

Hospital Equity Measures Report

General Information

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|---|---|
| Report Type: | Hospital Equity Measures Report |
| Year: | 2024 |
| Hospital Name: | PROVIDENCE SAINT JOSEPH MEDICAL CENTER |
| Facility Type: | General Acute Care Hospital |
| Hospital HCAI ID: | 106190758 |
| Report Period: | 01/01/2024 - 12/31/2024 |
| Status: | Complete |
| Due Date: | 11/29/2025 |
| Last Updated: | 02/05/2026 |
| Hospital Location with Clean Water and Air: | N |
| Hospital Web Address for Equity Report: | providence.org/locations/socal/saint-joseph-medical-center |

Overview

Assembly Bill No. 1204 requires the Department of Health Care Access and Information (HCAI) to develop and administer a Hospital Equity Measures Reporting Program to collect and post summaries of key hospital performance and patient outcome data regarding sociodemographic information, including but not limited to age, sex, race/ethnicity, payor type, language, disability status, and sexual orientation and gender identity.

Hospitals (general acute, children's, and acute psychiatric) and hospital systems are required to annually submit their reports to HCAI. These reports contain summaries of each measure, the top 10 disparities, and the equity plans to address the identified disparities. HCAI is required to maintain a link on the HCAI website that provides access to the content of hospital equity measures reports and equity plans to the public. All submitted hospitals are required to post their reports on their websites, as well.

Laws and Regulations

For more information on Assembly Bill No. 1204, please visit the following link by copying and pasting the URL into your web browser:

https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202120220AB1204

Hospital Equity Measures

Joint Commission Accreditation

General acute care hospitals are required to report three structural measures based on the Commission Accreditation's Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards. For more information on these measures, please visit the following link by copying and pasting the URL into your web browser:

<https://www.jointcommission.org/standards/r3-report/r3-report-issue-36-new-requirements-to-reduce>

-health-care-disparities/

The first two structural measures are scored as "yes" or "no"; the third structural measure comprises the percentages of patients by five categories of preferred languages spoken, in addition to one other/unknown language category.

Designate an individual to lead hospital health equity activities (Y = Yes, N = No).

Y

Provide documentation of policy prohibiting discrimination (Y = Yes, N = No).

Y

Number of patients that were asked their preferred language, five defined categories and one other/unknown languages category.

568814

Table 1. Summary of preferred languages reported by patients.

| Languages | Number of patients who report preferring language | Total number of patients | Percentage of total patients who report preferring language (%) |
|----------------------------------|---|--------------------------|---|
| English Language | 440690 | 568814 | 77.5 |
| Spanish Language | 61880 | 568814 | 10.9 |
| Asian Pacific Islander Languages | 6065 | 568814 | 1.1 |
| Middle Eastern Languages | 46015 | 568814 | 8.1 |
| American Sign Language | 124 | 568814 | 0 |
| Other Languages | 14040 | 568814 | 2.5 |

Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure

There are five domains that make up the CMS Hospital Commitment to HCHE measures. Each domain is scored as "yes" or "no." In order to score "yes," a general acute care hospital is required to confirm all the domain's attestations. Lack of one or more of the attestations results in a score of "no." For more information on the CMS Hospital Commitment to HCHE measures, please visit the following link by copying and pasting the URL into your web browser:

<https://data.cms.gov/provider-data/topics/hospitals/health-equity>

Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure Domain 1: Strategic Planning (Yes/No)

- Our hospital strategic plan identifies priority populations who currently experience health disparities.
- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.
- Our hospital strategic plan outlines specific resources that have been dedicated to achieving our equity goals.
- Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.

Y

CMS HCHE Measure Domain 2: Data Collection (Yes/No)

- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.
- Our hospital has training for staff in culturally sensitive collection of demographics and/or social determinant of health

information.

- Our hospital inputs demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified electronic health record (EHR) technology.

Y

CMS HCHE Measure Domain 3: Data Analysis (Yes/No)

- Our hospital stratifies key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information in hospital performance dashboards.

Y

CMS HCHE Measure Domain 4: Quality Improvement (Yes/No)

- Our hospital participates in local, regional or national quality improvement activities focused on reducing health disparities.

Y

CMS HCHE Measure Domain 5: Leadership Engagement (Yes/No)

- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.
- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually review key performance indicators stratified by demographic and/or social factors.

Y

Centers for Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH)

General acute care hospitals are required to report on rates of screenings and intervention rates among patients above 18 years old for five health related social needs (HRSN), which are food insecurity, housing instability, transportation problems, utility difficulties, and interpersonal safety. These rates are reported separately as being screened as positive for any of the five HRSNs, positive for each individual HRSN, and the intervention rate for each positively screened HRSN. For more information on the CMS SDOH, please visit the following link by copying and pasting the URL into your web browser:

<https://www.cms.gov/priorities/innovation/key-concepts/social-drivers-health-and-health-related-social-needs>

Number of patients admitted to an inpatient hospital stay who are 18 years or older on the date of admission and are screened for all of the five HRSN

10223

Total number of patients who are admitted to a hospital inpatient stay and who are 18 years or older on the date of admission

11356

Rate of patients admitted for an inpatient hospital stay who are 18 years or older on the date of admission, were screened for an HRSN, and who screened positive for one or more of the HRSNs

90

Table 2. Positive screening rates and intervention rates for the five Health Related Social Needs of the Centers of Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH).

| Social Driver of Health | Number of positive screenings | Rate of positive screenings (%) | Number of positive screenings who received intervention | Rate of positive screenings who received intervention (%) |
|--------------------------------|--------------------------------------|--|--|--|
| Food Insecurity | 152 | 1.5 | 25 | 0.2 |
| Housing Instability | 367 | 3.6 | 59 | 0.5 |
| Transportation Problems | 141 | 1.4 | 23 | 0.2 |
| Utility Difficulties | 123 | 1.2 | 28 | 0.2 |
| Interpersonal Safety | 75 | 0.7 | 14 | 0.1 |

Core Quality Measures for General Acute Care Hospitals

There are two quality measures from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey. For more information on the HCAHPS survey, please visit the following link by copying and pasting the URL into your web browser:

<https://hcahpsonline.org/en/survey-instruments/>

Patient Recommends Hospital

The first HCAHPS quality measure is the percentage of patients who would recommend the hospital to friends and family. For this measure, general acute care hospitals provide the percentage of patient respondents who responded "probably yes" or "definitely yes" to whether they would recommend the hospital, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for the percentages. The percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 19.

Number of respondents who replied "probably yes" or "definitely yes" to HCAHPS Question 19, "Would you recommend this hospital to your friends and family?"

300

Total number of respondents to HCAHPS Question 19

320

Percentage of total respondents who responded "probably yes" or "definitely yes" to HCAHPS Question 19

93.8

Total number of people surveyed on HCAHPS Question 19

326

Response rate, or the percentage of people who responded to HCAHPS Question 19

98.2

Table 3. Patient recommends hospital by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|--|--|---------------------------|---|-----------------------------------|--|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| Asian | 25 | 27 | 92.6 | 27 | 100 |
| Black or African American | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | 268 | 283 | 94.7 | 286 | 99 |
| Middle Eastern or North African | | | | | |
| Multiracial and/or Multiethnic (two or more races) | | | | | |
| Native Hawaiian or Pacific Islander | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| White | 222 | 233 | 95.3 | 236 | 98.7 |

| Age | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|------------------------|--|---------------------------|---|-----------------------------------|--|
| Age < 18 | | | | | |
| Age 18 to 34 | 35 | 38 | 92.1 | 38 | 100 |
| Age 35 to 49 | 54 | 57 | 94.7 | 58 | 98.3 |
| Age 50 to 64 | 38 | 40 | 95 | 43 | 93 |
| Age 65 Years and Older | 173 | 185 | 93.5 | 187 | 98.9 |

| Sex assigned at birth | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|-----------------------|--|---------------------------|---|-----------------------------------|--|
| Female | 181 | 191 | 94.8 | 195 | 97.9 |
| Male | 119 | 129 | 92.2 | 131 | 98.5 |
| Unknown | | | | | |

| Payer Type | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|------------|--|---------------------------|---|-----------------------------------|--|
| Medicare | 164 | 174 | 94.3 | 176 | 98.9 |
| Medicaid | 48 | 53 | 90.6 | 55 | 96.4 |
| Private | 85 | 88 | 96.6 | 89 | 98.9 |
| Self-Pay | | | | | |
| Other | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|----------------------------------|--|---------------------------|---|-----------------------------------|--|
| English Language | 200 | 215 | 93 | 219 | 98.2 |
| Spanish Language | 27 | 27 | 100 | 27 | 100 |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign Language | | | | | |
| Other/Unknown Languages | 32 | 32 | 100 | 32 | 100 |

| Disability Status | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|--------------------------------------|---|----------------------------------|--|--|---|
| Does not have a disability | | | | | |
| Has a mobility disability | | | | | |
| Has a cognition disability | | | | | |
| Has a hearing disability | | | | | |
| Has a vision disability | | | | | |
| Has a self-care disability | | | | | |
| Has an independent living disability | | | | | |

| Sexual Orientation | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|----------------------------|---|----------------------------------|--|--|---|
| Lesbian, gay or homosexual | | | | | |
| Straight or heterosexual | | | | | |
| Bisexual | | | | | |
| Something else | | | | | |
| Don't know | | | | | |
| Not disclosed | | | | | |

| Gender Identity | Number of "probably yes" or "definitely yes" responses | Total number of responses | Percent of "probably yes" or "definitely yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|--|---|----------------------------------|--|--|---|
| Female | | | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | | | |
| Male | | | | | |
| Male-to-female (MTF)/ transgender female/trans | | | | | |
| Non-conforming gender | | | | | |
| Additional gender category or other | | | | | |
| Not disclosed | | | | | |

Patient Received Information in Writing

The second HCAHPS quality measure is the percentage of patients who reported receiving information in writing on symptoms and health problems to look out for after leaving the hospital. General acute care hospitals are required to provide the percentage of patient respondents who responded "yes" to being provided written information, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for these percentages. These percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 17.

Number of respondents who replied "yes" to HCAHPS Question 17, "During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the

hospital?"

268

Total number of respondents to HCAHPS Question 17

312

Percentage of respondents who responded "yes" to HCAHPS Question 17

85.9

Total number of people surveyed on HCAHPS Question 17

326

Response rate, or the percentage of people who responded to HCAHPS Question 17

95.7

Table 4. Patient reports receiving information in writing about symptoms or health problems by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|---|----------------------------------|----------------------------------|--|--|---|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| Asian | 22 | 25 | 88 | 27 | 92.6 |
| Black or African American | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | 238 | 277 | 85.9 | 286 | 96.9 |
| Middle Eastern or North African | | | | | |
| Multiracial and/or Multiethnic (two or more races) | | | | | |
| Native Hawaiian or Pacific Islander | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |
| White | 196 | 228 | 86 | 236 | 96.6 |

| Age | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|-------------------------------|----------------------------------|----------------------------------|--|--|---|
| Age < 18 | | | | | |
| Age 18 to 34 | 37 | 38 | 97.4 | 38 | 100 |
| Age 35 to 49 | 48 | 56 | 85.7 | 58 | 96.6 |
| Age 50 to 64 | 39 | 42 | 92.9 | 43 | 97.7 |
| Age 65 Years and Older | 144 | 176 | 81.8 | 187 | 94.1 |

| Sex assigned at birth | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|------------------------------|----------------------------------|----------------------------------|--|--|---|
| Female | 165 | 189 | 87.3 | 195 | 96.9 |
| Male | 103 | 123 | 83.7 | 131 | 93.9 |
| Unknown | | | | | |

| Payer Type | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|-------------------|----------------------------------|----------------------------------|--|--|---|
| Medicare | 134 | 164 | 81.7 | 176 | 93.2 |
| Medicaid | 50 | 55 | 90.9 | 55 | 100 |
| Private | 80 | 89 | 89.9 | 89 | 100 |
| Self-Pay | | | | | |
| Other | Suppressed | Suppressed | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|----------------------------------|----------------------------------|----------------------------------|--|--|---|
| English Language | 179 | 212 | 84.4 | 219 | 96.8 |
| Spanish Language | 26 | 27 | 96.3 | 27 | 100 |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign | | | | | |
| Other/Unknown Languages | 27 | 31 | 87.1 | 32 | 96.9 |

| Disability Status | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|--------------------------------------|----------------------------------|----------------------------------|--|--|---|
| Does not have a disability | | | | | |
| Has a mobility disability | | | | | |
| Has a cognition | | | | | |
| Has a hearing disability | | | | | |
| Has a vision disability | | | | | |
| Has a self-care | | | | | |
| Has an independent living disability | | | | | |

| Sexual Orientation | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|----------------------------|----------------------------------|----------------------------------|--|--|---|
| Lesbian, gay or homosexual | | | | | |
| Straight or heterosexual | | | | | |
| Bisexual | | | | | |
| Something else | | | | | |
| Don't know | | | | | |
| Not disclosed | | | | | |

| Gender Identity | Number of "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|--|---------------------------|---------------------------|-----------------------------------|-----------------------------------|--|
| Female | | | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | | | |
| Male | | | | | |
| Male-to-female (MTF)/ transgender female/trans woman | | | | | |
| Non-conforming gender | | | | | |
| Additional gender category or other | | | | | |
| Not disclosed | | | | | |

Agency for Healthcare Research and Quality (AHRQ) Indicators

General acute care hospitals are required to report on two indicators from the Agency for Healthcare Research and Quality (AHRQ). For general information about AHRQ indicators, please visit the following link by copying and pasting the URL into your web browser:
<https://qualityindicators.ahrq.gov/>

Pneumonia Mortality Rate

The Pneumonia Mortality Rate is defined as the rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission for patients ages 18 years and older. General acute care hospitals report the Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding AHRQ Inpatient Quality Indicator is 20. For more information about this indicator, please visit the following link by copying and pasting the URL into your web browser:
https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI_20_Pneumonia_Mortality_Rate.pdf

Number of in-hospital deaths with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

33

Total number of hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

551

Rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

59.9

Table 5. Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|---|--|---|--|
| American Indian or Alaska Native | | | |
| Asian | Suppressed | Suppressed | Suppressed |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | Suppressed | Suppressed | Suppressed |
| Middle Eastern or North African | Suppressed | Suppressed | Suppressed |
| Multiracial and/or Multiethnic (two or more) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 19 | 314 | 60.5 |

| Age | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|-------------------------------|--|---|--|
| Age < 18 | | | |
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | Suppressed | Suppressed | Suppressed |
| Age 50 to 64 | Suppressed | Suppressed | Suppressed |
| Age 65 Years and Older | 30 | 468 | 64.1 |

| Sex assigned at birth | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|------------------------------|--|---|--|
| Female | 18 | 279 | 64.5 |
| Male | 15 | 272 | 55.1 |
| Unknown | | | |

| Payer Type | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|-------------------|--|---|--|
| Medicare | 30 | 480 | 62.5 |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | Suppressed | Suppressed | Suppressed |
| Self-Pay | | | |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|----------------------------------|--|---|--|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 33 | 551 | 59.9 |

| Disability Status | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|--------------------------------------|--|---|--|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|----------------------------|--|---|--|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of hospital discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|--|--|---|--|
| Female | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/ transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

Death Rate among Surgical Inpatients with Serious Treatable Complications

The Death Rate among Surgical Inpatients with Serious Treatable Complications is defined as the rate of in-hospital deaths per 1,000 surgical discharges among patients ages 18-89 years old or obstetric patients with serious treatable complications. General acute care hospitals report this measure by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding AHRQ Patient Safety Indicator is 04. For more information about this indicator, please visit the following link by copying and pasting the URL into your web browser:

https://qualityindicators.ahrq.gov/Downloads/Modules/PSI/V2023/TechSpecs/PSI_04_Death_Rate_among_Surgical_Inpatients_with_Serious_Treatable_Complications.pdf

Number of in-hospital deaths among patients aged 18-89 years old or obstetric patients with serious treatable complications

25

Total number of surgical discharges among patients aged 18-89 years old or obstetric patients

85

Rate of in-hospital deaths per 1,000 surgical discharges, among patients aged 18-89 years old or obstetric patients with serious treatable complications

294.1

Table 6. Death Rate among Surgical Inpatients with Serious Treatable Complications by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|--|---|--|---|
| American Indian or Alaska Native | | | |
| Asian | Suppressed | Suppressed | Suppressed |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | Suppressed | Suppressed | Suppressed |
| Middle Eastern or North African | Suppressed | Suppressed | Suppressed |
| Multiracial and/or Multiethnic (two or more) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 11 | 38 | 289.5 |

| Age | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|------------------------|---|--|---|
| Age < 18 | | | |
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | Suppressed | Suppressed | Suppressed |
| Age 50 to 64 | Suppressed | Suppressed | Suppressed |
| Age 65 Years and Older | 20 | 61 | 327.9 |

| Sex assigned at birth | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|-----------------------|---|--|---|
| Female | 12 | 35 | 342.9 |
| Male | 13 | 50 | 260 |
| Unknown | | | |

| Payer Type | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|------------|---|--|---|
| Medicare | 18 | 60 | 300 |
| Medicaid | | | |
| Private | Suppressed | Suppressed | Suppressed |
| Self-Pay | | | |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|----------------------------------|---|--|---|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 25 | 85 | 294.1 |

| Disability Status | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|--------------------------------------|---|--|---|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|----------------------------|---|--|---|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of in-hospital deaths that meet the inclusion/exclusion criteria | Number of surgical discharges that meet the inclusion/exclusion criteria | Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%) |
|--|---|--|---|
| Female | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/ transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

California Maternal Quality Care Collaborative (CMQCC) Core Quality Measures

There are three core quality maternal measures adopted from the California Maternal Quality Care Collaborative (CMQCC).

CMQCC Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth Rate

The CMQCC Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth Rate is defined as nulliparous women with a term (at least 37 weeks gestation), singleton baby in a vertex position delivered by cesarian birth. General acute care hospitals report the NTSV Cesarean Birth Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information, please visit the following link by copying and pasting the URL into your web browser:

<https://www.cmqcc.org/quality-improvement-toolkits/supporting-vaginal-birth/ntsv-cesarean-birth-measure-specifications>

Number of NTSV patients with Cesarean deliveries

189

Total number of nulliparous NTSV patients

852

Rate of NTSV patients with Cesarean deliveries

0.2

Table 7. Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|--|---|--------------------------------------|---|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | 21 | 80 | 0.3 |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | 73 | 348 | 0.2 |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | Suppressed | Suppressed | Suppressed |
| Native Hawaiian or Pacific Islander | | | |
| White | 75 | 358 | 0.2 |

| Age | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|------------------------|---|--------------------------------------|---|
| Age < 18 | Suppressed | Suppressed | Suppressed |
| Age 18 to 29 | 65 | 368 | 0.2 |
| Age 30 to 39 | 108 | 438 | 0.2 |
| Age 40 Years and Older | 16 | 41 | 0.4 |

| Sex assigned at birth | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|------------------------------|---|--------------------------------------|---|
| Female | | | |
| Male | | | |
| Unknown | | | |

| Payer Type | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|-------------------|---|--------------------------------------|---|
| Medicare | | | |
| Medicaid | 71 | 367 | 0.2 |
| Private | 77 | 333 | 0.2 |
| Self-Pay | Suppressed | Suppressed | Suppressed |
| Other | 39 | 146 | 0.3 |

| Preferred Language | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|----------------------------------|---|--------------------------------------|---|
| English Language | 159 | 690 | 0.2 |
| Spanish Language | 18 | 78 | 0.2 |
| Asian Pacific Islander Languages | Suppressed | Suppressed | Suppressed |
| Middle Eastern Languages | Suppressed | Suppressed | Suppressed |
| American Sign Language | | | |
| Other/Unknown Languages | Suppressed | Suppressed | Suppressed |

| Disability Status | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|--------------------------------------|---|--------------------------------------|---|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|----------------------------|---|--------------------------------------|---|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|---|---|--------------------------------------|---|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

CMQCC Vaginal Birth After Cesarean (VBAC) Rate

The CMQCC Vaginal Birth After Cesarean (VBAC) Rate is defined as vaginal births per 1,000 deliveries by patients with previous Cesarean deliveries. General acute care hospitals report the VBAC Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The VBAC Rate uses the specifications of AHRQ Inpatient Quality Indicator 22. For more information, please visit the following link by copying and pasting the URL into your web browser:

[https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI_22_Vaginal_Birth_After_Cesarean_\(VBAC\)_Delivery_Rate_Uncomplicated.pdf](https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI_22_Vaginal_Birth_After_Cesarean_(VBAC)_Delivery_Rate_Uncomplicated.pdf)

Number of vaginal delivery among cases with previous Cesarean delivery that meet the inclusion and exclusion criteria

35

Total number of birth discharges with previous Cesarean delivery that meet the inclusion and exclusion criteria

Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries

115.9

Table 8. Vaginal Birth After Cesarean (VBAC) Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|---|---|---|--|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | Suppressed | Suppressed | Suppressed |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | 18 | 143 | 125.9 |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | Suppressed | Suppressed | Suppressed |
| Native Hawaiian or Pacific | | | |
| White | Suppressed | Suppressed | Suppressed |

| Age | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|-------------------------------|---|---|--|
| Age < 18 | | | |
| Age 18 to 29 | 11 | 69 | 159.4 |
| Age 30 to 39 | 20 | 195 | 102.6 |
| Age 40 Years and Older | Suppressed | Suppressed | Suppressed |

| Sex assigned at birth | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|------------------------------|---|---|--|
| Female | | | |
| Male | | | |
| Unknown | | | |

| Payer Type | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|-------------------|---|---|--|
| Medicare | Suppressed | Suppressed | Suppressed |
| Medicaid | 18 | 191 | 94.2 |
| Private | Suppressed | Suppressed | Suppressed |
| Self-Pay | Suppressed | Suppressed | Suppressed |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|----------------------------------|---|---|--|
| English Language | 27 | 211 | 128 |
| Spanish Language | Suppressed | Suppressed | Suppressed |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | Suppressed | Suppressed | Suppressed |
| American Sign Language | | | |
| Other/Unknown Languages | Suppressed | Suppressed | Suppressed |

| Disability Status | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|----------------------------|---|---|--|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living | | | |

| Sexual Orientation | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|----------------------------|---|---|--|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of vaginal deliveries with previous Cesarean delivery | Total number of birth discharges with previous Cesarean delivery | Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%) |
|---|---|---|--|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or | | | |
| Not disclosed | | | |

CMQCC Exclusive Breast Milk Feeding Rate

The CMQCC Exclusive Breast Milk Feeding Rate is defined as the newborns per 100 who reached at least 37 weeks of gestation (or 3000g if gestational age is missing) who received breast milk

exclusively during their stay at the hospital. Other criteria are that the newborns did not go to the neonatal intensive care unit (NICU), transfer, or die, did not reflect multiple gestation, and did not have codes for parenteral nutrition or galactosemia. General acute care hospitals report the Exclusive Breast Milk Feeding Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The CMQCC Exclusive Breast Milk Feeding Rate uses the Joint Commission National Quality Measure PC-05. For more information, please visit the following link by copying and pasting the URL into your web browser: <https://manual.jointcommission.org/releases/TJC2024B/MIF0170.html>

Number of newborn cases that were exclusively fed breast milk during their hospital stay and meet the inclusion and exclusion criteria

713

Total number of newborn cases born in the hospital that meet the inclusion and exclusion criteria

1859

Rate of newborn cases per 100 that were exclusively fed breast milk during their hospital stay and meet the inclusion and exclusion criteria

38.4

Table 9. Exclusive Breast Milk Feeding Rate by race and/or ethnicity, maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|--|---|---|--|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | 53 | 133 | 39.8 |
| Black or African American | 34 | 63 | 54 |
| Hispanic or Latino | 236 | 823 | 28.7 |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | 27 | 46 | 58.7 |
| Native Hawaiian or Pacific | Suppressed | Suppressed | Suppressed |
| White | 353 | 776 | 45.5 |

| Age | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|------------------------|---|---|--|
| Age < 18 | Suppressed | Suppressed | Suppressed |
| Age 18 to 29 | 221 | 653 | 33.8 |
| Age 30 to 39 | 449 | 1066 | 42.1 |
| Age 40 Years and Older | 43 | 135 | 31.9 |

| Sex assigned at birth | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|------------------------------|--|--|---|
| Female | | | |
| Male | | | |
| Unknown | | | |

| Payer Type | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|-------------------|--|--|---|
| Medicare | Suppressed | Suppressed | Suppressed |
| Medicaid | 305 | 986 | 30.9 |
| Private | 273 | 576 | 47.4 |
| Self-Pay | 14 | 32 | 43.8 |
| Other | 121 | 264 | 45.8 |

| Preferred Language | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|---|--|--|---|
| English Language | 507 | 1208 | 42 |
| Spanish Language | 26 | 180 | 14.4 |
| Asian Pacific Islander Languages | Suppressed | Suppressed | Suppressed |
| Middle Eastern Languages | 50 | 145 | 34.5 |
| American Sign Language | | | |
| Other/Unknown Languages | 129 | 323 | 39.9 |

| Disability Status | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|-----------------------------------|--|--|---|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living | | | |

| Sexual Orientation | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|----------------------------|--|--|---|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria | Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria | Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%) |
|---|--|--|---|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or | | | |
| Not disclosed | | | |

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate

General acute care hospitals are required to report several HCAI All-Cause Unplanned 30-Day Hospital Readmission Rates, which are broadly defined as the percentage of hospital-level, unplanned, all-cause readmissions after admission for eligible conditions within 30 days of hospital discharge for patients aged 18 years and older. These rates are first stratified based on any eligible condition, mental health disorders, substance use disorders, co-occurring disorders, and no behavioral health diagnosis. Then, each condition-stratified hospital readmission rate is further stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, please visit the following link by copying and pasting the URL into your web browser:

https://hcai.ca.gov/wp-content/uploads/2024/10/HCAI-All-Cause-Readmission-Rate-Exclusions_ADA.pdf

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate – Any Eligible Condition

Number of inpatient hospital admissions which occurs within 30 days of the discharge date of an eligible index admission and were 18 years or older at time of admission

680

Total number of patients who were admitted to the general acute care hospital and were 18 years or older at time of admission

8269

Rate of hospital-level, unplanned, all-cause readmissions after admission for any eligible condition within 30 days of hospital discharge for patients aged 18 and older

8.2

Table 10. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for any eligible condition by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | 19 | 415 | 4.6 |
| Black or African American | 24 | 327 | 7.3 |
| Hispanic or Latino | 126 | 1636 | 7.7 |
| Middle Eastern or North African | 57 | 399 | 14.3 |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 392 | 4360 | 9 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------------------|---|--|-----------------------------|
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | 32 | 665 | 4.8 |
| Age 50 to 64 | 105 | 1224 | 8.6 |
| Age 65 Years and Older | 537 | 6008 | 8.9 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 386 | 4462 | 8.7 |
| Male | 294 | 3807 | 7.7 |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | 567 | 6085 | 9.3 |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | 90 | 1757 | 5.1 |
| Self-Pay | | | |
| Other | 19 | 369 | 5.1 |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 680 | 8269 | 8.2 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|---|--|-----------------------------|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|---|--|-----------------------------|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Mental Health Disorders

Number of inpatient hospital admissions which occurs within 30 days of the discharge date for mental health disorders and were 18 years or older at time of admission

114

Total number of patients who were admitted to the general acute care hospital and were 18 years or older at time of admission

1230

Rate of hospital-level, unplanned, all-cause readmissions after admission for mental health disorders within 30 days of hospital discharge for patients aged 18 and older

9.3

Table 11. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for mental health disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--|---|--|-----------------------------|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | Suppressed | Suppressed | Suppressed |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | 17 | 191 | 8.9 |
| Middle Eastern or North African | Suppressed | Suppressed | Suppressed |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 77 | 779 | 9.9 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|---|--|-----------------------------|
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | Suppressed | Suppressed | Suppressed |
| Age 50 to 64 | 17 | 185 | 9.2 |
| Age 65 Years and Older | 88 | 887 | 9.9 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 76 | 812 | 9.4 |
| Male | 38 | 418 | 9.1 |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | 102 | 951 | 10.7 |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | Suppressed | Suppressed | Suppressed |
| Self-Pay | | | |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|---|--|-----------------------------|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 114 | 1230 | 9.3 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|---|--|-----------------------------|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|---|--|-----------------------------|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Substance Use Disorders

Number of inpatient hospital admissions which occurs within 30 days of the discharge date for substance use disorders and were 18 years or older at time of admission

41

Total number of patients who were admitted to the general acute care hospital and were 18 years or older at time of admission

321

Rate of hospital-level, unplanned, all-cause readmissions after admission for substance use disorders within 30 days of hospital discharge for patients aged 18 and older

12.8

Table 12. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for substance use disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--|---|--|-----------------------------|
| American Indian or Alaska Native | | | |
| Asian | Suppressed | Suppressed | Suppressed |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | Suppressed | Suppressed | Suppressed |
| Middle Eastern or North African | Suppressed | Suppressed | Suppressed |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 34 | 201 | 16.9 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|---|--|-----------------------------|
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | Suppressed | Suppressed | Suppressed |
| Age 50 to 64 | 17 | 87 | 19.5 |
| Age 65 Years and Older | 18 | 156 | 11.5 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 26 | 109 | 23.9 |
| Male | 15 | 212 | 7.1 |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | 22 | 178 | 12.4 |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | 17 | 114 | 14.9 |
| Self-Pay | | | |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|---|--|-----------------------------|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 41 | 321 | 12.8 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|---|--|-----------------------------|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|---|--|-----------------------------|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Co-occurring disorders

Number of inpatient hospital admissions which occurs within 30 days of the discharge date for co-occurring disorders and were 18 years or older at time of admission

17

Total number of patients who were admitted to the general acute care hospital and were 18 years or older at time of admission

178

Rate of hospital-level, unplanned, all-cause readmissions after admission for co-occurring disorders within 30 days of hospital discharge for patients aged 18 and older

9.6

Table 13. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for co-occurring disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--|---|--|-----------------------------|
| American Indian or Alaska Native | | | |
| Asian | | | |
| Black or African American | Suppressed | Suppressed | Suppressed |
| Hispanic or Latino | Suppressed | Suppressed | Suppressed |
| Middle Eastern or North African | Suppressed | Suppressed | Suppressed |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 12 | 126 | 9.5 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|---|--|-----------------------------|
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | Suppressed | Suppressed | Suppressed |
| Age 50 to 64 | Suppressed | Suppressed | Suppressed |
| Age 65 Years and Older | Suppressed | Suppressed | Suppressed |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 13 | 90 | 14.4 |
| Male | Suppressed | Suppressed | Suppressed |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | Suppressed | Suppressed | Suppressed |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | Suppressed | Suppressed | Suppressed |
| Self-Pay | | | |
| Other | Suppressed | Suppressed | Suppressed |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|---|--|-----------------------------|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 17 | 178 | 9.6 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|---|--|-----------------------------|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|---|--|-----------------------------|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - No Behavioral Health Diagnosis

Number of inpatient hospital admissions which occurs within 30 days of the discharge date with no behavioral diagnosis and were 18 years or older at time of admission

508

Total number of patients who were admitted to the general acute care hospital and were 18 years or older at time of admission

6540

Rate of hospital-level, unplanned, all-cause readmissions after admission with no behavioral diagnosis within 30 days of hospital discharge for patients aged 18 and older

7.8

Table 14. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate with No Behavioral Diagnosis by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

| Race and/or Ethnicity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--|---|--|-----------------------------|
| American Indian or Alaska Native | Suppressed | Suppressed | Suppressed |
| Asian | 18 | 375 | 4.8 |
| Black or African American | 18 | 248 | 7.3 |
| Hispanic or Latino | 102 | 1370 | 7.4 |
| Middle Eastern or North African | 49 | 339 | 14.5 |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 269 | 3254 | 8.3 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|---|--|-----------------------------|
| Age 18 to 34 | Suppressed | Suppressed | Suppressed |
| Age 35 to 49 | 17 | 481 | 3.5 |
| Age 50 to 64 | 64 | 886 | 7.2 |
| Age 65 Years and Older | 424 | 4894 | 8.7 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 271 | 3451 | 7.9 |
| Male | 237 | 3089 | 7.7 |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | 433 | 4852 | 8.9 |
| Medicaid | Suppressed | Suppressed | Suppressed |
| Private | 58 | 1353 | 4.3 |
| Self-Pay | | | |
| Other | 13 | 296 | 4.4 |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|---|--|-----------------------------|
| English Language | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | 508 | 6540 | 7.8 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|---|--|-----------------------------|
| Does not have a disability | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|---|--|-----------------------------|
| Lesbian, gay or homosexual | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| Female | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

Health Equity Plan

All general acute care hospitals report a health equity plan that identifies the top 10 disparities and a written plan to address them.

Top 10 Disparities

Disparities for each hospital equity measure are identified by comparing the rate ratios by stratification groups. Rate ratios are calculated differently for measures with preferred low rates and those with preferred high rates. Rate ratios are calculated after applying the California Health and Human Services Agency's "Data De-Identification Guidelines (DDG)," dated September 23, 2016.

Table 15. Top 10 disparities and their rate ratio values.

| Measures | Stratifications | Stratification Group | Stratification Rate | Reference Group | Reference Rate | Rate Ratio |
|---|-----------------------------------|---------------------------------|---------------------|--|----------------|------------|
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Substance Use Disorder) | Sex Assigned at Birth | Female | 23.9 | Male | 7.1 | 3.4 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Race and/or Ethnicity | Middle Eastern or North African | 14.3 | Asian | 4.6 | 3.1 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (No Behavioral Health Diagnosis) | Race and/or Ethnicity | Middle Eastern or North African | 14.5 | Asian | 4.8 | 3 |
| CMQCC Exclusive Breast Milk Feeding | Preferred Language | Spanish Language | 14.4 | English Language | 42 | 2.9 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (No Behavioral Health Diagnosis) | Age (excluding maternal measures) | 65 and older | 8.7 | 35 to 49 | 3.5 | 2.5 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (No Behavioral Health Diagnosis) | Expected Payor | Medicare | 8.9 | Private | 4.3 | 2.1 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (No Behavioral Health Diagnosis) | Age (excluding maternal measures) | 50 to 64 | 7.2 | 35 to 49 | 3.5 | 2.1 |
| CMQCC Exclusive Breast Milk Feeding | Race and/or Ethnicity | Hispanic or Latino | 28.7 | Multiracial and/or Multiethnic (two or more races) | 58.7 | 2 |
| California Maternal Quality Care Collaborative (CMQCC) Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth | Age (for maternal measures only) | 40 and older | 0.4 | 18 to 29 | 0.2 | 2 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Race and/or Ethnicity | White | 9 | Asian | 4.6 | 2 |

Plan to address disparities identified in the data

All-Cause Unplanned 30-Day Hospital Readmission Rate, by Behavioral Health Diagnosis (Substance Use Disorder) The disparity groups for the patient populations to improve 30-day hospital readmission rate by Behavioral Health Diagnosis includes: - Sex Assigned at birth: Female - 50 - 64 years old All-Cause Unplanned 30-Day Hospital Readmission Rate (HCAI-SS-HWR) The disparity groups for the patient populations to improve all cause unplanned 30-day hospital readmission rate includes: - Race and/or ethnicity: Middle Eastern or North American - Race and/or ethnicity: White - 65 years and older - Payor: Medicare - 50 - 64 years Goal: reduce 30-day readmission rates by 10% within the next 16 months by the following action plan: - Utilize evidence-based readmission tactics including: o Comprehensive Discharge Planning o Early Case Management Assessment o Clear, patient-centered education on diagnosis, medications, and warning signs o Schedule follow-up appointments before discharge o SUD - additional resources as needed o Medication reconciliation and management o Medication reconciliation prior to discharge - ideally partnered with pharmacy on admission and discharge o Post Discharge Follow Up

(Transitions in Care) o Warm hand off to next level of care (SNF, Home Health) o On Click Program starting 11/24/2025 o Continued collaboration with the SNF Collaborative o Palliative Care Team to support Goals of Care conversations o Patient Education o Provide in preferred language o Use teach-back methods to confirm understanding o Include family members and caregivers in education with an emphasis on those with chronic conditions i.e., Heart Failure and focused on pneumonia and sepsis o Use EHR based interventions to identify high-risk patients o Address Social Determinates of Health o Screen for barriers to transportation, food insecurity, and housing o Connect patients to community resources and services o Address Substance Use concerns that population (SUD) o Multi-professional Readmission Committee to establish goals, discuss process (PDSA), identify trends, sustain outcomes o Review cases for root causes and share with team o Engage Physician Advisor expertise CMQCC Exclusive Breast Milk Feeding (PC-05) The disparity groups for the patient population to increase exclusive breast milk feeding includes: - Preferred language: Spanish - Race and/or ethnicity: Hispanic and/or Latino Goal: increase exclusive breast milk feeding rates by 10% in the next 12 months with Spanish speaking and Hispanic or Latino race and/or ethnicity group by the following action plan: - Extended lactation coverage that includes night shifts and weekends o Of note, the entire lactation team is bilingual and fluent in Spanish to ensure information/education is provided in the preferred language - Provide educational resources and materials on breastfeeding in Spanish when it is the patient preferred language - Incorporate family members in the educational process - Continue to offer outpatient support groups and appointments in Spanish to assist mothers in preferred language - Launch of a Donor Breast Milk Program CMQCC Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth Rate (PC-02) The disparity group for the patient population to reduce NTSV Cesarean Rates include: - 40 and older Goal: reduce monthly NTSV rates to o 23.6% for patients > 40 years old by the following action plan: - Share provider level performance data by posting unblinded NTSV rates for transparency and review data regularly with providers for awareness and encourage accountability - Trend fall outs to understand cause and collaborate with Maternal Fetal Medicine, OB Department Chair, and Quality leader identify action plans and collaborate with coding as needed - Collaborate with divisional leaders for support of local program - Continue elective c-section patient education and consent process - Professional staff to send follow up letters to outlier physicians - Encourage high performing physicians to share best practices amongst the team - Continue the Labor in Motion Program developed by the Perinatal NPD - Enforcement of the Laborist 2nd Opinion form that has been developed to require collaboration between stakeholders prior to a potential NTSV - Share the daily and month-to-date NTSV numbers in L&D for constant awareness

Performance in the priority area

General acute care hospitals are required to provide hospital equity plans that address the top 10 disparities by identifying population impact and providing measurable objectives and specific timeframes. For each disparity, hospital equity plans will address performance across priority areas: person-centered care, patient safety, addressing patient social drivers of health, effective treatment, care coordination, and access to care.

Person-centered care

Providence Saint Joseph Medical Center is committed to advancing health equity through person-centered care. We actively engage patients and families in care planning to ensure that individual preferences and goals guide every treatment decision. To reduce disparities, we prioritize practices such as bedside shift report that allow real-time engagement and clarifying questions, screening all patients for language preferences, providing tailored education in their preferred language, conducting goals-of-care conversations, and addressing sexual orientation and gender identity (SOGI) needs. In addition, we continuously monitor HCAHPS data-particularly around discharge

education and hospital recommendations-to ensure we exceed patient experience expectations. Metrics and Improvements: - Audit bedside shift reports for both frequency and quality of information shared with a goal of > 90% - Review care plans to confirm they reflect patient-stated goals with a goal of > 90% - Analyze language preference data and ensure educational materials align with patient needs with a goal of > 90% - Monitor and evaluate Goals of Care conversations for completeness and effectiveness with a goal of >90% - Assess current SOGI documentation, analyze data, develop an action plan, and track compliance with a goal of > 90% - Monitor HCAHPS scores, focusing on discharge education and hospital recommendations, with the goal of exceeding performance benchmarks

Patient safety

Providence Saint Joseph Medical Center is committed to advancing health equity, with harm prevention at the heart of everything we do. Guided by the principles of a highly reliable organization, we maintain a constant focus on identifying and addressing potential risks. This preoccupation with failure drives every caregiver to make patient safety a top priority. We constantly monitor and will stratify key safety indicators such as falls, hospital acquired pressure injuries, hospital acquired infections, and medication errors by race, ethnicity, language and other demographic factors to identify disparities and implement target interventions. Metrics and Improvements: - Conduct quarterly reviews of safety data stratified by demographic factors - Develop and implement an action plan based on data analysis - Engage the Health Equity Committee to provide governance and oversight for improvement initiatives

Addressing patient social drivers of health

Providence Saint Joseph Medical Center appreciates that health outcomes are influenced by more than clinical care alone. Social Determinants of Health such as housing stability, food security, transportation access, education, and economic opportunity play a critical role in shaping patient well-being. Addressing these factors is essential to achieving health equity and improving overall quality of care. We systematically identify and address social needs that impact health outcomes. To achieve this, we screen all patients for key social determinants, including housing, food, transportation, and financial insecurity, and stratify findings by race, ethnicity, language, and other demographics to uncover disparities. Currently, our screening rate is 90%. We partner with community-based organizations to connect patients to resources and provide culturally and linguistically appropriate support. Metrics and Improvements: - Analyze social determinants of health screening and interventions data - Develop and implement an action plan based on data and current state - Engage the Health Equity Committee to provide governance and oversight for improvement initiatives

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

Providence Saint Joseph Medical Center is committed to delivering evidence-based, timely, and appropriate clinical care. Our goal is to ensure every patient receives treatment that aligns with best practices, clinical guidelines, and their unique health needs-regardless of demographic or socioeconomic factors. We closely monitor key treatment outcomes, including but not limited to NTSV cesarean rates, readmissions for pneumonia and heart failure, and mortality, while tracking adherence to evidence-based protocols across demographic groups to identify and address disparities. Patient preferences and social context are integrated into care planning, and language access is provided to support understanding and adherence. These efforts reflect our unwavering commitment to high-quality, equitable care that improves outcomes for all populations. Metrics and

Improvements: - Stratify clinical outcomes, readmission and mortality and the adherence to evidence-based protocols by race, ethnicity, language, and other demographic factors - Identify disparities and implement targeted interventions to improve equity in treatment effectiveness - Engage the Health Equity Committee to provide governance and oversight for improvement initiatives

Care coordination

Providence Saint Joseph Medical Center is committed to delivering seamless and coordinated care to reduce fragmentation and improve patient outcomes. Effective care coordination ensures smooth transitions between care settings such as hospital to home and promotes continuity of care for all patients, regardless of demographic or socioeconomic factors. We monitor transitions of care such as hospital discharge to home across demographic groups to identify and address disparities. We utilize coordinators that focus on Sepsis and Heart Failure and coordinate with community health workers to support individuals with complex needs and social barriers, providing culturally and linguistically appropriate guidance throughout the care continuum. We have recently partnered with a transition in care program called On Click to support the transition to home and ensure access to physicians when a patient cannot get in touch with their assigned provider and needs support. We also have strong alliance with our Skilled Nursing Partners in a collaborative that focuses on preventing readmissions and ensuring the patient is at the right level of care. Additionally, we track follow-up appointment completion rates with diagnosis and will also include race, ethnicity, and language, implementing targeted interventions to close gaps in continuity of care. These efforts reflect our dedication to reducing fragmentation and improving health outcomes for diverse populations. Metrics and Improvements: - Develop standardized discharge and transition protocols that include culturally and linguistically appropriate instructions. - Monitor transition success rates and identify disparities across demographic groups - Develop and implement an action plan based on data and current state analysis - Track follow-up appointment completion rates by race, ethnicity, language, and other demographics

Access to care

Providence Saint Joseph Medical Center is committed to ensuring that patients have access to care. Access to care is defined as the ability of patients to obtain timely, culturally appropriate services. Our organization is committed to removing barriers that prevent individuals from receiving the care they need, including access to emergency services, community resources, clinic appointments and physicians for all patients. PSJMC has a telehealth service for Behavioral Health patients and community health workers that provide social support including mental health resources. In addition, through the On Click program, as previously mentioned, patients will have access to a provider for the first 30 days post discharge to support the transition to home. Metrics and Improvements: - Track wait times, and service utilization stratified by race, ethnicity, language, and other demographic factors - Identify disparities and develop strategies to improve equity in access

Methodology Guidelines

Did the hospital follow the methodology in the Measures Submission Guide? (Y/N)

Y