

CBE ID

0353

Title

Failure to Rescue 30-Day Mortality (risk adjusted)

Project

Patient Safety

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Fall 2019

Removal Date

Tue, 11/16/2021 - 00:00

Initial Endorsement

Wed, 05/14/2008 - 20:00

Steward

The Children's Hospital of Philadelphia

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

Percentage of patients who died with documented or undocumented complications within 30 days from admission

1.7 Measure Type

Outcome

1.8 Level of Analysis

Facility, Health Plan, Integrated Delivery System, Other, Population: Community, County or City,

Population: Regional and State

1.9 Care Setting

Inpatient/Hospital

1.14 Numerator

Patients who died with a complication plus patients who died without documented complications. Death is defined as death within 30 days from admission. All patients in an FTR analysis have developed a documented complication (by definition) or died without a documented complication. Complicated patient has at least one of the complications defined in Appendix B (see attachment and website <https://cor.research.chop.edu/node/26>). Complications are defined using the secondary ICD9 diagnosis and procedure codes and the DRG code of the current admission. Comorbidities are defined in Appendix C/E (see attachment and website <https://cor.research.chop.edu/node/26>) using secondary ICD9/ICD10 diagnosis codes of the current admission and primary or secondary ICD9/ICD10 diagnosis codes of previous admission within 90 days of the admission date of the current admission. *When Current Procedural Terminology (CPT) codes are available, the definitions of complications and comorbidities are augmented to include them

1.15 Denominator

General Surgery, Orthopedic and Vascular patients in specific DRGs with complications plus patients who died in the hospital without complications. Inclusions: adult patients admitted for one of the procedures in the General Surgery, Orthopedic or Vascular DRGs (see attachment and Appendix A at <https://cor.research.chop.edu/node/26>)

1.20 Types of Data Sources

Claims Data

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Exclusions

Patients over age 90, under age 18. Those over 90 are excluded due to the increased likelihood that these patients will have DNR orders. This could introduce a bias towards increased failure-to-rescue due to DNR status census, potentially disproportionately penalizing hospitals for deaths that were out of their control. If DNR status were included in the dataset, it could be used as a more accurate exclusion criteria variable.

Planned Use

Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Risk Adjustment

Statistical risk model

Target Population

Dual eligible beneficiaries, Elderly, Individuals with multiple chronic conditions, Populations at Risk, Veterans

Steward Organization

The Children's Hospital of Philadelphia

Steward POC email

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