

# Hospital Equity Measures Report

## General Information

Report Type:	Hospital Equity Measures Report
Year:	2024
Hospital Name:	SUTTER DAVIS HOSPITAL
Facility Type:	General Acute Care Hospital
Hospital HCAI ID:	106574010
Report Period:	1/1/2024 - 12/31/2024
Status:	Complete
Due Date:	11/29/2025
Last Updated:	01/25/2026
Hospital Location with Clean Water and Air:	Y
Hospital Web Address for Equity Report:	<a href="https://www.sutterhealth.org/sdh-equity-report">https://www.sutterhealth.org/sdh-equity-report</a>

## 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](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.

35568

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	30685	35568	86.3
Spanish Language	3813	35568	10.7
Asian Pacific Islander Languages	443	35568	1.2
Middle Eastern Languages	Suppressed	35568	Suppressed
American Sign Language	Suppressed	35568	Suppressed
Other Languages	383	35568	1.1

## 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.

N

#### 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

1397

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

2196

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

63.6

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).

<b>Social Driver of Health</b>	<b>Number of positive screenings</b>	<b>Rate of positive screenings (%)</b>	<b>Number of positive screenings who received intervention</b>	<b>Rate of positive screenings who received intervention (%)</b>
<b>Food Insecurity</b>	92	6.6	40	2.9
<b>Housing Instability</b>	60	4.3	31	2.2
<b>Transportation Problems</b>	98	7	48	3.4
<b>Utility Difficulties</b>	139	9.9	65	4.7
<b>Interpersonal Safety</b>	16	1.1	Suppressed	Suppressed

## 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?"

598

Total number of respondents to HCAHPS Question 19

629

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

95.1

Total number of people surveyed on HCAHPS Question 19

636

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

98.9

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	42	47	89.4	47	100
Black or African American	15	16	93.8	16	100
Hispanic or Latino	129	133	97	133	100
Middle Eastern or North African					
Multiracial and/or Multiethnic (two or more races)	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Native Hawaiian or Pacific Islander	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
White	373	393	94.9	400	98.3

  

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	127	132	96.2	132	100
Age 35 to 49	83	86	96.5	87	98.9
Age 50 to 64	56	59	94.9	60	98.3
Age 65 Years and Older	332	352	94.3	357	98.6

  

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	407	427	95.3	432	98.8
Male	191	202	94.6	204	99
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	201	216	93.1	219	98.6
Medicaid	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Private	322	337	95.5	340	99.1
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	537	568	94.5	575	98.8
Spanish Language	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Middle Eastern Languages	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
American Sign Language					
Other/Unknown Languages	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed

<b>Disability Status</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Does not have a disability</b>	480	503	95.4	508	99
<b>Has a mobility disability</b>	99	107	92.5	109	98.2
<b>Has a cognition disability</b>					
<b>Has a hearing disability</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Has a vision disability</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Has a self-care disability</b>					
<b>Has an independent living disability</b>					

  

<b>Sexual Orientation</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Lesbian, gay or homosexual</b>					
<b>Straight or heterosexual</b>	70	73	95.9	76	96.1
<b>Bisexual</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Something else</b>	524	552	94.9	556	99.3
<b>Don't know</b>					
<b>Not disclosed</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed

  

<b>Gender Identity</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Female</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Female-to-male (FTM)/ transgender male/trans man</b>					
<b>Male</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Male-to-female (MTF)/ transgender female/trans</b>					
<b>Non-conforming gender</b>					
<b>Additional gender category or other</b>	492	516	95.3	520	99.2
<b>Not disclosed</b>					

## 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?"

518

Total number of respondents to HCAHPS Question 17

580

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

89.3

Total number of people surveyed on HCAHPS Question 17

636

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

91.2

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.

<b>Race and/or Ethnicity</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>American Indian or Alaska Native</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Asian</b>	38	42	90.5	47	89.4
<b>Black or African American</b>	Suppressed	Suppressed	Suppressed	16	81.3
<b>Hispanic or Latino</b>	123	125	98.4	133	94
<b>Middle Eastern or North African</b>					
<b>Multiracial and/or Multiethnic (two or more races)</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Native Hawaiian or Pacific Islander</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>White</b>	319	367	86.9	400	91.8

<b>Age</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Age &lt; 18</b>					
<b>Age 18 to 34</b>	127	130	97.7	132	98.5
<b>Age 35 to 49</b>	82	85	96.5	87	97.7
<b>Age 50 to 64</b>	54	56	96.4	60	93.3
<b>Age 65 Years and Older</b>	255	309	82.5	357	86.6

<b>Sex assigned at birth</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Female</b>	363	398	91.2	432	92.1
<b>Male</b>	155	182	85.2	204	89.2
<b>Unknown</b>					

<b>Payer Type</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Medicare</b>	162	188	86.2	219	85.8
<b>Medicaid</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Private</b>	285	319	89.3	340	93.8
<b>Self-Pay</b>					
<b>Other</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed

  

<b>Preferred Language</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>English Language</b>	463	523	88.5	575	91
<b>Spanish Language</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Asian Pacific Islander Languages</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Middle Eastern Languages</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>American Sign</b>					
<b>Other/Unknown Languages</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed

  

<b>Disability Status</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Does not have a disability</b>	439	479	91.6	508	94.3
<b>Has a mobility disability</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Has a cognition</b>					
<b>Has a hearing disability</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Has a vision disability</b>				Suppressed	Suppressed
<b>Has a self-care</b>					
<b>Has an independent living disability</b>					

  

<b>Sexual Orientation</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Lesbian, gay or homosexual</b>					
<b>Straight or heterosexual</b>	63	70	90	76	92.1
<b>Bisexual</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
<b>Something else</b>	451	506	89.1	556	91
<b>Don't know</b>					
<b>Not disclosed</b>	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed



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	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/ transgender male/trans man					
Male	Suppressed	Suppressed	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/ transgender female/trans woman					
Non-conforming gender					
Additional gender category or other	422	474	89	520	91.2
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](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

3

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

139

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

21.6

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.

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

  

<b>Age</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>Age &lt; 18</b>			
<b>Age 18 to 34</b>	Suppressed	Suppressed	Suppressed
<b>Age 35 to 49</b>	Suppressed	Suppressed	Suppressed
<b>Age 50 to 64</b>	Suppressed	26	Suppressed
<b>Age 65 Years and Older</b>	Suppressed	96	Suppressed

  

<b>Sex assigned at birth</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>Female</b>	Suppressed	66	Suppressed
<b>Male</b>	Suppressed	73	Suppressed
<b>Unknown</b>			

  

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

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

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

<b>Sexual Orientation</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
Lesbian, gay or homosexual			
Straight or heterosexual	Suppressed	Suppressed	Suppressed
Bisexual			
Something else	Suppressed	123	Suppressed
Don't know			
Not disclosed	Suppressed	Suppressed	Suppressed

<b>Gender Identity</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/ transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/ transgender female/trans woman			
Non-conforming gender			
Additional gender category or other	Suppressed	Suppressed	Suppressed
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](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

1

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

18

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

55.6

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			
Hispanic or Latino	Suppressed	Suppressed	Suppressed
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more)			
Native Hawaiian or Pacific Islander	Suppressed	Suppressed	Suppressed
White	Suppressed	Suppressed	Suppressed

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	Suppressed	Suppressed	Suppressed

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	Suppressed	13	Suppressed
Male	Suppressed	Suppressed	Suppressed
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	Suppressed	Suppressed	Suppressed
Medicaid	Suppressed	Suppressed	Suppressed
Private	Suppressed	Suppressed	Suppressed
Self-Pay			
Other			

  

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	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages	Suppressed	Suppressed	Suppressed
Middle Eastern Languages			
American Sign Language			
Other/Unknown Languages			

  

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	Suppressed	Suppressed	Suppressed
Has a mobility disability	Suppressed	Suppressed	Suppressed
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	Suppressed	Suppressed	Suppressed
Bisexual			
Something else	Suppressed	Suppressed	Suppressed
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	Suppressed	Suppressed	Suppressed
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	Suppressed	Suppressed	Suppressed
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

74

Total number of nulliparous NTSV patients

489

Rate of NTSV patients with Cesarean deliveries

0.151

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.

<b>Race and/or Ethnicity</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
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			
Multiracial and/or Multiethnic (two or more races)	Suppressed	Suppressed	Suppressed
Native Hawaiian or Pacific Islander	Suppressed	Suppressed	Suppressed
White	Suppressed	Suppressed	Suppressed

  

<b>Age</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
Age < 18	Suppressed	Suppressed	Suppressed
Age 18 to 29	Suppressed	266	Suppressed
Age 30 to 39	Suppressed	207	Suppressed
Age 40 Years and Older	Suppressed	Suppressed	Suppressed

  

<b>Sex assigned at birth</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
Female	74	489	0.151
Male			
Unknown			

  

<b>Payer Type</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
Medicare	Suppressed	Suppressed	Suppressed
Medicaid	Suppressed	Suppressed	Suppressed
Private	Suppressed	Suppressed	Suppressed
Self-Pay			
Other	Suppressed	Suppressed	Suppressed

  

<b>Preferred Language</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
English Language	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages	Suppressed	Suppressed	Suppressed
Middle Eastern Languages	Suppressed	Suppressed	Suppressed
American Sign Language			
Other/Unknown Languages	Suppressed	Suppressed	Suppressed

<b>Disability Status</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
Does not have a disability	Suppressed	Suppressed	Suppressed
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			

  

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

  

<b>Gender Identity</b>	<b>Number of NTSV patients with cesarean deliveries</b>	<b>Total number of NTSV patients</b>	<b>Rate of NTSV patients with Cesarean deliveries (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male			
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	Suppressed	Suppressed	Suppressed
Additional gender category or other	Suppressed	Suppressed	Suppressed
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

49

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

273.7

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.

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

  

<b>Age</b>	<b>Number of vaginal deliveries with previous Cesarean delivery</b>	<b>Total number of birth discharges with previous Cesarean delivery</b>	<b>Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%)</b>
<b>Age &lt; 18</b>			
<b>Age 18 to 29</b>	Suppressed	Suppressed	Suppressed
<b>Age 30 to 39</b>	Suppressed	123	Suppressed
<b>Age 40 Years and Older</b>	Suppressed	Suppressed	Suppressed

  

<b>Sex assigned at birth</b>	<b>Number of vaginal deliveries with previous Cesarean delivery</b>	<b>Total number of birth discharges with previous Cesarean delivery</b>	<b>Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%)</b>
<b>Female</b>	49	179	273.7
<b>Male</b>			
<b>Unknown</b>			

  

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

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

  

<b>Disability Status</b>	<b>Number of vaginal deliveries with previous Cesarean delivery</b>	<b>Total number of birth discharges with previous Cesarean delivery</b>	<b>Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%)</b>
Does not have a disability	Suppressed	Suppressed	Suppressed
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			

  

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

  

<b>Gender Identity</b>	<b>Number of vaginal deliveries with previous Cesarean delivery</b>	<b>Total number of birth discharges with previous Cesarean delivery</b>	<b>Rate of vaginal delivery per 1,000 deliveries by patients with previous Cesarean deliveries (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male			
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender			
Additional gender category or	Suppressed	Suppressed	Suppressed
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

1042

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

1271

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

82

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	88	112	78.6
Black or African American	50	62	80.6
Hispanic or Latino	379	506	74.9
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	36	44	81.8
Native Hawaiian or Pacific	Suppressed	Suppressed	Suppressed
White	385	418	92.1

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	1042	1271	82
Age 18 to 29			
Age 30 to 39			
Age 40 Years and Older			

<b>Sex assigned at birth</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
<b>Female</b>	554	672	82.4
<b>Male</b>	488	599	81.5
<b>Unknown</b>			

<b>Payer Type</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
<b>Medicare</b>			
<b>Medicaid</b>	301	418	72
<b>Private</b>	724	832	87
<b>Self-Pay</b>			
<b>Other</b>	17	21	81

<b>Preferred Language</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
<b>English Language</b>	915	1088	84.1
<b>Spanish Language</b>	100	144	69.4
<b>Asian Pacific Islander Languages</b>	Suppressed	Suppressed	Suppressed
<b>Middle Eastern Languages</b>	Suppressed	Suppressed	Suppressed
<b>American Sign Language</b>			
<b>Other/Unknown Languages</b>	Suppressed	Suppressed	Suppressed

<b>Disability Status</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
<b>Does not have a disability</b>	1042	1271	82
<b>Has a mobility disability</b>			
<b>Has a cognition disability</b>			
<b>Has a hearing disability</b>			
<b>Has a vision disability</b>			
<b>Has a self-care disability</b>			
<b>Has an independent living</b>			

<b>Sexual Orientation</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
Lesbian, gay or homosexual			
Straight or heterosexual	Suppressed	Suppressed	Suppressed
Bisexual			
Something else	1032	1260	81.9
Don't know	Suppressed	Suppressed	Suppressed
Not disclosed	Suppressed	Suppressed	Suppressed

  

<b>Gender Identity</b>	<b>Number of newborn cases that were exclusively breastfed and meet inclusion/exclusion criteria</b>	<b>Total number of newborn cases born in the hospital that meet inclusion/exclusion criteria</b>	<b>Rate of newborn cases per 100 that were exclusively breastfed and met inclusion/exclusion criteria (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender			
Additional gender category or	965	1190	81.1
Not disclosed	Suppressed	Suppressed	Suppressed

## 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](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

90

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

2671

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

### 3.4

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.

<b>Race and/or Ethnicity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
<b>American Indian or Alaska Native</b>	Suppressed	Suppressed	Suppressed
<b>Asian</b>	Suppressed	205	Suppressed
<b>Black or African American</b>	Suppressed	127	Suppressed
<b>Hispanic or Latino</b>	Suppressed	855	Suppressed
<b>Middle Eastern or North African</b>			
<b>Multiracial and/or Multiethnic (two or more races)</b>	Suppressed	Suppressed	Suppressed
<b>Native Hawaiian or Pacific Islander</b>	Suppressed	Suppressed	Suppressed
<b>White</b>	Suppressed	1205	Suppressed

  

<b>Age</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
<b>Age 18 to 34</b>	14	1222	1.1
<b>Age 35 to 49</b>	17	526	3.2
<b>Age 50 to 64</b>	17	254	6.7
<b>Age 65 Years and Older</b>	42	669	6.3

  

<b>Sex assigned at birth</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
<b>Female</b>	48	2043	2.3
<b>Male</b>	Suppressed	Suppressed	Suppressed
<b>Unknown</b>	Suppressed	Suppressed	Suppressed

  

<b>Payer Type</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
<b>Medicare</b>	Suppressed	Suppressed	Suppressed
<b>Medicaid</b>	Suppressed	708	Suppressed
<b>Private</b>	Suppressed	1437	Suppressed
<b>Self-Pay</b>			
<b>Other</b>	Suppressed	Suppressed	Suppressed

  

<b>Preferred Language</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
<b>English Language</b>	Suppressed	2282	Suppressed
<b>Spanish Language</b>	Suppressed	Suppressed	Suppressed
<b>Asian Pacific Islander Languages</b>	Suppressed	Suppressed	Suppressed
<b>Middle Eastern Languages</b>	Suppressed	Suppressed	Suppressed
<b>American Sign Language</b>	Suppressed	Suppressed	Suppressed
<b>Other/Unknown Languages</b>	Suppressed	Suppressed	Suppressed

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

  

<b>Sexual Orientation</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Lesbian, gay or homosexual	Suppressed	Suppressed	Suppressed
Straight or heterosexual	Suppressed	277	Suppressed
Bisexual	Suppressed	Suppressed	Suppressed
Something else	Suppressed	2355	Suppressed
Don't know			
Not disclosed	Suppressed	Suppressed	Suppressed

  

<b>Gender Identity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	Suppressed	Suppressed	Suppressed
Additional gender category or other	Suppressed	Suppressed	Suppressed
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

33

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

578

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

5.7

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.

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

  

<b>Age</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Age 18 to 34	Suppressed	206	Suppressed
Age 35 to 49	Suppressed	105	Suppressed
Age 50 to 64	Suppressed	52	Suppressed
Age 65 Years and Older	19	215	8.8

  

<b>Sex assigned at birth</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	467	Suppressed
Male	Suppressed	Suppressed	Suppressed
Unknown	Suppressed	Suppressed	Suppressed

  

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

  

<b>Preferred Language</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
English Language	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages	Suppressed	Suppressed	Suppressed
Middle Eastern Languages	Suppressed	Suppressed	Suppressed
American Sign Language			
Other/Unknown Languages	Suppressed	Suppressed	Suppressed



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

  

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

  

<b>Gender Identity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	Suppressed	Suppressed	Suppressed
Additional gender category or other	Suppressed	Suppressed	Suppressed
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

1

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

80

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

1.3

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.

<b>Race and/or Ethnicity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
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			
Multiracial and/or Multiethnic (two or more races)	Suppressed	Suppressed	Suppressed
Native Hawaiian or Pacific Islander			
White	Suppressed	Suppressed	Suppressed

  

<b>Age</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Age 18 to 34	Suppressed	Suppressed	Suppressed
Age 35 to 49	Suppressed	27	Suppressed
Age 50 to 64	Suppressed	25	Suppressed
Age 65 Years and Older	Suppressed	Suppressed	Suppressed

  

<b>Sex assigned at birth</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Male	Suppressed	Suppressed	Suppressed
Unknown			

  

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

  

<b>Preferred Language</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
English Language	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages			
Middle Eastern Languages			
American Sign Language			
Other/Unknown Languages			

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

  

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

  

<b>Gender Identity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender			
Additional gender category or other	Suppressed	Suppressed	Suppressed
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

18

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

138

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

13

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.

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

  

<b>Age</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Age 18 to 34	Suppressed	23	Suppressed
Age 35 to 49	Suppressed	46	Suppressed
Age 50 to 64	Suppressed	37	Suppressed
Age 65 Years and Older	Suppressed	32	Suppressed

  

<b>Sex assigned at birth</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Male	Suppressed	Suppressed	Suppressed
Unknown			

  

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

  

<b>Preferred Language</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
English Language	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages			
Middle Eastern Languages	Suppressed	Suppressed	Suppressed
American Sign Language	Suppressed	Suppressed	Suppressed
Other/Unknown Languages			

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

  

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

  

<b>Gender Identity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender			
Additional gender category or other	Suppressed	Suppressed	Suppressed
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

38

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

1875

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

2

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.

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

  

<b>Age</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Age 18 to 34	Suppressed	986	Suppressed
Age 35 to 49	Suppressed	348	Suppressed
Age 50 to 64	Suppressed	140	Suppressed
Age 65 Years and Older	18	401	4.5

  

<b>Sex assigned at birth</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	1492	Suppressed
Male	Suppressed	383	Suppressed
Unknown			

  

<b>Payer Type</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Medicare	Suppressed	Suppressed	Suppressed
Medicaid	Suppressed	Suppressed	Suppressed
Private	Suppressed	1072	Suppressed
Self-Pay			
Other	Suppressed	Suppressed	Suppressed

  

<b>Preferred Language</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
English Language	Suppressed	Suppressed	Suppressed
Spanish Language	Suppressed	Suppressed	Suppressed
Asian Pacific Islander Languages	Suppressed	Suppressed	Suppressed
Middle Eastern Languages	Suppressed	Suppressed	Suppressed
American Sign Language			
Other/Unknown Languages	Suppressed	Suppressed	Suppressed

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

  

<b>Sexual Orientation</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Lesbian, gay or homosexual			
Straight or heterosexual	Suppressed	Suppressed	Suppressed
Bisexual	Suppressed	Suppressed	Suppressed
Something else	Suppressed	1668	Suppressed
Don't know			
Not disclosed	Suppressed	Suppressed	Suppressed

  

<b>Gender Identity</b>	<b>Number of inpatient readmissions</b>	<b>Total number of admitted patients</b>	<b>Readmission rate (%)</b>
Female	Suppressed	Suppressed	Suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	Suppressed	Suppressed	Suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	Suppressed	Suppressed	Suppressed
Additional gender category or other	Suppressed	Suppressed	Suppressed
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	Age (excluding maternal measures)	50 to 64	6.7	18 to 34	1.1	5.8
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate	Age (excluding maternal measures)	65 and older	6.3	18 to 34	1.1	5.5
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate	Age (excluding maternal measures)	35 to 49	3.2	18 to 34	1.1	2.8
CMQCC Exclusive Breast Milk Feeding	Race and/or Ethnicity	Hispanic or Latino	74.9	White	92.1	1.2
CMQCC Exclusive Breast Milk Feeding	Preferred Language	Spanish Language	69.4	English Language	84.1	1.2
CMQCC Exclusive Breast Milk Feeding	Expected Payor	Medicaid	72	Private	87	1.2
HCAHPS survey: Received information and education	Age (excluding maternal measures)	65 and older	82.5	18 to 34	97.7	1.2
CMQCC Exclusive Breast Milk Feeding	Race and/or Ethnicity	Asian	78.6	White	92.1	1.2
CMQCC Exclusive Breast Milk Feeding	Race and/or Ethnicity	Black or African American	80.6	White	92.1	1.1
HCAHPS survey: Received information and education	Race and/or Ethnicity	White	86.9	Hispanic or Latino	98.4	1.1

Plan to address disparities identified in the data

Sutter Davis Hospital's health equity plan is greater than 5,000 characters. It has been submitted to HCAi and published to the hospital's website as a supplemental PDF file.

## 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

Sutter Davis Hospital assesses Person Centeredness through Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient surveys. CMS publishes the results of these surveys in the Patient Survey Rating section of their Hospital Care Compare platform at <https://www.medicare.gov/care-compare/details/hospital/050537>

### Patient safety

Sutter Davis Hospital assesses Patient Safety through Healthcare Associated Infection (HAI) Standardized Infection Rates (SIR). CMS publishes these measures in the Complications & Deaths section of their Hospital Care Compare platform at <https://www.medicare.gov/care-compare/details/hospital/050537>

### Addressing patient social drivers of health

Sutter Davis Hospital assesses Social Drivers of Health through the CMS Screening for Social



Drivers of Health measure set, which is found in this hospital's Health Equity Report.

## **Performance in the priority area continued**

Performance across all of the following priority areas.

### **Effective treatment**

Sutter Davis Hospital assesses Priority Treatment through the CMS Sepsis Care measure. CMS publishes this measures in the Timely & Effective Care section of their Hospital Care Compare platform at <https://www.medicare.gov/care-compare/details/hospital/050537>

### **Care coordination**

Sutter Davis Hospital assesses Care Coordination through the CMS Unplanned Hospital Visit measure set. CMS publishes these measures in the Unplanned Hospitals Visits section of their Hospital Care Compare platform at <https://www.medicare.gov/care-compare/details/hospital/050537>

### **Access to care**

Sutter Davis Hospital assesses Care Access through CMS Left Without Being Seen (OP-22) measure. CMS publishes this measures in the Timely & Effective Care section of their Hospital Care Compare platform at <https://www.medicare.gov/care-compare/details/hospital/050537>

## **Methodology Guidelines**

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

Y