IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF FLORIDA
WEST PALM BEACH DIVISION

CASE NO. 9:25-CV-80526-DMM

GOOD SAMARITAN MEDICAL CENTER, INC. et al.,

Plaintiffs,

v.

THE LEAPFROG GROUP,

Defendant.

DECLARATION OF HEATHER HAVERICAK

1. My name is Heather Havericak. I am over 18 years of age, of sound mind, and capable of making this declaration. I make the statements in this declaration based on personal knowledge, personal experience as a representative of Delray Medical Center, Inc., and communications with my colleagues. If called and sworn as a witness, I could and would testify competently to the facts stated in this declaration.

* * *

2. I am Chief Executive Officer at Delray Medical Center in Palm Beach County, Florida, a Plaintiff in this action.

3. ***My Career in Patient Care.*** I began my career in patient care more than 20 years ago when I became a registered nurse. Starting in 2002, I worked at patients' bedsides in hospitals throughout South Florida. From 2002 to 2005, I worked bedside at Miami Children's Hospital and transitioned to Broward Health Medical Center, which is a Level 1 Trauma Center, in 2006. I

continue to keep my registration current and complete ongoing training. I am a Master's prepared nurse with a MSN from Indiana State University and a fellow of the American College of Healthcare Executives (FACHE).

4. I worked my way up through Broward Health for 17 years and, in March 2019, I was promoted to interim Chief Executive Officer of Broward Health, and permanent CEO starting August 2019. I served as CEO of Broward Health Medical Center for five years before I received the offer to join Delray Medical Center. During the COVID-19 pandemic, I supported my teams by helping turn patients in their beds and provided post-mortem care in our COVID ICU and medical surge areas. I also supported our community and employees with food delivery.

5. From January to May 2024, I served as the Chief Operating Officer at Delray Medical Center (the "Medical Center") in Palm Beach County, Florida. I was then given the opportunity to leverage my skills and experience at the Medical Center as their interim Chief Executive Officer in May 2024, and permanent CEO starting in July 2024.

6. ***My Medical Center CEO Responsibilities***. In my role as CEO, I oversee the Medical Center's operational, financial, and patient safety and quality performance. While I no longer serve on the frontlines of patient care as I did in my earlier years, my experience as a registered nurse informs every day how I lead our organization in its commitment to patient care and safety.

7. ***The Medical Center's Services to the Palm Beach County Community.*** The Medical Center was founded in 1982 and is an accredited hospital in Palm Beach County, Florida that provides high-quality medical care to adults and children in the community. The Medical Center is a Level I Trauma Center and has 536 licensed beds. The Medical Center has more than 1,900 employees and contractors, has more than 92,000 outpatient visits, has more than 22,600

patient admissions, and houses over 18,600 surgeries per year. The Medical Center is committed to providing high-quality patient care, and it consistently invests in technology and staff to ensure excellent, cutting-edge care.

8. ***The Medical Center Is Accredited, Certified, and Lauded for Our Exceptional Patient Care.*** The Medical Center has received numerous awards and accolades. For example, the Medical Center was awarded the Resuscitation Center of Excellence award for 2025, becoming the first hospital in Palm Beach County to be named a Florida Resuscitation Center of Excellence. To do so, the Medical Center met approximately 15 criteria for patient care that were established by the Florida Resuscitation Center Committee, including intensive neurological monitoring, strong collaboration with Emergency Medical Services partners, and community outreach programs to promote health and lifestyle modifications to decrease the prevalence of cardiac disease. Additionally, the American College of Surgeons awarded the Medical Center the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program ("MBSAQIP") Surgery Center of Excellence award, which is dedicated to enhancing the safety and quality of care for bariatric patients in the United States and Canada. MBSAQIP accreditation promotes uniform standards and continuous quality improvement.

9. The Medical Center also earned DNV GL Comprehensive Stroke certification, which means the Medical Center gives the highest quality of care to most complete patient cases and offers evidence-based treatments with cutting-edge research protocols. Additionally, the Medical Center earned the VQI (Vascular Quality Initiative) Carotid Care Champion this year, which honors participants that are dedicated to improving the safety and effectiveness of vascular care. Delray is also accredited by the Joint Commission, the nation's largest hospital accreditor that evaluates hospitals' quality performance standards through an objective evaluation process.

The Medical Center also earned a Certification for the American Association of Cardiovascular and Pulmonary Rehabilitation Program. This accreditation is peer-reviewed and designed to review individual facilities.

10. The American Heart Association honored the Medical Center with "Get with the Guidelines" Gold Plus awards in three specializations. First, the Medical Center earned the Target Stroke Honor Roll Elite, meaning the Medical Center is able to achieve door-to-needle times of within 60 minutes for at least 85% of applicable patients. Second, the Medical Center earned the Target Stroke Honor Roll Advanced Therapy, meaning that 50% of applicable patients are able to achieve door-to-device times of 90 minutes or less in the case of directly arriving patients, and 60 minutes or less for transfer patients. Third, the Medical Center earned the Target Type II Diabetes Honor Roll, meaning that the Medical Center met numerous requirements, including qualifying for a Silver level or higher Achievement Award in the "Get with the Guidelines-Heart Failure, Stroke, and/or Coronary Artery Disease" modules. The entities that award and assign these accreditations and certifications visit the healthcare facility and perform regular periodic in-person reviews, audits, surveys, and assessments of the facility.

11. In 2025, the medical ranking organization Healthgrades named the Medical Center one of the top 250 hospitals in the country. To assess and evaluate hospitals, Healthgrades relies on data from Medicare medical claims records and states' data on Medicare and commercially insured patient outcomes to determine patients' actual clinical outcomes when visiting a given hospital. Healthgrades also assigned the Medical Center the following awards:

a. **Cardiac Care**

i. Five-Star Recipient for Valve Surgery (2024-2025, two years in a row)

ii. Five-Star Recipient for Treatment of Heart Attack (2024-2025, two years in a row)

iii. Five-Star Recipient for Treatment of Heart Failure (2003-2025, 23 years in a row)

iv. Five-Star Recipient for Defibrillator Procedures (2024-2025, two years in a row)

v. Five-Star Recipient for Treatment of Stroke (2008-2025, 18 years in a row)

vi. Five-Star Recipient for Coronary Interventional Procedures (2024)

b. **Pulmonary Care**

i. One of Healthgrades America's 100 Best Hospitals for Pulmonary Care in 2025

ii. Recipient of the Healthgrades 2025 Pulmonary Care Excellence Award

iii. Top 5% in the Nation for Overall Pulmonary Services (2025)

iv. Top 10% in the Nation for Overall Pulmonary Services (2025)

v. Five-Star Recipient for Treatment of Pneumonia (2024-2025, two years in a row)

c. **Critical Care**

i. Recipient of the Healthgrades 2025 Critical Care Excellence Award

ii. Top 5% in the Nation for Critical Care (2025)

iii. Top 10% in the Nation for Critical Care (2025)

iv. Five-Star Recipient for Treatment of Sepsis (2004-2025, 22 years in a row)

v. Five-Star Recipient for Treatment of Respiratory Failure (2023-2025, three years in a row)

d. **Gastrointestinal**

i. Five-Star Recipient for Upper Gastrointestinal Surgery (2022-2024, three years in a row)

ii. Five-Star Recipient for Small Intestine Surgeries (2017-2021 (five years in a row), 2024)

e. **Neurosurgery**

i. Five-Star Recipient for Cranial Neurosurgery (2024)

12. ***The Medical Center Chooses Not to Participate in TLG's Misleading, Pay-to-Play Grading Surveys.*** The Medical Center welcomes review by industry commentators who analyze the quality of hospitals. A fair, rigorous assessment of how we're doing can only help us improve. But we don't participate in every attempt to comment on hospital quality. When we decide whether to provide our hospital's data to commentators, my colleagues in leadership and I consider the fairness and accuracy of each commentator's methodology for processing and compiling data because we know that patients base important medical decisions on these types of reports.

13. For those reasons, since 2021, the Medical Center has declined to respond to The Leapfrog Group's ("TLG") "Hospital Survey." During the height of the pandemic, we concluded TLG's methodology—which does not include a facilities visit or any effort to speak directly with patients or providers—is not reliable and generates inaccurate and misleading results that harm our hospital, our patients, and our community. It is apparent to us as veteran medical providers that TLG's "grades" do not reflect patient outcomes or quality of care at the Medical Center. Given

the serious problems in TLG's methodology, it was clear to our leadership that the hospital, its doctors, its patients, and the community would benefit far more from us no longer spending time, energy, and funds towards providing TLG the onerous data it sought and instead redirecting those resources towards patient services and providing the highest quality care.

14. Just six months before the Medical Center stopped participating in TLG's Hospital Survey, it had received a C grade from TLG. At that time, the Medical Center had never received a D or F.

15. When the Medical Center stopped participating in TLG's Hospital Survey, we expected TLG would simply omit the Medical Center from its Hospital Safety Grades. That would have been the responsible thing to do, because without us providing the necessary voluntary data, TLG would not have sufficient information to accurately assess the quality of our care.

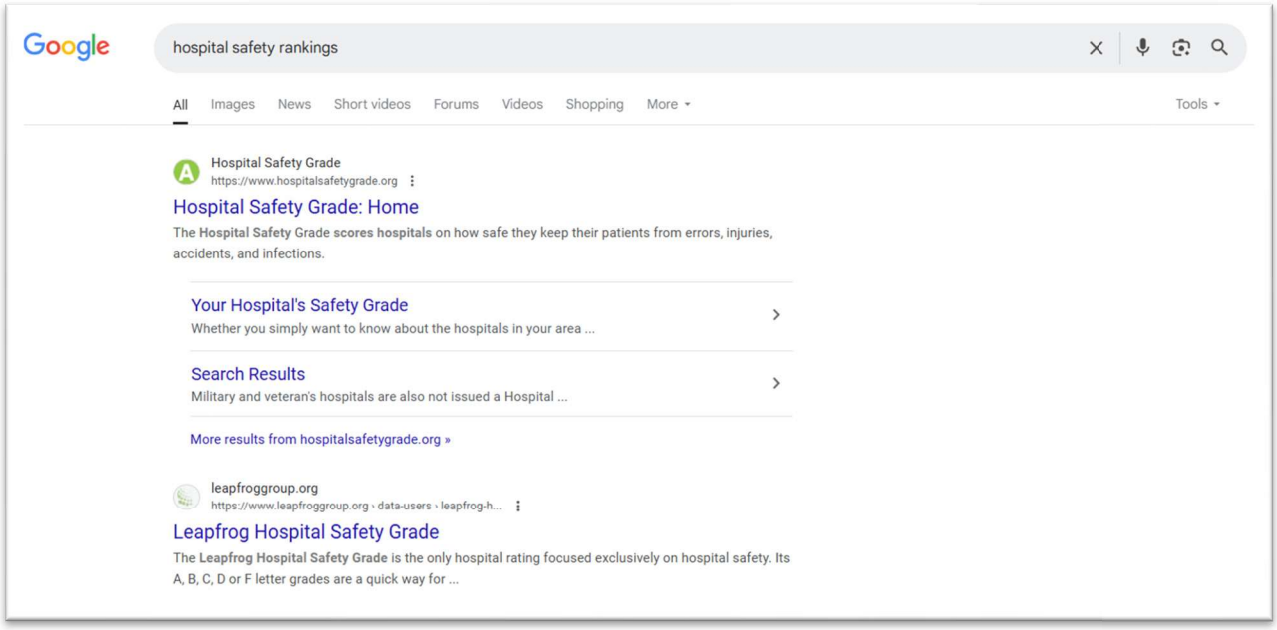
16. We were surprised to see the Medical Center was still graded by TLG when it released its Spring 2022 Hospital Safety Grades. We have been surprised to see TLG continue to grade the Medical Center every six months even though the Medical Center last participated in the TLG Hospital Survey in 2021.

17. In Fall 2024, TLG adjusted its grading methodology as noted below and continued to grade the Medical Center. Even though we did not respond to the 2022, 2023, or 2024 TLG Hospital Surveys, TLG assigned the Medical Center an "F" in Fall 2024. ***See*** **Exhibit 1** (Attached as Exhibit 1 is a true and correct copy of a screen-shot of TLG's Fall 2024 grade for the Medical Center). Rather than actually assess our hospital, TLG simply went ahead to "impute" failing scores into its formula to "grade"—and effectively penalize—the Medical Center even though it did not participate. And this month, even though the Medical Center did not participate in TLG's

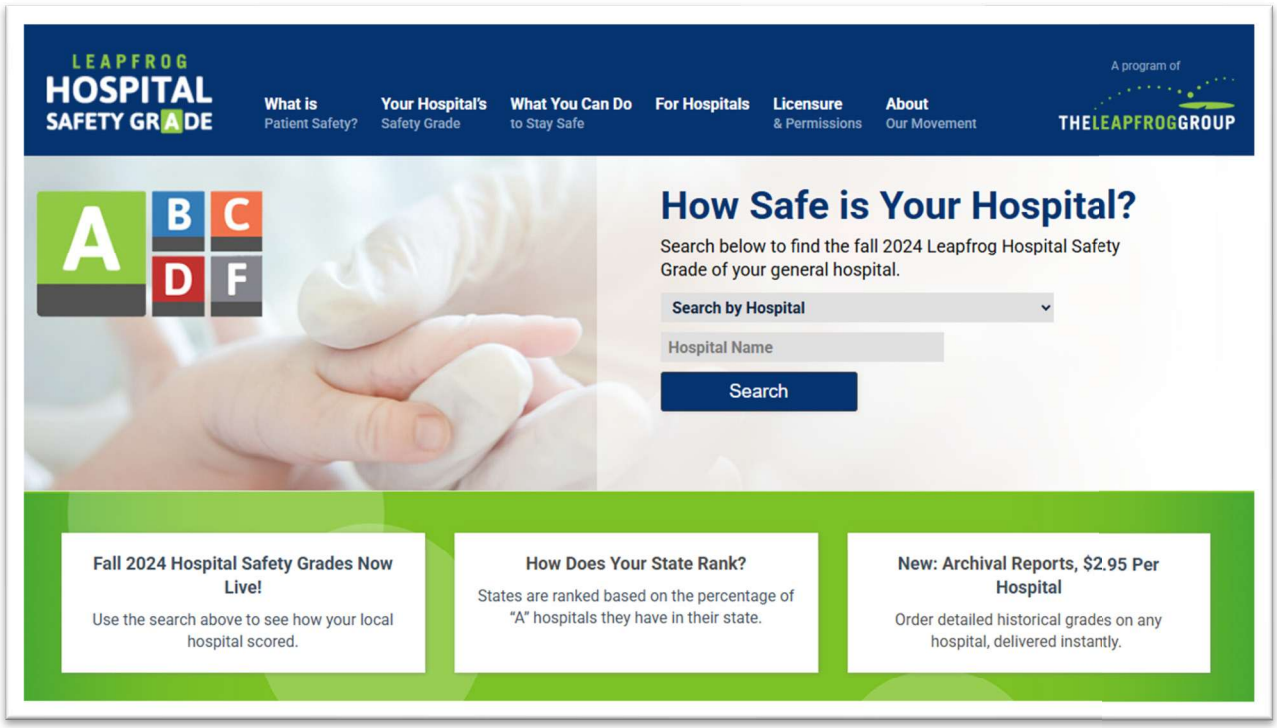
2024 Hospital Survey, TLG still assigned our facility an "F." ***See* Exhibit 2** (Attached as Exhibit 2 is a true and correct copy of a screen-shot of TLG's Spring 2025 grade for the Medical Center).

18. ***TLG's Misleading Safety Grades Do Not Accurately Assess Quality of Care.*** TLG's scoring methodology is reflected in the "TLG Calculator" it shares with hospitals before publicly releasing final scores. It shows that if you participate in its pay-to-play, time-consuming Hospital Survey, TLG assigns you a better grade. ***See* Exhibit 3** (Attached as Exhibit 3 is a true and correct copy of the TLG Spring 2025 Calculator TLG shared with the Medical Center). The Medical Center's data shows that TLG's score for Computerized Provider Order Entry ("CPOE"), Bar Code Medication Administration ("BCMA"), ICU Physician Staffing ("IPS"), and Hand Hygiene Score measures are inaccurate. The Medical Center has a computerized provider order entry program, satisfactory bar code medication system, and comprehensive hand hygiene practices and equipment. Further, its ICU is well-staffed with qualified physicians and nurses. Despite these facts, because we decline to participate in TLG's data requests, our "score" for each of these metrics is the lowest possible because we do not participate in the TLG Hospital Survey.

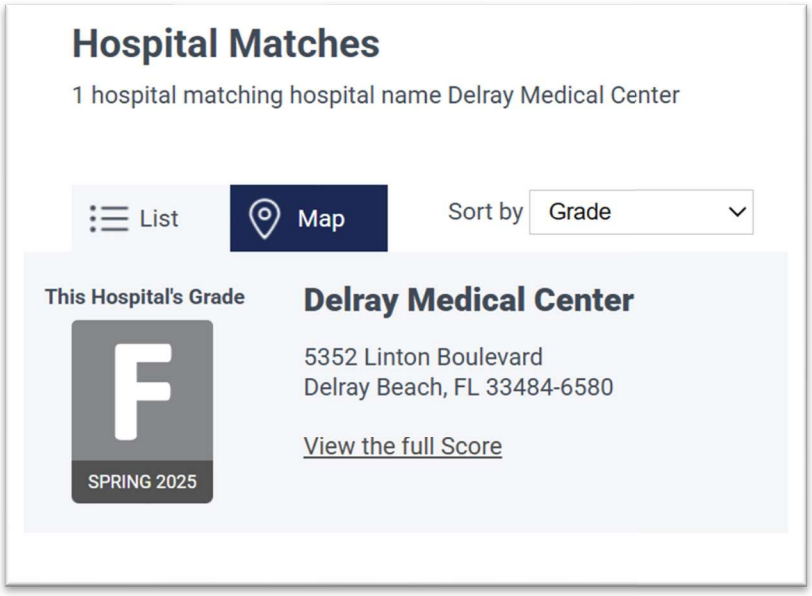
19. ***TLG Deceives Our Potential and Current Patients with Deceptive "Safety Grades" Easily Reached on Google.*** Having worked in healthcare for over two decades, I know patients looking for hospital care often will search online for hospital rankings and safety information before coming to the Medical Center or other hospitals they visit for care. TLG's purported "safety grades" in particular are very accessible and provide simplified information that is easy for patients to digest but really misleading. For instance, when a potential patient or even an existing patient Googles "hospital safety rankings," the top two results are TLG's websites, www.hospitalsafetygrade.org and www.leapfroggroup.org:



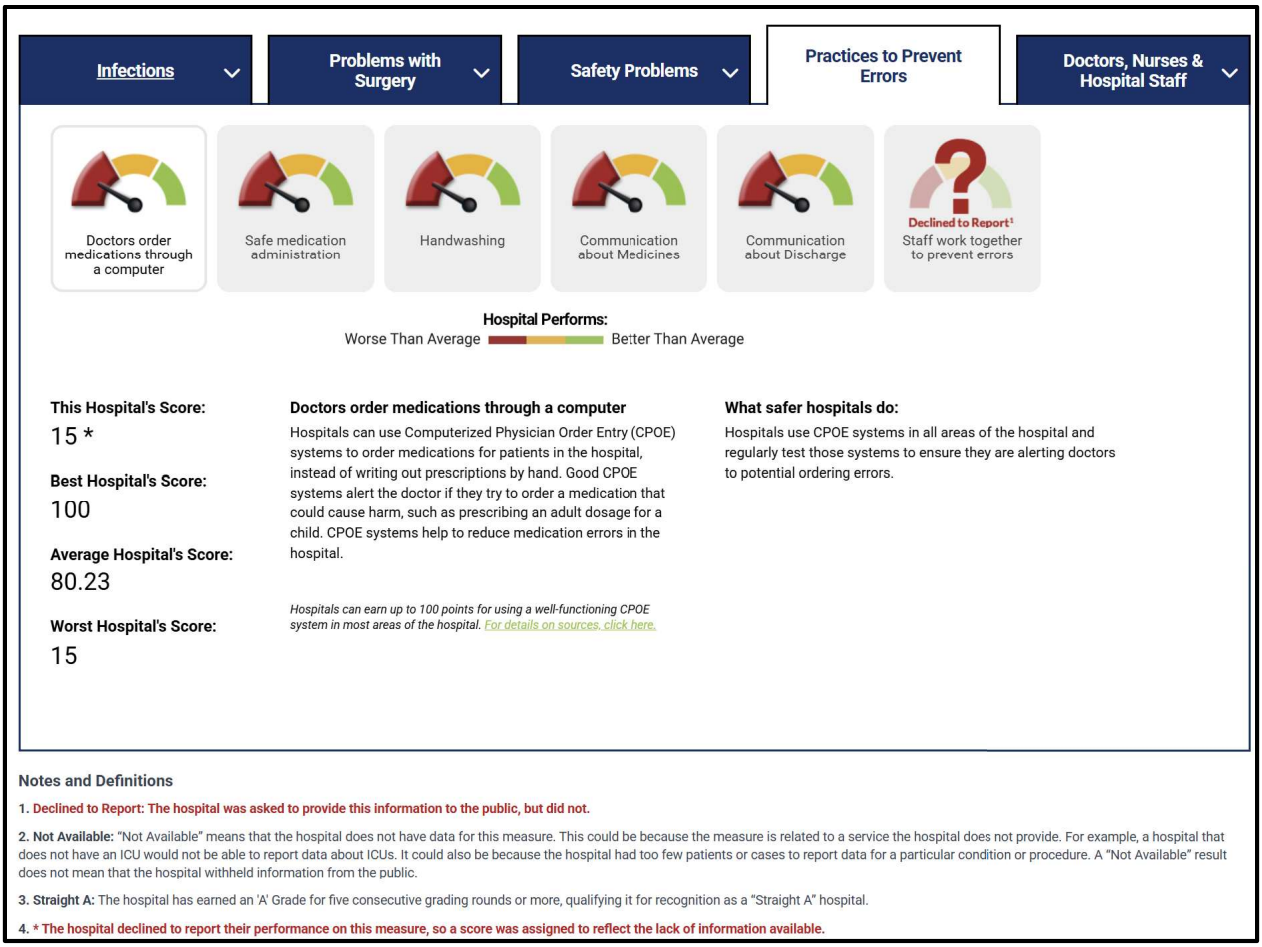
20. If a prospective patient clicks on the top link, it brings her to https://www.hospitalsafetygrade.org/. There, TLG asks them in big bold letters, "How Safe is Your Hospital," encouraging the user to search for their local hospital:



21. Once a patient searches for the Medical Center she is immediately confronted with the following image—an alarming "F" grade, the meaning of which even an elementary school student would understand:

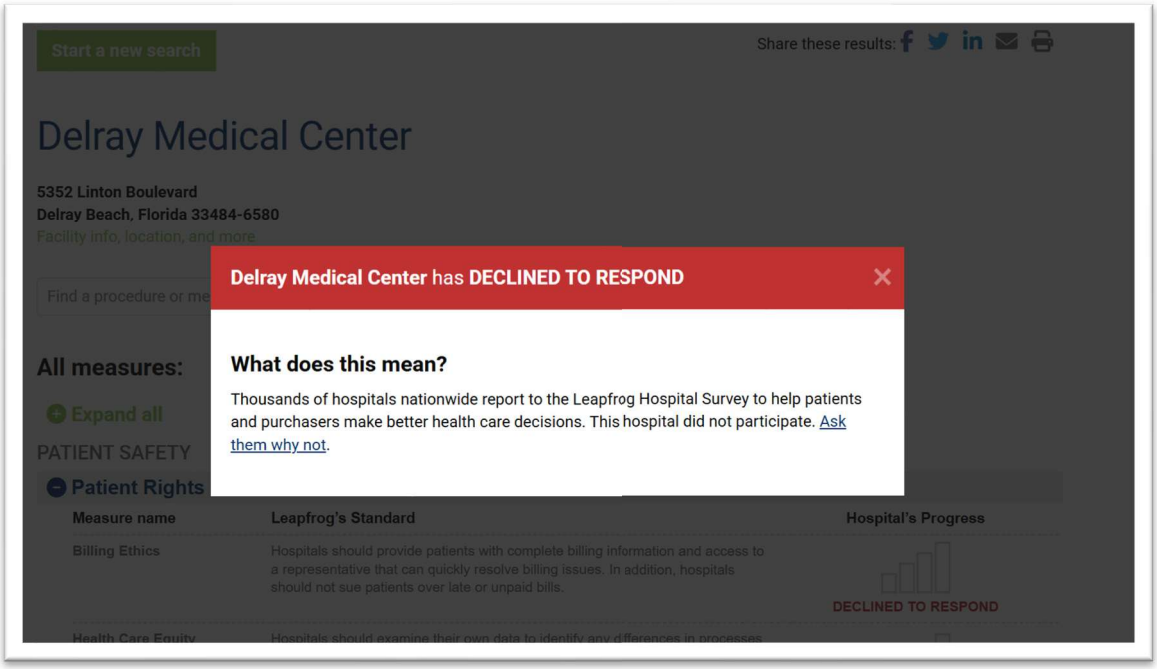


22. When the user clicks on "View the full Score" she sees inaccurate and misleading information about the Medical Center:

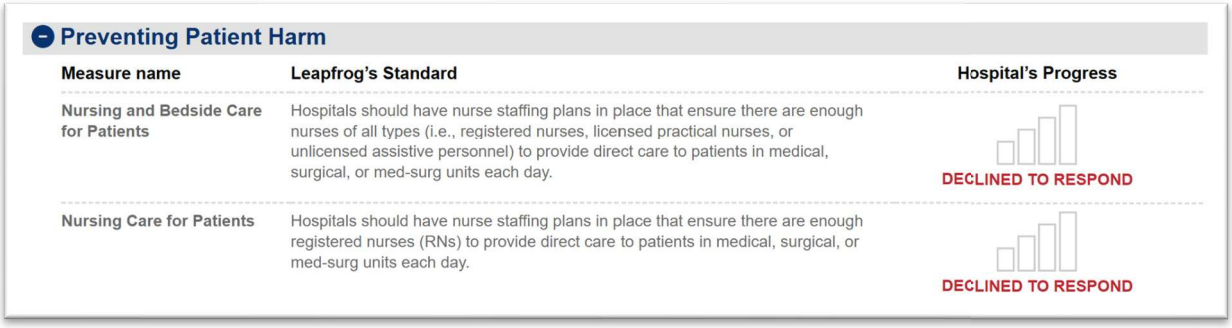


At the bottom of the page, TLG discloses—in a small font and in footnotes—that the Medical Center did not provide data to TLG.

23. TLG's approach on hospitalsafetygrades.org is really disturbing in light of how TLG lists information about our hospital on its other website—leapfroggroup.org. On rankings provided on leapfroggroup.org, searching for the Medical Center does not provide any "F" grade at all. Instead, on *that* website, TLG states clearly that the Medical Center did not provide data to TLG sufficient to rate the hospital:



TLG's leapfroggroup.org website also transparently articulates that TLG has inadequate information to rate our hospital:



It is therefore confusing that TLG's separate website—hospitalsafetygrade.org—actually goes on to grade the Medical Center with an "F" and fails to provide similar disclosures when displaying the Medical Center's purported "F" grade. TLG knows how to tell patients that it lacks data sufficient to rate the Medical Center, but it clearly chooses not to do that on hospitalsafetygrade.org.

24. ***TLG's Safety Grades Harm the Medical Center, Its Patients, and Its Community.*** TLG's Hospital Grades harm patients by misleading them as to the quality of the Medical Center. That in turn causes them to doubt the quality of the care they would receive at the facility, harming the facility's reputation and damaging its goodwill in the community.

25. The Medical Center has experienced significant reputational damage and loss of goodwill due to TLG's misleading Hospital Grades. The damage caused by the TLG grades has been significant. Attempting to counteract the inaccurate, negative picture TLG has created in the community has required time and resources that could have otherwise been spent continuing to improve patient care.

26. Confirming the damage to the Medical Center's reputation and goodwill, our Medical Executive Committee, which is comprised of the medical leadership that oversees each department within the hospital, has received direct inquiries from patients regarding their concerns as to TLG's grades and related public reports. Patients have told physicians that they do not want to go to the Medical Center for surgeries after seeing TLG's grade and associated press reports.

27. TLG's inaccurate grades have also damaged the Medical Center's relationships with physicians—again confirming the damage to our reputation and the goodwill we had developed over many years with local physicians. Medical professionals have expressed concern about working with the Medical Center due to the grade TLG assigned it. The Medical Center has devoted substantial time and resources to do damage control to convince the medical professionals they should still work with the hospital.

28. The Medical Center has received reports from patients and doctors that patients have planned to drive past the Medical Center to a farther away medical facility due to the grade assigned by TLG to the Medical Center. Patients' reliance on TLG's grades in considering where

to receive their care risks dangerous delay of care for these patients. That's all the more problematic given that the Medical Center is one of only two Level I Trauma Centers in Palm Beach County—providing care in an emergency context where every second matters for improving patient outcomes and in which delay can literally be the difference between life or death.

29. If TLG is permitted to grade and keep grading the Medical Center, the Medical Center will lose patients, practices, revenue, business opportunities, and goodwill because the continued misleading "grade" and subsequent rounds of additional grades will mislead patients about the quality of our care. The Medical Center's reputation will be unfairly maligned. And—over time—it will only get worse because the consistent low grades (reflecting lack of participation not lack of quality) will misleadingly communicate to patients that we have failed to improve—a representation that just doesn't comport with reality. The Medical Center anticipates we will experience this same harm each time TLG releases its misleading "grades"—a harm that will essentially compound each time we purportedly "fail."

30. The Medical Center has worked tirelessly to ensure it is providing high-quality care and improving patient health outcomes. But TLG's grade—which is based off cherry-picked and stale data—inaccurately reflects that performance has worsened, rather than improved. TLG does not accurately measure quality or reflect whether a hospital will deliver quality healthcare outcomes.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 14, 2025

Signed: _____
HEATHER HAVERICAK, RN

Exhibit 1

LEAPFROG HOSPITAL SAFETY GRADE

A program of THELEAPFROGGROUP

Hospital Details

Delray Medical Center

5352 Linton Boulevard
Delray Beach, FL 33484-6580

This Hospital's Grade

F

FALL 2024

Outcomes measures include errors, accidents, and injuries that this hospital has publicly reported.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Dangerous object left in patient's body	0.000	0.327	0.014	0.000	CMS	07/01/2021 - 06/30/2023
Air or gas bubble in the blood	0.000	2.890	0.002	0.000	CMS	07/01/2021 - 06/30/2023
Patient falls and injuries	0.479	1.942	0.385	0.000	CMS	07/01/2021 - 06/30/2023
Infection in the blood	1.335	2.534	0.687	0.000	CMS	10/01/2022 - 09/30/2023
Infection in the urinary tract	0.344	2.550	0.577	0.000	CMS	10/01/2022 - 09/30/2023
Surgical site infection after colon surgery	1.965	3.534	0.852	0.000	CMS	10/01/2022 - 09/30/2023
MRSA Infection	1.003	2.696	0.746	0.000	CMS	10/01/2022 - 09/30/2023
C. diff. Infection	0.349	1.699	0.418	0.000	CMS	10/01/2022 - 09/30/2023
Death from treatable serious complications	91.65	222.68	168.34	86.68	CMS	07/01/2020 - 6/30/2022

Harmful Events	1.09	2.74	1.01	0.55	CMS	07/01/2020 - 6/30/2022
Dangerous bed sores *	0.70	6.31	0.58	0.05	CMS	07/01/2020 - 6/30/2022
Collapsed lung *	0.17	0.51	0.25	0.12	CMS	07/01/2020 - 6/30/2022
Falls causing broken hips *	0.09	0.13	0.09	0.06	CMS	07/01/2020 - 6/30/2022
Blood Leakage *	2.86	6.10	2.50	1.10	CMS	07/01/2020 - 6/30/2022
Kidney injury after surgery *	1.49	4.55	1.57	0.47	CMS	07/01/2020 - 6/30/2022
Serious breathing problem *	8.14	49.00	9.19	2.73	CMS	07/01/2020 - 6/30/2022
Dangerous blood clot *	5.03	7.51	3.62	1.61	CMS	07/01/2020 - 6/30/2022
Sepsis infection after surgery *	6.30	13.49	5.33	2.17	CMS	07/01/2020 - 6/30/2022
Surgical wound splits open *	2.07	4.40	2.01	0.89	CMS	07/01/2020 - 6/30/2022
Accidental cuts and tears *	0.73	3.43	1.10	0.35	CMS	07/01/2020 - 6/30/2022

* This measure is a part of the Harmful Events Composite and is not used for scoring.

Process measures include the management structures and procedures a hospital has in place to protect patients from errors, accidents, and injuries.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Doctors order medications through a computer	15	15	79.04	100	Imputation Model Applied	Not Applicable
Safe medication administration	25	25	80.51	100	Imputation Model Applied	Not Applicable
Specially trained doctors care for ICU patients	5	5	64.45	100	Imputation Model Applied	Not Applicable
Effective leadership to prevent errors	Declined to Report	27.69	117.40	120.00	2024 Leapfrog Hospital Survey	2024
Staff work together to prevent errors	Declined to Report	0.00	116.60	120.00	2024 Leapfrog Hospital Survey	2024
Nursing and Bedside Care for Patients	Declined to Report	15	76.10	100	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
Handwashing	15	15	72.43	100	Imputation Model Applied	Not Applicable

Communication with nurses	78	76	90.04	97	CMS	10/01/2022 - 09/30/2023
Communication with doctors	80	77	89.80	99	CMS	10/01/2022 - 09/30/2023
Responsiveness of hospital staff	64	55	81.48	96	CMS	10/01/2022 - 09/30/2023
Communication about medicines	57	55	74.33	93	CMS	10/01/2022 - 09/30/2023
Communication about discharge	69	64	85.14	98	CMS	10/01/2022 - 09/30/2023

THELEAPFROGGROUP

The Leapfrog Hospital Safety Grade

The Leapfrog Hospital Safety Grade is a public service provided by The Leapfrog Group, an independent nonprofit organization committed to driving quality, safety, and transparency in the U.S. health system.

Exhibit 2

LEAPFROG HOSPITAL SAFETY GRADE

A program of THELEAPFROGGROUP

Hospital Details

Delray Medical Center

5352 Linton Boulevard
Delray Beach, FL 33484-6580

This Hospital's Grade

F

SPRING 2025

Outcomes measures include errors, accidents, and injuries that this hospital has publicly reported.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Dangerous object left in patient's body	0.000	0.327	0.014	0.000	CMS	07/01/2021 - 06/30/2023
Air or gas bubble in the blood	0.000	2.890	0.002	0.000	CMS	07/01/2021 - 06/30/2023
Patient falls and injuries	0.479	1.926	0.384	0.000	CMS	07/01/2021 - 06/30/2023
Infection in the blood	1.477	2.782	0.651	0.000	CMS	01/01/2023 - 12/31/2023
Infection in the urinary tract	0.271	2.512	0.540	0.000	CMS	01/01/2023 - 12/31/2023
Surgical site infection after colon surgery	2.073	3.094	0.831	0.000	CMS	01/01/2023 - 12/31/2023
MRSA Infection	0.922	2.850	0.719	0.000	CMS	01/01/2023 - 12/31/2023
C. diff. Infection	0.284	1.607	0.401	0.000	CMS	01/01/2023 - 12/31/2023
Death from treatable serious complications	108.94	235.51	177.45	84.66	CMS	07/01/2021 - 06/30/2023

Harmful Events	1.03	3.10	1.00	0.53	CMS	07/01/2021 - 06/30/2023
Dangerous bed sores *	0.56	7.50	0.64	0.05	CMS	07/01/2021 - 06/30/2023
Collapsed lung *	0.20	0.65	0.25	0.10	CMS	07/01/2021 - 06/30/2023
Falls causing broken hips *	0.31	0.56	0.29	0.15	CMS	07/01/2021 - 06/30/2023
Blood Leakage *	2.22	5.53	2.42	1.01	CMS	07/01/2021 - 06/30/2023
Kidney injury after surgery *	1.61	4.60	1.69	0.74	CMS	07/01/2021 - 06/30/2023
Serious breathing problem *	9.54	57.80	10.53	1.94	CMS	07/01/2021 - 06/30/2023
Dangerous blood clot *	5.06	8.15	3.90	1.56	CMS	07/01/2021 - 06/30/2023
Sepsis infection after surgery *	6.71	12.56	5.63	1.95	CMS	07/01/2021 - 06/30/2023
Surgical wound splits open *	1.60	4.00	1.87	1.13	CMS	07/01/2021 - 06/30/2023
Accidental cuts and tears *	1.03	2.41	0.89	0.28	CMS	07/01/2021 - 06/30/2023

* This measure is a part of the Harmful Events Composite and is not used for scoring.

Process measures include the management structures and procedures a hospital has in place to protect patients from errors, accidents, and injuries.

Measure	The Hospital's Score	Worst Performing Hospital	Avg. Performing Hospital	Best Performing Hospital	Data Source	Time Period Covered
Doctors order medications through a computer	15	15	80.23	100	Imputation Model Applied	Not Applicable
Safe medication administration	25	25	81.87	100	Imputation Model Applied	Not Applicable
Specially trained doctors care for ICU patients	5	5	65.15	100	Imputation Model Applied	Not Applicable
Effective leadership to prevent errors	Declined to Report	9.23	117.49	120.00	2024 Leapfrog Hospital Survey	2024
Staff work together to prevent errors	Declined to Report	0.00	116.85	120.00	2024 Leapfrog Hospital Survey	2024
Nursing and Bedside Care for Patients	Declined to Report	15	77.07	100	2024 Leapfrog Hospital Survey	01/01/2023 - 12/31/2023
Handwashing	15	15	74.40	100	Imputation Model Applied	Not Applicable

Communication with nurses	79	73	90.19	97	CMS	01/01/2023 - 12/31/2023
Communication with doctors	81	73	89.91	97	CMS	01/01/2023 - 12/31/2023
Responsiveness of hospital staff	64	55	81.63	95	CMS	01/01/2023 - 12/31/2023
Communication about medicines	58	55	74.42	93	CMS	01/01/2023 - 12/31/2023
Communication about discharge	71	67	85.25	97	CMS	01/01/2023 - 12/31/2023

THELEAPFROGGROUP

The Leapfrog Hospital Safety Grade

The Leapfrog Hospital Safety Grade is a public service provided by The Leapfrog Group, an independent nonprofit organization committed to driving quality, safety, and transparency in the U.S. health system.

Exhibit 3

Note: If you have a score of:
-- zero (0), enter 0, in Column E.
-- Not Available or Declined to Report for a measure, enter N/A in Column E.

April 2025

Measure Domain	Measure	Enter Your Hospital's Score Here (Do NOT Leave Blanks)	Mean	Standard Deviation	Z-Score[1]		Inputs to Weighting Individual Measures[2]				Weight[3]		Weighted Measure Score (Modified Z-Score x Final Weight)
					Original Z-Score	Modified Z-Score	Evidence	Opportunity	Impact	Number of Component Measures[4]	Standard Weight	Final Weight (N/A redistributes)	
Process/Structural Measures	Computerized Physician Order Entry (CPOE)	15	80.23	34.14	-1.9104	-1.9104	2	1.43	3	1	6.157%	7.9%	-0.1507
	Bar Code Medication Administration (BCMA)	25	81.87	30.45	-1.8675	-1.8675	2	1.37	3	1	6.000%	7.7%	-0.1435
	ICU Physician Staffing (IPS)	5	65.15	43.73	-1.3754	-1.3754	2	1.67	3	1	6.881%	8.8%	-0.1212
	Safe Practice 1: Culture of Leadership Structures and Systems	N/A	117.49	6.79	N/A	N/A	1	1.06	2	1	3.056%	0.0%	0.0000
	Safe Practice 2: Culture Measurement, Feedback, & Intervention	N/A	116.85	13.98	N/A	N/A	1	1.12	2	1	3.178%	0.0%	0.0000
	Total Nursing Care Hours per Patient Day	N/A	77.07	31.61	N/A	N/A	2	1.41	2	1	4.729%	0.0%	0.0000
	Hand Hygiene	15	74.40	36.14	-1.6434	-1.6434	2	1.49	2	1	4.877%	6.2%	-0.1027
	H-COMP-1: Nurse Communication	86	90.19	2.51	-1.6678	-1.6678	1	1.03	2	1	2.998%	3.8%	-0.0640
	H-COMP-2: Doctor Communication	86	89.91	2.48	-1.5761	-1.5761	1	1.03	2	1	2.997%	3.8%	-0.0605
	H-COMP-3: Staff Responsiveness	75	81.63	4.36	-1.5206	-1.5206	1	1.05	2	1	3.048%	3.9%	-0.0594
	H-COMP-5: Communication about Medicines	69	74.42	4.13	-1.3141	-1.3141	1	1.06	2	1	3.052%	3.9%	-0.0514
	H-COMP-6: Discharge Information	80	85.25	3.70	-1.4175	-1.4175	1	1.04	2	1	3.028%	3.9%	-0.0550
Outcome Measures	Foreign Object Retained	0.000	0.014	0.05	0.2755	0.2755	1	3.00	2	1	4.208%	4.2%	0.0116
	Air Embolism	0.000	0.002	0.06	0.0348	0.0348	1	3.00	1	1	2.405%	2.4%	0.0008
	Falls and Trauma	0.665	0.384	0.40	-0.6972	-0.6972	2	2.05	3	1	4.894%	4.9%	-0.0341
	CLABSI	0.229	0.651	0.55	0.7637	0.7637	2	1.85	3	1	4.536%	4.5%	0.0346
	CAUTI	1.217	0.540	0.49	-1.3710	-1.3710	2	1.91	3	1	4.654%	4.7%	-0.0638
	SSI: Colon	0.354	0.831	0.69	0.6932	0.6932	2	1.83	2	1	3.400%	3.4%	0.0236
	MRSA	0.829	0.719	0.59	-0.1858	-0.1858	2	1.82	3	1	4.489%	4.5%	-0.0083
	C. Diff.	0.370	0.401	0.33	0.0937	0.0937	2	1.81	3	1	4.474%	4.5%	0.0042
	PSI 4: Death rate among surgical inpatients with serious treatable conditions	152.54	177.45	24.02	1.0371	1.0371	1	1.14	2	1	1.966%	2.0%	0.0204
	CMS Medicare PSI 90: Patient safety and adverse events composite	0.91	1.00	0.20	0.4708	0.4708	1	1.20	2	10	14.974%	15.0%	0.0705
Process Measure Domain Score:		-0.8083											
Outcome Measure Domain Score:		0.0595											
Process/Outcome Domains - Combined Score:		-0.7488											
Normalized Numerical Score:		2.2512											
Hospital Safety Grade (Letter Grade):		D											

Additional Resources:

[1]Please refer to the 'Calculating Z-scores' section of the methodology document for more details.

[2]Please refer to the 'Weighting Individual Measures' section of the methodology document for more details.

[3]Please refer to the 'Dealing with Missing Data' section of the methodology document for more details.

[4]Please refer to the 'Number of Component Measures' section of the methodology document for more details.