Steward Norwood Hospital is a mid-size, for-profit community hospital located in the Metro West region. Norwood Hospital is a member of Steward Health Care System. The hospital had 8.3% fewer inpatient discharges in FY13 than in FY09, similar to the median trend among peer hospitals. It had 20.7% more outpatient visits in FY13 than in FY09, compared with a median increase of 4.0% among peer cohort hospitals. Norwood Hospital was profitable three of the five years in the FY09 to FY13 period, with a 0.1% total margin in FY13, lower than the median performance of its cohort of 2.4%.

What were the most common inpatient cases (DRGs) treated at the hospital?

What proportion of the region's cases did this hospital treat for each service?

Where did most of the hospital's inpatients reside? What proportion of each community's total discharges were attributed to this hospital?

What were the hospital's CY13 payer-specific relative price levels for its top three commercial payers? How does this hospital compare to the average hospital in its peer cohort?
How has the volume of the hospital's inpatient discharges changed compared to FY09, and how does this hospital compare to the median hospital in its peer cohort? (FY09=100)

For descriptions of the metrics, please see Technical Appendix.

What were the hospital's total margin and operating margin between FY09 and FY13, and how do these compare to the median of its peer cohort hospitals?

How has the volume of the hospital's outpatient visits changed compared to FY09, and how does this hospital compare to the median hospital in its peer cohort? (FY09=100)

How have the hospital's total revenue and costs changed between FY09 and FY13?

What was the hospital's net inpatient service revenue per case mix adjusted discharge between FY09 and FY13, and how does this hospital compare to the median hospital in its peer cohort?

How has the hospital's total outpatient revenue changed compared to FY09, and how does this hospital compare to the median hospital in its peer cohort? (FY09=100)

For descriptions of the metrics, please see Technical Appendix.

* Disproportionate Share Hospitals (DSH) receive a minimum of 63% of gross patient service revenue from public payers.
* For more information on Infrastructure and Capacity Building (ICB) special funding, please contact the Massachusetts Executive Office of Health and Human Services (EOHHS).
* Costs were adjusted to exclude direct medical education costs and physician compensation.
* Delivery DRG includes Cesarean and Vaginal Deliveries, and Neonate DRG.
* Average Hospital does not include Specialty hospitals.
The selected quality measures displayed in this hospital’s profile are derived from the Commonwealth’s Standard Quality Measure Set (SQMS). CHIA is required to uniformly report hospital performance on SQMS measures. SQMS measures are used by health plans for tiering providers for certain insurance products. They may also be used to inform consumers about the quality and safety of their care providers. The selected indicators are hospital-specific measures based on information that hospitals self-report to CHIA and other entities, including the federal Centers for Medicare and Medicaid Services (CMS) and The Leapfrog Group.

**PATIENT SAFETY**

How many complications or adverse events were reported at this hospital for conditions included in the PSI-90 Composite, relative to the annual national average of 1.00? How does this compare to the median of its peer cohort?

<table>
<thead>
<tr>
<th>Year</th>
<th>Hospital</th>
<th>Peer Cohort</th>
<th>Other Cohort Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.64</td>
<td>0.82</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>0.82</td>
<td>0.91</td>
<td></td>
</tr>
<tr>
<td>2011</td>
<td>0.81</td>
<td>0.87</td>
<td></td>
</tr>
</tbody>
</table>

The PSI-90 is a summary of 11 Patient Safety Indicators (PSIs) that measure adverse events for various procedures.

- Population: All patients
- Score: Lower is better
- Source: Hospital Discharge Data (HDD); CHIA-calculated indicator, risk adjusted
- Data Period*: 10/1-9/30

2013 Statewide Average = 0.74

**PATIENT EXPERIENCE**

How well did the hospital fulfill the following key expectations for patient experience, based on patient surveys? How does this compare to the national average?

**Global Ratings**

- Patients gave hospital a rating of 9 or 10
- Patients would definitely recommend the hospital

**Communication**

- Nurses always communicated well
- Doctors always communicated well

**Care Coordination**

- Staff always explained medications
- Recovery information was provided

**Comfort**

- Always received help as soon as they wanted
- Pain was always well controlled
- Room and bathroom were always clean
- Room was always quiet at night

The HCAHPS survey measures patient perspectives on key aspects of their care.

- Population: All patients
- Score: Higher is better
- Source: Centers for Medicare and Medicaid Services (CMS) Hospital Compare
- Data Period*: 2012-2013

For descriptions of the metrics, please see Technical Appendix.
2013 Hospital Profile: STEWARD NORWOOD HOSPITAL

Cohort: Community Hospital

CARE PRACTICES

What percentage of medication orders were entered by a physician using an electronic system that included error checking? How does this hospital compare to the median hospital in its peer cohort?

<table>
<thead>
<tr>
<th>Percentage of Orders</th>
<th>Hospital</th>
<th>Peer Cohort</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-24%</td>
<td>1</td>
<td>16.3%</td>
<td>16.0%</td>
</tr>
<tr>
<td>25-49%</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>50-74%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>75-100%</td>
<td>14</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of cohort hospitals in this category of CPOE usage: 18

Computerized Physician Order Entry (CPOE) is believed to increase efficiency and reduce transcription errors.

Population: 18 of 19 cohort hospitals responded to this survey

Score: Higher is better

Source: The Leapfrog Group Hospital Survey^ Source: The Leapfrog Group Hospital Survey^ Data Period*: 2012-2013

READMISSIONS

What percentage of Medicare patients who were discharged from this hospital were readmitted to any hospital within 30 days? How does this compare to the median hospital in its peer cohort, and the national average?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Hospital</th>
<th>Peer Cohort</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.0%</td>
<td>15.8%</td>
<td>16.3%</td>
<td>16.0%</td>
</tr>
</tbody>
</table>

Lower is better

Hospital-Wide All-Cause 30-Day Readmissions follows patients for 30 days from discharge and determines if they are readmitted to any hospital for any unplanned reason.

Population: Medicare Fee For Service (FFS) patients age 65+

Score: Lower is better

Source: CMS Hospital Compare Data Period*: 2011-2012

OBSTETRIC CARE

What percentage of all newborn deliveries at this hospital were clinically unnecessary inductions before the recommended 39 weeks of gestation? How does this compare to the median hospital in its peer cohort, and the national median?

<table>
<thead>
<tr>
<th>Year</th>
<th>Hospital</th>
<th>Peer Cohort</th>
<th>National Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011-2012</td>
<td>2.9%</td>
<td>2.9%</td>
<td>5.0%</td>
</tr>
<tr>
<td>2012-2013</td>
<td>2.3%</td>
<td>0.0%</td>
<td>2.5%</td>
</tr>
</tbody>
</table>

Lower is better

Clinically Unnecessary Elective Deliveries before 39 weeks of gestation are associated with higher risks for newborns.

Population: Non-clinically complicated births. 41 hospitals reported data for this measure.

Score: Lower is better

Source: The Leapfrog Group Hospital Survey^ Data Period*: 2011-2012 and 2012-2013

OBSTETRIC CARE COMPLICATIONS

Out of every 1,000 births, how many patients experienced an adverse event? How does this compare to the median hospital in its peer cohort?

<table>
<thead>
<tr>
<th>Event</th>
<th>Hospital</th>
<th>Peer Cohort</th>
<th>National Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury to Neonates</td>
<td>0.0%</td>
<td>0.7%</td>
<td></td>
</tr>
<tr>
<td>Obstetric Trauma: Delivery with Instrument</td>
<td>11.1%</td>
<td>19.7%</td>
<td></td>
</tr>
<tr>
<td>Obstetric Trauma: Delivery without Instrument</td>
<td>168.6</td>
<td>168.6</td>
<td></td>
</tr>
</tbody>
</table>

Lower is better

Complications and adverse events during birth can harm both the mother and infant.

Population: 42 hospitals are included in this analysis

Score: Lower is better

Source: HDD; CHIA-calculated indicator, not risk adjusted Data Period*: 2012-2013

For descriptions of the metrics, please see Technical Appendix.

Data Periods vary by measure based on data source. Please see Technical Appendix for measure-specific reporting periods.

Measures from The Leapfrog Survey are voluntarily reported by hospitals. Not all hospitals report this data.

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http://chiamass.gov/hospital-profiles

CHIA