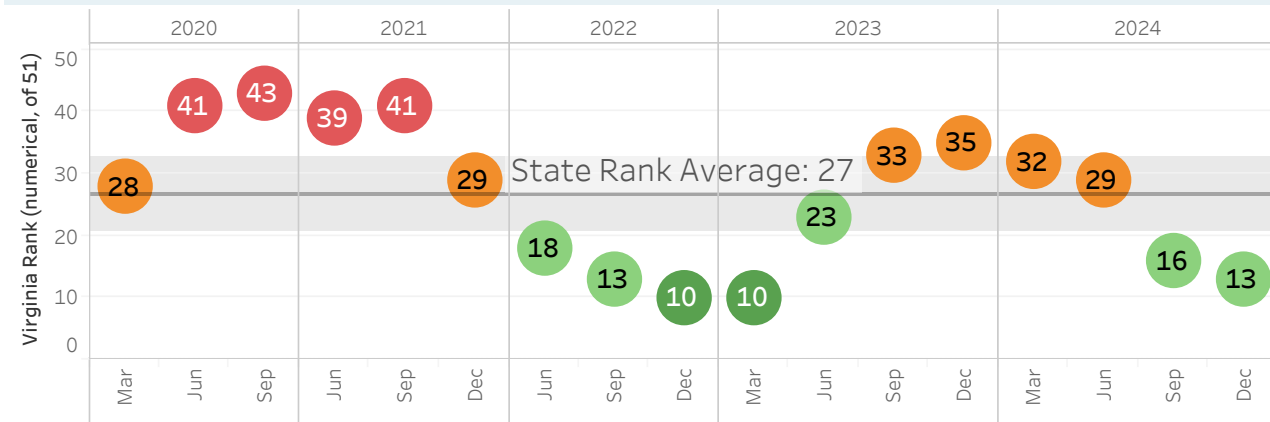


SSI Abdominal Hysterectomy (TAH) | HAI 4 - Virginia SIR Trend
Care Compare Release Date



Legend: Above National Rate (Red), Below National Rate (Blue)

SSI Abdominal Hysterectomy (TAH) | HAI-4 - State Rank Trend



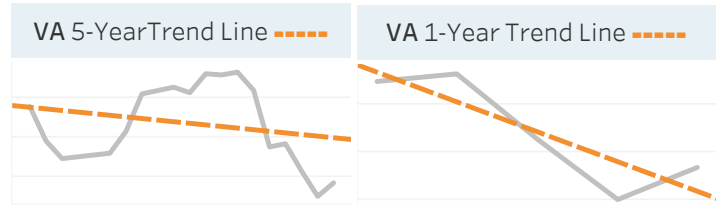
Legend: 1st Quartile (Green), 2nd Quartile (Light Green), 3rd Quartile (Orange), 4th Quartile (Red)

Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

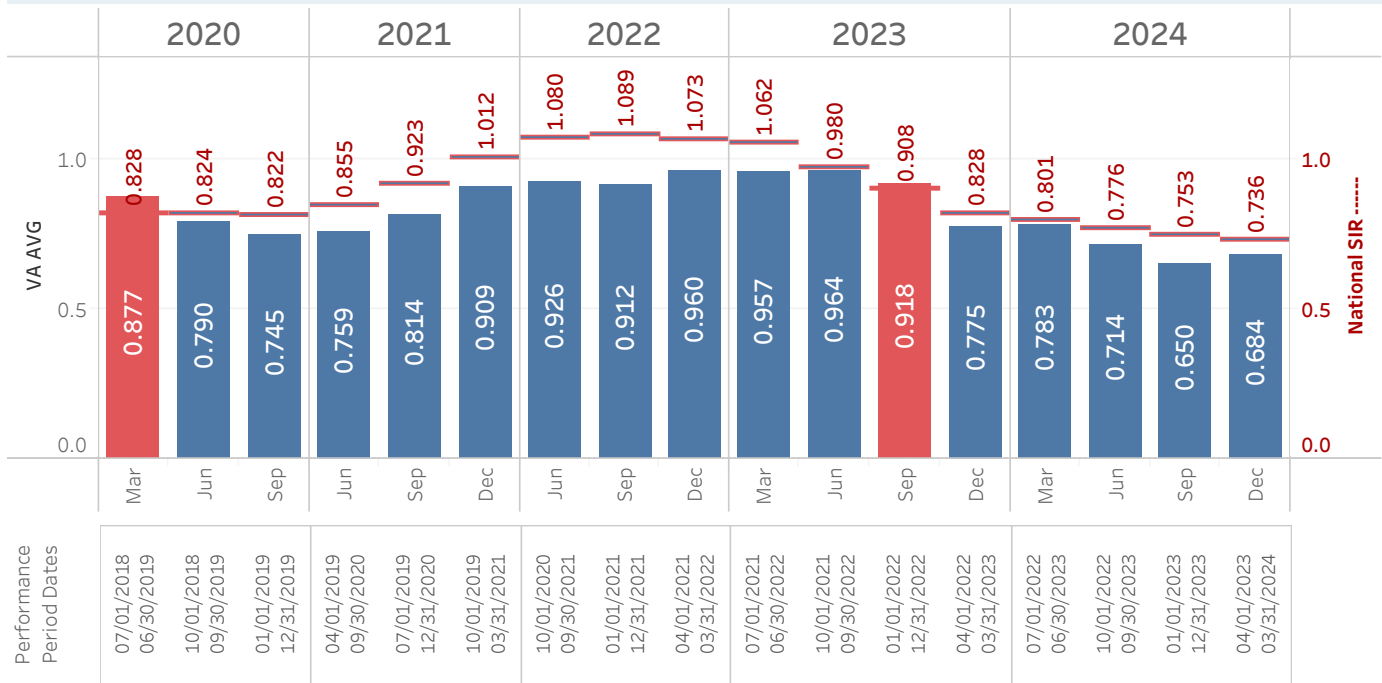
VHHA Quality and Patient Safety Dashboard

Measure Detail

HAI 5: Methicillin-resistant Staphylococcus aureus | MRSA

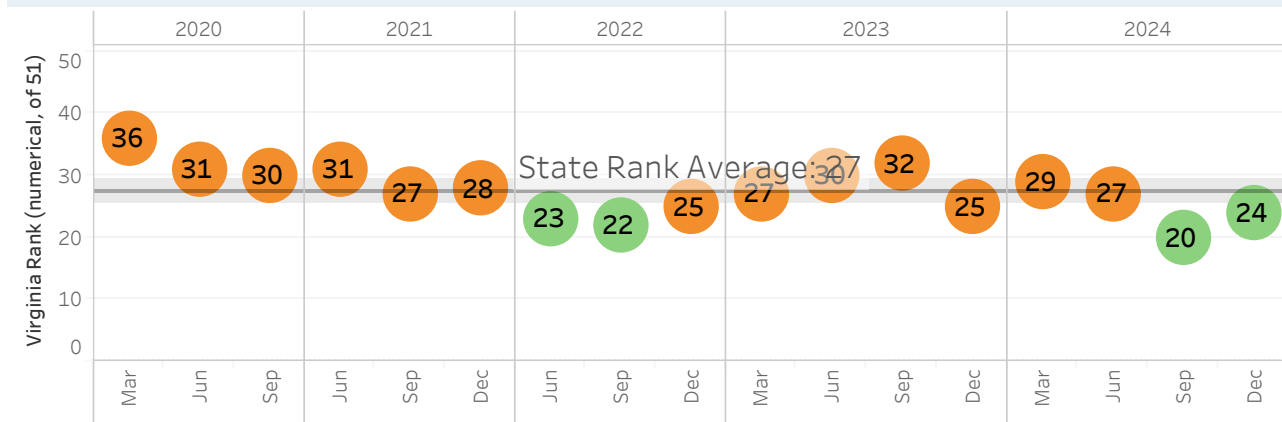


Methicillin-resistant Staphylococcus aureus (MRSA) | HAI 5 - Virginia SIR Trend
Care Compare Release Date



Legend: Above National Rate (Red), Below National Rate (Blue)

Methicillin-resistant Staphylococcus aureus (MRSA) | HAI-5 - State Rank Trend



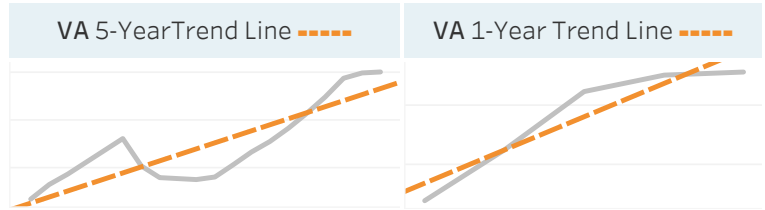
Legend: 2nd Quartile (Green), 3rd Quartile (Orange)

Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

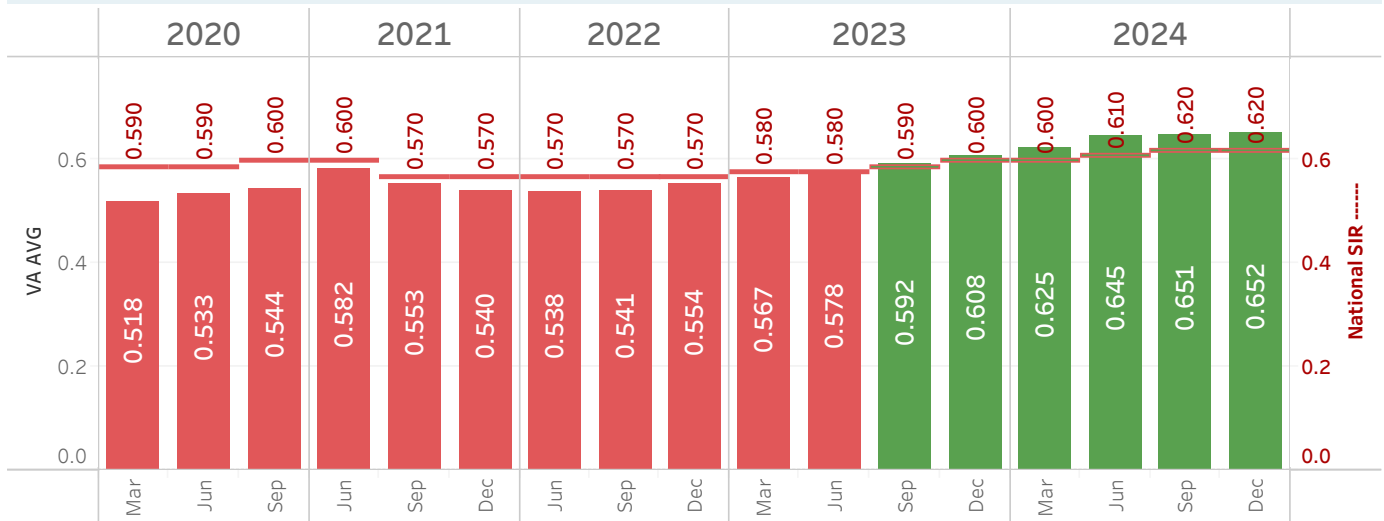
VHHA Quality and Patient Safety Dashboard

Measure Detail

PROCESS: Severe Sepsis/Septic Shock | SEP 1



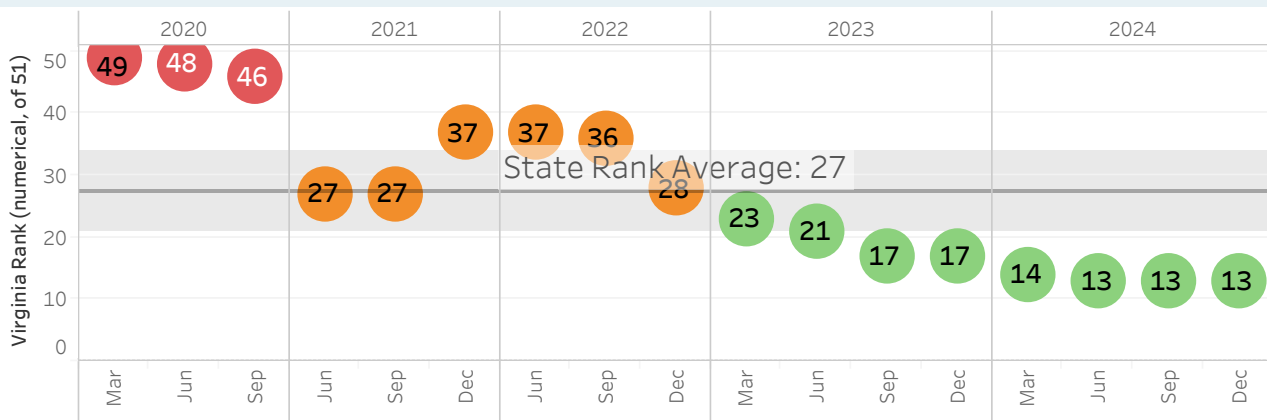
Severe Sepsis/Septic Shock | SEP 1 - Virginia SIR Trend
Care Compare Release Date



Legend: Above National Rate (Green), Below National Rate (Red)

Performance Period Dates	07/01/2018 06/30/2019	10/01/2018 09/30/2019	01/01/2019 12/31/2019	10/01/2019 09/30/2020	07/01/2020 12/31/2020	07/01/2020 03/31/2021	10/01/2020 09/30/2021	01/01/2021 12/31/2021	04/01/2021 03/31/2022	07/01/2021 06/30/2022	10/01/2021 09/30/2022	01/01/2022 12/31/2022	04/01/2022 03/31/2023	07/01/2022 06/30/2023	10/01/2022 09/30/2023	01/01/2023 12/31/2023	04/01/2023 03/31/2024
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Severe Sepsis/Shock | SEP 1 - State Rank Trend

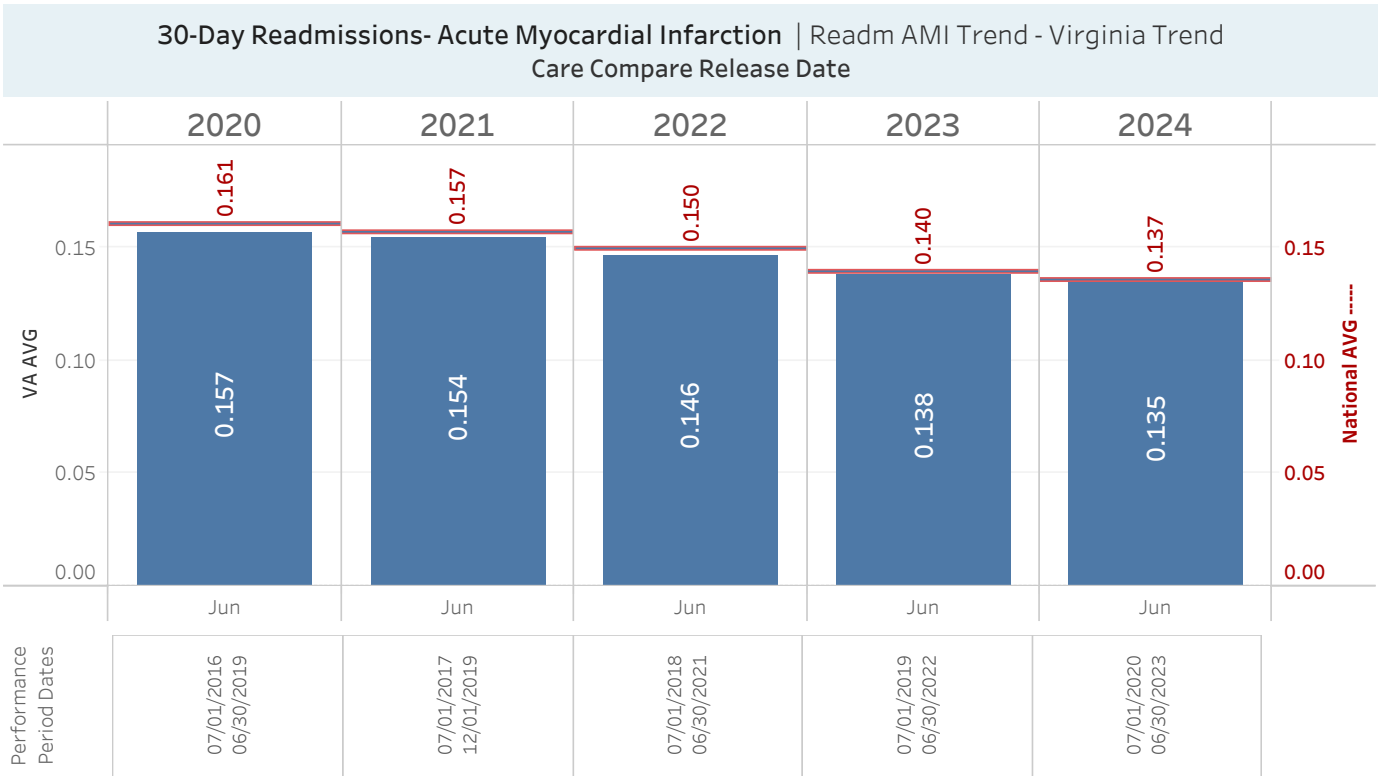
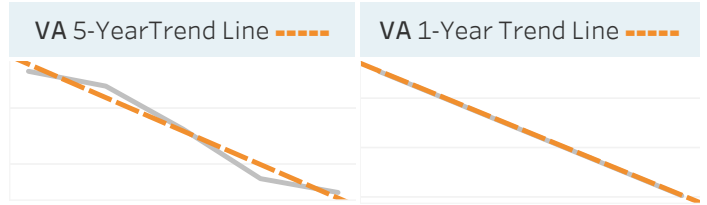


Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

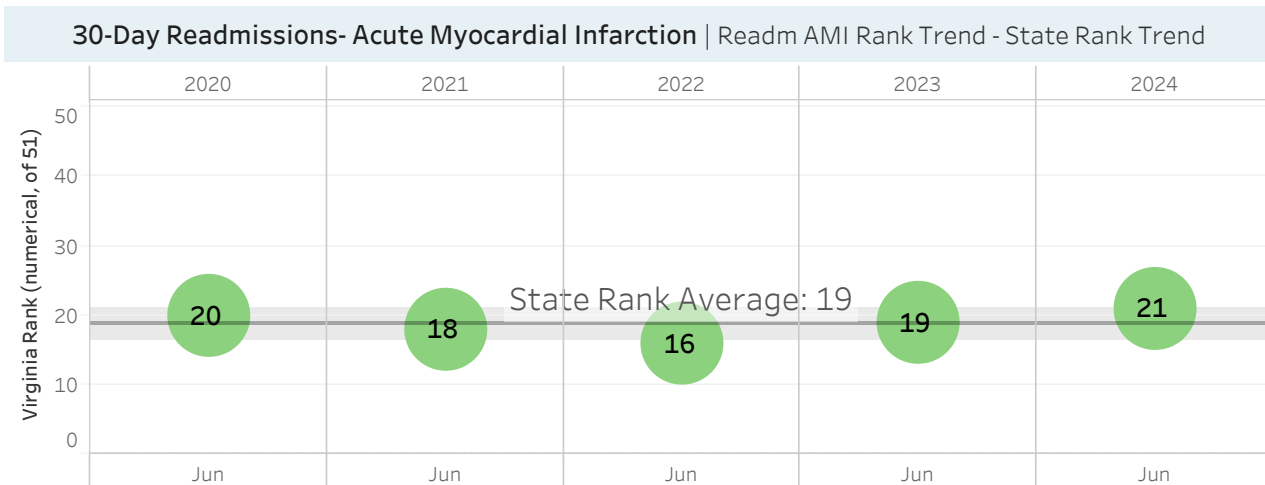
VHHA Quality and Patient Safety Dashboard

Measure Detail

READM AMI: 30-Day Readmissions Acute Myocardial Infarction



Legend: Below National ..



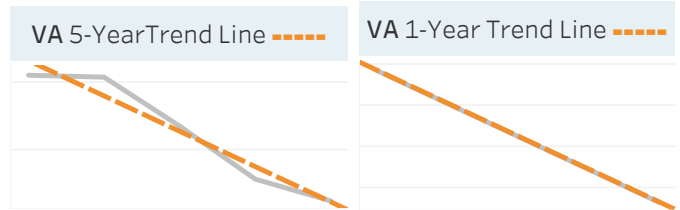
Legend: 2nd Quartile

Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

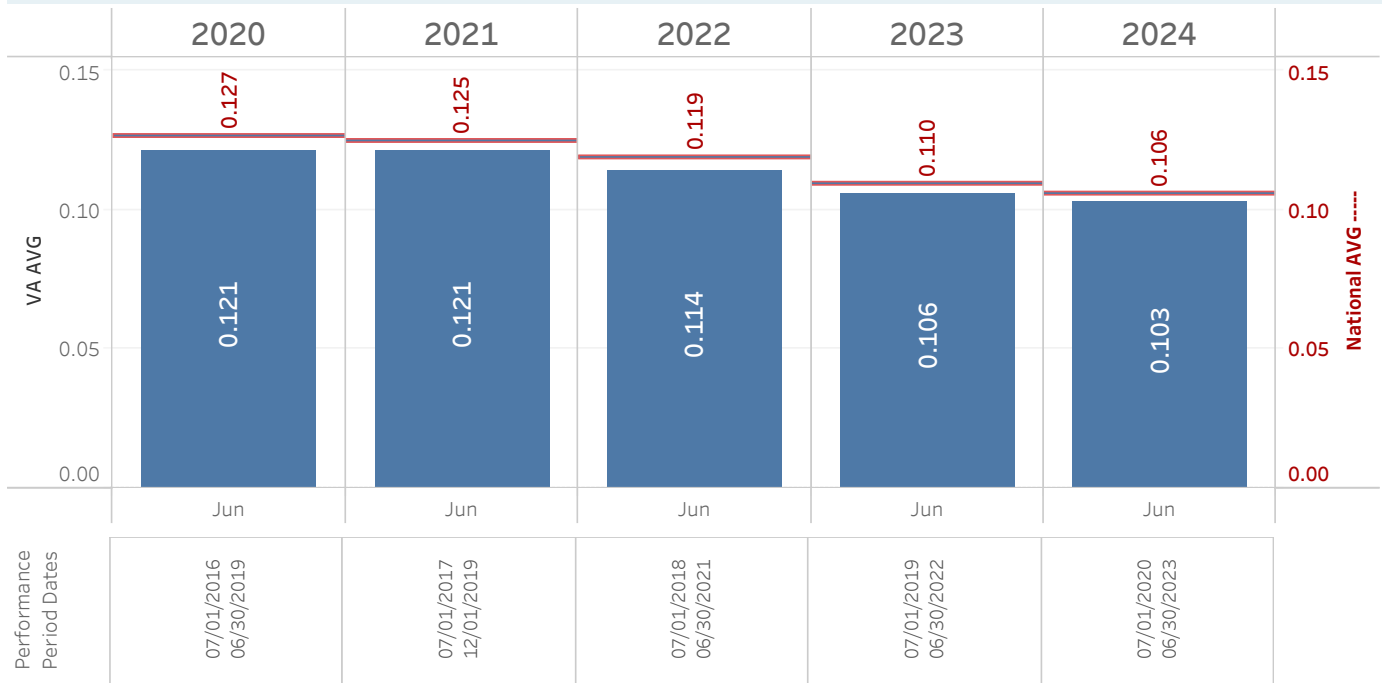
VHHA Quality and Patient Safety Dashboard

Measure Detail

READM CABG: 30-Day Readmissions Coronary Artery Bypass Graft

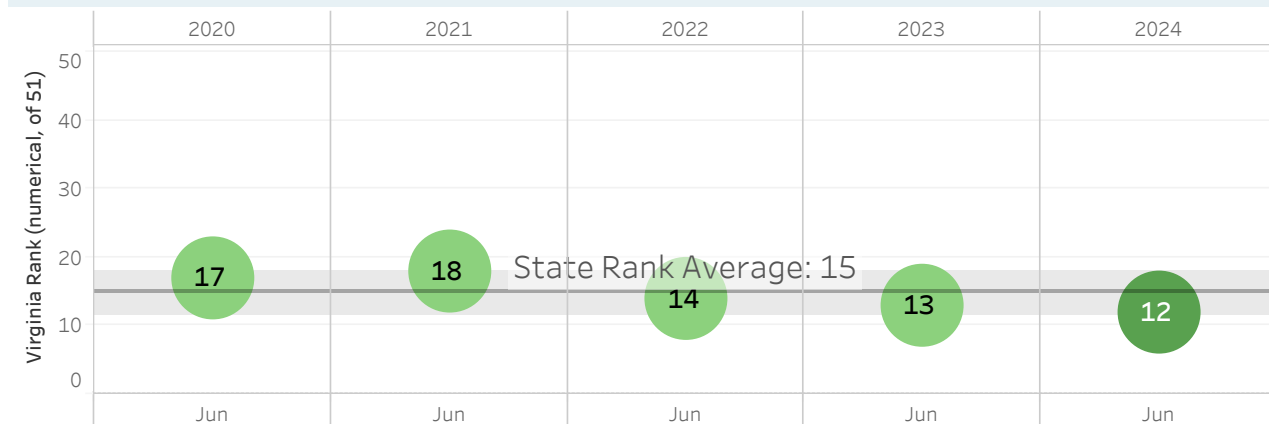


30-Day Readmissions- Coronary Artery Bypass Graft | Readm CABG Trend - Virginia Trend
Care Compare Release Date



Legend: Below National ..

30-Day Readmissions- Coronary Artery Bypass Graft | Readm CABG Rank Trend - State Rank Trend



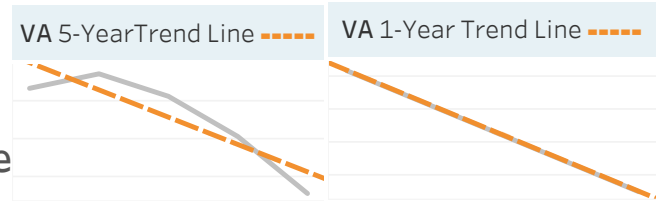
Legend: 1st Quartile, 2nd Quartile

Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

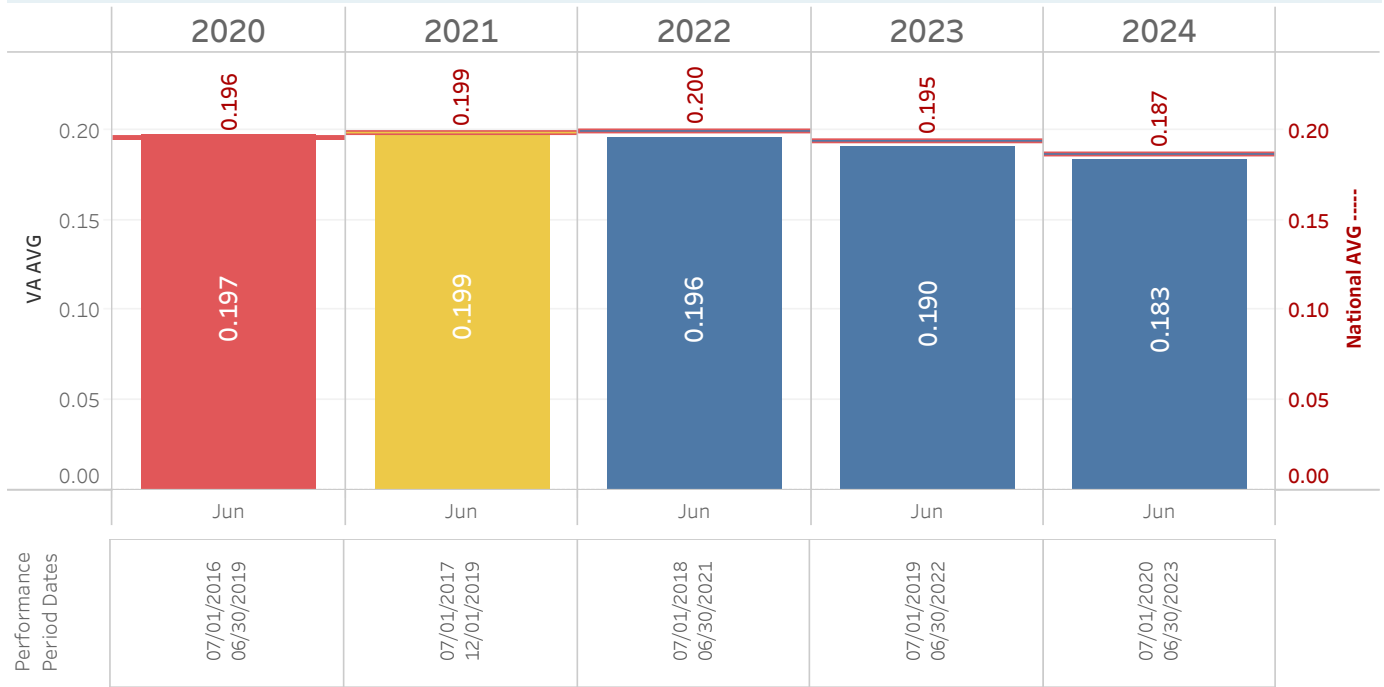
VHHA Quality and Patient Safety Dashboard

Measure Detail

READM COPD: 30-Day Readmissions Chronic Obstructive Pulmonary Disease

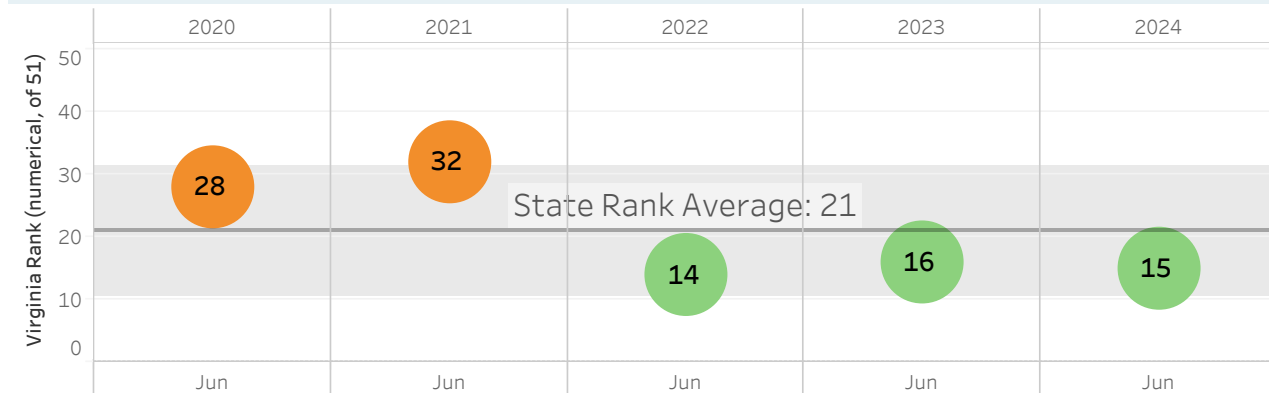


30-Day Readmissions- Chronic Obstructive Pulmonary Disease(COPD)| Readm COPD Trend - Virginia Trend
Care Compare Release Date



Legend: Above National Rate (Red), At National Rate (Yellow), Below National Rate (Blue)

30-Day Readmissions- Chronic Obstructive Pulmonary Disease
| Readm COPD Rank Trend - State Rank Trend



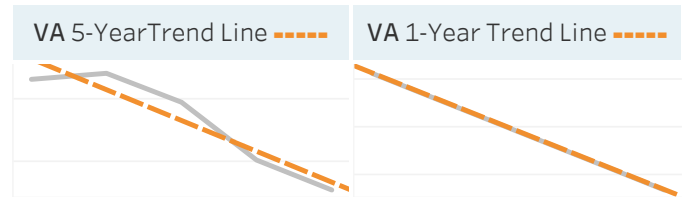
Legend: 2nd Quartile (Green), 3rd Quartile (Orange)

Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

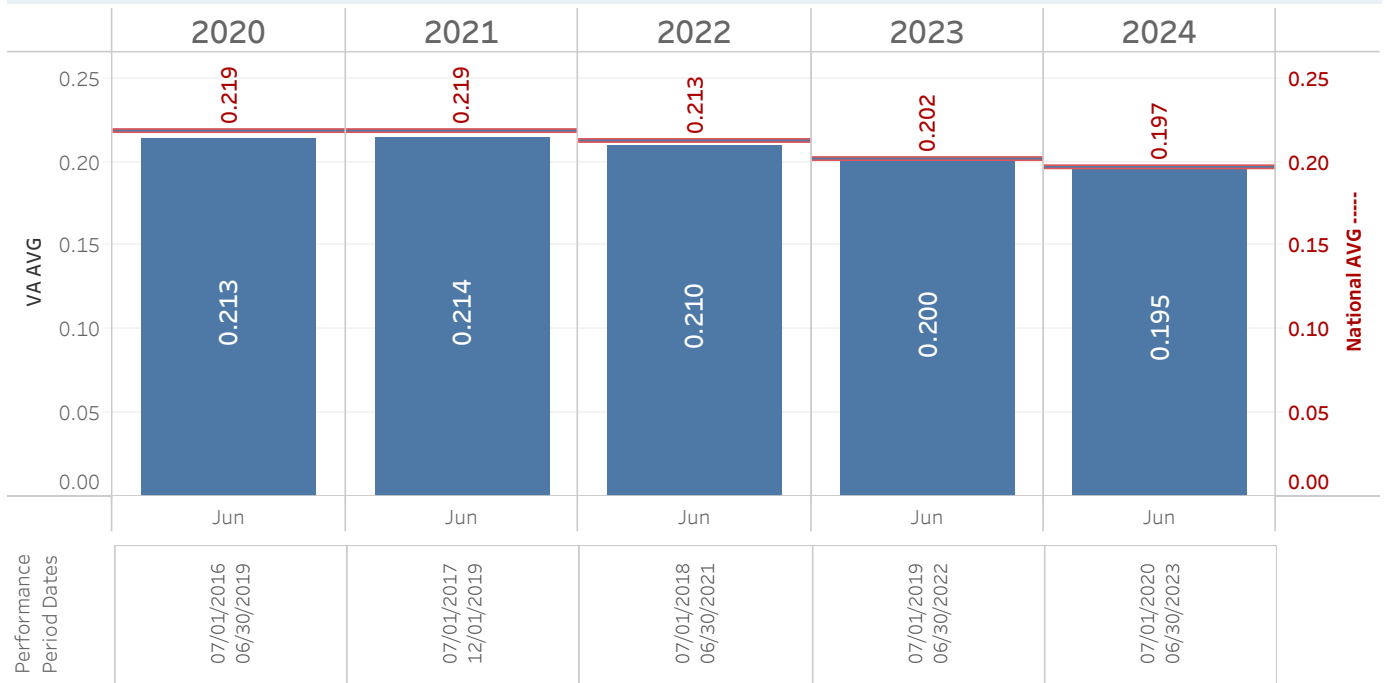
VHHA Quality and Patient Safety Dashboard

Measure Detail

READM HF: 30-Day Readmissions Heart Failure

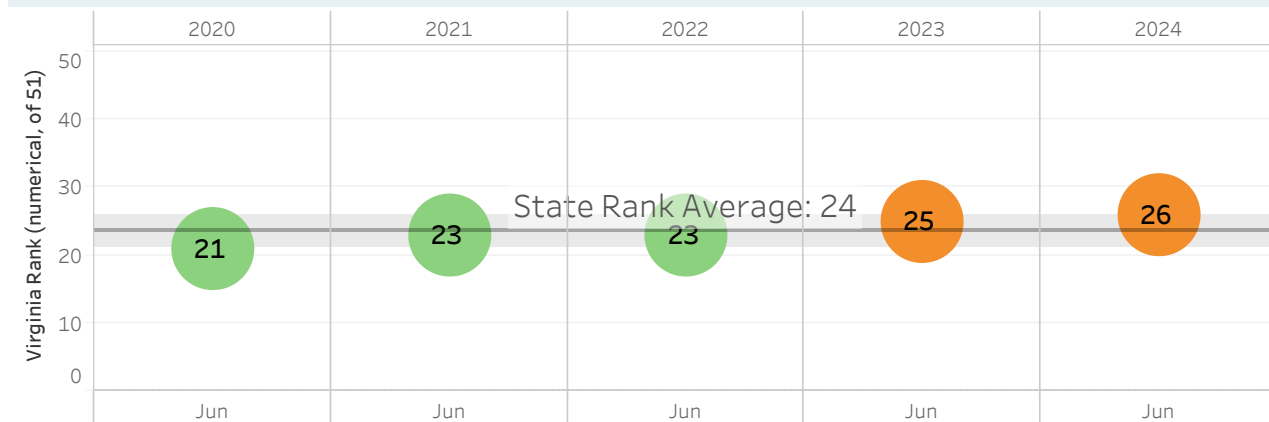


30-Day Readmissions- Heart Failure | Readm HF Trend - Virginia Trend
Care Compare Release Date



Legend Below National ..

30-Day Readmissions- Heart Failure | Readm HF Rank Trend - State Rank Trend



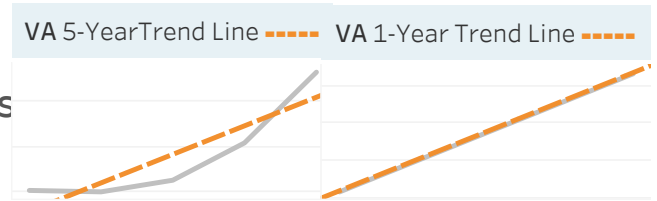
Legend 2nd Quartile 3rd Quartile

Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

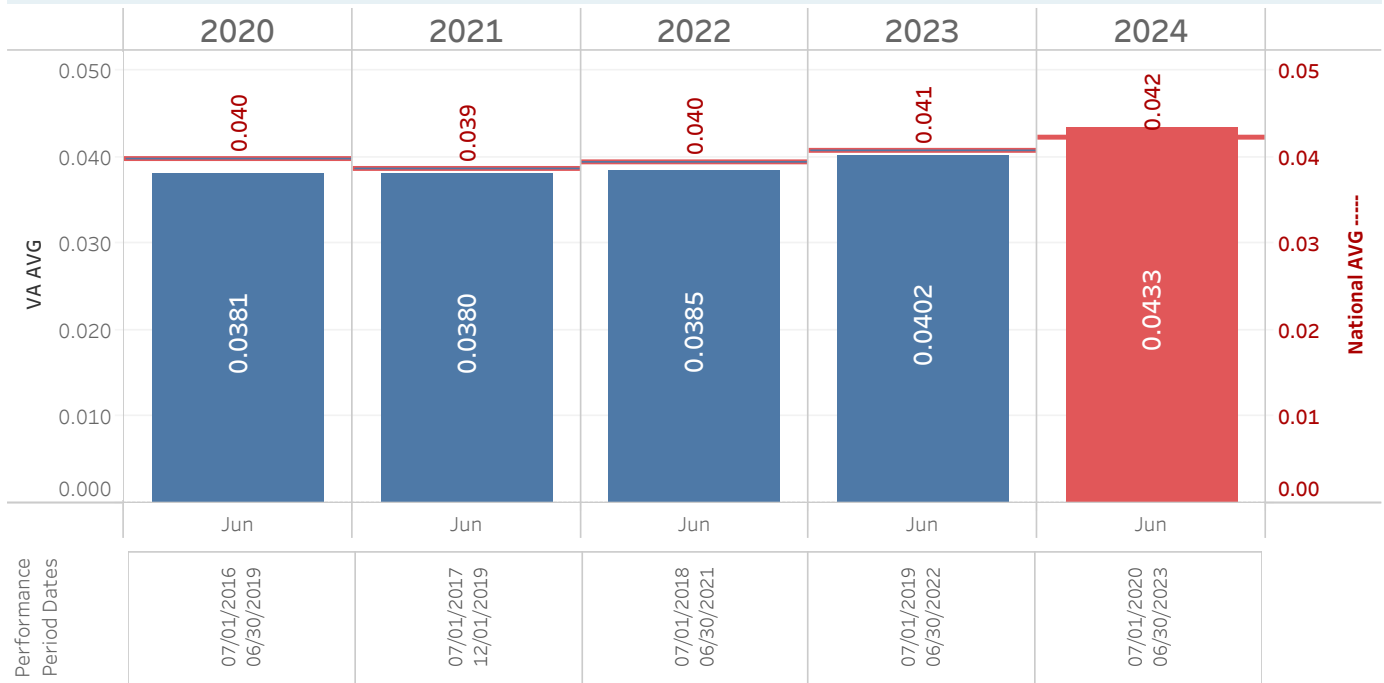
VHHA Quality and Patient Safety Dashboard

Measure Detail

READM THA/TKA: 30-Day Readmissions Hip and Knee Arthroplasty

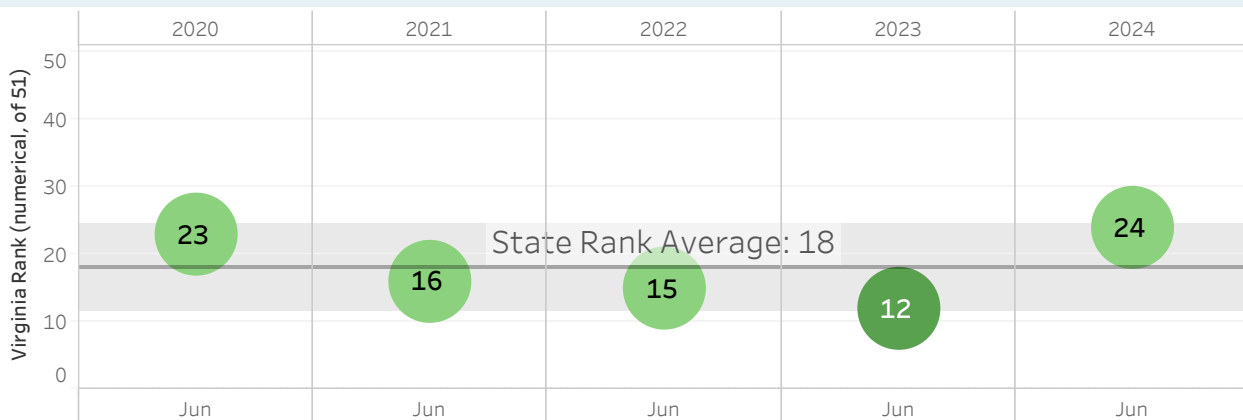


30-Day Readmissions- Hip and Knee Arthroplasty | Readm THA/TKA Trend - Virginia Trend
Care Compare Release Date



Legend: Above National.. Below National..

30-Day Readmissions- Hip and Knee Arthroplasty | Readm THA/TKA Rank Trend - State Rank Trend



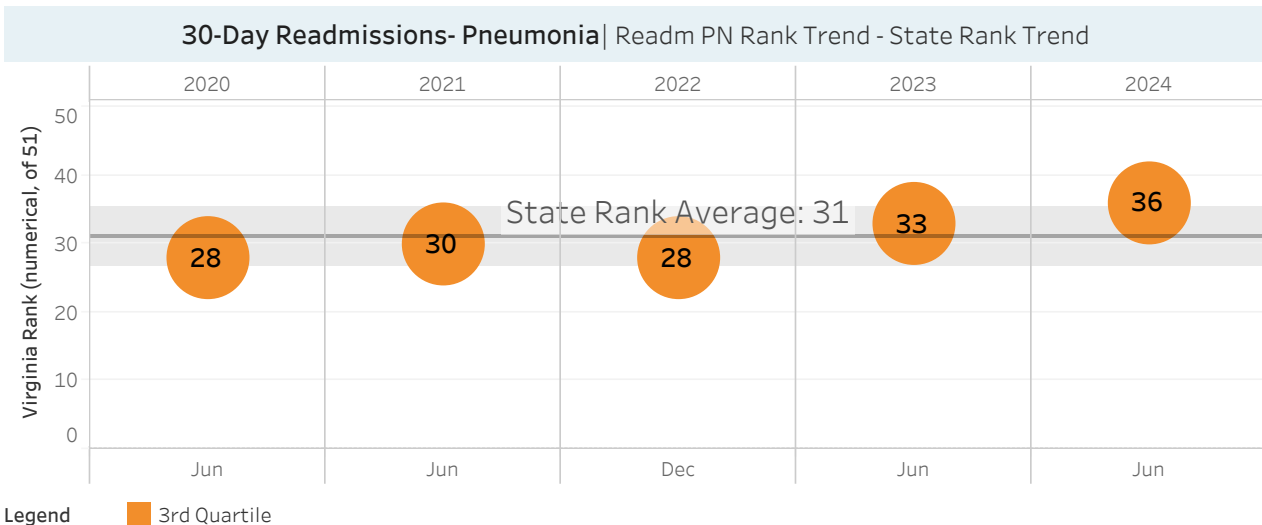
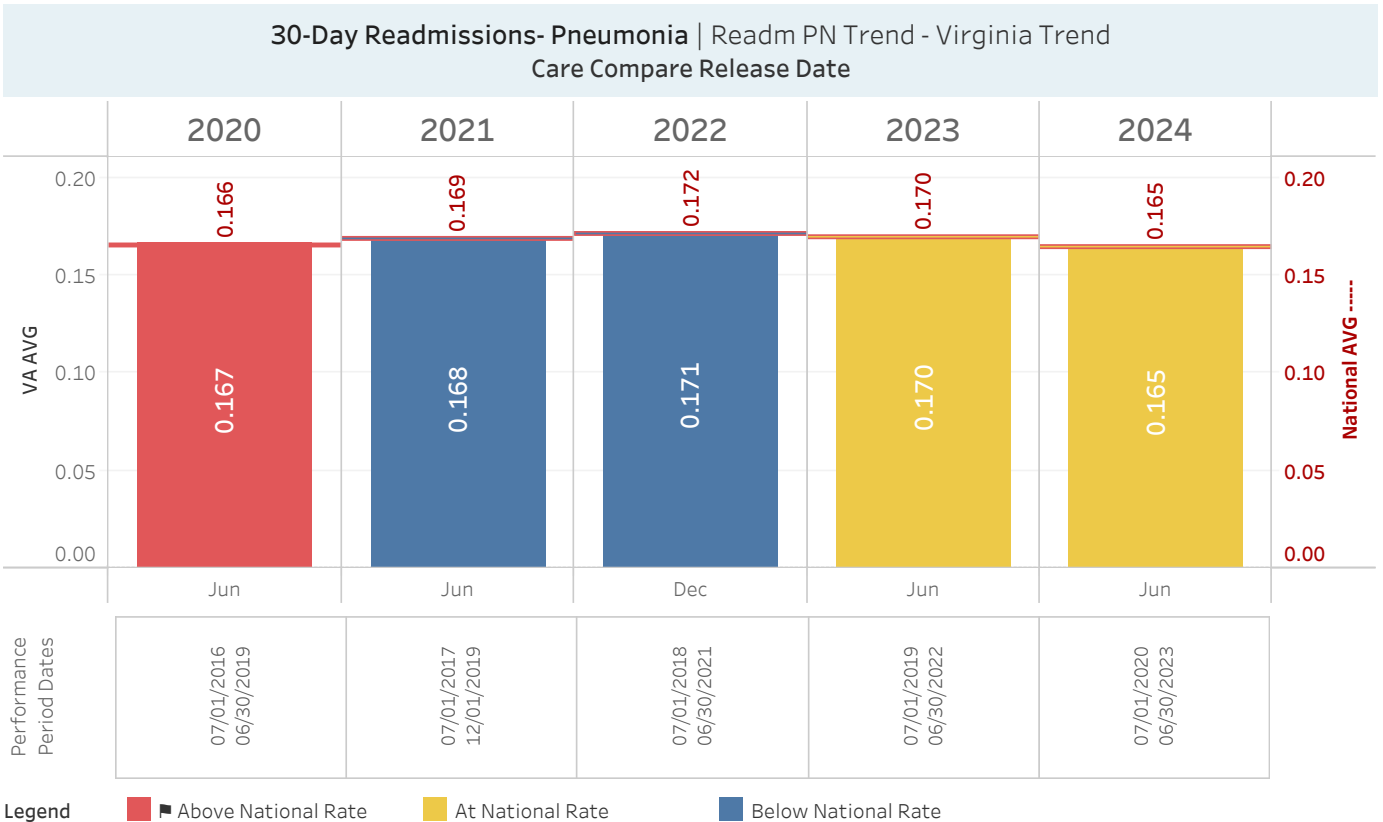
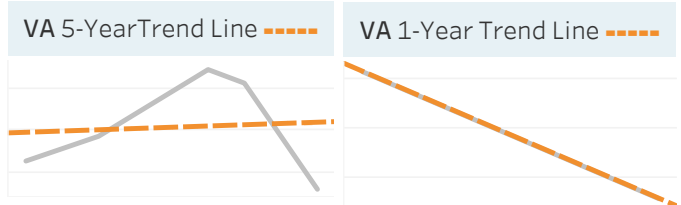
Legend: 1st Quartile 2nd Quartile

Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

Measure Detail

READM PN: 30-Day Readmissions Pneumonia



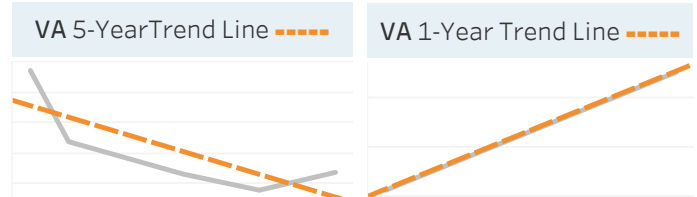
Reported as a risk-standardized readmission rate (RSRR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

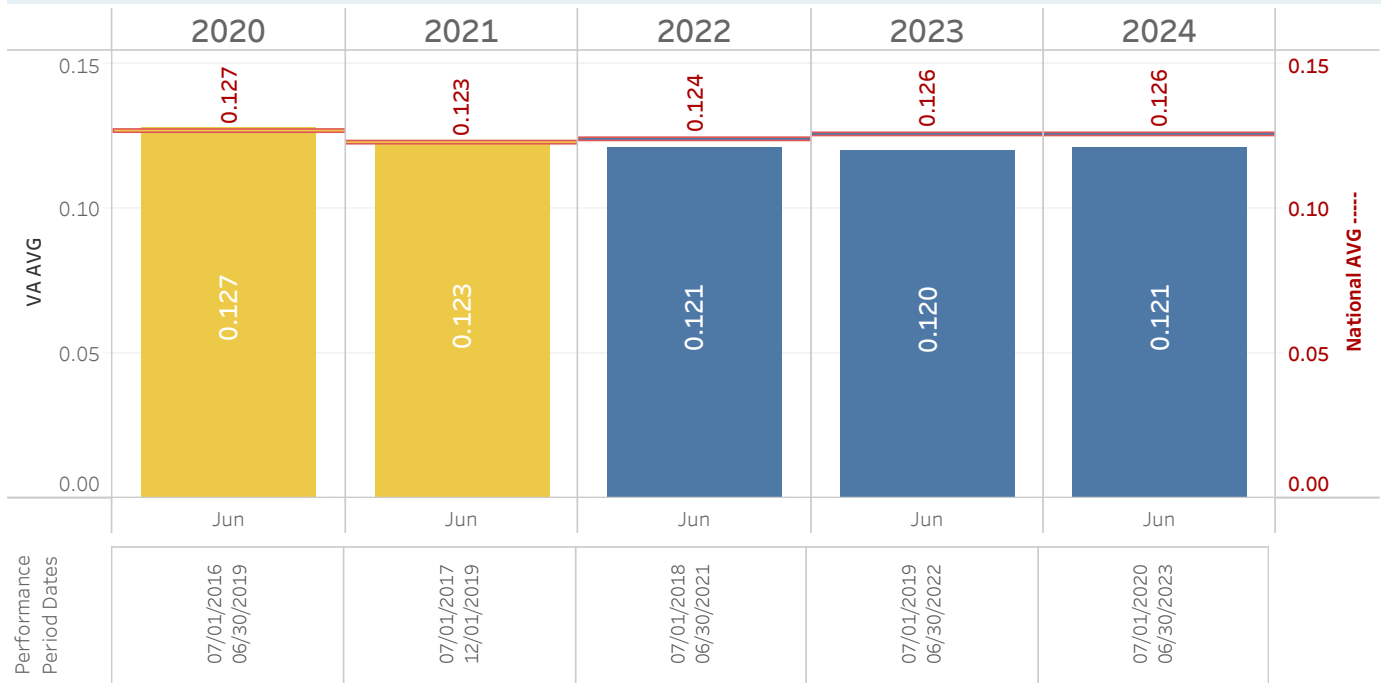
Measure Detail

MORT AMI: 30-Day Mortality

Acute Myocardial Infarction

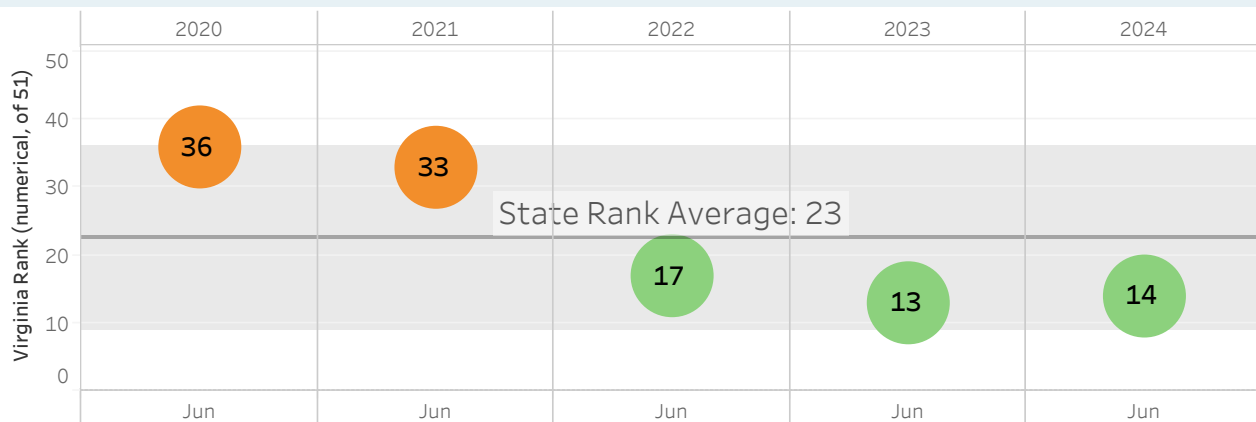


30-Day Mortality - Acute Myocardial Infarction | Mort AMI Trend - Virginia Trend
Care Compare Release Date



Legend: ■ At National Rate ■ Below National Rate

30-Day Mortality- Acute Myocardial Infarction | Mort AMI Rank Trend - State Rank Trend



Legend: ■ 2nd Quartile ■ 3rd Quartile

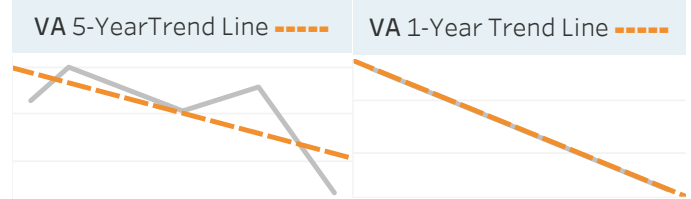
Reported as a risk-standardized mortality rate (RSMR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

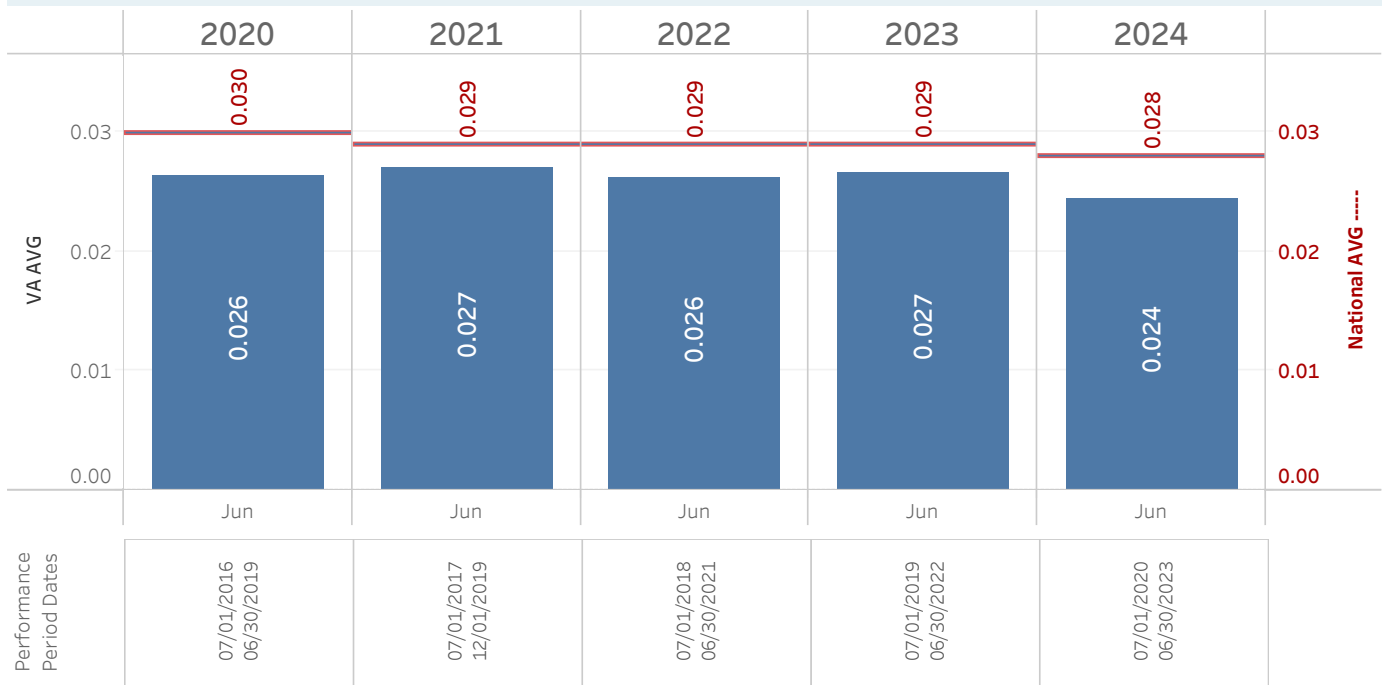
Measure Detail

MORT CABG: 30-Day Mortality

Coronary Artery Bypass Graft

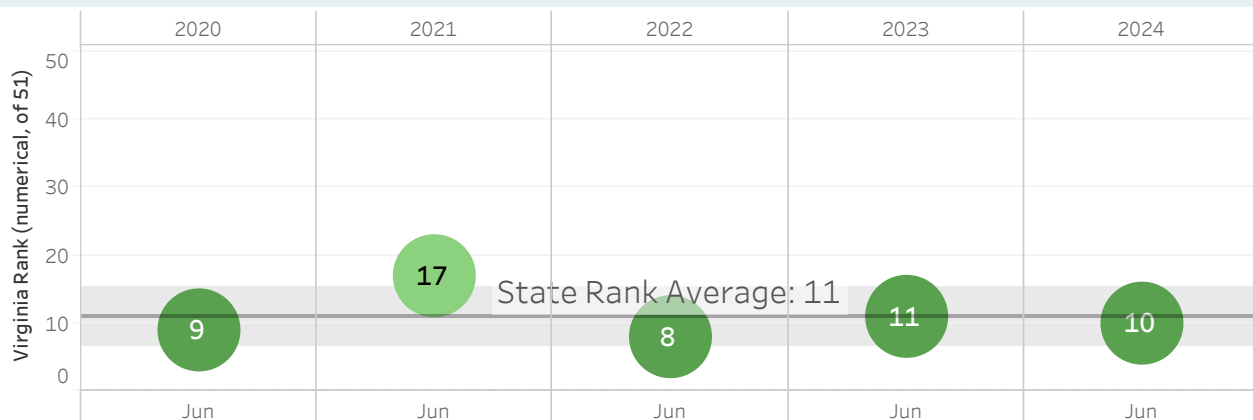


30-Day Mortality -Coronary Artery Bypass Graft | Mort CABG Trend - Virginia Trend
Care Compare Release Date



Legend: Below National ..

30-Day Mortality- Coronary Artery Bypass Graft | Mort CABG Rank Trend - State Rank Trend



Legend: 1st Quartile, 2nd Quartile

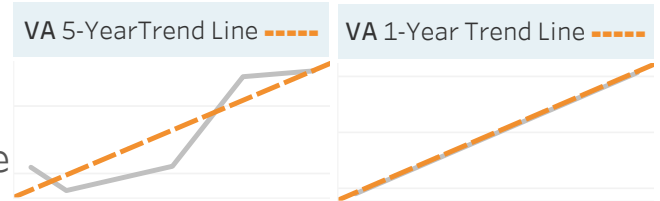
Reported as a risk-standardized mortality rate (RSMR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

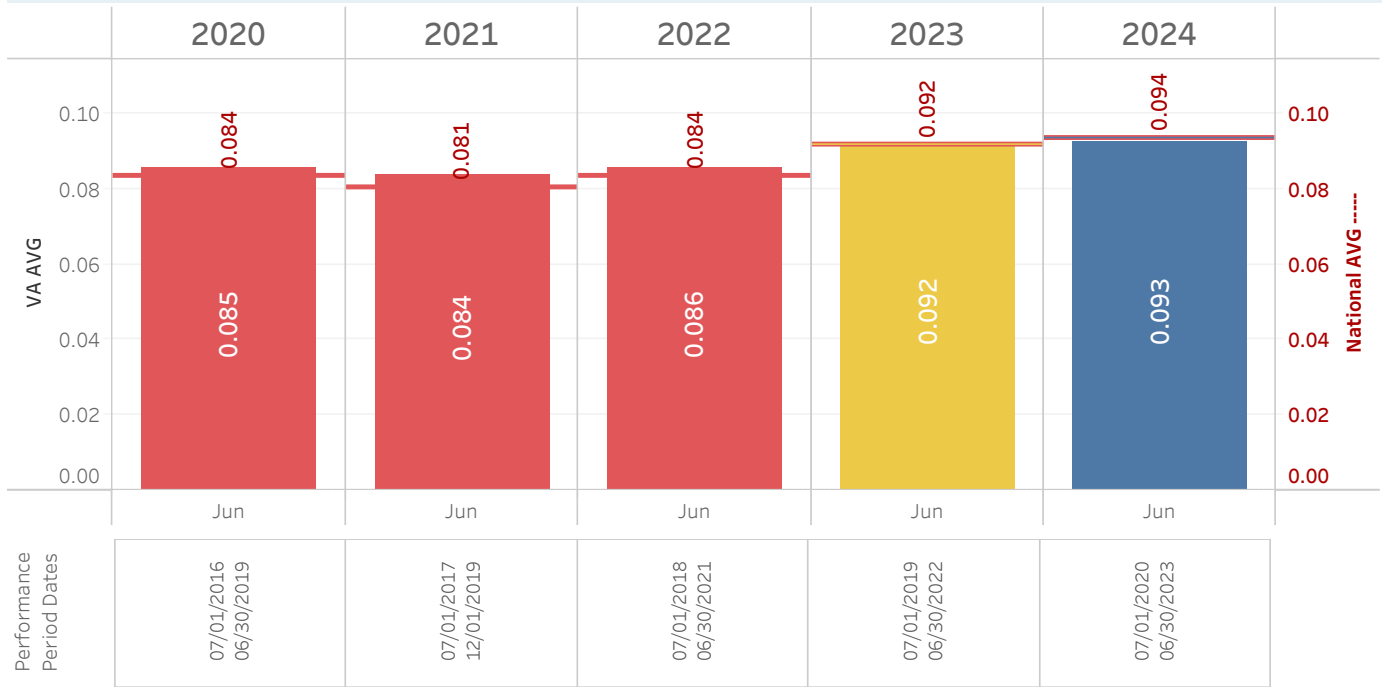
Measure Detail

MORT COPD: 30-Day Mortality

Chronic Obstructive Pulmonary Disease



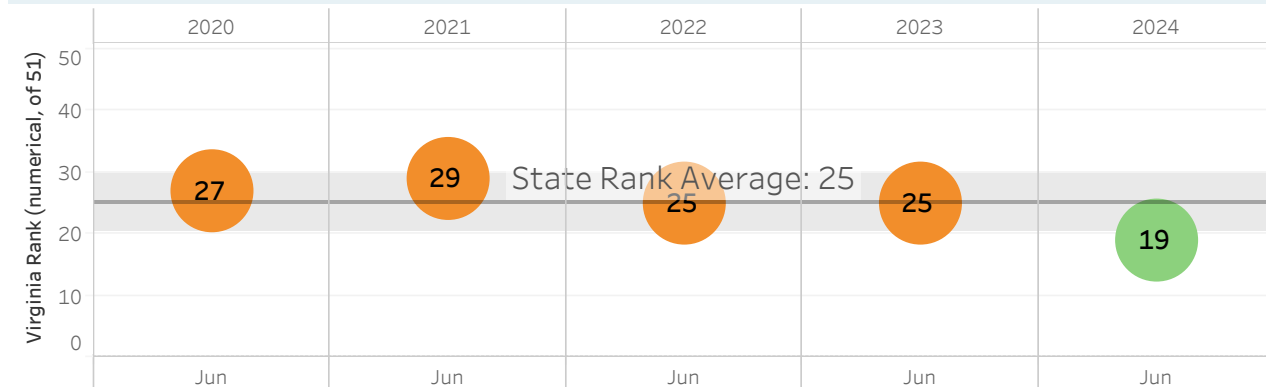
30-Day Mortality -Chronic Obstructive Pulmonary Disease (COPD)| Mort COPD Trend - Virginia Trend
Care Compare Release Date



Legend: Above National Rate (red), At National Rate (yellow), Below National Rate (blue)

30-Day Mortality- Chronic Obstructive Pulmonary Disease

| Mort COPD Rank Trend - State Rank Trend



Legend: 2nd Quartile (green), 3rd Quartile (orange)

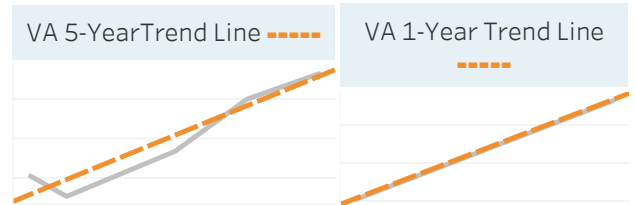
Reported as a risk-standardized mortality rate (RSMR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

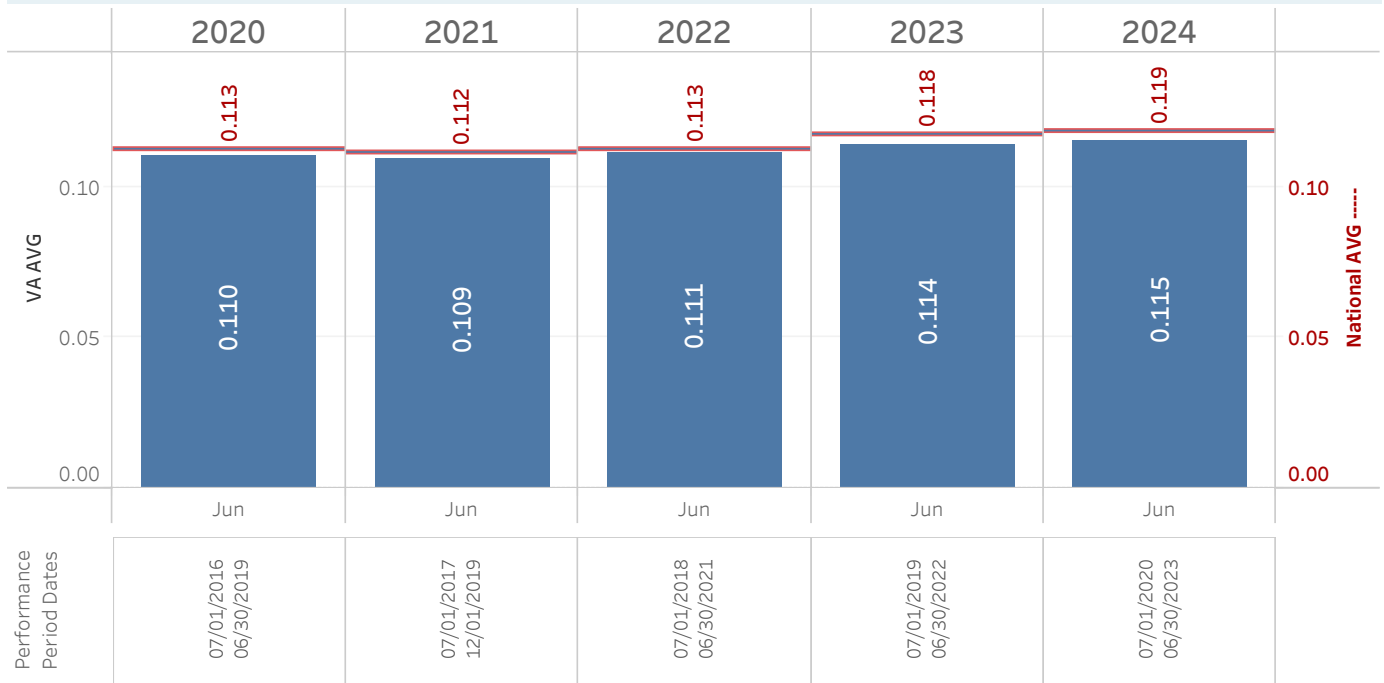
Measure Detail

MORT HF: 30-Day Mortality

Heart Failure

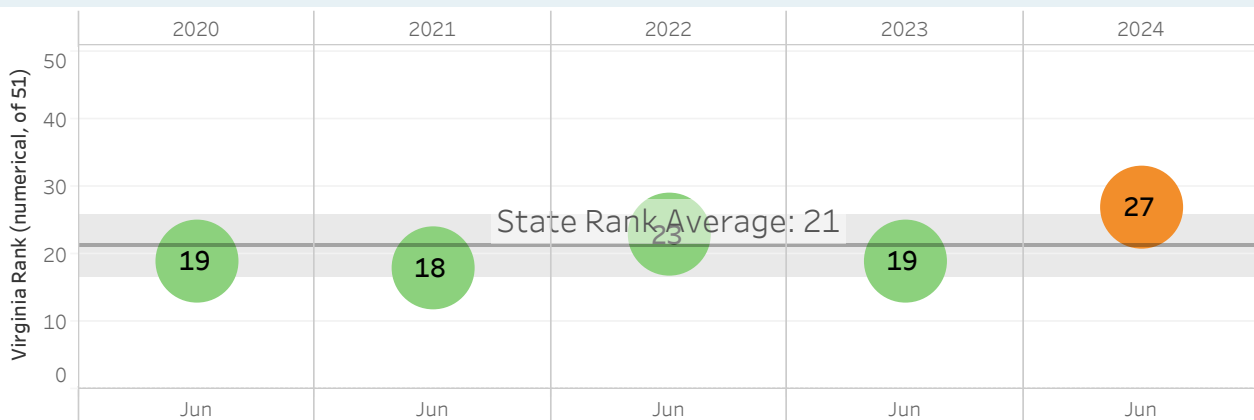


30-Day Mortality -Heart Failure | Mort HF Trend - Virginia Trend
Care Compare Release Date



Legend: Below National ..

30-Day Mortality- Heart Failure | Mort HF Rank Trend - State Rank Trend



Legend: 2nd Quartile (green circle), 3rd Quartile (orange circle)

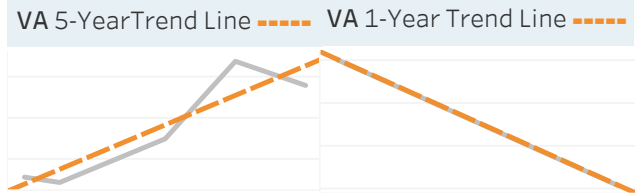
Reported as a risk-standardized mortality rate (RSMR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

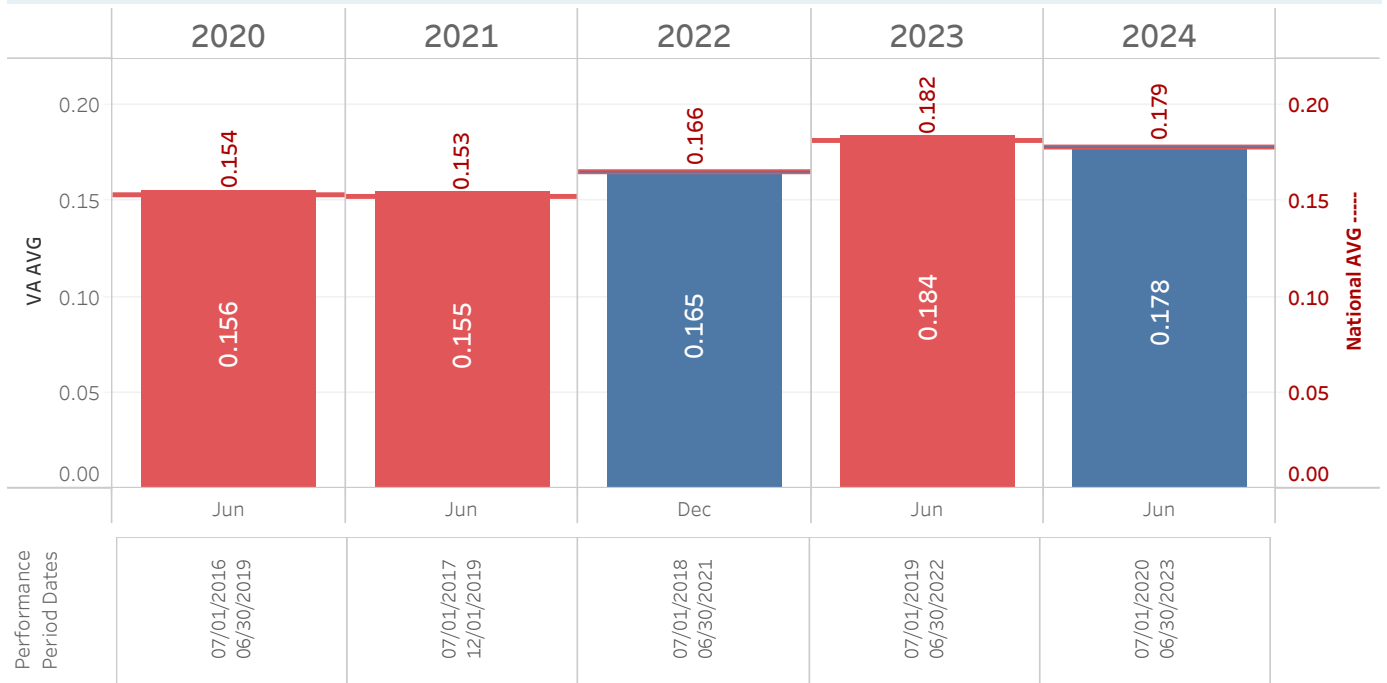
Measure Detail

MORT PN: 30-Day Mortality

Pneumonia

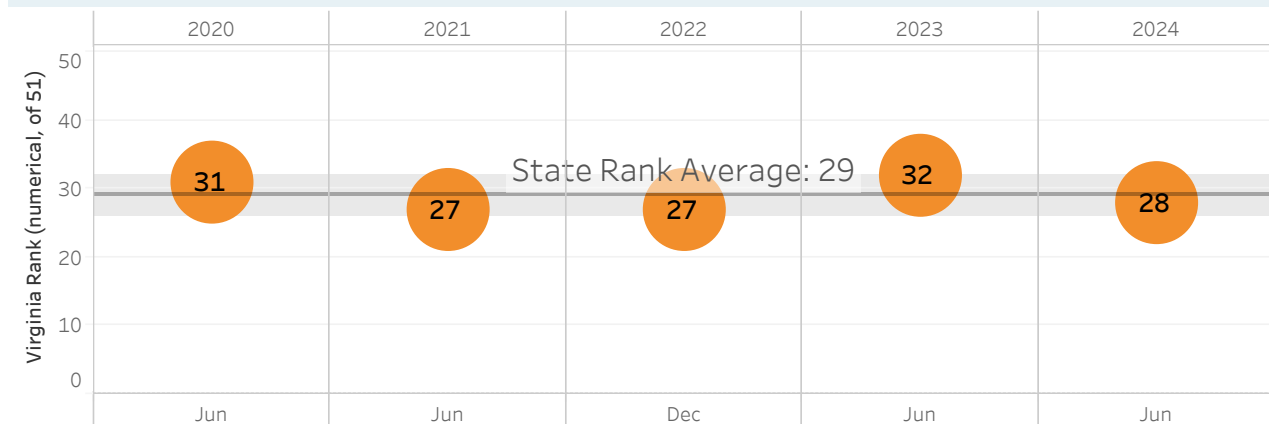


30-Day Mortality -Pneumonia | Mort PN Trend - Virginia Trend
Care Compare Release Date



Legend: Above National Rate (Red), Below National Rate (Blue)

30-Day Mortality- Pneumonia | Mort PN Rank Trend - State Rank Trend



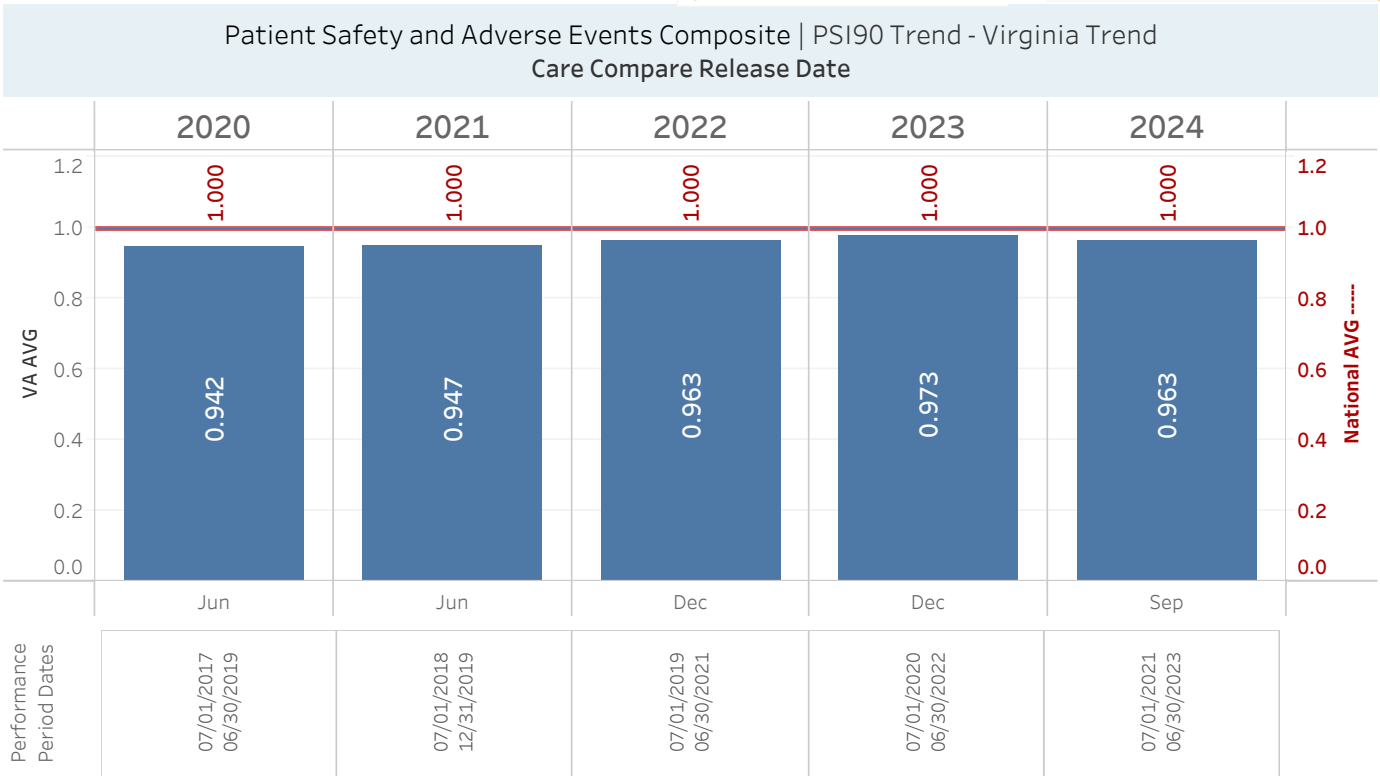
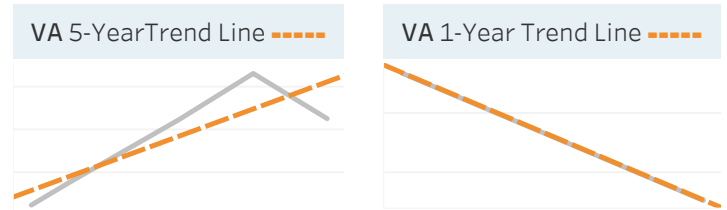
Legend: 3rd Quartile (Orange)

Reported as a risk-standardized mortality rate (RSMR). Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

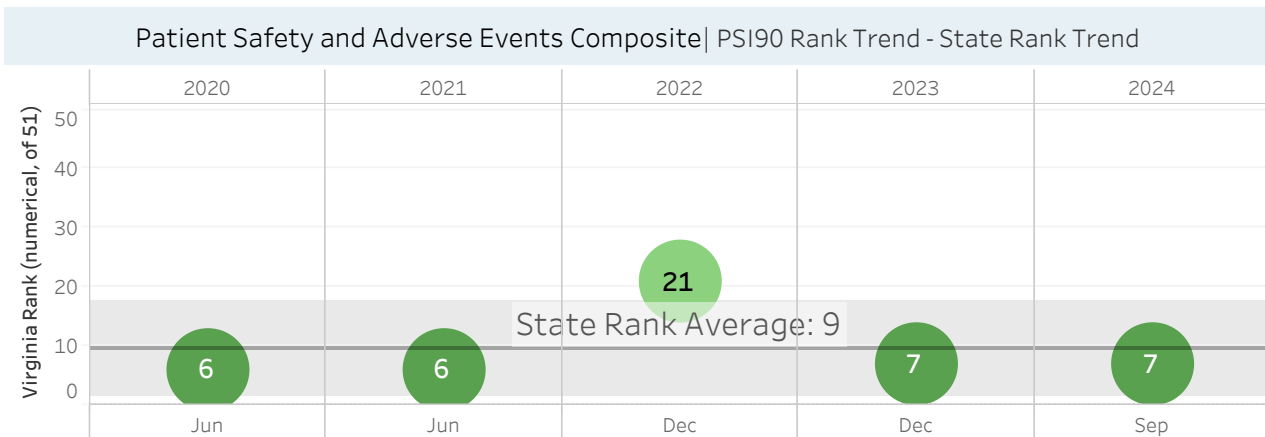
VHHA Quality and Patient Safety Dashboard

Measure Detail

PSI90: Patient Safety and Adverse Events Composite



Legend: Below National ..



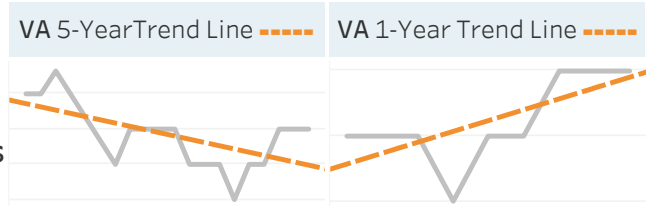
Legend: 1st Quartile, 2nd Quartile

PSI 90 is comprised of 10 component measures that include; PSI 03, PSI 06, and PSI 08-15. Full methodology of PSI90 can be found here: https://qualityindicators.ahrq.gov/Downloads/Modules/PSI/V2023/PSI_Composite_Measures.pdf. Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

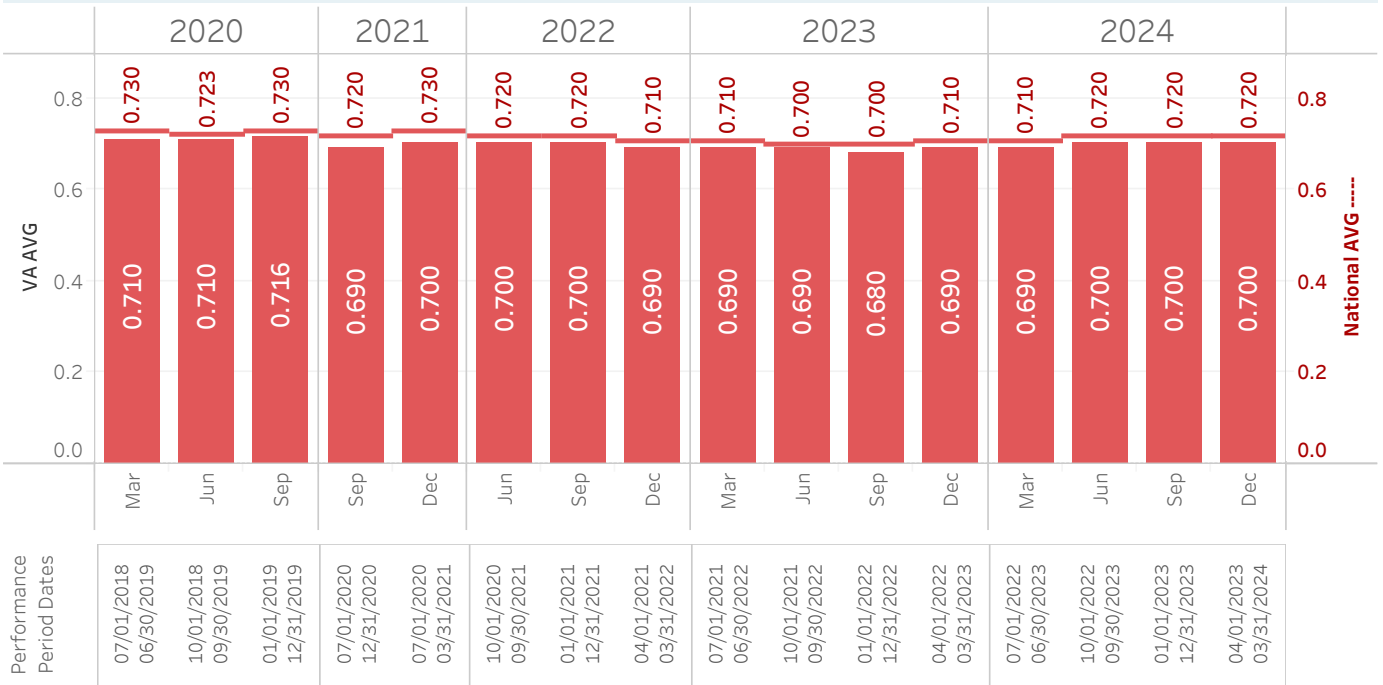
VHHA Quality and Patient Safety Dashboard

Measure Detail

HCAHPS Overall: Hospital Consumer
Assessment of Healthcare Providers and Systems



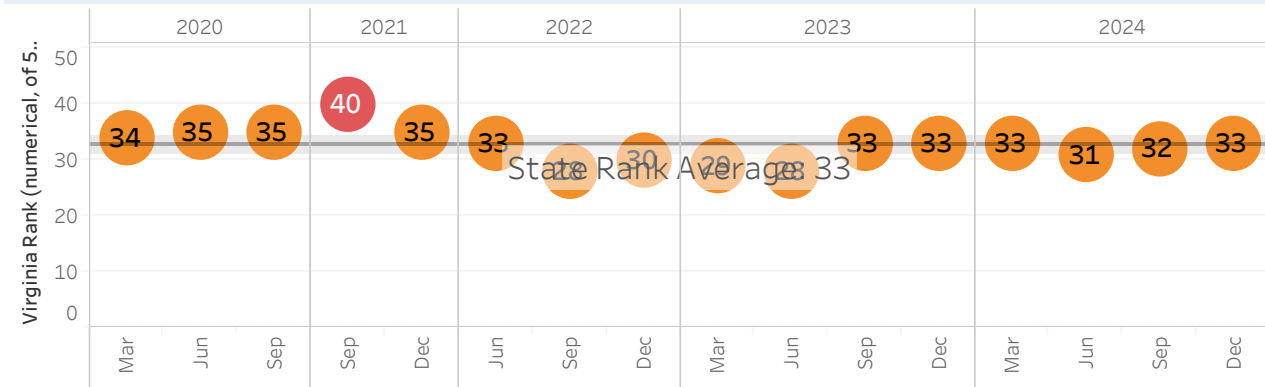
HCAHPS Overall Score | HCAHPS Overall Trend - Virginia Trend
Care Compare Release Date



Legend Below National ..

HCAHPS Overall Score

| HCAHPS Rank Trend - State Rank Trend



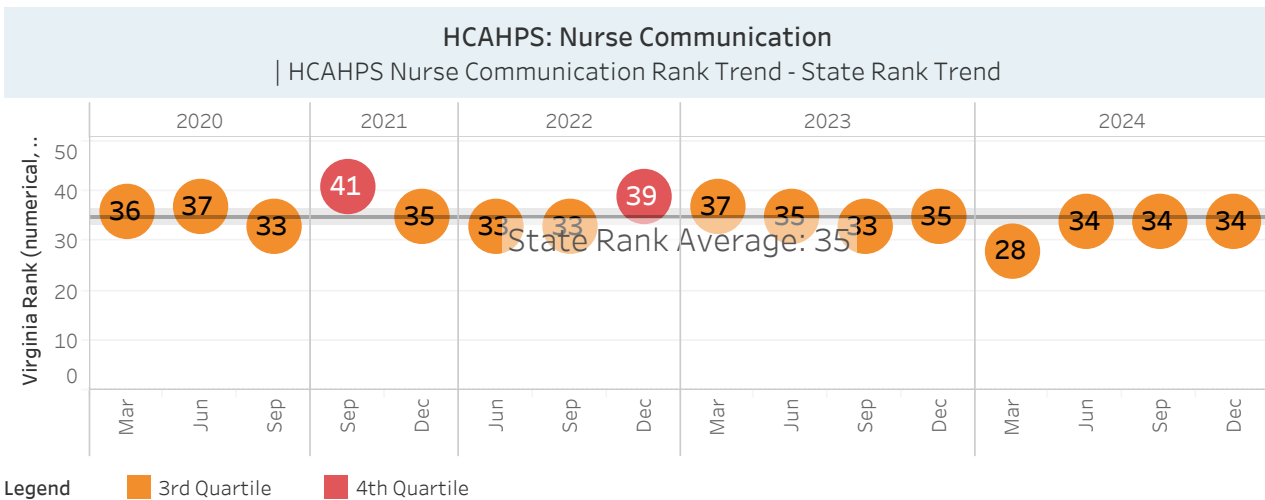
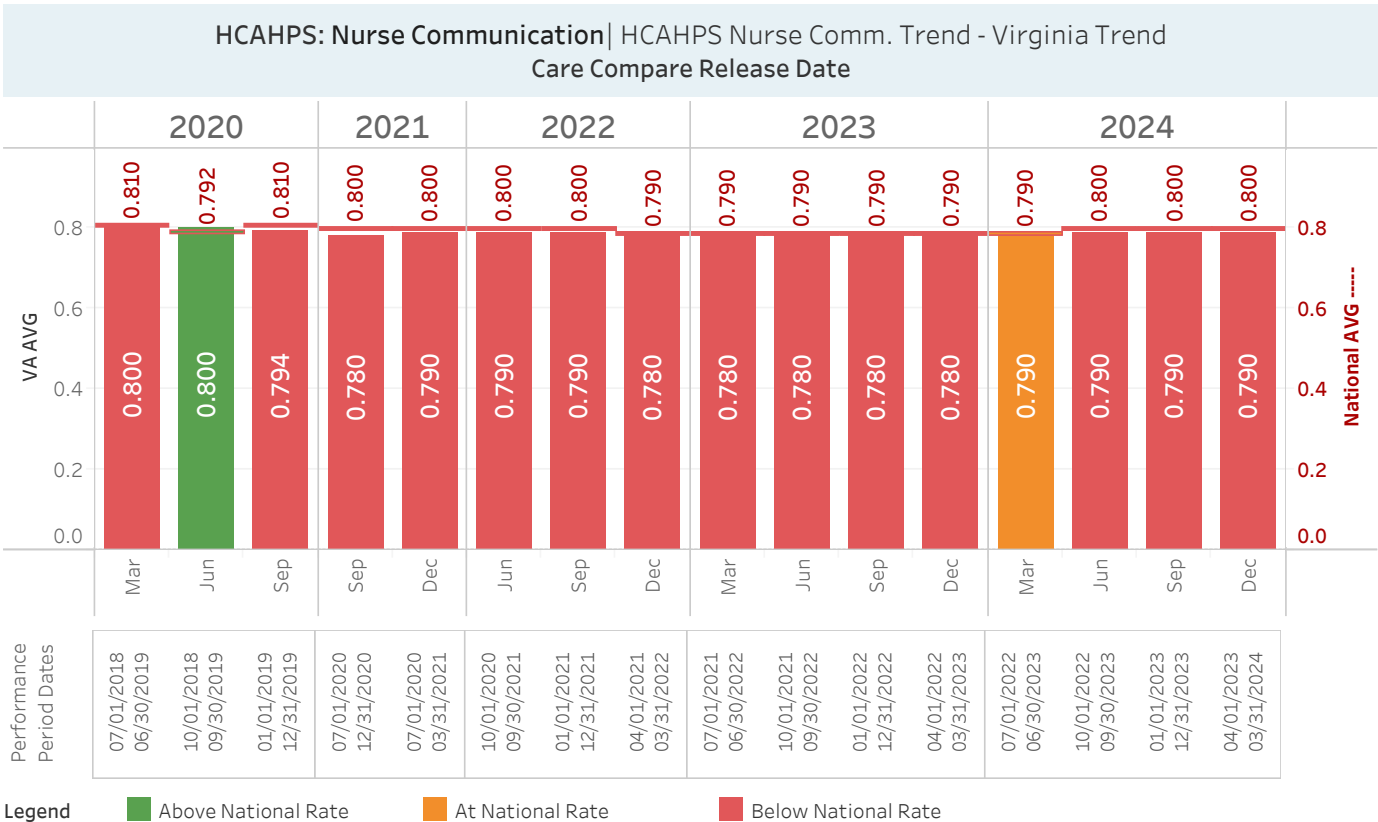
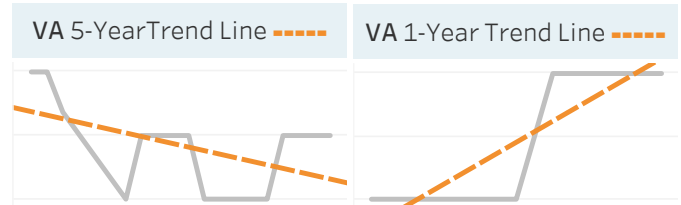
Legend 3rd Quartile 4th Quartile

HCAHPS Overall Score (Question 18 on survey) Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

Measure Detail

HCAHPS Nurse Communication: Hospital Consumer Assessment of Healthcare Providers and Systems

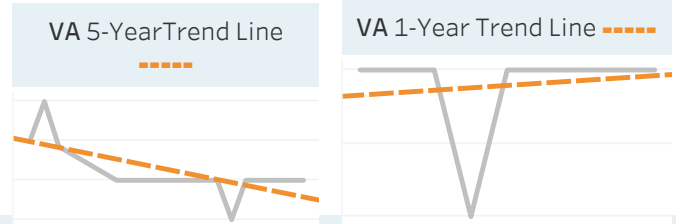


HCAHPS Nurse Communication – Composite of Questions 1, 2, and 3 on survey. **Data Source:** DataGen Care Compare Data. Produced by VHHA Analytics

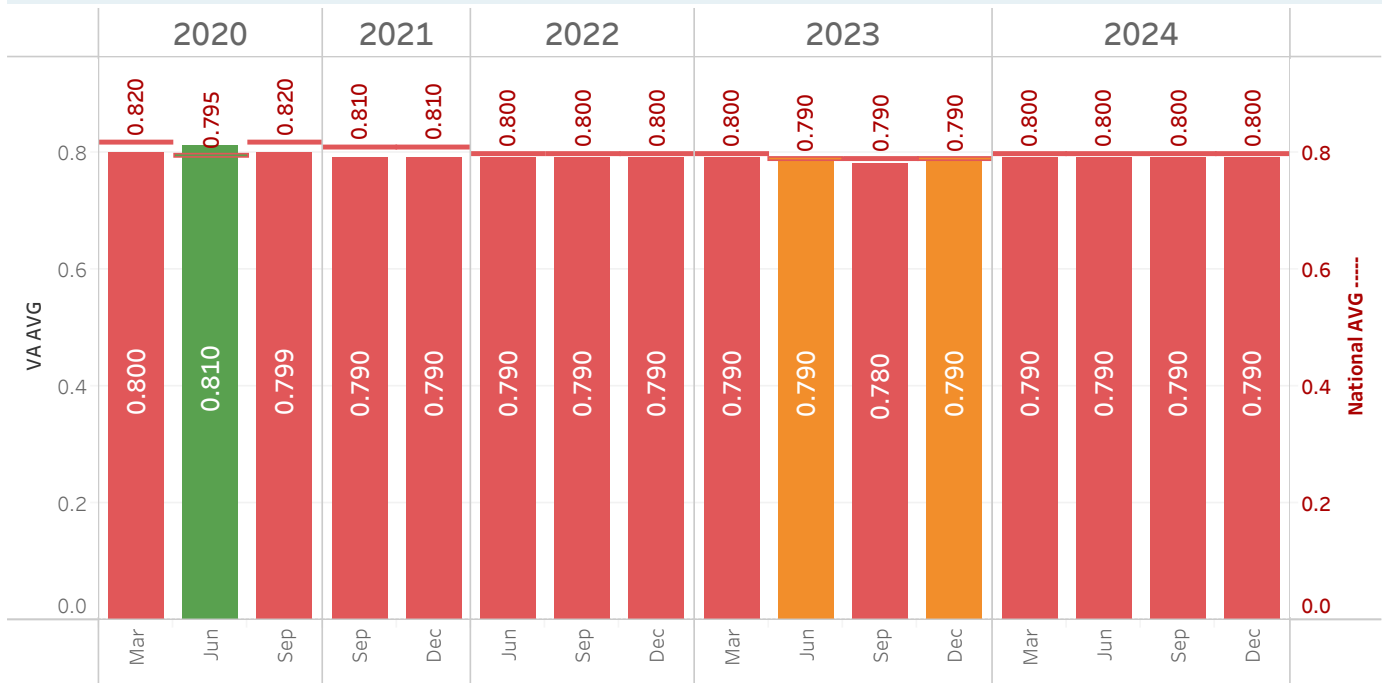
VHHA Quality and Patient Safety Dashboard

Measure Detail

HCAHPS Doctor Communication: Hospital Consumer Assessment of Healthcare Providers and Systems

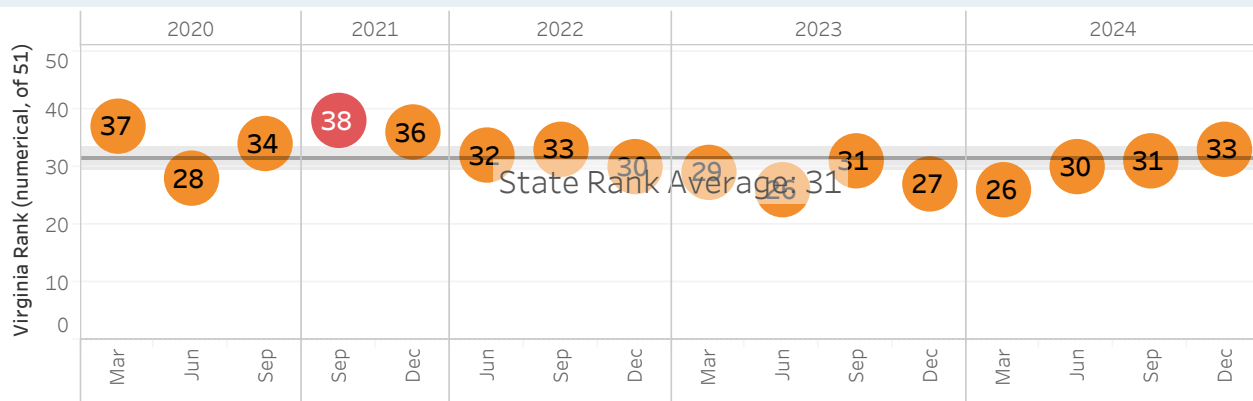


HCAHPS: Doctor Communication | HCAHPS Doctor Comm. Trend - Virginia Trend
Care Compare Release Date



Legend: Above National Rate (green), At National Rate (orange), Below National Rate (red)

HCAHPS: Doctor Communication | HCAHPS Doctor Communication Rank Trend - State Rank Trend



Legend: 3rd Quartile (orange), 4th Quartile (red)

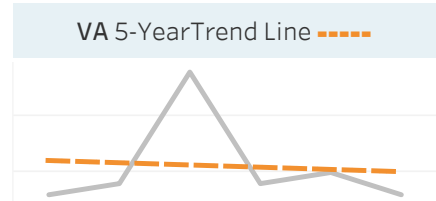
HCAHPS Doctor Communication – Composite of Questions 5, 6, and 7 on survey Data Source: DataGen Care Compare Data. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard

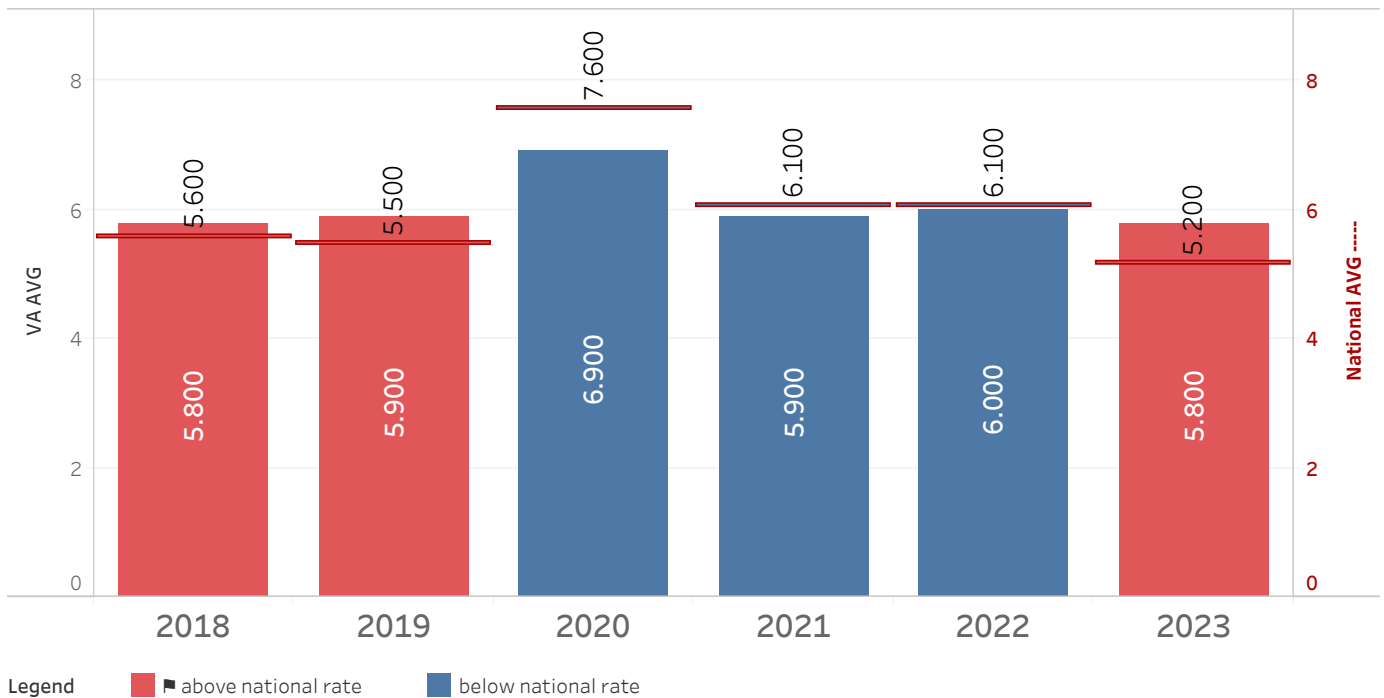


Measure Detail

TCIR : Total Case Incident Rate



TCIR| TCIR Trends - Virginia Performance Trend
Release Date



Ranking Data not Available

TCIR: The Total Case Incident Rate (TCIR) for the hospital industry category measures the frequency of work-related injuries and illnesses within a specified time period, typically expressed per 100 full-time employees. It serves as a comprehensive indicator of occupational health and safety performance, encompassing all recordable incidents, including both minor injuries and more serious incidents. Reported as a standardized rate, TCIR enables comparisons across organizations and industries, providing insights into workplace safety practices and risk management efforts, with lower rates indicating better safety outcomes. **Data Source:** Bureau of Labor Statistics. **Measurement Periods:** The performance period is the calendar year preceeding the data release date listed. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard



Measure Detail

Leapfrog Hospital Safety Grades

Leapfrog Hospital Safety Grades Release Date

Grade Apr 2019 Sep 2019 Apr 2020 Sep 2020 Apr 2021 Sep 2021 Apr 2022 Sep 2022 Apr 2023 Sep 2023 Apr 2024 Sep 2024 Apr 2025

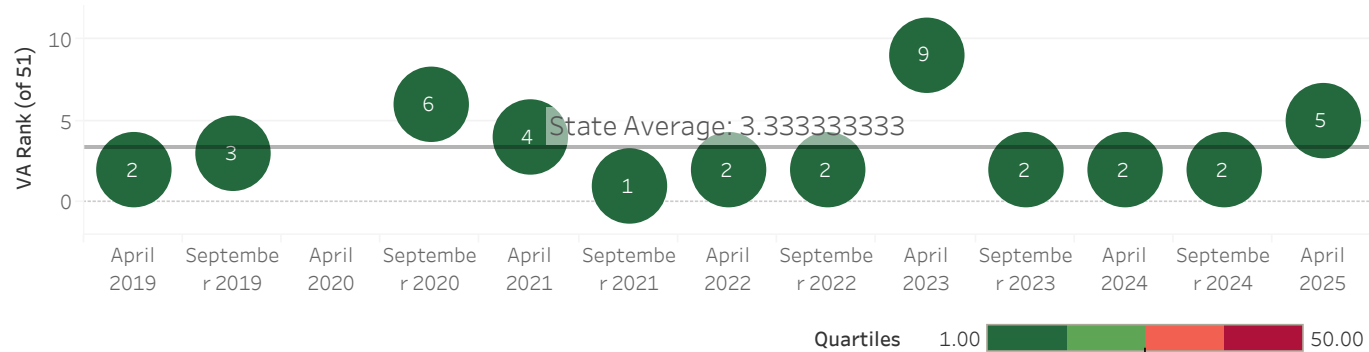
A	50.79%	56.92%	53.85%	50.77%	50.77%	57.75%	59.15%	52.17%	38.57%	50.72%	56.34%	56.52%	45.59%
B	23.81%	27.69%	23.08%	26.15%	27.69%	23.94%	21.13%	30.43%	40.00%	30.43%	25.35%	21.74%	33.82%
C	22.22%	12.31%	18.46%	20.00%	18.46%	16.90%	15.49%	15.94%	21.43%	17.39%	16.90%	21.74%	20.59%
D	3.17%	3.08%	4.62%	3.08%	3.08%	1.41%	4.23%	1.45%	0.00%	1.45%	1.41%	0.00%	0.00%
F	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%



Leapfrog Hospital Safety Grades | Total Hospital Survey Responses

April 2019	September 2019	April 2020	September 2020	April 2021	September 2021	April 2022	September 2022	April 2023	September 2023	April 2024	September 2024	April 2025
63	65	65	65	65	71	71	69	70	69	71	69	68

Leapfrog Safety Grades | Leapfrog state Rank - State Rank Trend



Reported semi-annually, typically occurring in spring (April to June) and fall (October to December), Leapfrog survey grades offer insights into.

Data Source: Leapfrog Group Survey Results. Produced by VHHA Analytics

VHHA Quality and Patient Safety Dashboard



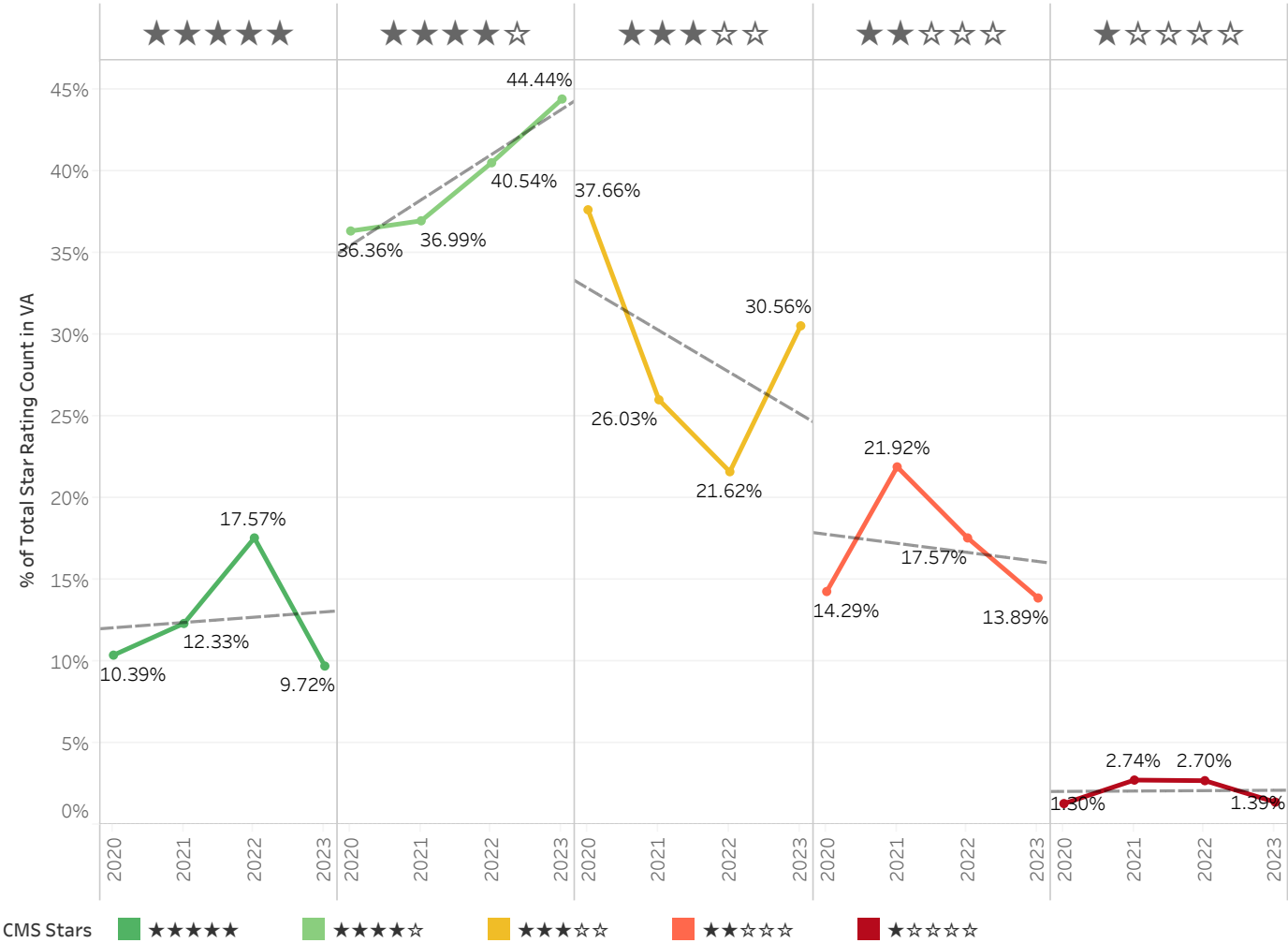
CMS Star Rating Average Score (of 5 stars)

Measure Detail

CMS Star Ratings

2021	2022	2023	2024
3.403	3.342	3.527	3.472

Centers for Medicare & Medicaid Services (CMS) Star Ratings
| CMS Star Ratings Trends - Virginia Benchmark Rate Trend



Centers for Medicare & Medicaid Services (CMS) Star Ratings | Total Hospital Survey Responses

2021	2022	2023	2024
77	73	74	72

Data Source: CMS Quality Reporting Programs. Measurement Period: The performance period is the calendar year preceeding the data release date listed. | Produced by VHHA Analytics