

Hospital Equity Measures Report

General Information

Report Type:	Hospital Equity Measures Report
Year:	2024
Hospital Name:	THOUSAND OAKS SURGICAL HOSPITAL, a campus of Los Robles Hosp & Med Ctr
Facility Type:	General Acute Care Hospital
Hospital HCAI ID:	106564121
Report Period:	01/01/2024 - 12/31/2024
Status:	Final Review
Due Date:	11/29/2025
Last Updated:	03/17/2026
Hospital Location with Clean Water and Air:	Y
Hospital Web Address for Equity Report:	https://www.losrobleshospital.com

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.

596994

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	94163	596994	94.6
Spanish Language	4422	596994	4.4
Asian Pacific Islander Languages	207	596994	0.2
Middle Eastern Languages	suppressed	596994	suppressed
American Sign Language	suppressed	596994	suppressed
Other Languages	565	596994	0.6

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

9761

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

15435

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

63.2

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	62	0.4		
Housing Instability	292	1.9		
Transportation Problems	86	0.6		
Utility Difficulties	suppressed	suppressed		
Interpersonal Safety	362	2.3		

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?"

1710

Total number of respondents to HCAHPS Question 19

1858

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

92

Total number of people surveyed on HCAHPS Question 19

15544

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

12

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	84	94	89.4	738	12.7
Black or African American	24	27	88.9	264	10.2
Hispanic or Latino					
Middle Eastern or North African					
Multiracial and/or Multiethnic (two or more races)					
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed	suppressed	suppressed
White	1406	1526	92.1	12023	12.7

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	0	0		94	0
Age 18 to 34	159	167	95.2	1950	8.6
Age 35 to 49	167	182	91.8	1930	9.4
Age 50 to 64	285	313	91.1	2573	12.2
Age 65 Years and Older	1099	1196	91.9	8997	13.3

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	961	1048	91.7	8930	11.7
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed	suppressed	suppressed

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	1041	1138	91.5	8744	13
Medicaid	82	92	89.1	1592	5.8
Private	508	543	93.6	4322	12.6
Self-Pay	79	85	92.9	886	9.6
Other					

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	1665	1810	92	14709	12.3
Spanish Language	31	32	96.9	619	5.2
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

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	1698	1844	92.1	15303	12
Has a mobility disability					
Has a cognition disability					
Has a hearing disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed	suppressed	suppressed
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	303	338	89.6	2832	11.9
Female-to-male (FTM)/ transgender male/trans man	0	0		suppressed	0
Male	292	312	93.6	2564	12.2
Male-to-female (MTF)/ transgender female/trans					
Non-conforming gender	suppressed	suppressed	suppressed	suppressed	suppressed
Additional gender category or other	0	0		suppressed	0
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

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?"

1502

Total number of respondents to HCAHPS Question 17

1708

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

87.9

Total number of people surveyed on HCAHPS Question 17

15544

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

11

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	74	88	84.1	738	11.9
Black or African American	24	27	88.9	264	10.2
Hispanic or Latino					
Middle Eastern or North African					
Multiracial and/or Multiethnic (two or more races)					
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed	suppressed	suppressed
White	1227	1399	87.7	12023	11.6

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	0	0		94	0
Age 18 to 34	156	167	93.4	1950	8.6
Age 35 to 49	171	176	97.2	1930	9.1
Age 50 to 64	256	294	87.1	2573	11.4
Age 65 Years and Older	919	1071	85.8	8997	11.9

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	859	969	88.6	8930	10.9
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed	suppressed	suppressed

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	867	1015	85.4	8744	11.6
Medicaid	74	86	86	1592	5.4
Private	486	524	92.7	4322	12.1
Self-Pay	75	83	90.4	886	9.4
Other					

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	1467	1665	88.1	14709	11.3
Spanish Language	22	29	75.9	619	4.7
Asian Pacific Islander Languages	suppressed	suppressed	suppressed	suppressed	suppressed
Middle Eastern Languages	0	0		44	0
American Sign					
Other/Unknown Languages	suppressed	suppressed	suppressed	suppressed	suppressed

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	1492	1695	88	15303	11.1
Has a mobility disability					
Has a cognition					
Has a hearing disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed	suppressed	suppressed
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	259	303	85.5	2832	10.7
Female-to-male (FTM)/ transgender male/trans man	0	0		suppressed	suppressed
Male	248	284	87.3	2564	11.1
Male-to-female (MTF)/ transgender female/trans woman					
Non-conforming gender	suppressed	suppressed	suppressed	suppressed	suppressed
Additional gender category or other	0	0		3	0
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

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

22

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

772

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

28.5

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	0	0	
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more)			
Native Hawaiian or Pacific Islander	0	0	
White	18	629	28.6

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	0	0	
Age 18 to 34	0	18	0
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	20	606	33

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	suppressed	suppressed	suppressed
Male	13	371	35
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	18	599	30.1
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	0	30	0
Other			

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	21	724	29
Spanish Language	0	30	0
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	0	0	
Other/Unknown Languages	suppressed	suppressed	suppressed

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	22	756	29.1
Has a mobility disability			
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			

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	suppressed	183	suppressed
Female-to-male (FTM)/ transgender male/trans man	0	0	
Male	suppressed	155	suppressed
Male-to-female (MTF)/ transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or other	0	suppressed	0
Not disclosed	0	suppressed	0

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

19

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

174

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

109.2

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	0	0	
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more)			
Native Hawaiian or Pacific Islander	0	suppressed	0
White	14	132	106.1

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	0	0	
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	0	17	0
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	12	102	117.6

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	85	suppressed
Male	suppressed	89	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	13	100	130
Medicaid	suppressed	20	suppressed
Private	suppressed	44	suppressed
Self-Pay	suppressed	suppressed	suppressed
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	0	11	0
Asian Pacific Islander Languages	0	0	
Middle Eastern Languages	0	0	
American Sign Language	0	0	
Other/Unknown Languages	suppressed	suppressed	suppressed

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	19	171	111.1
Has a mobility disability			
Has a cognition disability			
Has a hearing disability	0	suppressed	0
Has a vision disability	0	suppressed	0
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	suppressed	33	suppressed
Female-to-male (FTM)/ transgender male/trans man	0	suppressed	0
Male	suppressed	37	suppressed
Male-to-female (MTF)/ transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or other	0	0	
Not disclosed	0	suppressed	0

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

176

Total number of nulliparous NTSV patients

636

Rate of NTSV patients with Cesarean deliveries

0.3

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	17	64	0.3
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific Islander	0	0	
White	118	403	0.3

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			
Age 30 to 39			
Age 40 Years and Older			

Sex assigned at birth	Number of NTSV patients with cesarean deliveries	Total number of NTSV patients	Rate of NTSV patients with Cesarean deliveries (%)
Female	176	629	0.3
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of NTSV patients with cesarean deliveries	Total number of NTSV patients	Rate of NTSV patients with Cesarean deliveries (%)
Medicare	0	0	
Medicaid	11	50	0.2
Private	150	535	0.3
Self-Pay	15	51	0.3
Other			

Preferred Language	Number of NTSV patients with cesarean deliveries	Total number of NTSV patients	Rate of NTSV patients with Cesarean deliveries (%)
English Language	173	621	0.3
Spanish Language	suppressed	12	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	0	0	
American Sign Language	0	0	
Other/Unknown Languages	0	suppressed	0

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	176	636	0.3
Has a mobility disability			
Has a cognition disability			
Has a hearing disability	0	0	
Has a vision disability	0	0	
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	0	0	
Female-to-male (FTM)/transgender male/trans man	0	0	
Male	0	0	
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or other	0	0	
Not disclosed	0	0	

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

18

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

64.1

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	0	0	
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific	0	0	
White	suppressed	199	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	0	0	
Age 18 to 29			
Age 30 to 39			
Age 40 Years and Older			

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	18	281	64.1
Male	0	0	
Unknown	0	0	

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	0	0	
Medicaid	suppressed	suppressed	suppressed
Private	12	238	50.4
Self-Pay	suppressed	suppressed	suppressed
Other			

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	18	277	65
Spanish Language	0	suppressed	0
Asian Pacific Islander Languages	0	suppressed	0
Middle Eastern Languages	0	0	
American Sign Language	0	0	
Other/Unknown Languages	0	0	

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	18	281	64.1
Has a mobility disability			
Has a cognition disability			
Has a hearing disability	0	0	
Has a vision disability	0	0	
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	0	0	
Female-to-male (FTM)/ transgender male/trans man	0	0	
Male	0	0	
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or	0	0	
Not disclosed	0	0	

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

1451

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

4206

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

34.5

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	105	359	29.2
Black or African American	32	81	39.5
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific	suppressed	suppressed	suppressed
White	984	2813	35

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	1451	1493	97.2
Age 18 to 29			
Age 30 to 39			
Age 40 Years and Older			

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	suppressed	suppressed	suppressed
Male	763	783	97.4
Unknown	suppressed	suppressed	suppressed

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	suppressed	suppressed	suppressed
Private	1168	3409	34.3
Self-Pay	147	386	38.1
Other			

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	1418	4106	34.5
Spanish Language	26	82	31.7
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	0	0	
American Sign Language	0	0	
Other/Unknown Languages	suppressed	suppressed	suppressed

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	1451	4206	34.5
Has a mobility disability			
Has a cognition disability			
Has a hearing disability	0	0	
Has a vision disability	0	0	
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	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	0	0	
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or	0	0	
Not disclosed	0	0	

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

460

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

9998

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

4.6

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	0	12	0
Asian	21	473	4.4
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	383	7676	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	24	1770	1.4
Age 65 Years and Older	432	5778	7.5

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	231	5752	4
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	457	5555	8.2
Medicaid	0	1047	0
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other			

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	440	9402	4.7
Spanish Language	11	438	2.5
Asian Pacific Islander Languages	suppressed	57	suppressed
Middle Eastern Languages	suppressed	27	suppressed
American Sign Language	0	0	
Other/Unknown Languages	suppressed	74	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	442	9832	4.5
Has a mobility disability			
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			

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	88	1905	4.6
Female-to-male (FTM)/transgender male/trans man	0	suppressed	0
Male	85	1738	4.9
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	suppressed	0
Additional gender category or other	0	suppressed	0
Not disclosed	suppressed	47	suppressed

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

138

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

2032

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

6.8

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	0	suppressed	0
Asian	0	46	0
Black or African American	suppressed	29	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific Islander	0	0	
White	122	1700	7.2

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	0	173	0
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	128	1291	9.9

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	92	1376	6.7
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	138	1316	10.5
Medicaid	0	169	0
Private	0	446	0
Self-Pay	0	101	0
Other			

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	134	1958	6.8
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	0	suppressed	0
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language			
Other/Unknown Languages	0	12	0

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	133	2000	6.7
Has a mobility disability			
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			

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	39	525	7.4
Female-to-male (FTM)/transgender male/trans man	0	suppressed	0
Male	21	276	7.6
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	0	
Additional gender category or other	0	suppressed	0
Not disclosed	suppressed	14	suppressed

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

13

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

475

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

2.7

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	0	0	
Asian	0	suppressed	0
Black or African American	0	suppressed	0
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific Islander	0	0	
White	12	348	3.4

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	0	55	0
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	12	176	6.8

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	0	suppressed	0

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	13	155	8.4
Medicaid	0	130	0
Private	0	128	0
Self-Pay	0	62	0
Other			

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	12	443	2.7
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	0	0	
Middle Eastern Languages			
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	12	471	2.5
Has a mobility disability			
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			

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	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			
Not disclosed	0	suppressed	0

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

suppressed

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

407

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

suppressed

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	0	0	
Asian	0	suppressed	0
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino			
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)			
Native Hawaiian or Pacific Islander			
White	suppressed	suppressed	suppressed

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	0	55	0
Age 35 to 49	suppressed	88	suppressed
Age 50 to 64	suppressed	136	suppressed
Age 65 Years and Older	suppressed	128	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	184	suppressed
Male	suppressed	220	suppressed
Unknown	0	suppressed	0

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	0	122	0
Self-Pay	0	44	0
Other			

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages			
Middle Eastern Languages	0	0	
American Sign Language			
Other/Unknown Languages	0	0	

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability			
Has a cognition disability			
Has a hearing disability	0	0	
Has a vision disability	suppressed	suppressed	suppressed
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	suppressed	82	suppressed
Female-to-male (FTM)/transgender male/trans man			
Male	suppressed	91	suppressed
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender	0	suppressed	0
Additional gender category or other	0	suppressed	0
Not disclosed	0	suppressed	0

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

NA

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

NA

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

NA

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

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

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

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

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			

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 (Mental Health	Preferred Language	English Language	4.7	Spanish Language	2.5	1.9
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate	Race and/or Ethnicity	White	5	Asian	4.4	1.1
CMQCC Exclusive Breast Milk Feeding	Preferred Language	Spanish Language	31.7	English Language	34.5	1.1

Plan to address disparities identified in the data

The hospital's plan to address the disparities identified in the data including population impact, measurable objectives, and specific timeframe are as follows. Ⓓ

MHD readmission rate disparities identified are language, over 65, visual disability. The hospital's plan is to analyze all MHD readmission for trends and to partner with our local community resources to address identified gaps. Nurses will be encouraged help patients and family members to record the audio discharge instructions in preferred language with use of language interpreter services.Ⓓ

AHRQ Pneumonia mortality rate disparities identified are language, black males, over 65. The hospital's plan is to analyze trends in process measures, such as timely antibiotic administration or use of standardized order sets. Use of language interpreter services for education and plan of care, including family in discussions.Ⓓ

AHRQ PSI death disparity identified is black race/ethnicity. The hospital analyze all PSI mortalities. The hospital will analyze trends, identify gaps, and implement targeted solutions. Ⓓ

Breastfeeding rate disparity identified is language. The hospital will partner with community resources and provide lactation services during prenatal period using language interpreter services. Assign lactation services to all mothers. Ⓓ

VBAC disparity identified is white race/ethnicity. The hospital will partner with community resources and provide education on risk associated with c-section during prenatal period.

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

In order to address needs related to patient centered care, the hospital has a patient and family advisory council, where patient disparity data will be presented and reviewed.

Patient safety

Patient safety metrics are trended for disparities related to gender, ethnicity, race, language, and age

Addressing patient social drivers of health

The hospital has screening systems in place to identify SDOH and consults for social services/case management to provide the ideintfied need.

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

The hospital analyzes patient mortality and complication rates and targets interventions as needed.

Care coordination

Nursing leadership performs patient rounds, case management coordinate post-discharge needs, and patient navigators do follow-up calls for high-risk populations based on admitting and discharge diagnosis. Additional consideration will be given to newly identified high-risk populations in light of new health equity trends.

Access to care

The hospital will identify gaps in access to care, present it at Patient Family Advisory Committee and implement targeted solutions.

Methodology Guidelines

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

Y