



CALIFORNIA
HOSPITAL
ASSOCIATION

Information Builders Training



Contact us at DataSuiteReports@calhospital.org

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Why a Business Intelligence platform?

- Embedded macros are a security concern for some IT departments.
- More automation of processes, leads to fewer errors and improved efficiency.

Why IB with webFOCUS?

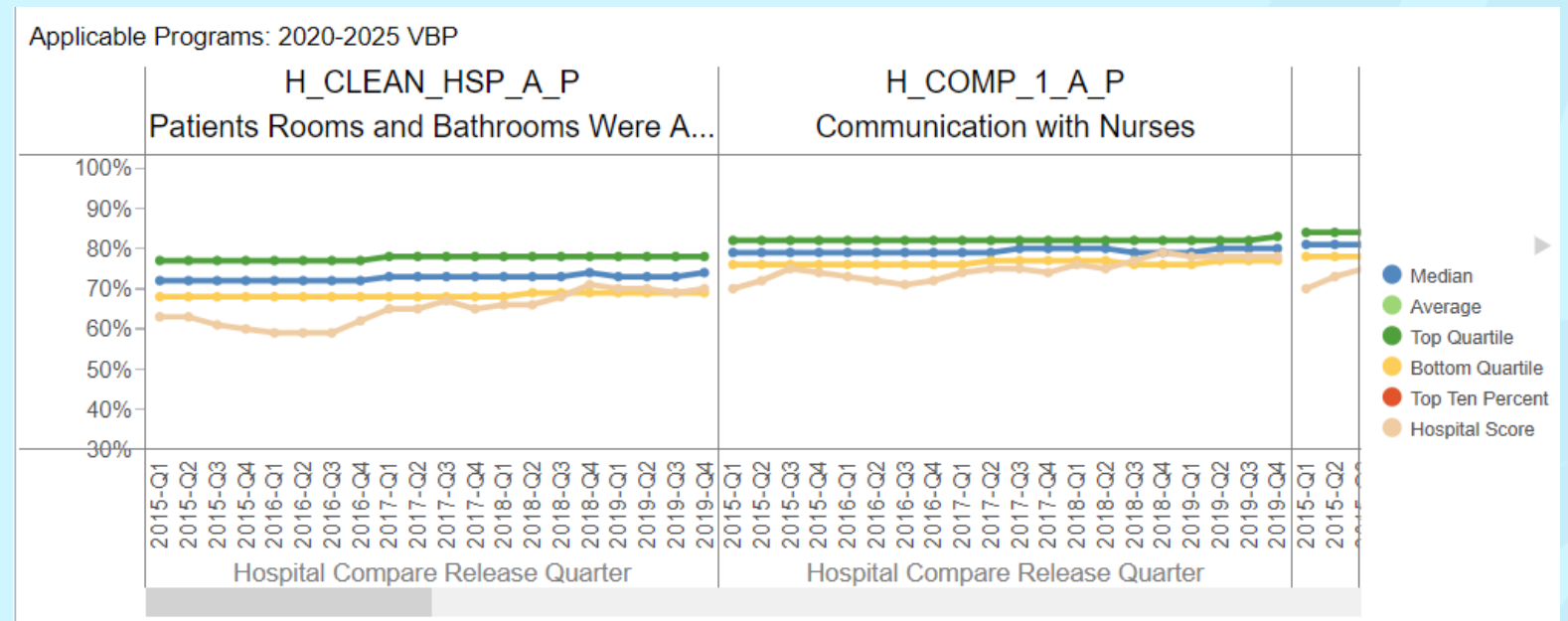
- It provides a secure environment for analyses without embedded macros.
- Enhanced visualizations and interactive reports can be distributed to hospitals.

- The blue bar has navigation for tabs within the analysis.
- Filter selections on the left of the selected tab impact the data shown on charts and reports throughout the analysis.
- Export data to Excel/CSV, sort, filter, and hide columns using drop-down arrows in reports.
- Use the scroll bars to view more data in a report or chart.
- Use right arrows on bottom of report next to “Page 1 of x” to view additional data.

- In a chart, scrolling over a data point brings up a tooltip with the data point value, when applicable.
- In a chart, the arrow on the right can be used to hide a legend and increase graph size.
- The notes tab, rather than individual notes, is repeated on multiple tabs.
 - Some notes that are specific to a section will remain on the tab.
- Glossary will include acronyms and their meaning.

Enhancements to Quality Trend Reports

- Measures with no data will no longer be shown (providers w/ smaller volume had several blank graphs in the Excel version).
- There is now flexibility to show more data views.
- A z-score has been introduced.
 - Hospitals can compare measures that are scored on different scales.
 - Analysis shows hospital-specific bottom three measures based on z-score.



Enhancements to Quality Trend Reports

- Selection of start period to hide older data
- Active document
 - User has the capability to filter time frames, national comparisons, etc.
 - Tooltips allow more interactivity with charts
 - Ability to export raw data to Excel/CSV

Measure	Hospital Compare Release Quarter	Measure Start Date	Measure End Date	Hospital Score	Hospital Z-Score	State Rank	National Rank
H_CLEAN_HSP_A_P	2019-Q4	04/01/2018	03/31/2019	70%	-0.458	63 of 147	2379 of 3497
	2019-Q3	01/01/2018	12/31/2018	69%	-0.364	72 of 146	2514 of 3497
	2019-Q2	10/01/2017	09/30/2018	70%	-0.299	68 of 148	2342 of 3521
	2019-Q1	07/01/2017	06/30/2018	70%	-0.306	68 of 148	2351 of 3528
	2018-Q4	04/01/2017	03/31/2018	71%	-0.252	62 of 151	2182 of 3560
	2018-Q3	01/01/2017	12/31/2017	68%	-0.481	85 of 150	2717 of 3567
	2018-Q2	10/01/2016	09/30/2017	66%	-0.665	98 of 146	2925 of 3460
	2018-Q1	07/01/2016	06/30/2017	66%	-0.665	97 of 147	2882 of 3468
	2017-Q4	04/01/2016	03/31/2017	65%	-0.712	100 of 146	2998 of 3486
	2017-Q3	01/01/2016	12/31/2016	67%	-0.541	92 of 149	2722 of 3488
2017-Q2	10/01/2015	09/30/2016	65%	-0.617	100 of 149	3016 of 3504	

Exploring DataSuite Reports in IB

Layouts **Safety** HCAHPS (VBP) HCAHPS (CJR) Outcomes Readmissions Efficiency Star Ratings Bottom Measures Notes Glossary

Start Period: 2015-Q1

Comparison Groups:

- Average
- Bottom Quartile
- Hospital Score
- Median
- Top Quartile
- Top Ten Percent

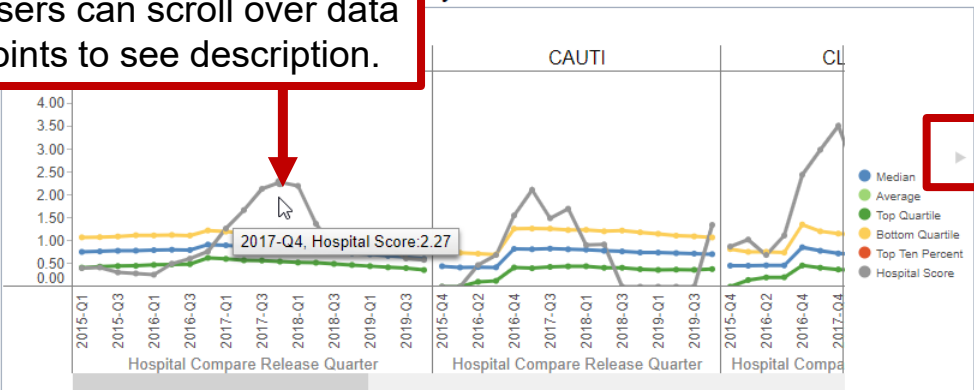
Measures:

- [All]
- C.diff
- CAUTI
- CLABSI
- MRSA
- PSI-90
- SSI - Abd. Hys.
- SSI - Colon

Sample Hospital

Quality Program Measure Trends Analysis

CAUTI



2017-Q4, Hospital Score: 2.27

Measure	Release Quarter	Start Date	End Date	Score	Delta	Count	Target
CAUTI	2017-Q3	01/01/2016	12/31/2016	2.982	-2.930	106 of 108	1978 of 2019
	2016-Q4	01/01/2015	12/31/2015	2.439	-1.788	102 of 111	1944 of 2043
	2016-Q3	01/01/2015	12/31/2015	1.114	-1.100	110 of 131	2136 of 2359
	2016-Q2	01/01/2015	09/30/2015	0.692	-0.235	75 of 123	1545 of 2195
	2016-Q1	01/01/2015	06/30/2015	1.027	-0.925	95 of 115	1771 of 2038
MRSA	2015-Q4	01/01/2015	03/31/2015	0.874	-0.633	72 of 96	1298 of 1664
	2019-Q4	04/01/2018	03/31/2019	0.000	1.335		
	2019-Q3	01/01/2018	12/31/2018	0.000	1.300		
	2019-Q2	10/01/2017	09/30/2018	3.472	-3.794		
	2019-Q1	07/01/2017	06/30/2018	3.546	-3.930		
2018-Q4	04/01/2017	03/31/2018	3.215	-3.365			
2018-Q3	01/01/2017	12/31/2017	3.333	-3.356			

112 of 112 records, Page 1 of 2

Filters can be used to easily filter data in charts/reports throughout the analysis.

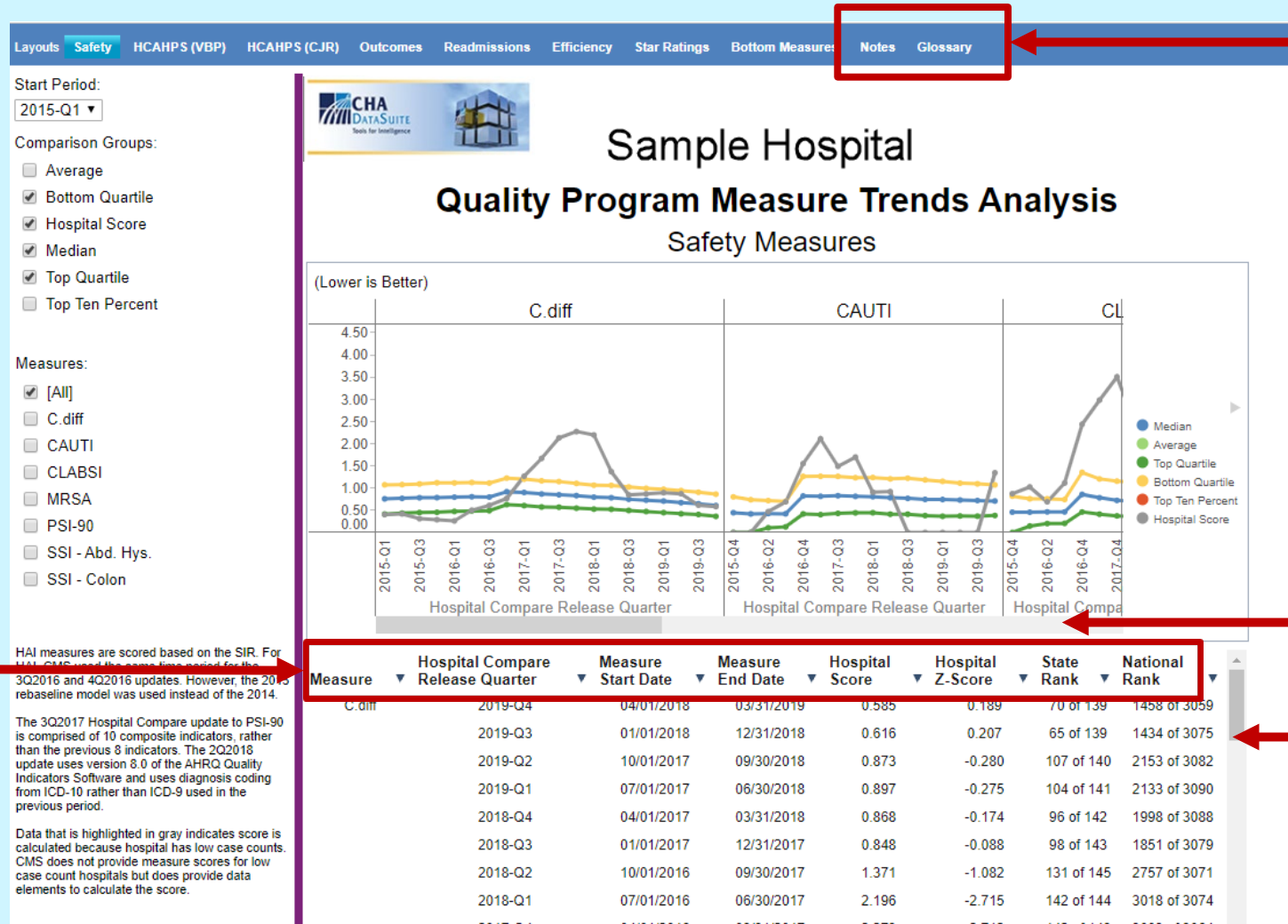
Users can scroll over data points to see description.

Tabs can be used to view additional data in analysis.

Arrows can be used to hide the legend.

Allows the user to view additional data.

Exploring DataSuite Reports in IB



Measure	Hospital Compare Release Quarter	Measure Start Date	Measure End Date	Hospital Score	Hospital Z-Score	State Rank	National Rank
C.diff	2019-Q4	04/01/2018	03/31/2019	0.585	0.189	70 of 139	1458 of 3059
	2019-Q3	01/01/2018	12/31/2018	0.616	0.207	65 of 139	1434 of 3075
	2019-Q2	10/01/2017	09/30/2018	0.873	-0.280	107 of 140	2153 of 3082
	2019-Q1	07/01/2017	06/30/2018	0.897	-0.275	104 of 141	2133 of 3090
	2018-Q4	04/01/2017	03/31/2018	0.868	-0.174	96 of 142	1998 of 3088
	2018-Q3	01/01/2017	12/31/2017	0.848	-0.088	98 of 143	1851 of 3079
	2018-Q2	10/01/2016	09/30/2017	1.371	-1.082	131 of 145	2757 of 3071
	2018-Q1	07/01/2016	06/30/2017	2.196	-2.715	142 of 144	3018 of 3074
	2017-Q4	04/01/2016	03/31/2017	2.273	-2.743	143 of 143	3003 of 3064

Notes tab has general analysis notes and glossary tab has measure abbreviations and acronyms used throughout analysis.

Arrows can be used to sort, hide columns, filter, and export raw data to Excel/CSV.

Scrollbars can be used to view more data in a chart or report.

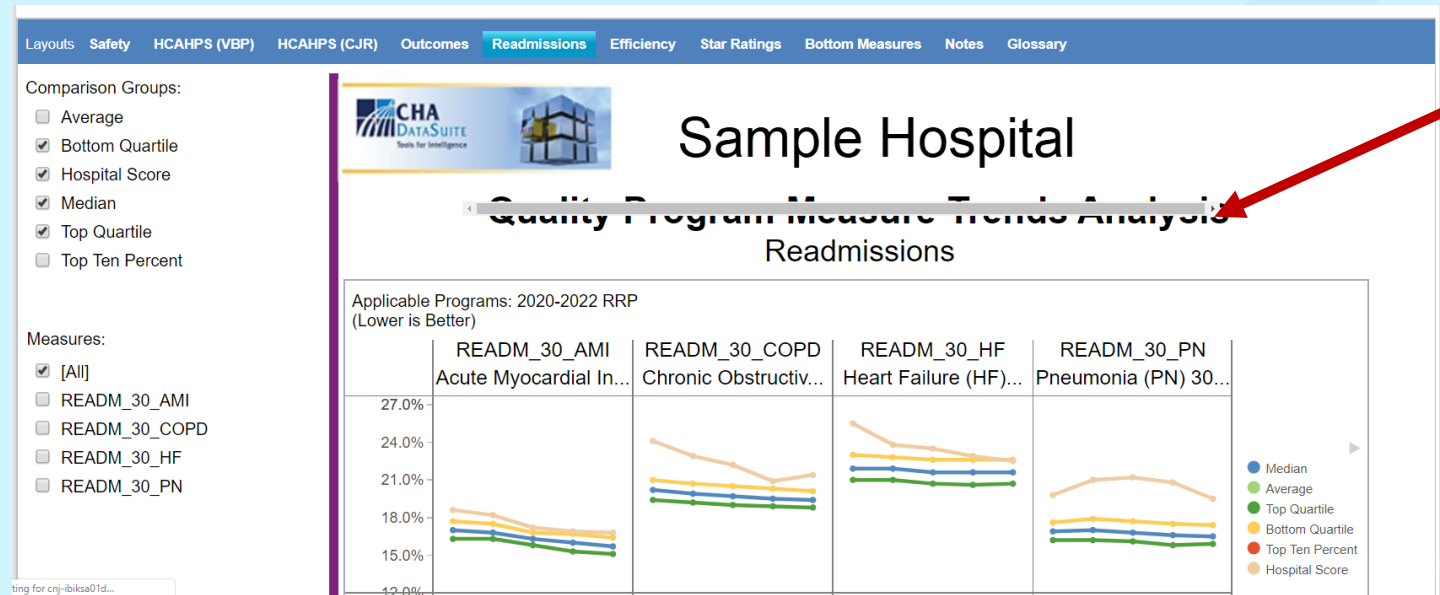
Sample Glossary Tab

Layouts Safety HCAHPS (VBP) HCAHPS (CJR) Outcomes Readmissions Efficiency Star Ratings Bottom Measures Notes **Glossary**

AMI Mort. - MORT-30-AMI: Acute Myocardial Infarction (AMI) 30-Day Mortality Rate
AMI Readm. - READM-30-AMI: Acute Myocardial Infarction (AMI) 30-Day Readmission Rate
C.diff - HAI-6: Clostridium Difficile (C.Diff)
CABG Mort. - MORT-30-CABG: Coronary Artery Bypass Graft (CABG) 30-Day Mortality Rate
CABG Readm. - READM-30-CABG: Coronary Artery Bypass Graft (CABG) 30-Day Readmission Rate
Care Transitions - 3-Item Care Transitions Measure (CTM-3) (H-COMP-7-SA; H-COMP-7-LINEAR_SCORE; H-COMP-7-STAR_RATING)
CAUTI - HAI-2: Catheter Associated Urinary Tract Infections
CJR - Comprehensive Care for Joint Replacement
CLABSI - HAI-1: Central Line Associated Bloodstream Infection
CMS - Centers for Medicare and Medicaid Services
COPD Mort. - MORT-30-COPD: Chronic Obstructive Pulmonary Disease (COPD) 30-Day Mortality Rate
COPD Readm. - READM-30-COPD: Chronic Obstructive Pulmonary Disease (COPD) 30-Day Readmission Rate
Disch. Info - Discharge Information (H-COMP-6-Y-P; H-COMP-6-LINEAR-SCORE; H-COMP-6-STAR-RATING)
Doctor Comm. - Communication with Doctors (H-COMP-2-A-P; H-COMP-2-LINEAR-SCORE; H-COMP-2-STAR-RATING)
Elective Delivery - PC-01: Elective Delivery Prior to 39 Completed Weeks Gestation
HAC - Hospital Acquired Condition
HCAHPS Star - H-STAR-RATING: HCAHPS Star Rating
HF Mort. - MORT-30-HF: Heart Failure (HF) 30-Day Mortality Rate
HF Readm. - READM-30-HF: Heart Failure (HF) 30-Day Readmission Rate
HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems
MRSA - HAI-5: Methicillin Resistant Staph Infection
MSPB - MSPB-1: Medicare Spending Per Beneficiary
Nurse Comm. - Communication with Nurses (H_COMP_1_A_P; H_COMP_1_LINEAR_SCORE; H_COMP_1_STAR_RATING)
Overall Rating - Overall Rating of Hospital (H_HSP_RATING_9_10; H_HSP_RATING_STAR_RATING; H_HSP_RATING_LINEAR_SCORE)
Overall Star - HOSPITAL_STAR: Overall Star Rating
Pain Mgmt - H_COMP_4_STAR_RATING: Pain Management
PN Mort. - MORT-30-PN: Pneumonia (PN) 30-Day Mortality Rate

Resolution Settings

- Adjust the computer's resolution if an extra scrollbar appears next to a hospital's name, report or filter.
- Press the "ctrl" key on the keyboard while pressing either the "-" key (zoom out) or "+" key (zoom in).
- Recommend 100% resolution to remove scrollbars, but zooming in can be used to view smaller fonts when needed.





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Thank you