



Advancing a culture of health.



Nursing-Sensitive Measure Report

Statistical Appendix

July 2022 – June 2023



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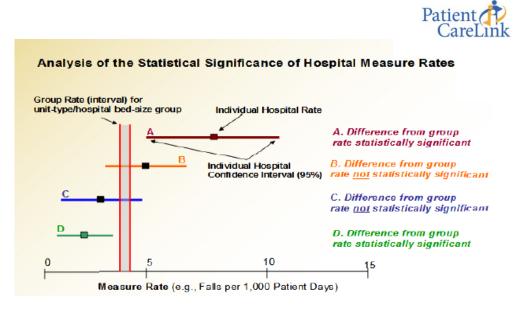
Analysis of the Statistical Significance of Hospital Measure Rates

Because the measure rates for the hospitals are for a specific period of time, and because there is variability in performance over time because of chance and other factors, there is a degree of uncertainty about the extent to which a hospital's measure rate may reflect its true underlying performance. Without taking this uncertainty into account, we cannot conclude that a hospital with a measure rate that is higher or lower than the group rate is truly performing at a worse or better rate than the group.

Statisticians use **confidence intervals** to account for this uncertainty. A confidence interval is a numeric range around the estimate represented by the hospital's measure rate, calculated to provide a specified level of confidence that the interval includes the true underlying performance of the hospital. The confidence level chosen for this analysis, 95% confidence, means that, in repeated collection and analysis of similar data, 95% of the resulting confidence intervals will include the true rate. The use and interpretation of confidence intervals in the nursing-sensitive measures is **illustrated below**. For any hospital (A, B, C, or D), the measure rate represented by the square is accompanied by a confidence interval, represented by the vertical lines (hospitals A and D in the illustration), we can say that the difference between the hospital rate and the group rate is statistically significant and likely represents a true difference in performance. When the hospital's interval completely crosses the group interval (hospitals B and C in the illustration), the difference is not statistically significant. (When a hospital's interval extends only a small distance into the group interval, the difference may be statistically significant and additional calculation is required.)

The confidence level of 95% applies to the confidence interval for each individual hospital. In a group of 20 hospitals, one would expect, on average, that one confidence interval does not actually include the hospital's true rate. Hospitals' confidence intervals will vary in width because, among other factors, the measure rate is based on more or fewer observations (i.e., patient days).

Abt Associates Inc. advised MHA on the analytic approach and performed the statistical analysis.



Acute Care Hospitals

Hospitals will be found within the section of their bed-size group. Hospitals are listed alphabetically within bed-size groups below. Not all hospitals will have data for each unit-type. The data graphs are presented in order of hospital-bed size group, low to high.

| Less than 100 Beds | |
|---|--|
| Addison Gilbert Hospital | Fairview Hospital |
| Athol Hospital | Falmouth Hospital |
| Baystate Franklin Medical Center | Massachusetts Eye and Ear Infirmary |
| Baystate Noble Hospital | Nashoba Valley Medical Center |
| Baystate Wing Hospital | Southcoast Hospitals Group – Tobey Hospital |
| Beth Israel Deaconess Hospital – Milton | UMass Memorial Marlborough Hospital |
| Beth Israel Deaconess Hospital – Needham | |
| 100 – 199 Beds | |
| Anna Jaques Hospital | Lawrence General Hospital |
| Beth Israel Deaconess Hospital – Plymouth | Melrose Wakefield Hospital |
| Brigham and Women's Faulkner Hospital | MetroWest Medical Center – Framingham Campus |
| Cambridge Health Alliance – Cambridge | MetroWest Medical Center – Leonard Morse Campus |
| Cambridge Health Alliance – Everett | Milford Regional Medical Center |
| Carney Hospital | Morton Hospital |
| Cooley Dickinson Health | New England Baptist Hospital |
| Emerson Health | Saint Anne's Hospital |
| Heywood Hospital | Sturdy Memorial Hospital |
| Holy Family Hospital at Haverhill | UMass Memorial Health – Harrington |
| Holyoke Medical Center | UMass Memorial HealthAlliance – Clinton Hospital |
| 200 | – 299 Beds |
| Berkshire Medical Center | Newton-Wellesley Hospital |
| Beverly Hospital | Saint Vincent Hospital |
| Cape Cod Hospital | Salem Hospital |
| Good Samaritan Medical Center | Signature Healthcare Brockton Hospital |
| Holy Family Hospital at Methuen | Winchester Hospital |
| Mount Auburn Hospital | |
| 300 – 399 Beds | |
| Lahey Hospital & Medical Center | Southcoast Hospitals Group – Charlton Memorial |
| Lowell General Hospital | Southcoast Hospitals Group – St. Luke's Hospital |
| Mercy Medical Center | St. Elizabeth's Medical Center |
| South Shore Hospital | Tufts Medical Center |
| 500 or More Beds | |
| Baystate Medical Center | Brigham and Women's Hospital |
| Beth Israel Deaconess Medical Center | Massachusetts General Hospital |
| Boston Medical Center | UMass Memorial Medical Center |

Post-Acute Care Hospitals

Hospitals will be found within the section for their hospital type. Hospitals are listed alphabetically within hospital type below. Not all hospitals will have data for each unit-type. Post-Acute hospital data graphs follow the acute care hospital data graphs in this document.

| Rehabilitation Hospitals | |
|---|--|
| Bronson Rehabilitation Center at Baystate Noble Hospital | |
| Encompass Health Rehabilitation Hospital of Braintree | |
| Encompass Health Rehabilitation Hospital of New England | |
| Encompass Health Rehabilitation Hospital of Western Massachusetts | |
| Fairlawn Rehabilitation Hospital | |
| Southeast Rehabilitation Hospital at Southcoast Hospitals Group - Charlton Hospital | |
| Spaulding Rehabilitation Hospital Boston | |
| Spaulding Rehabilitation Hospital Cape Cod | |
| The Center for Rehabilitation at Berkshire Medical Center | |
| Weldon Rehabilitation Hospital at Mercy Medical Center | |
| Long-Term Post-Acute Care Hospitals | |
| New England Sinai Hospital | |
| Spaulding Hospital for Continuing Medical Care Cambridge | |

Tewksbury Hospital

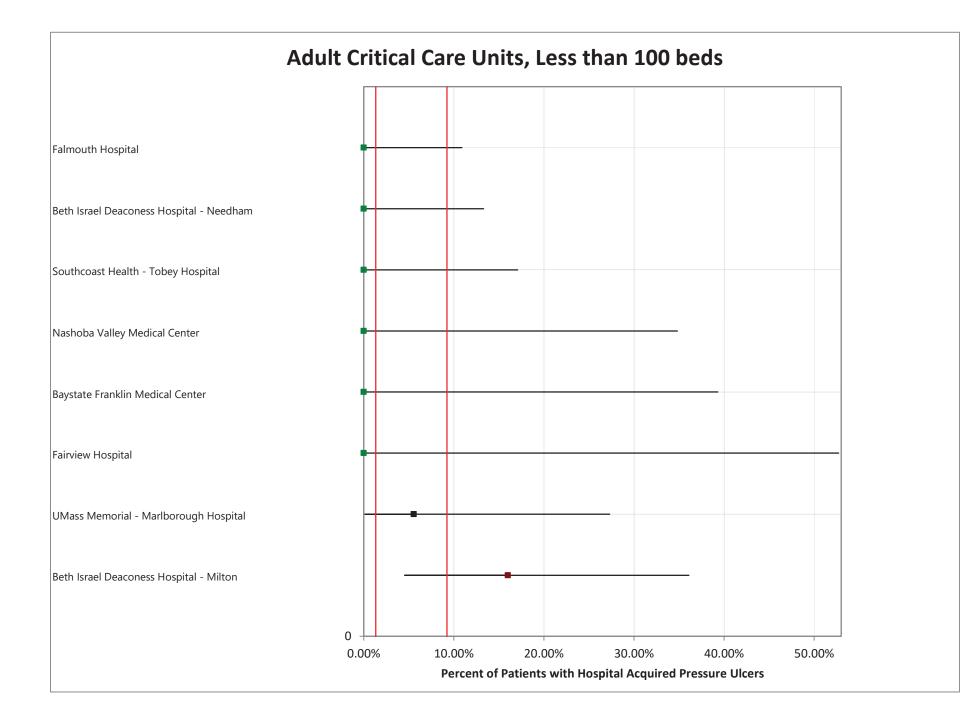
Acute Care Hospitals



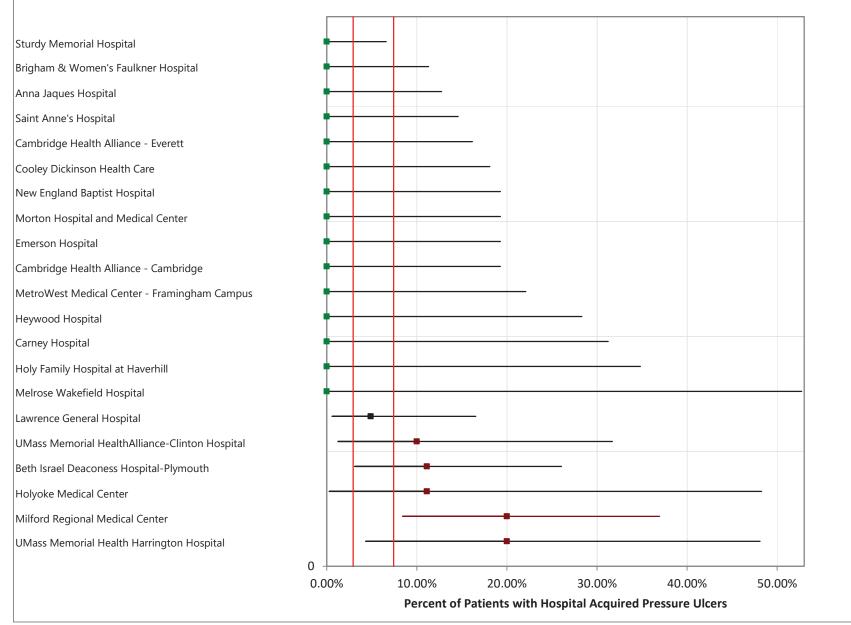
NSC-2 Pressure Ulcer Prevalence

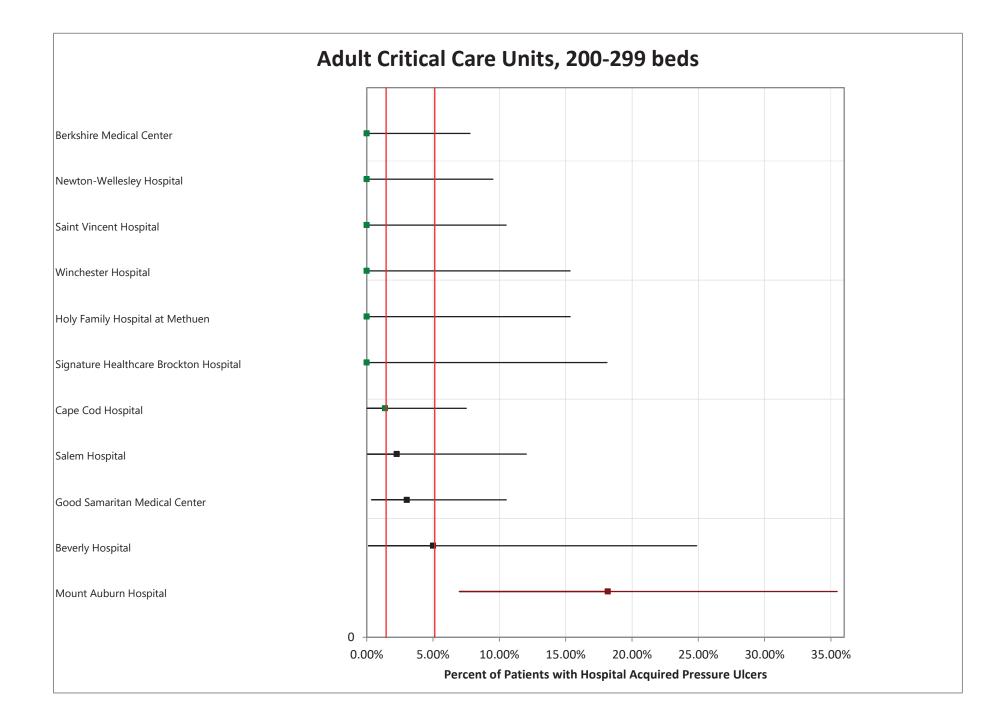
September 2022 December 2022* March 2023 June 2023*

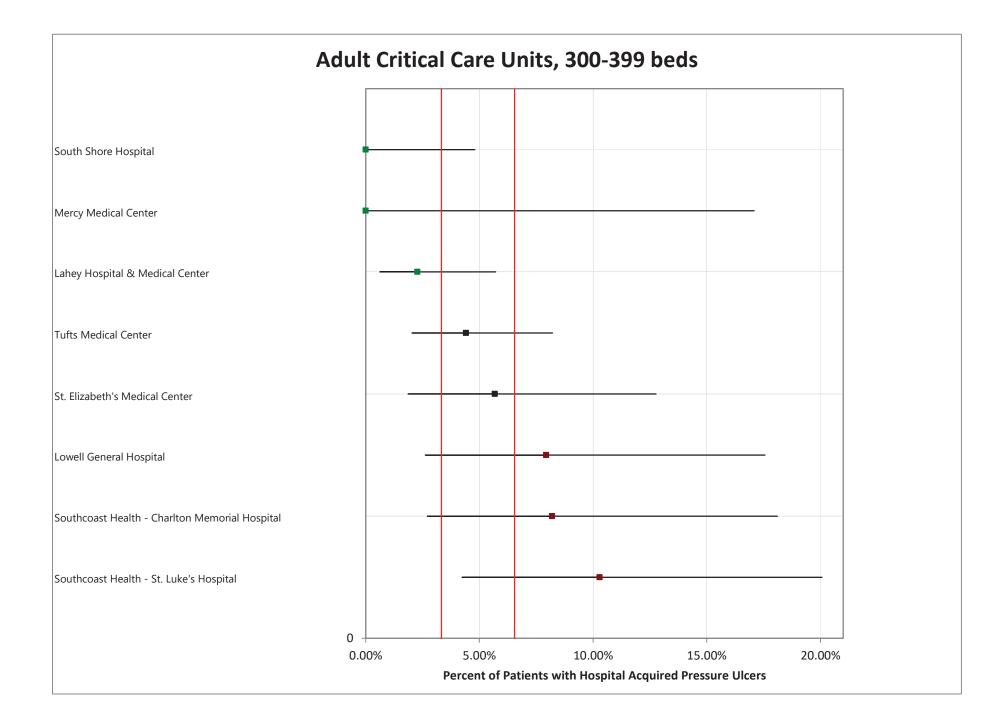
* Optional studies

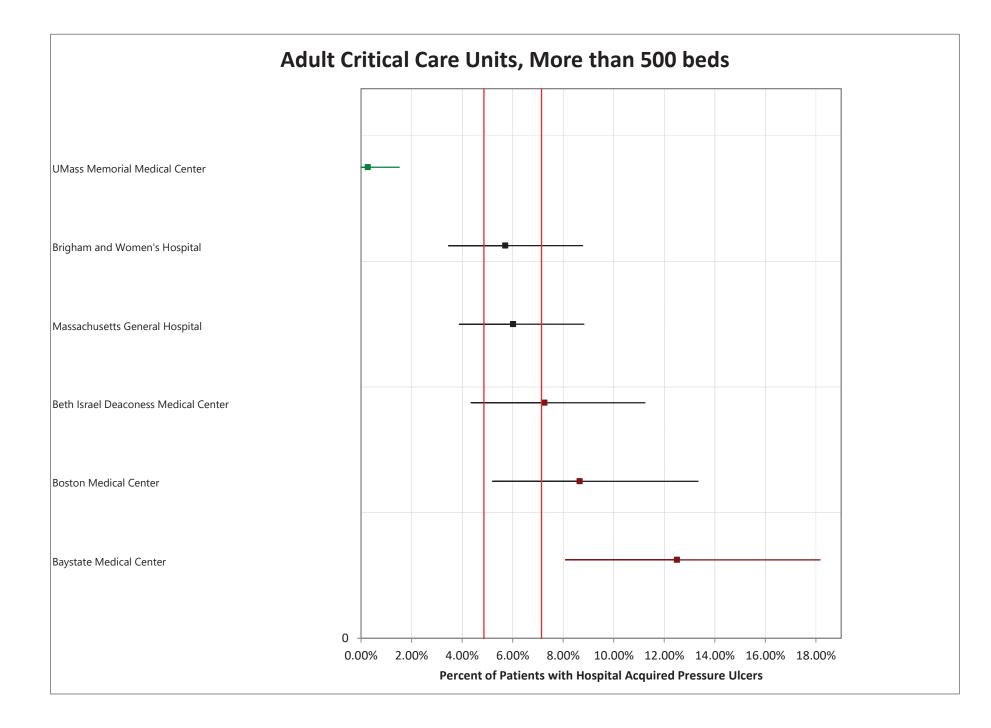


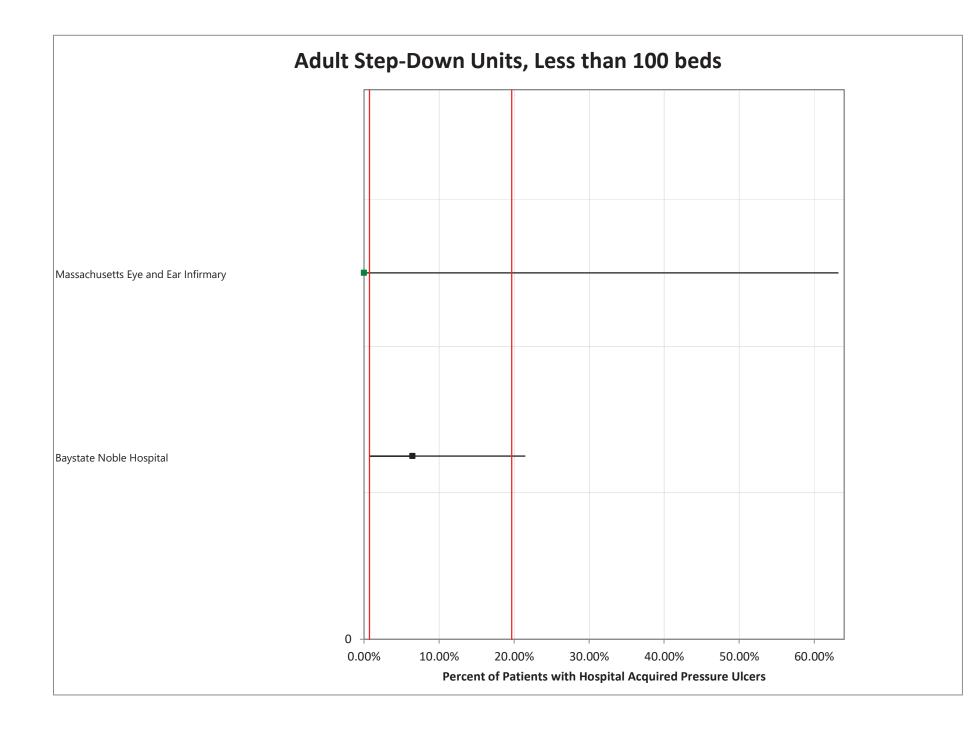
Adult Critical Care Units, 100-199 beds

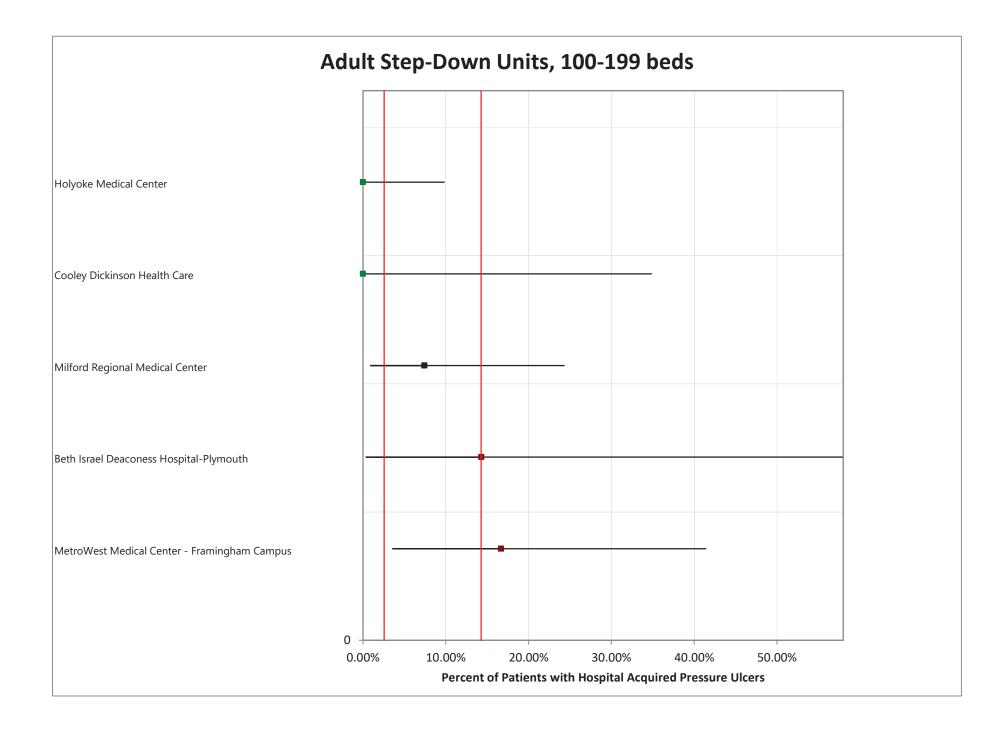


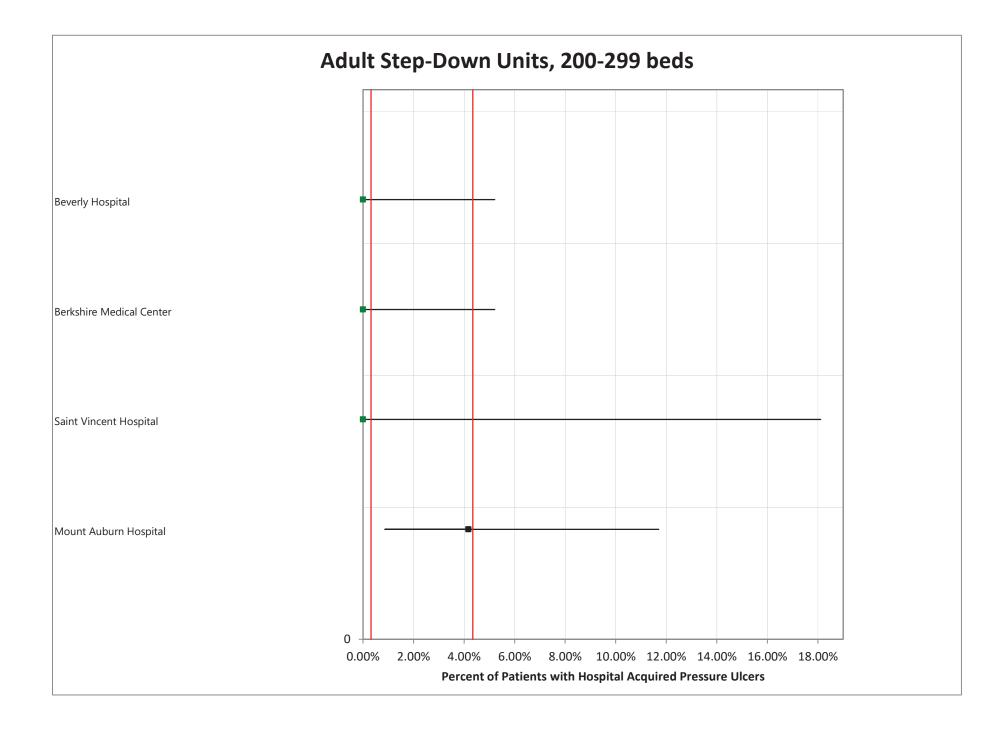


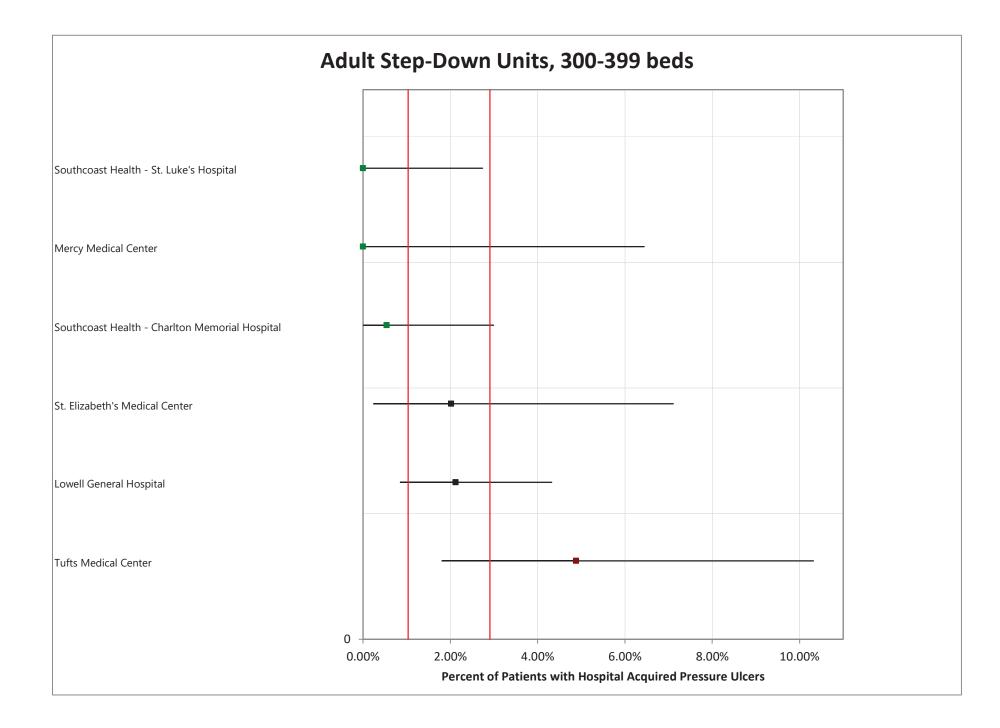


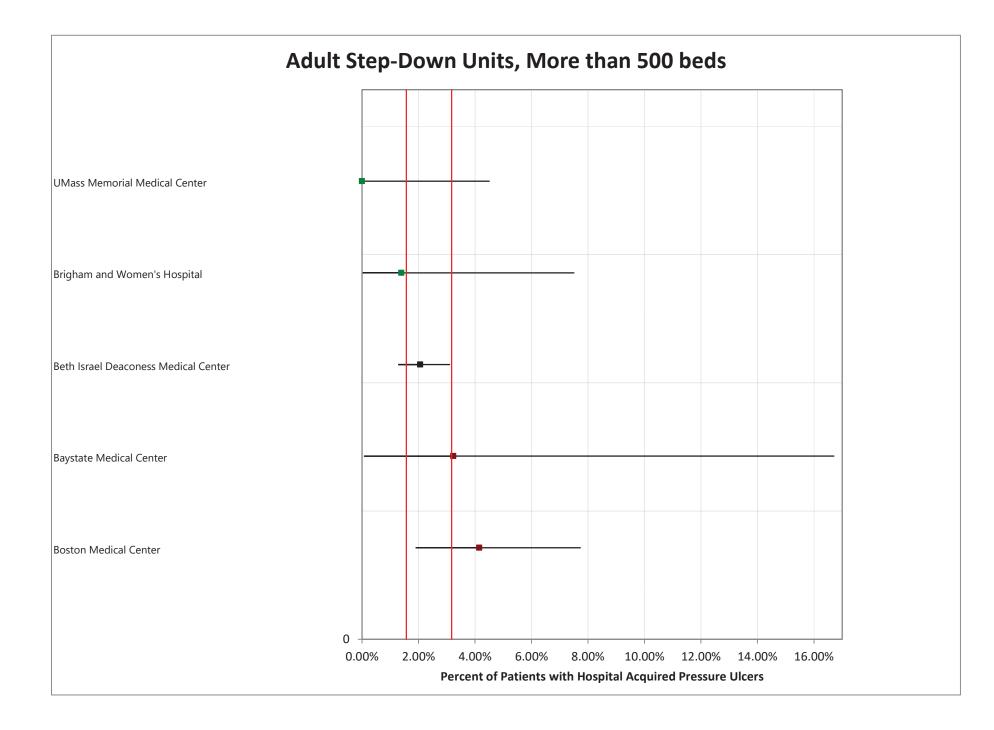


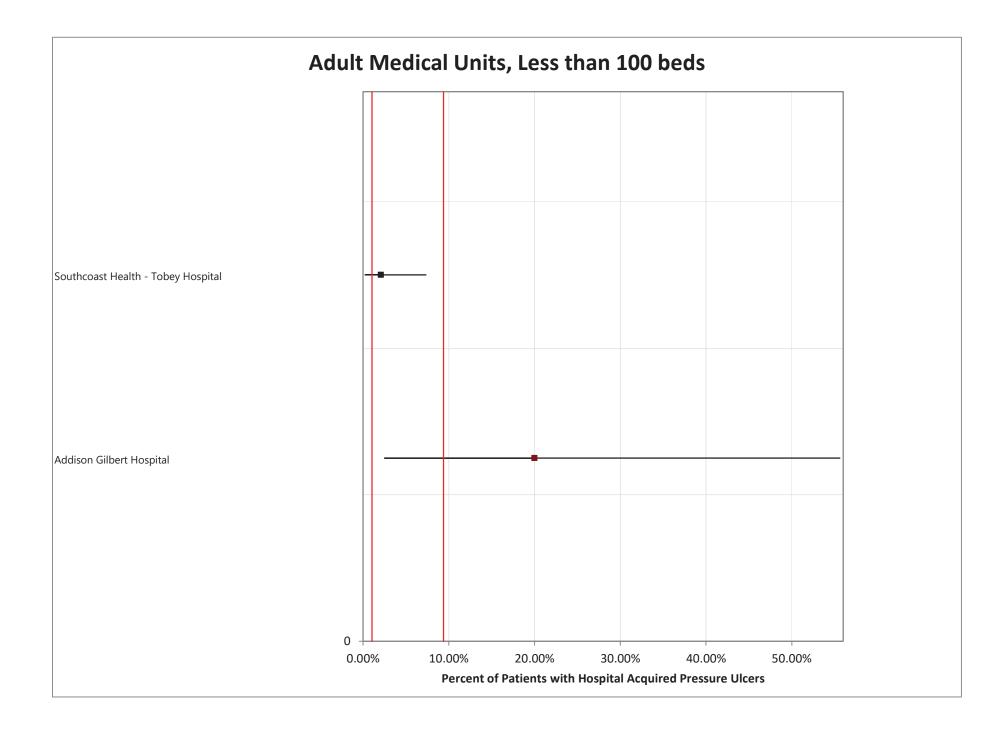


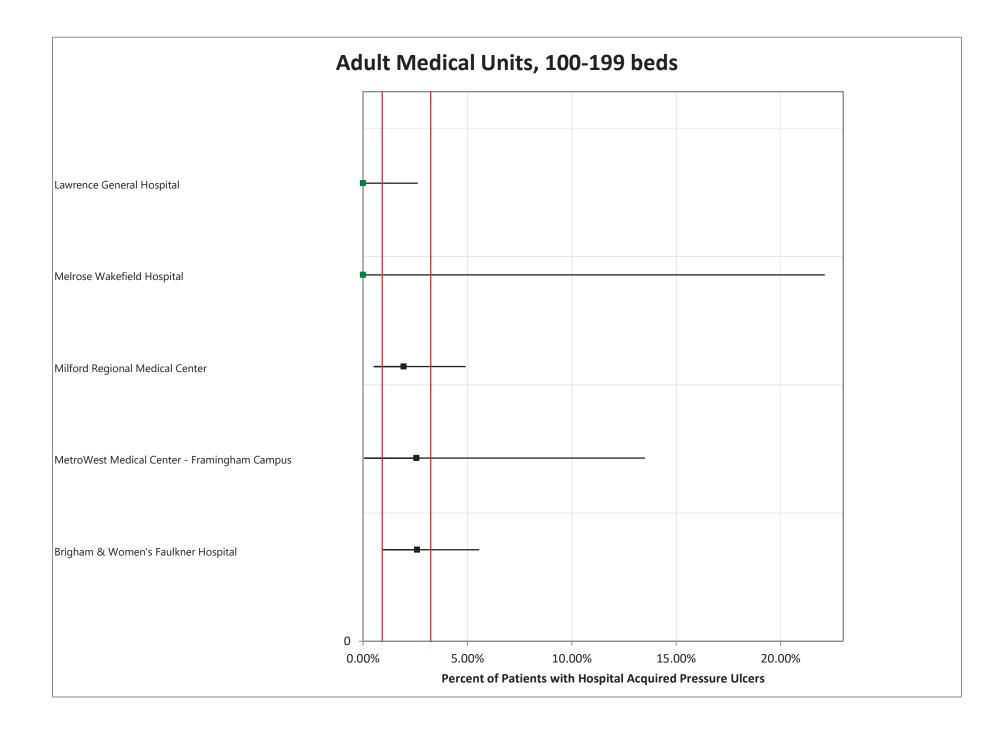


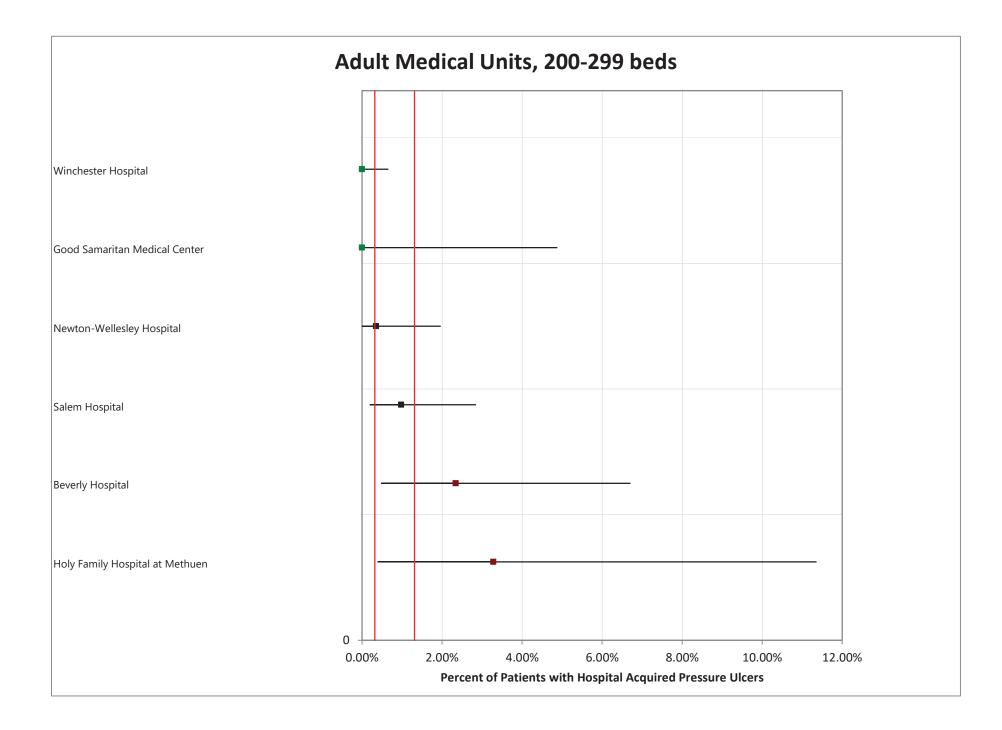


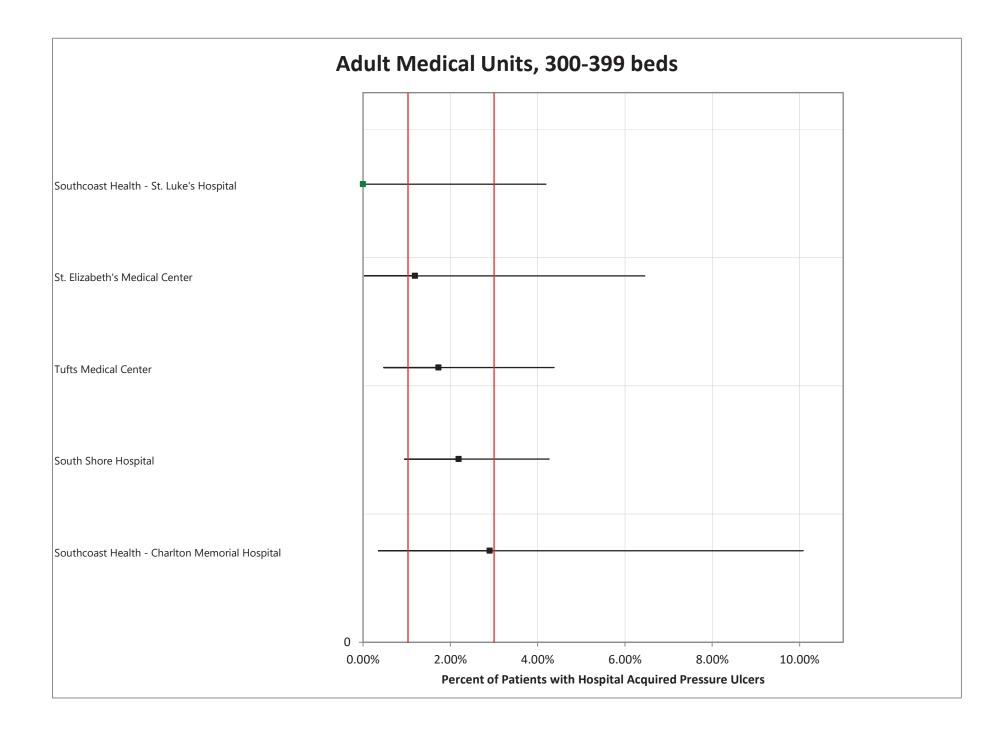


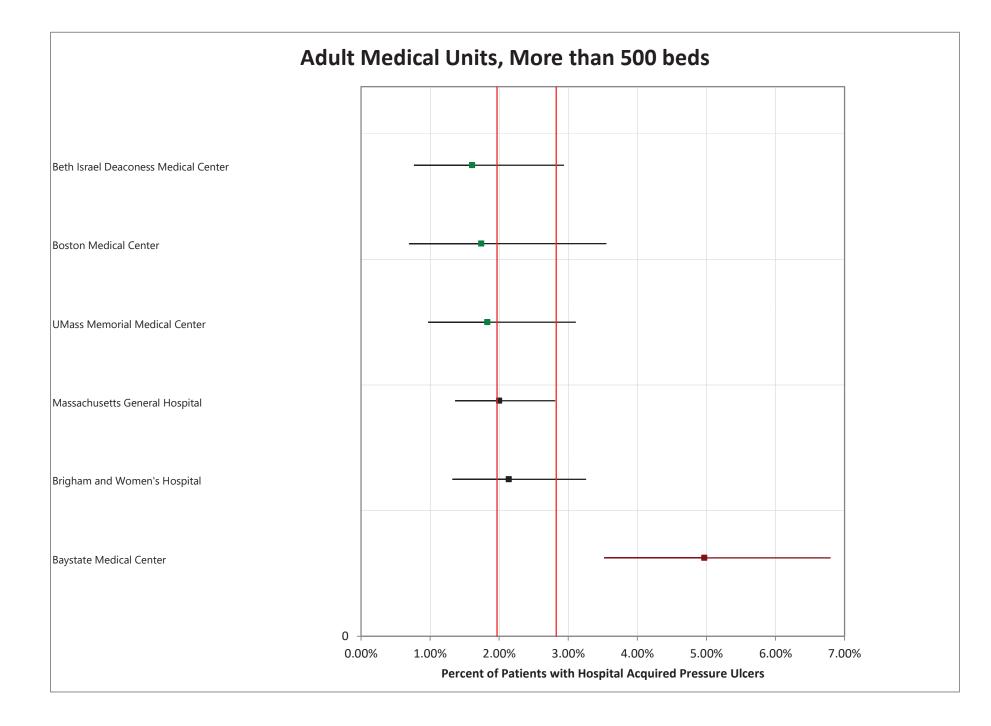


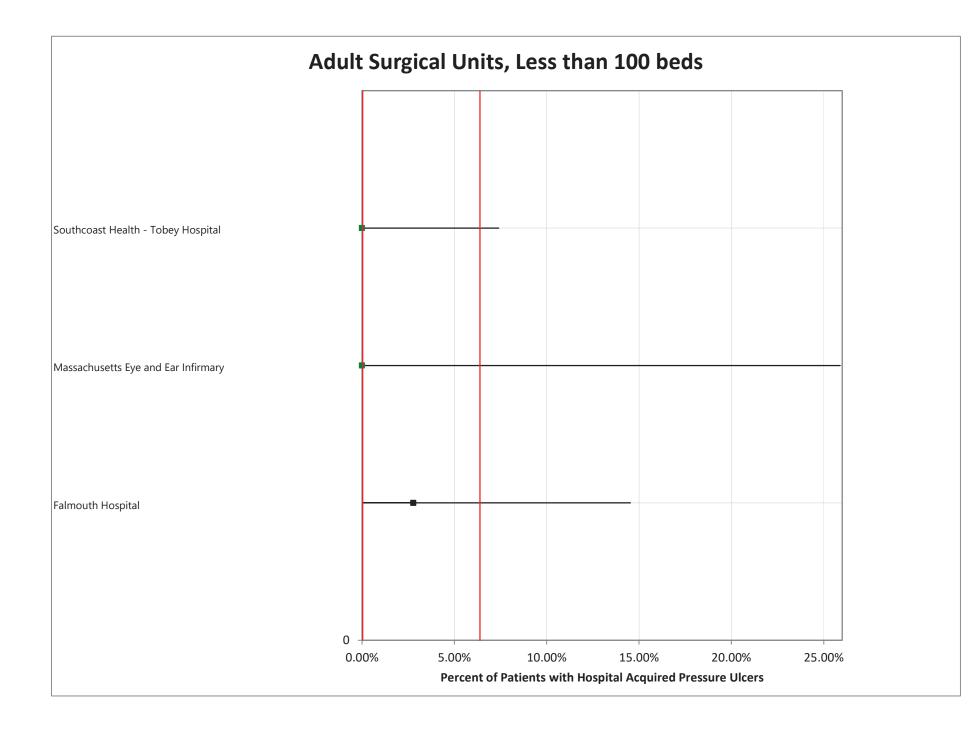


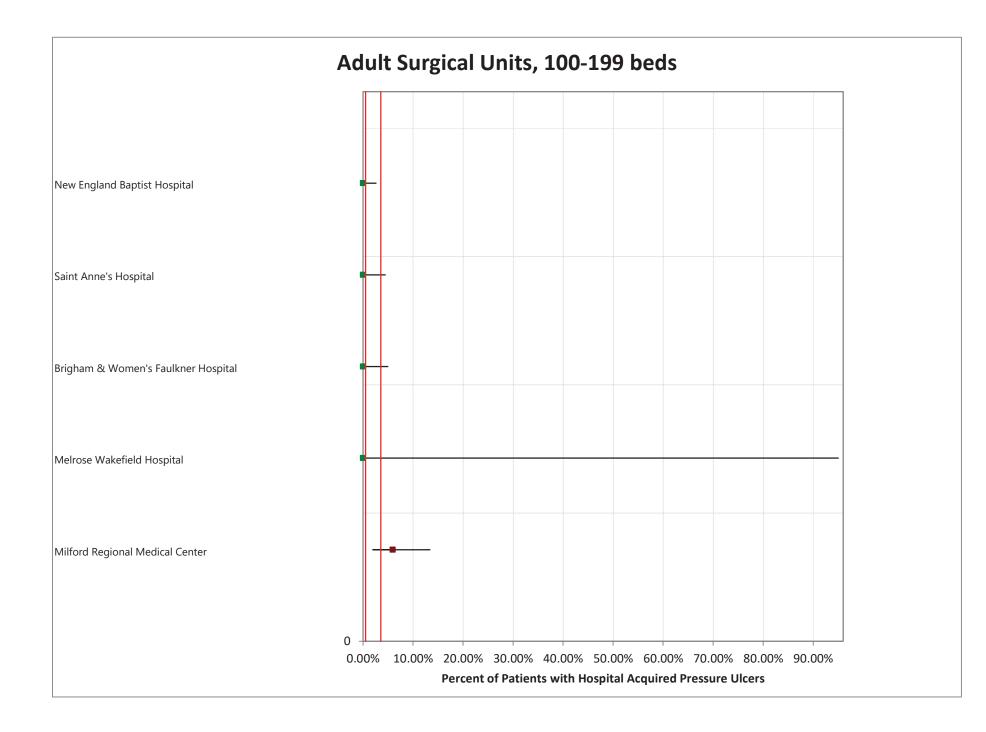


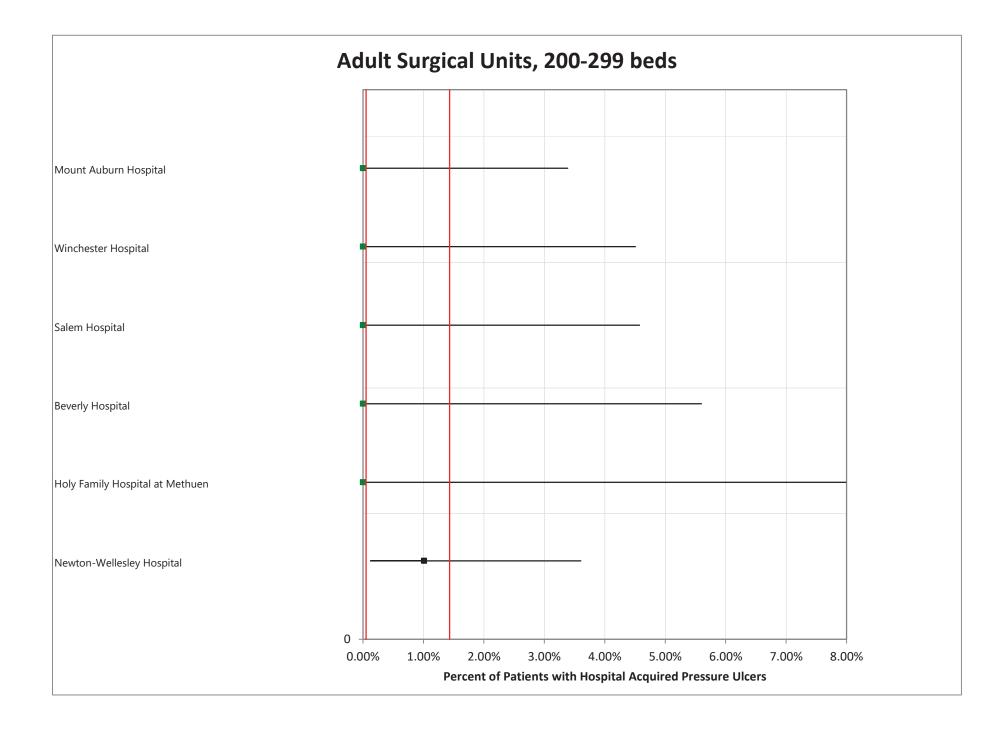


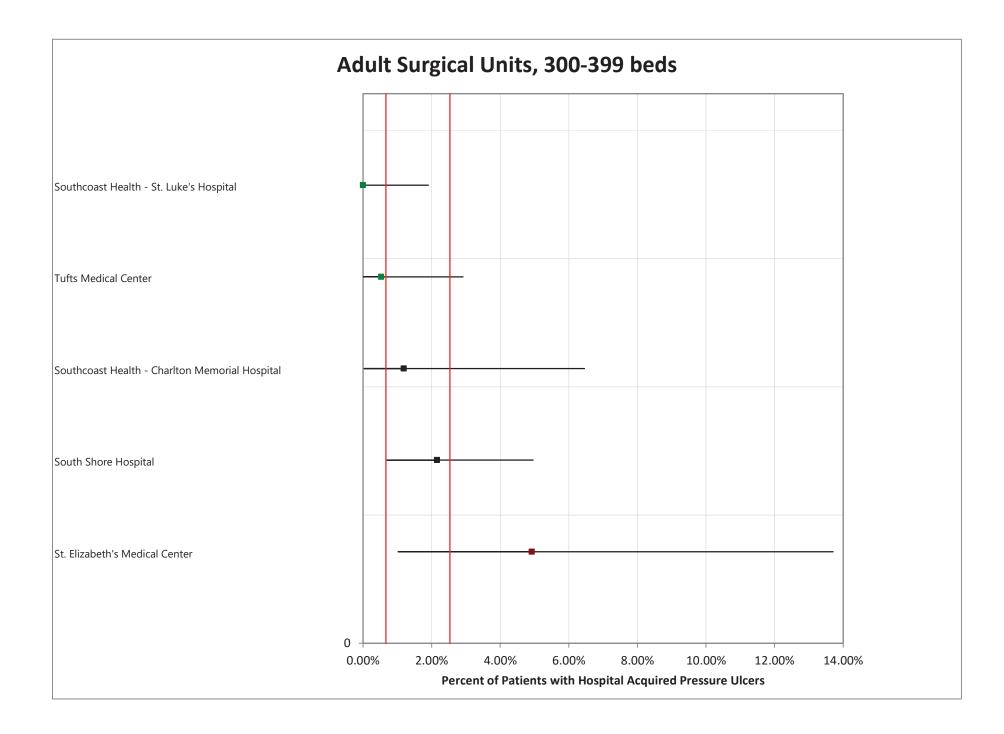


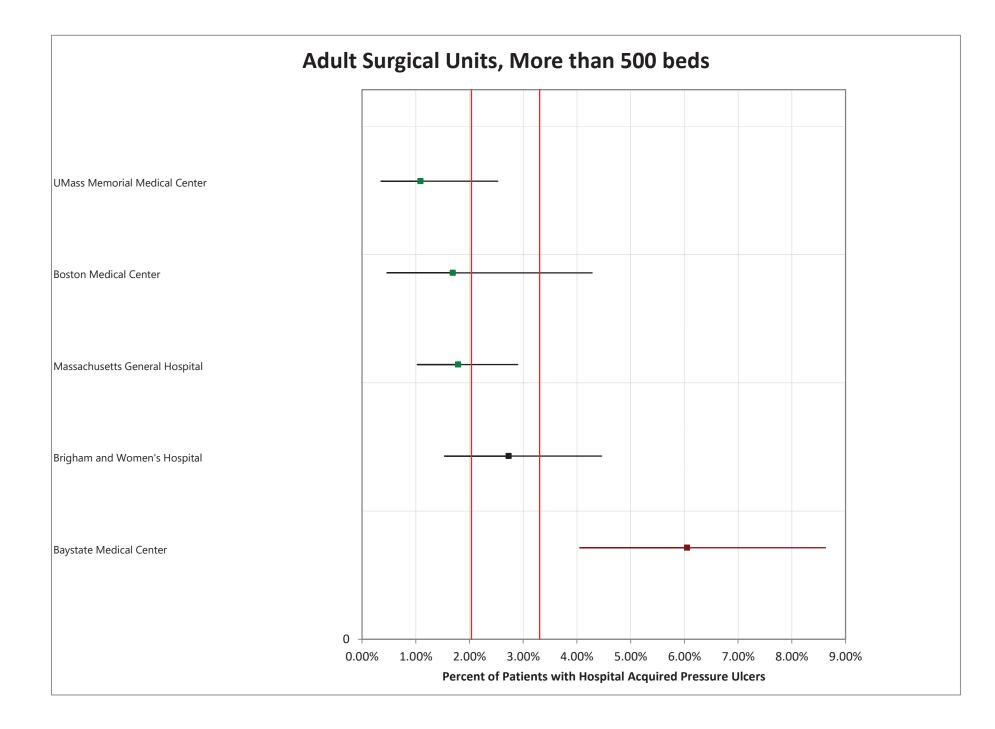


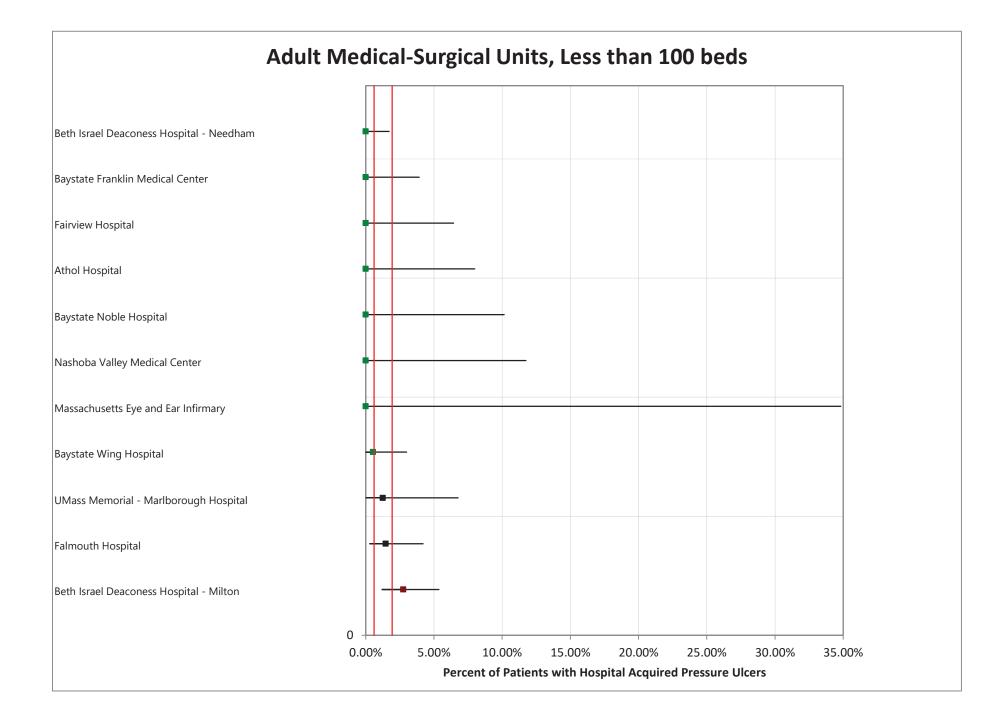




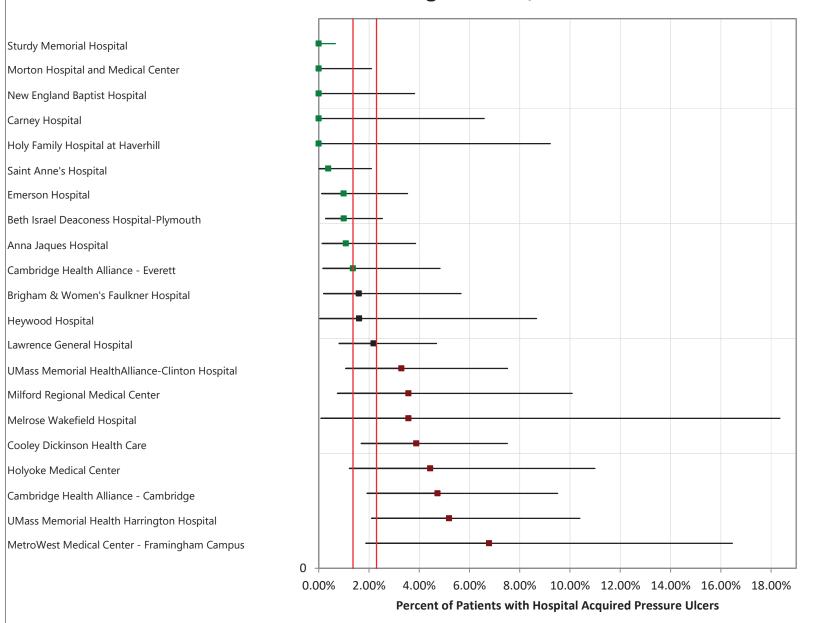


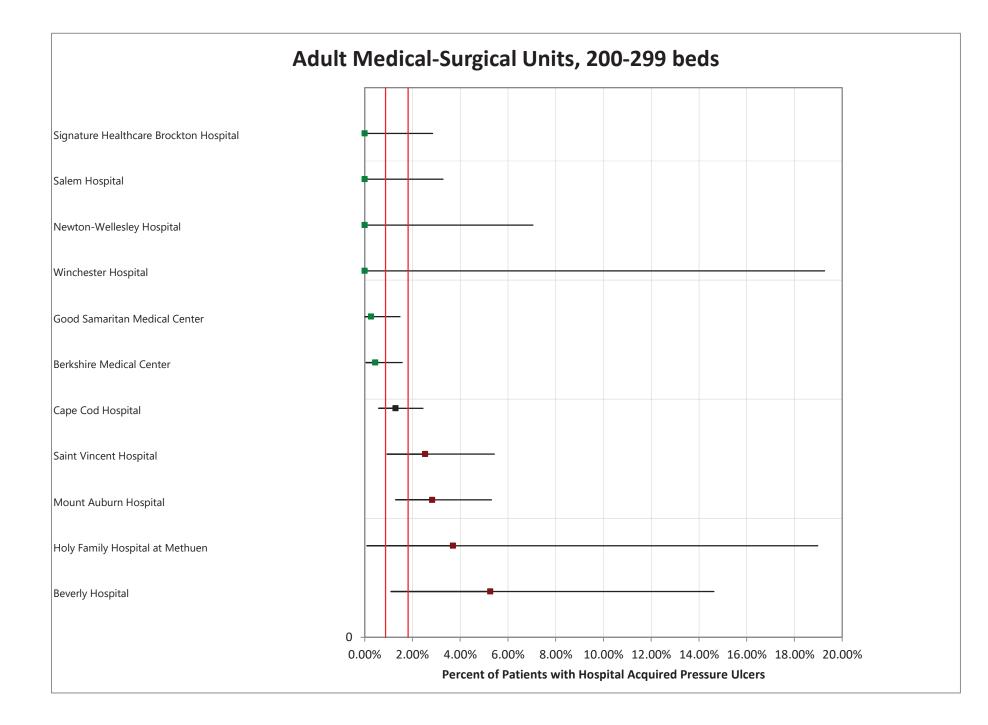


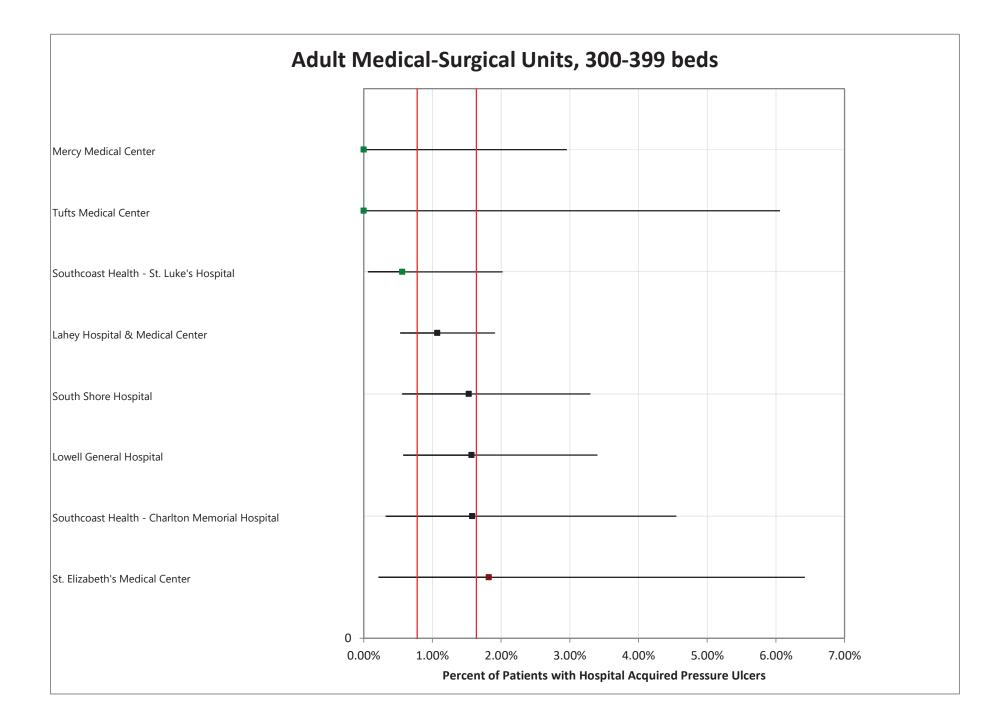


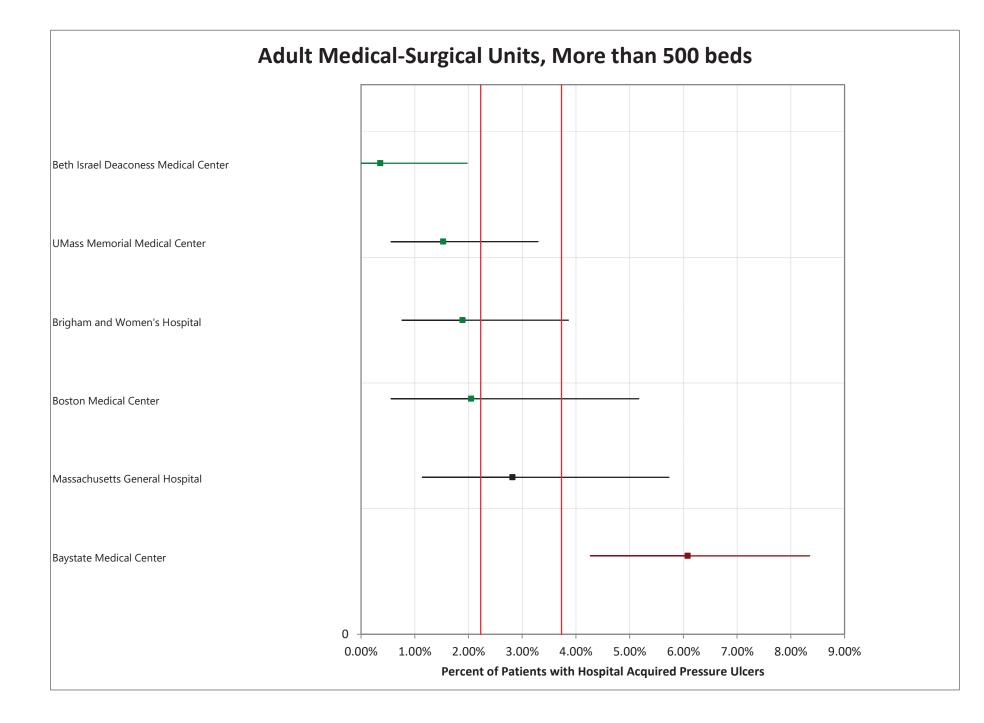


Adult Medical-Surgical Units, 100-199 beds



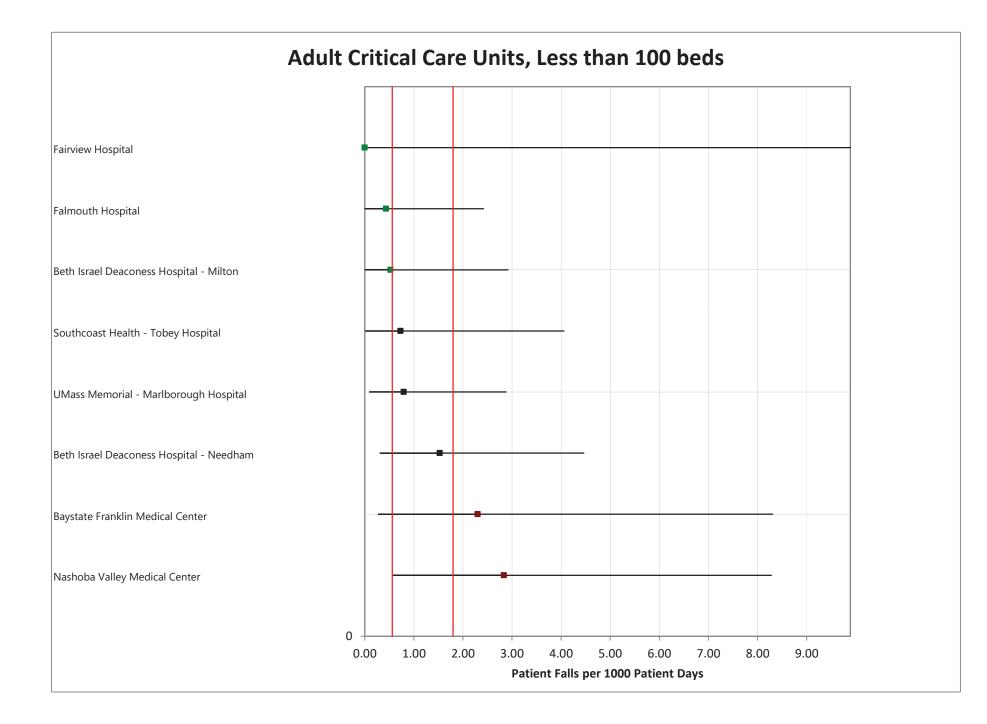




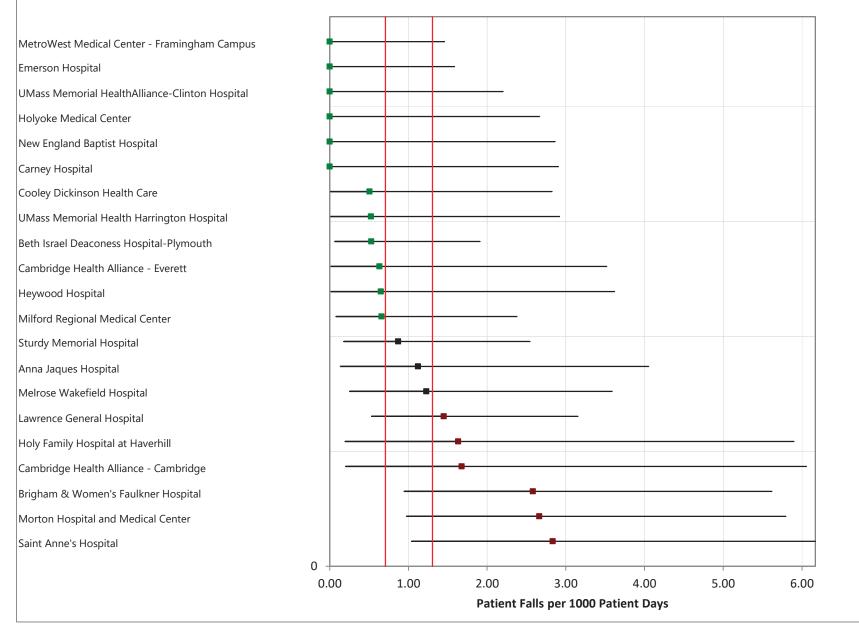


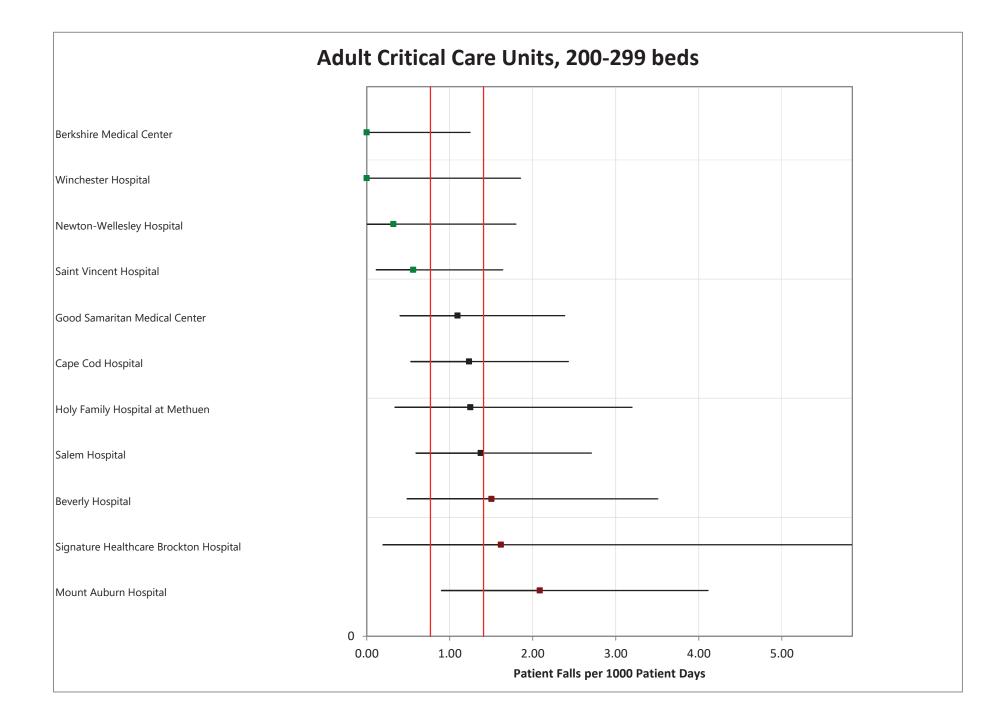
NSC-3 Patient Falls

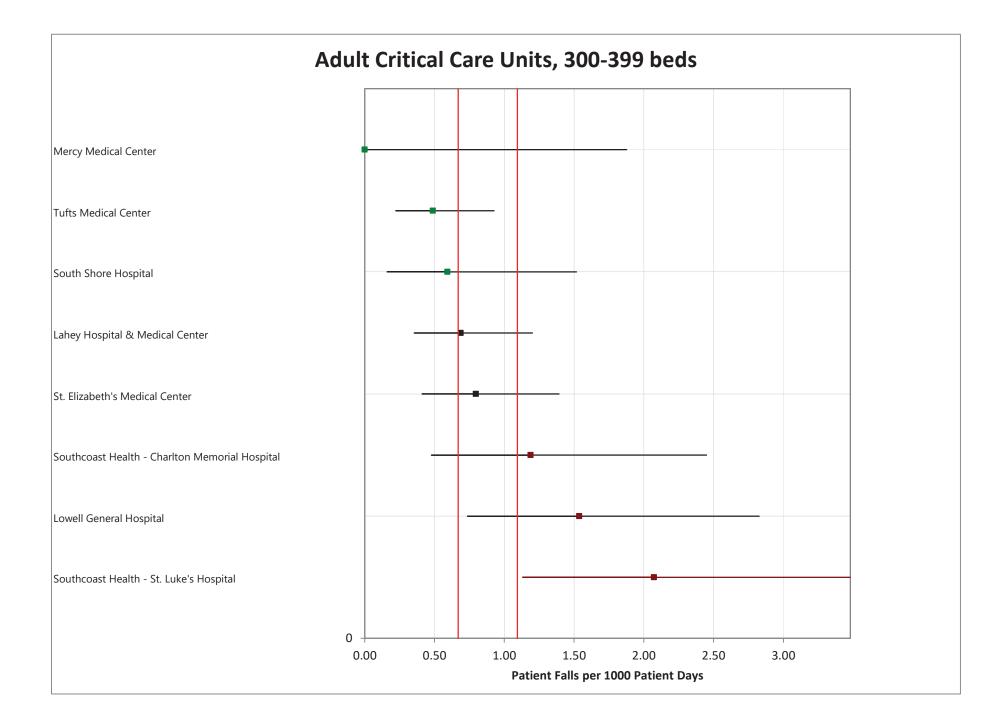
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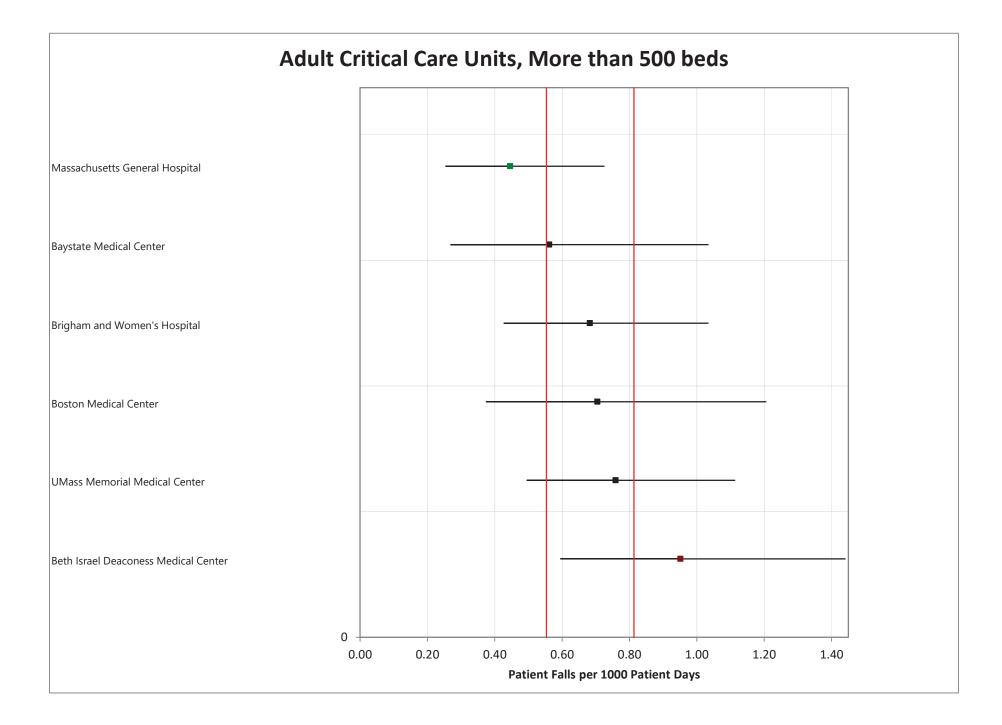


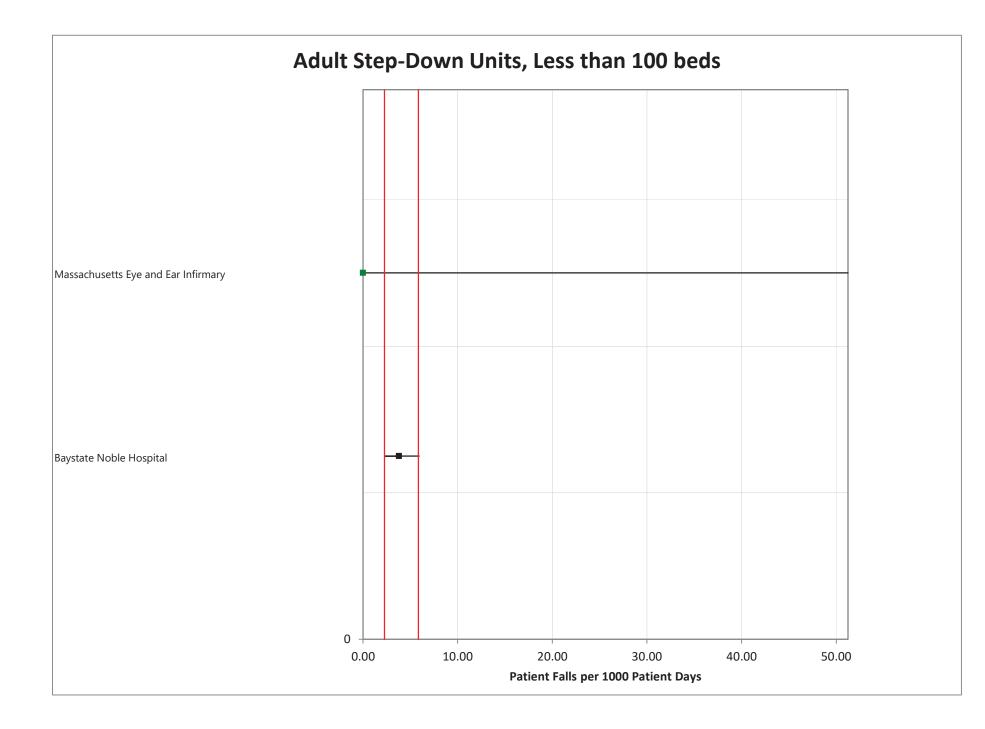
Adult Critical Care Units, 100-199 beds

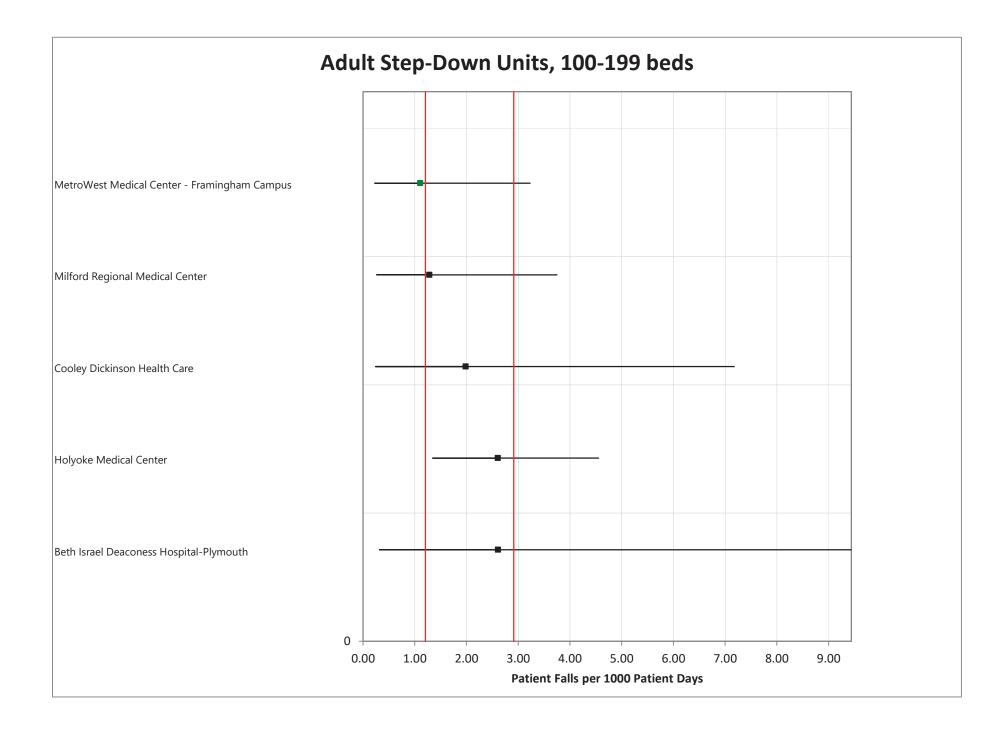


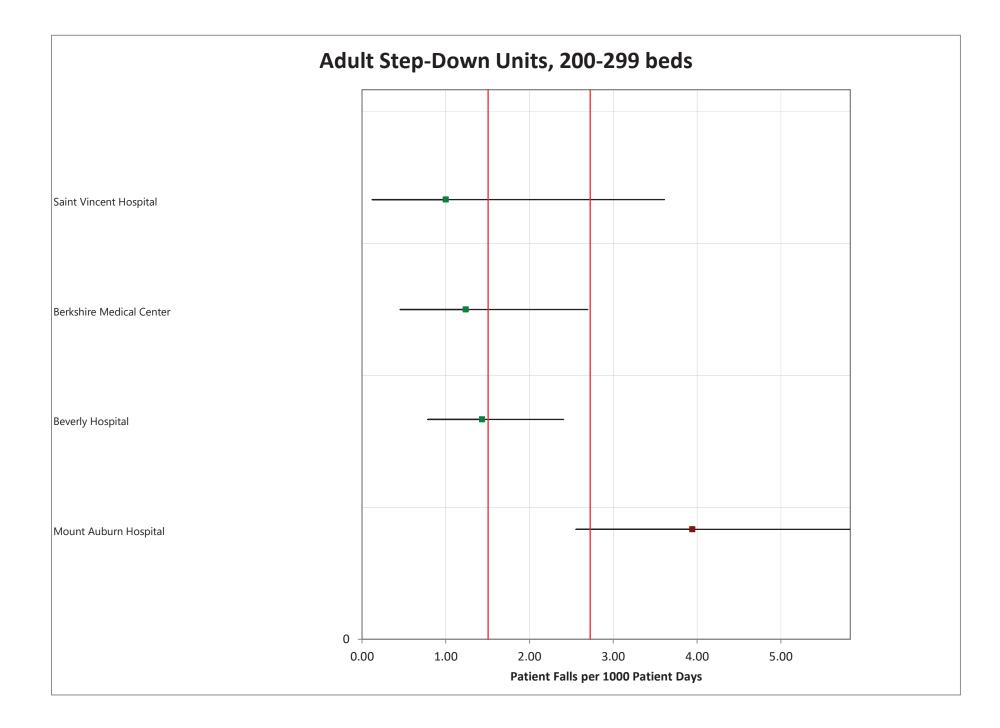


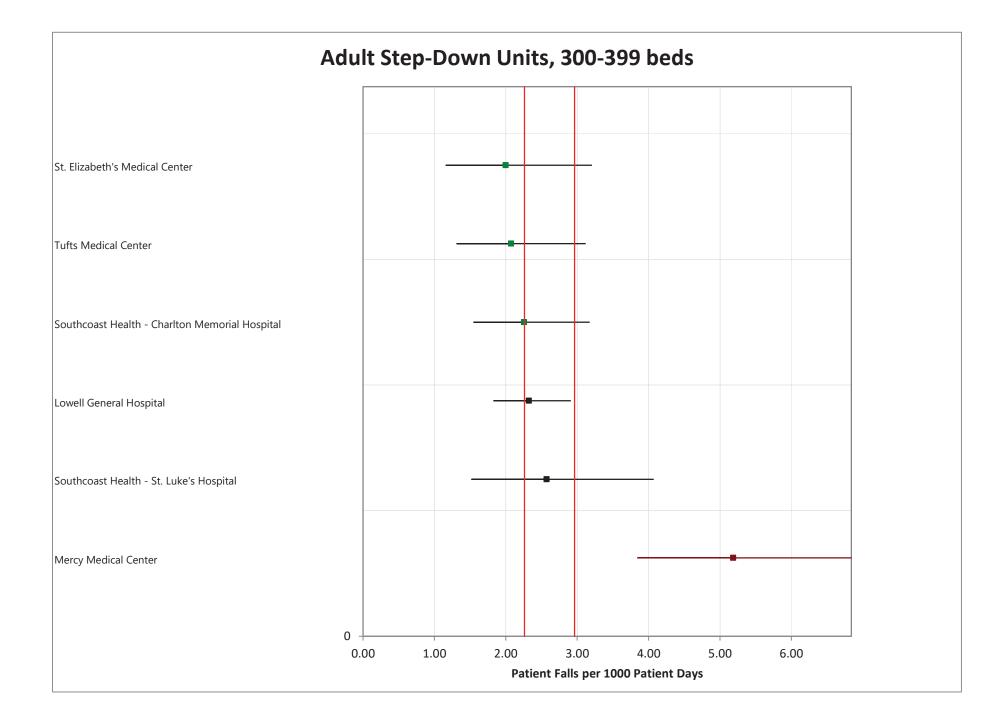


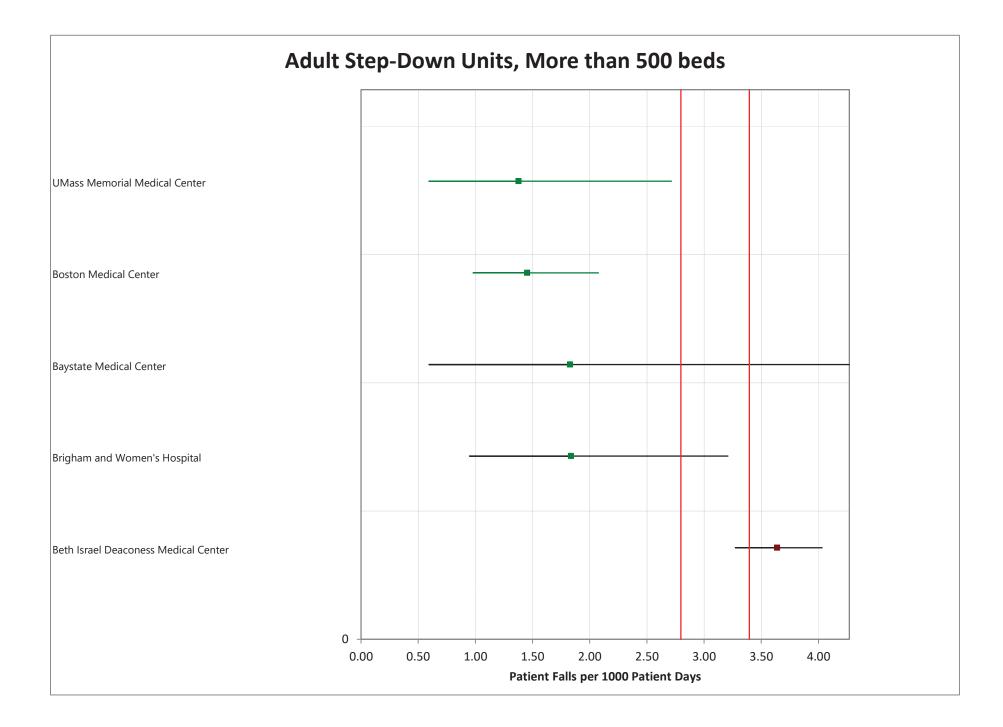


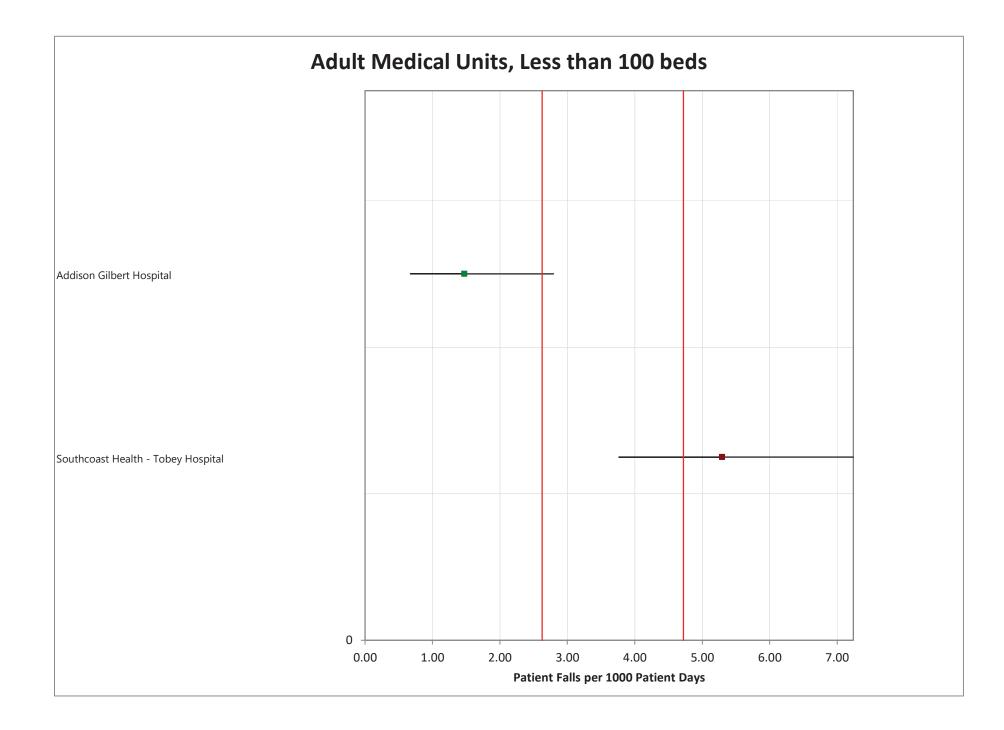


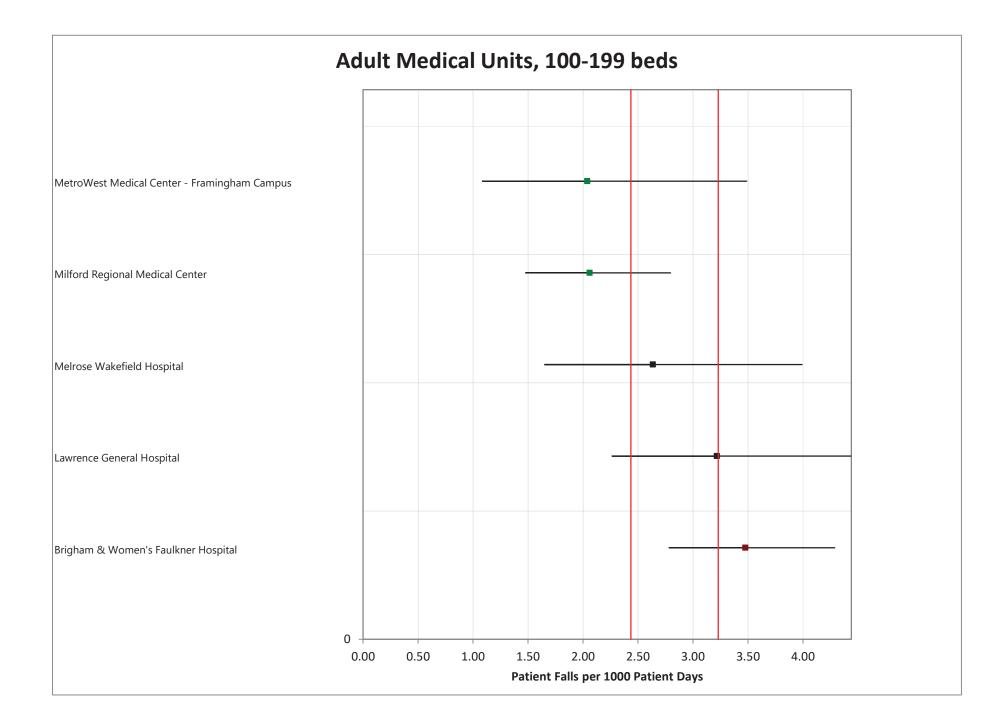


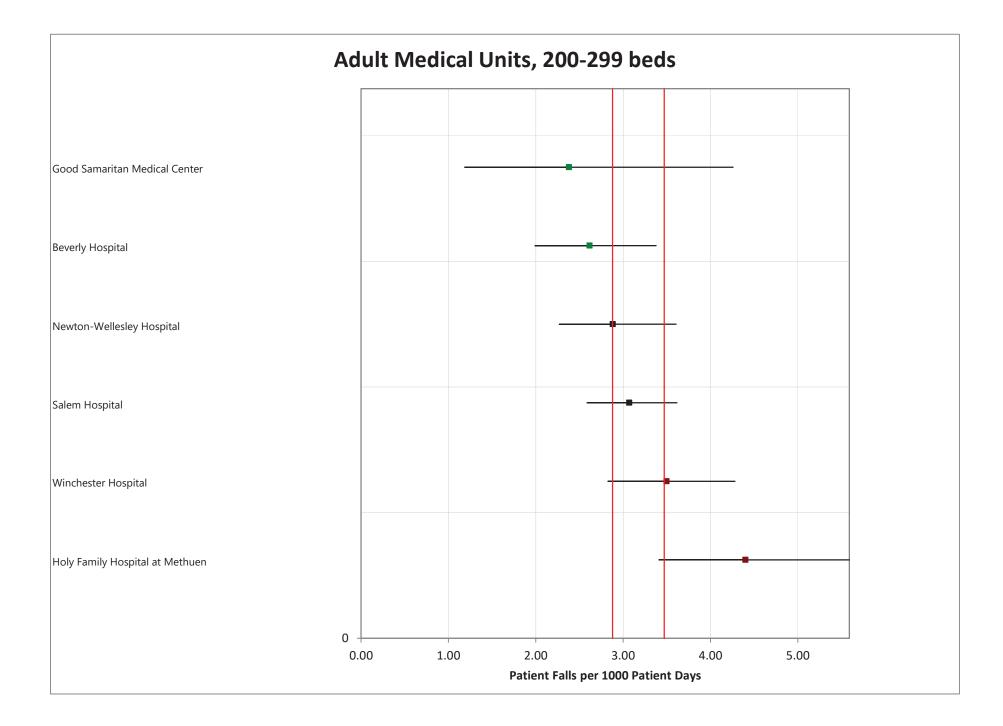


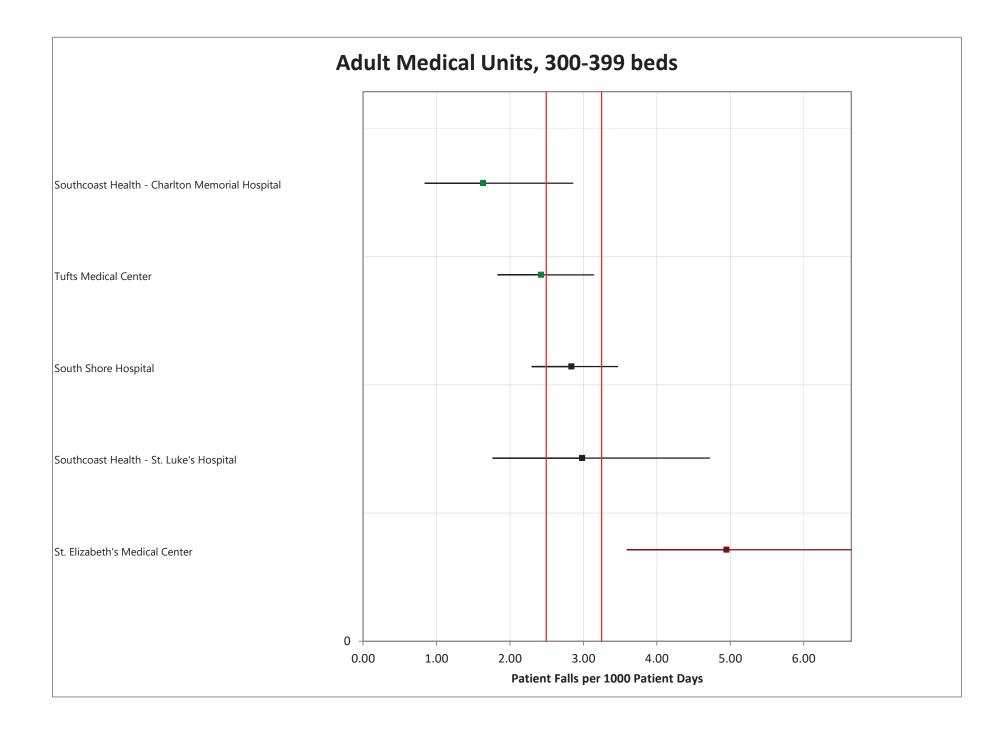


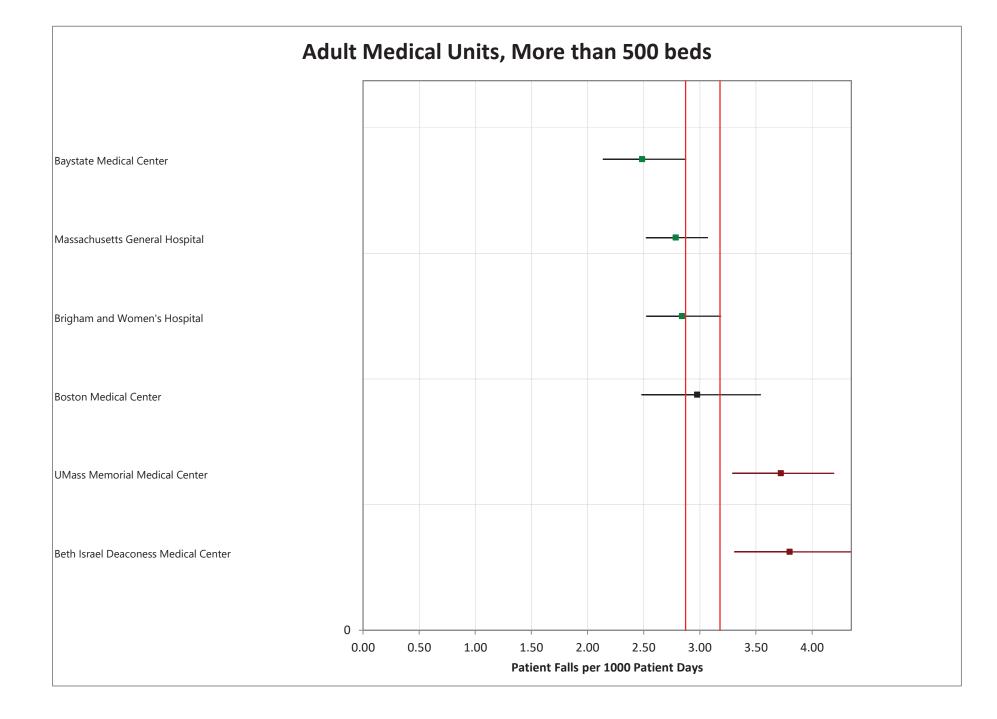


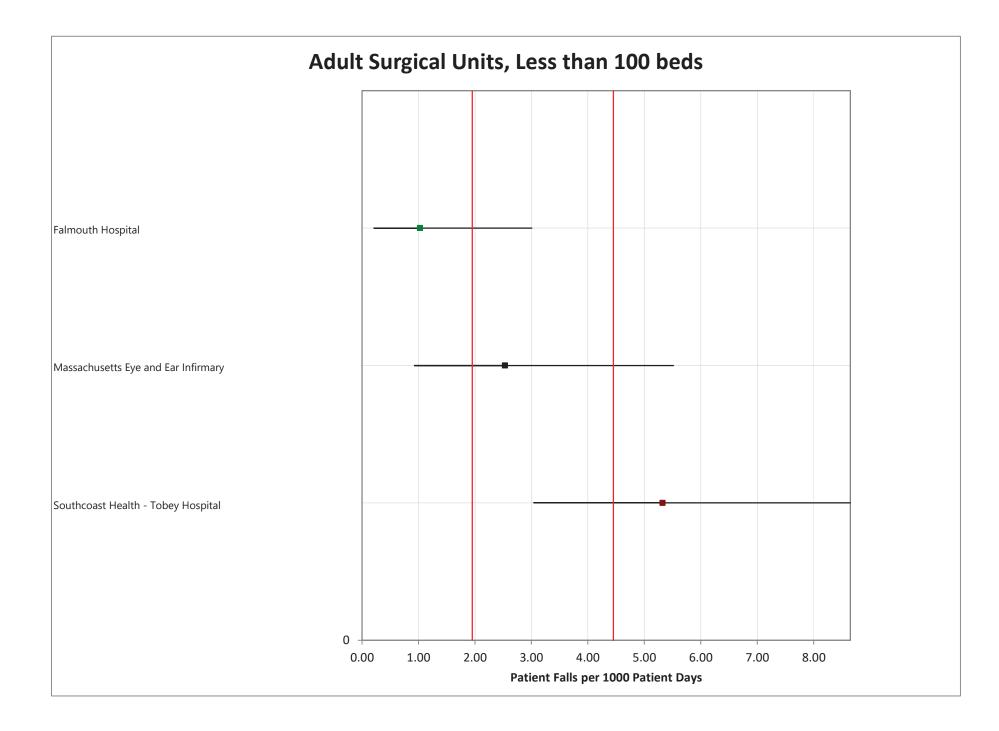


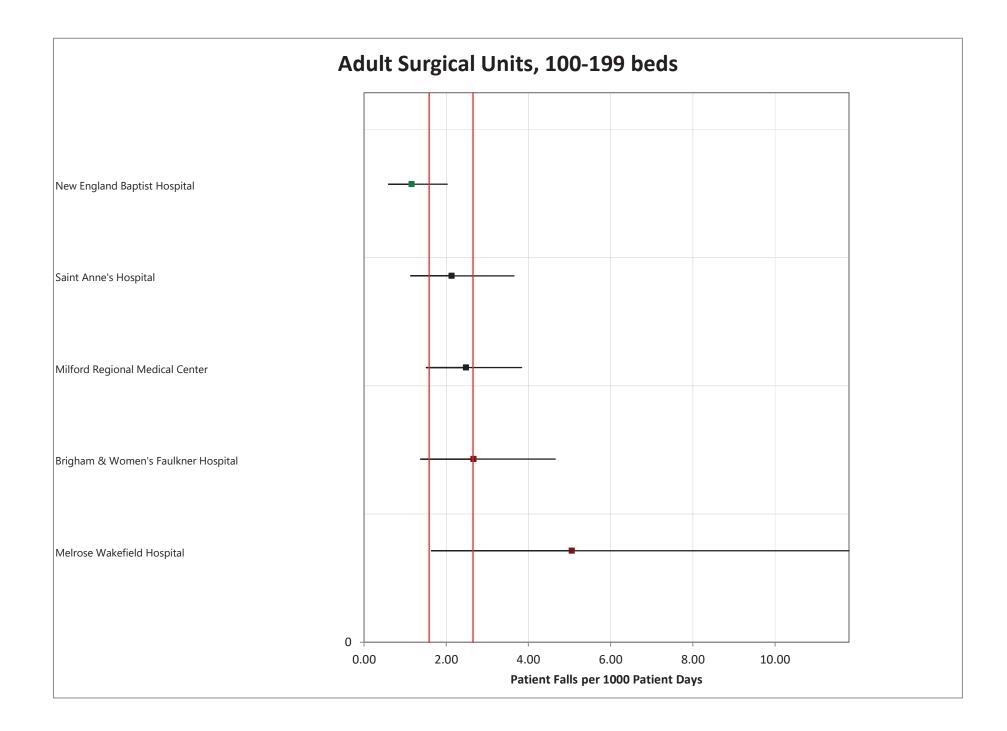


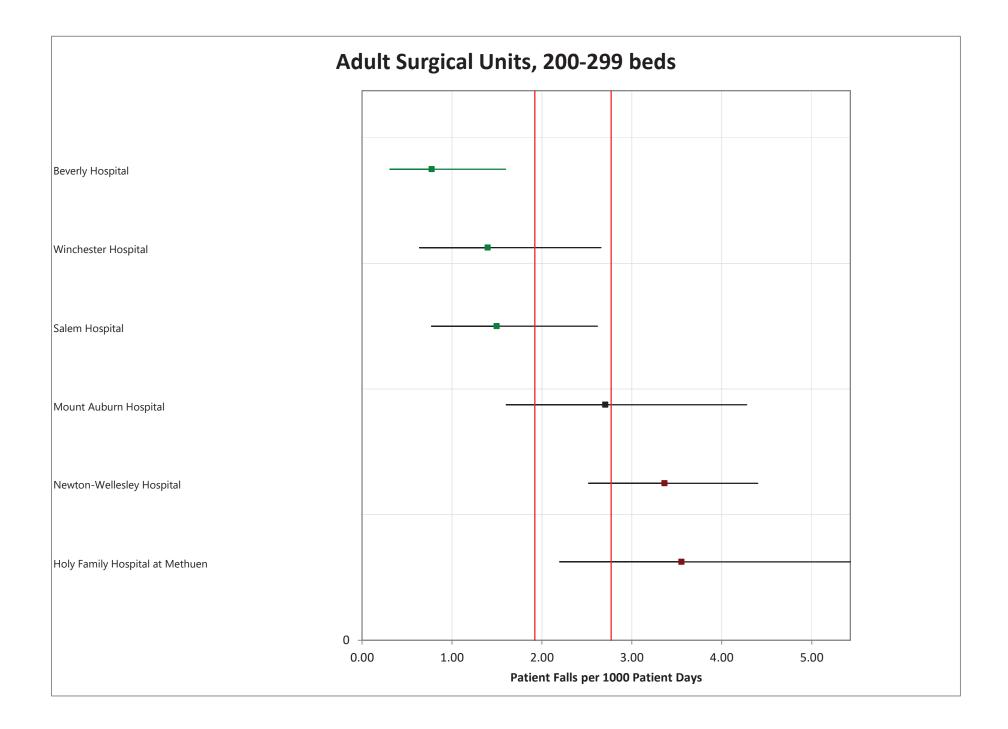


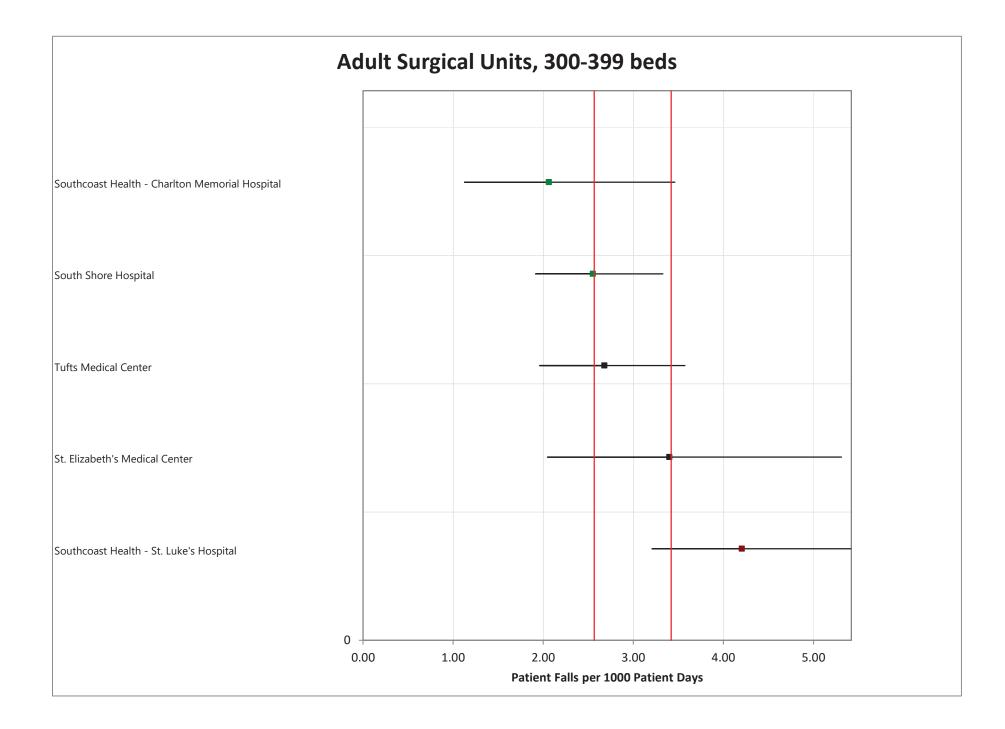


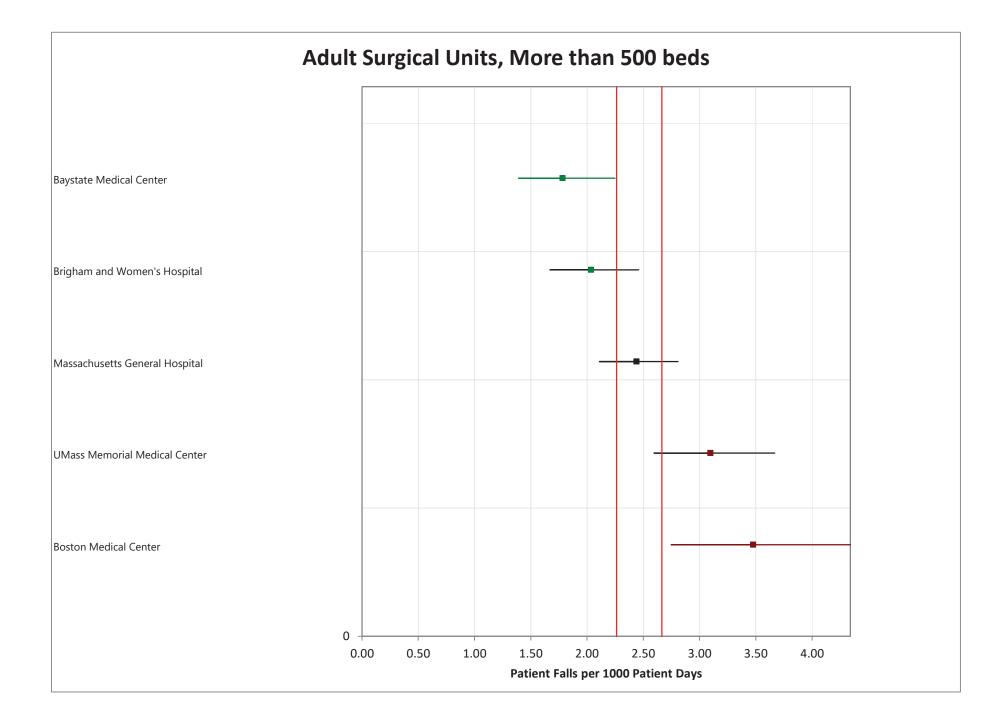


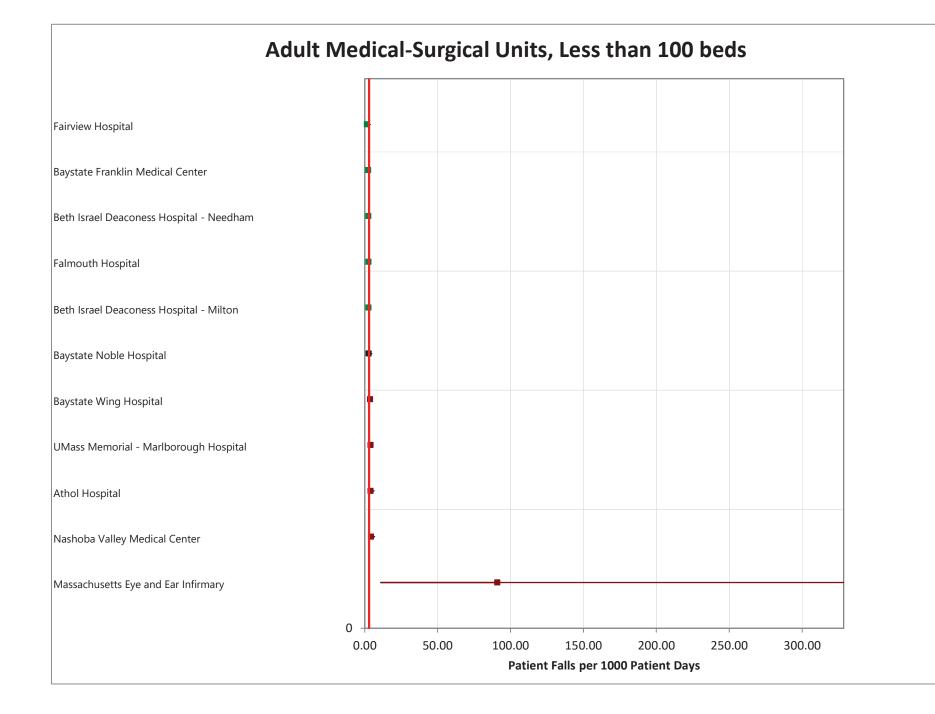


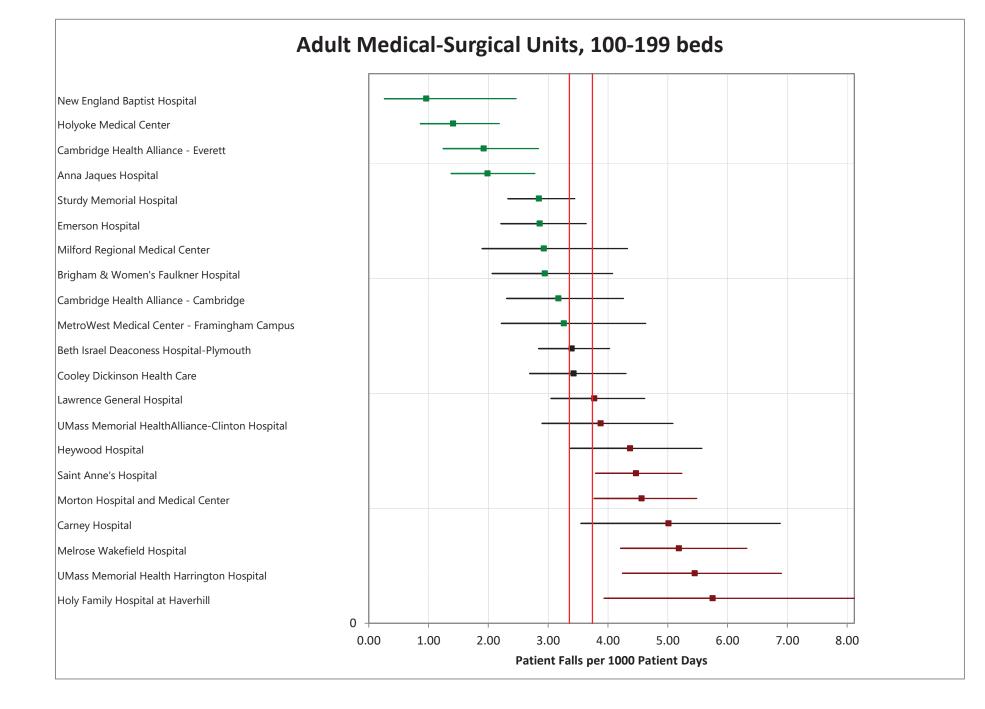


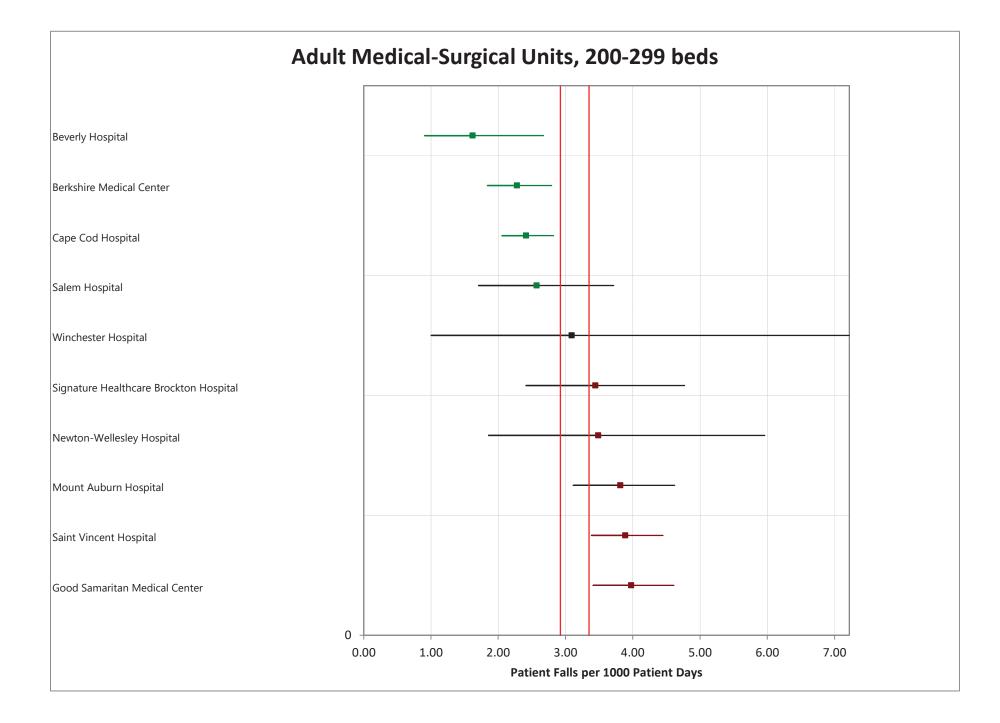


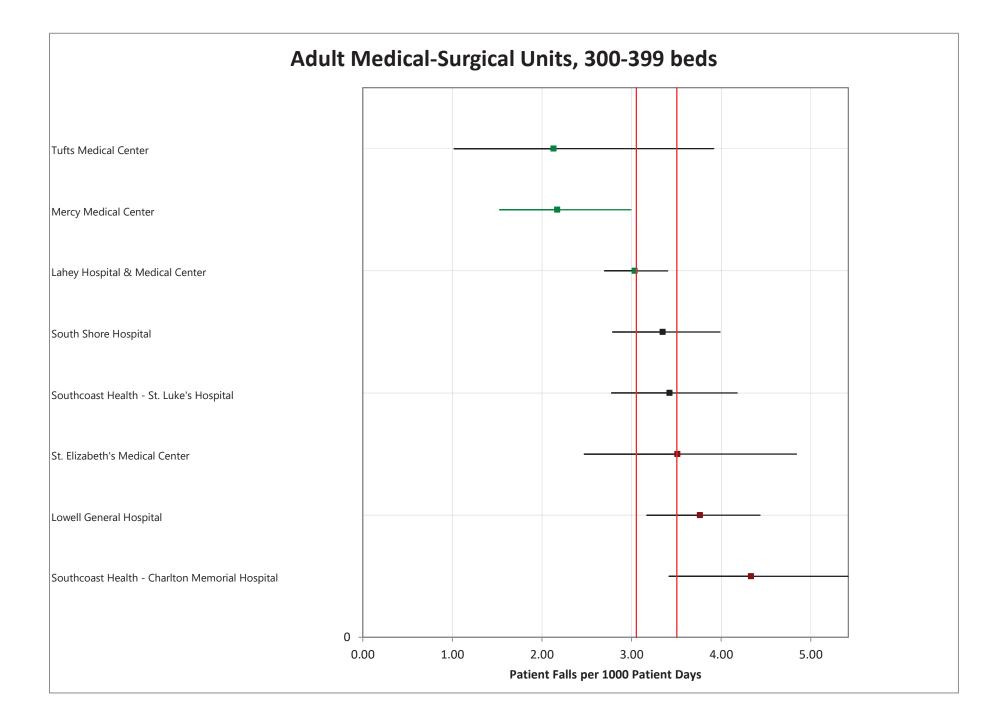


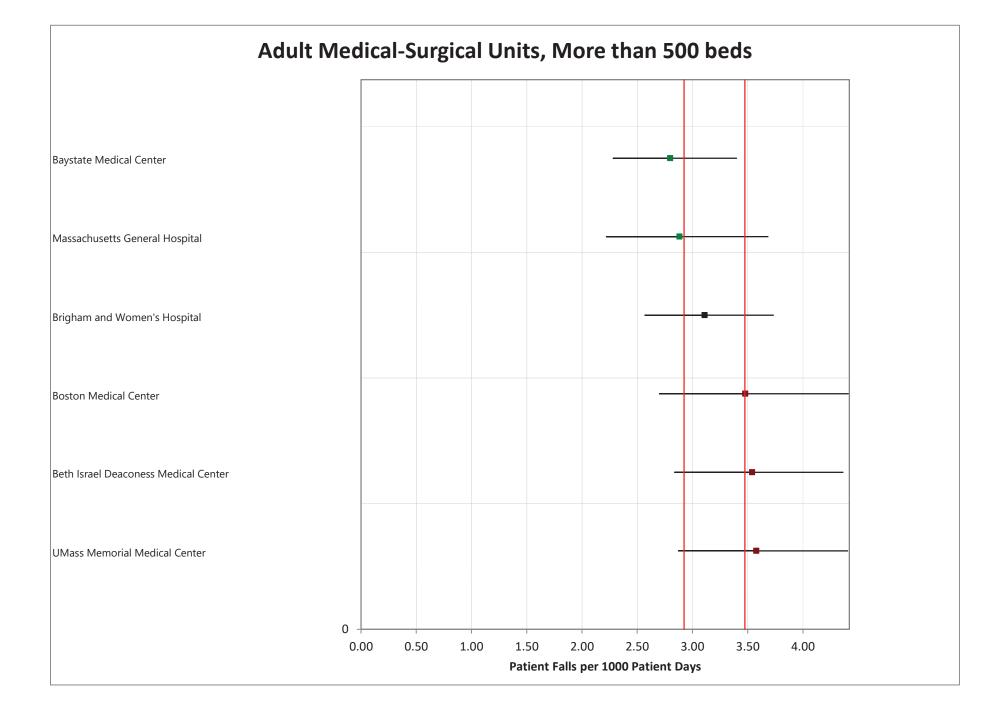








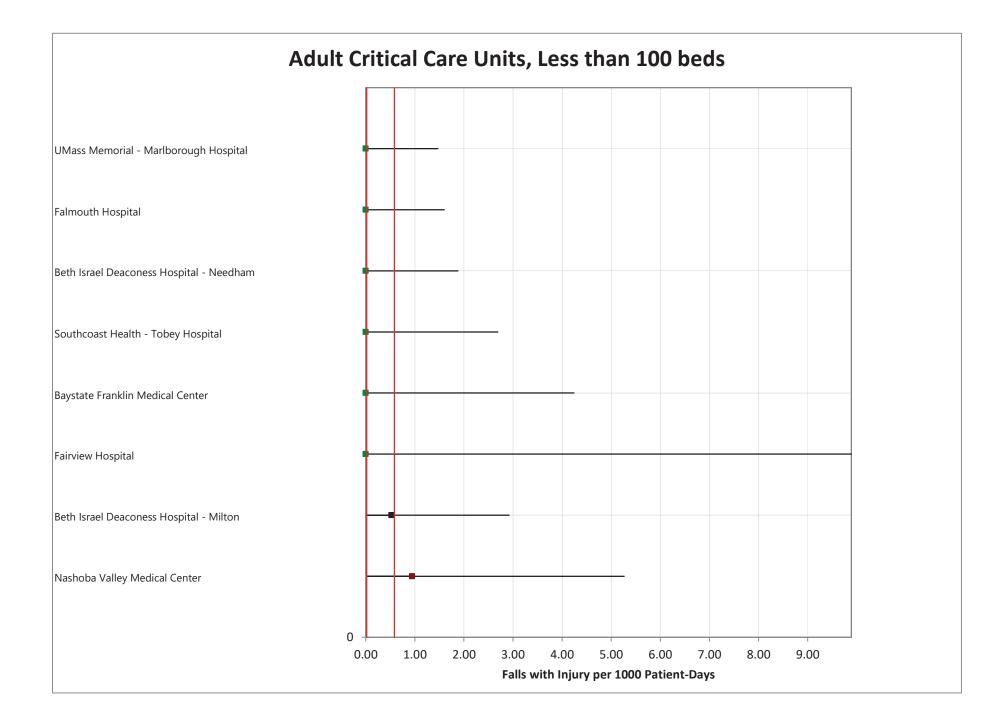




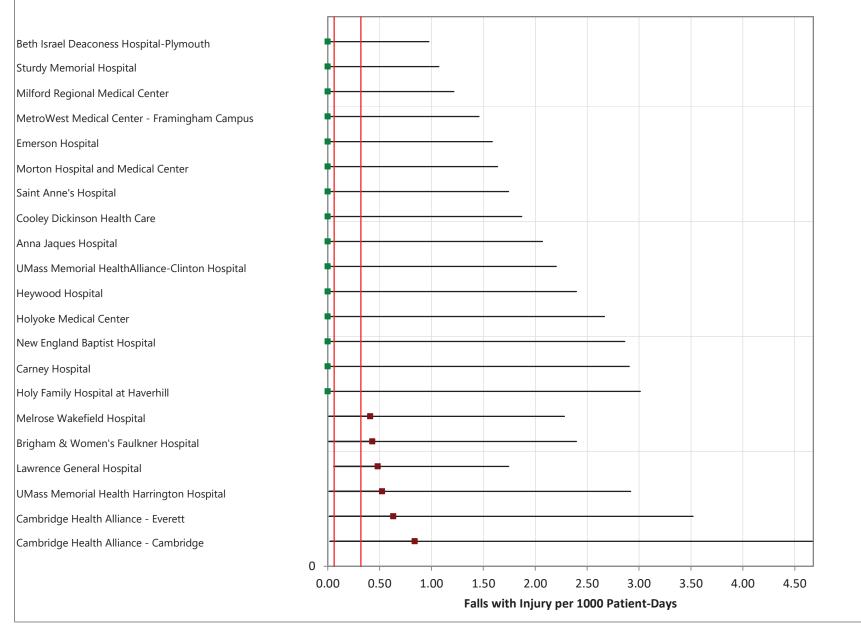
NSC-4 Falls with Injury

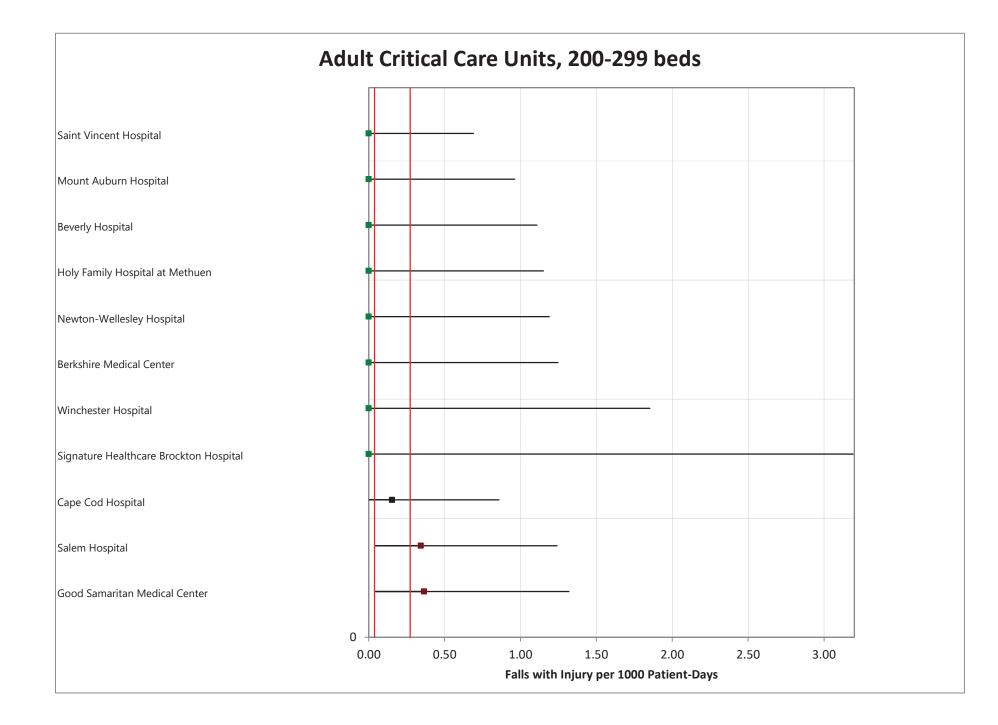
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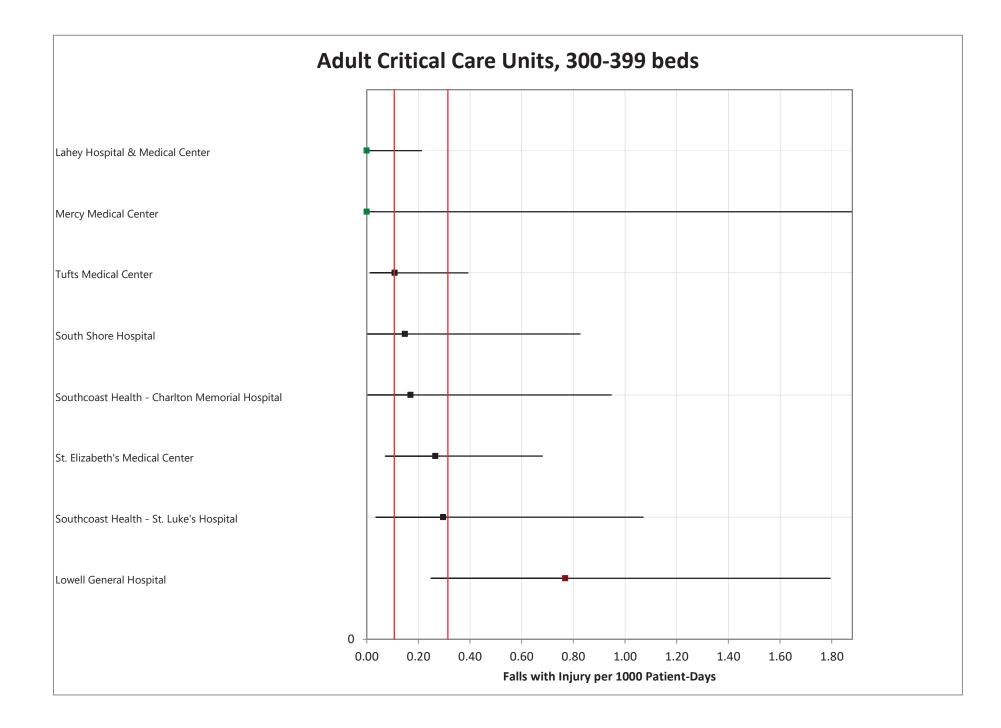
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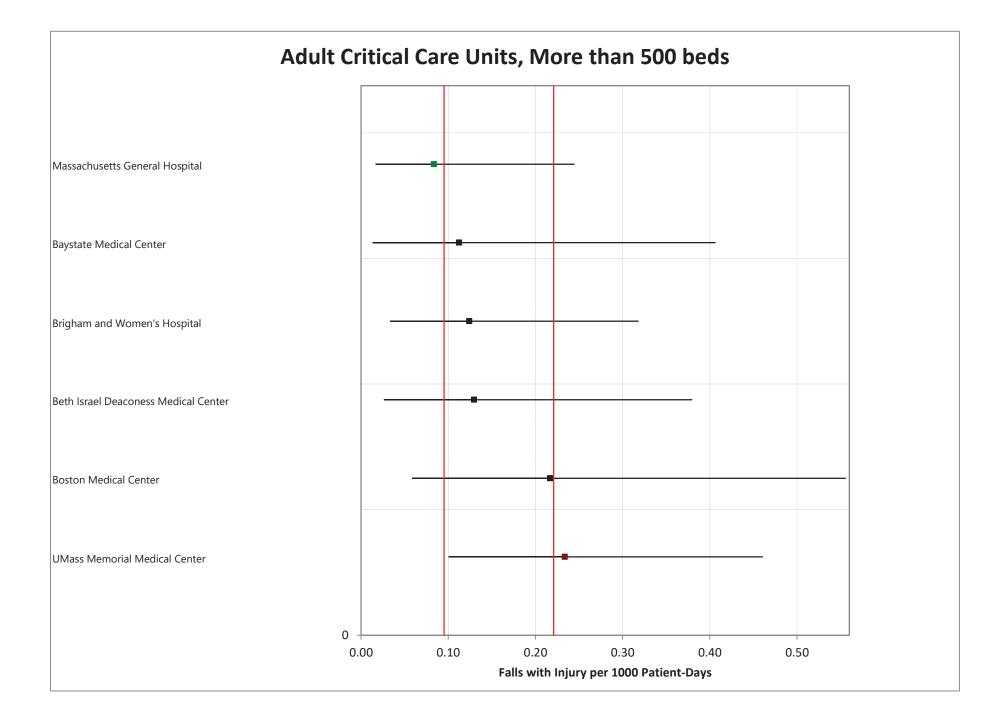


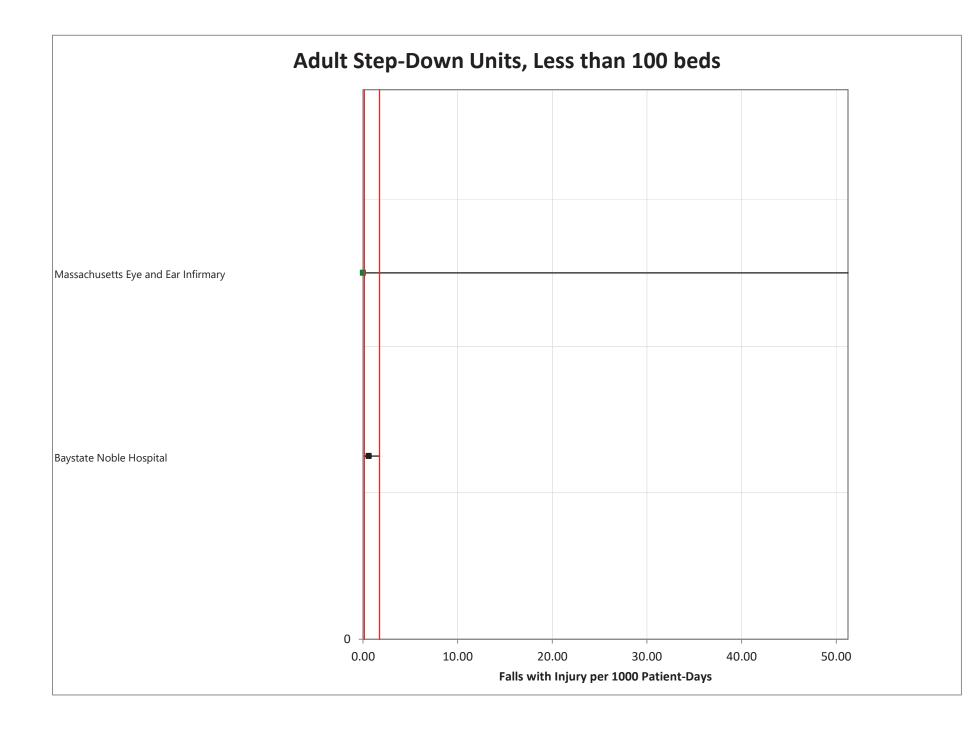
Adult Critical Care Units, 100-199 beds

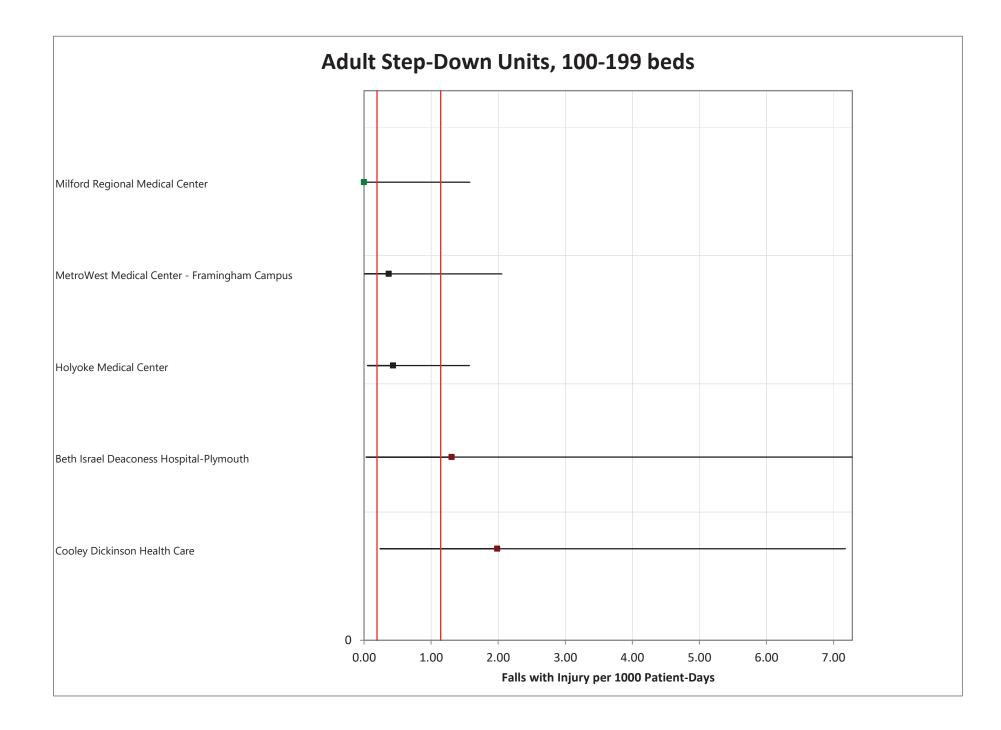


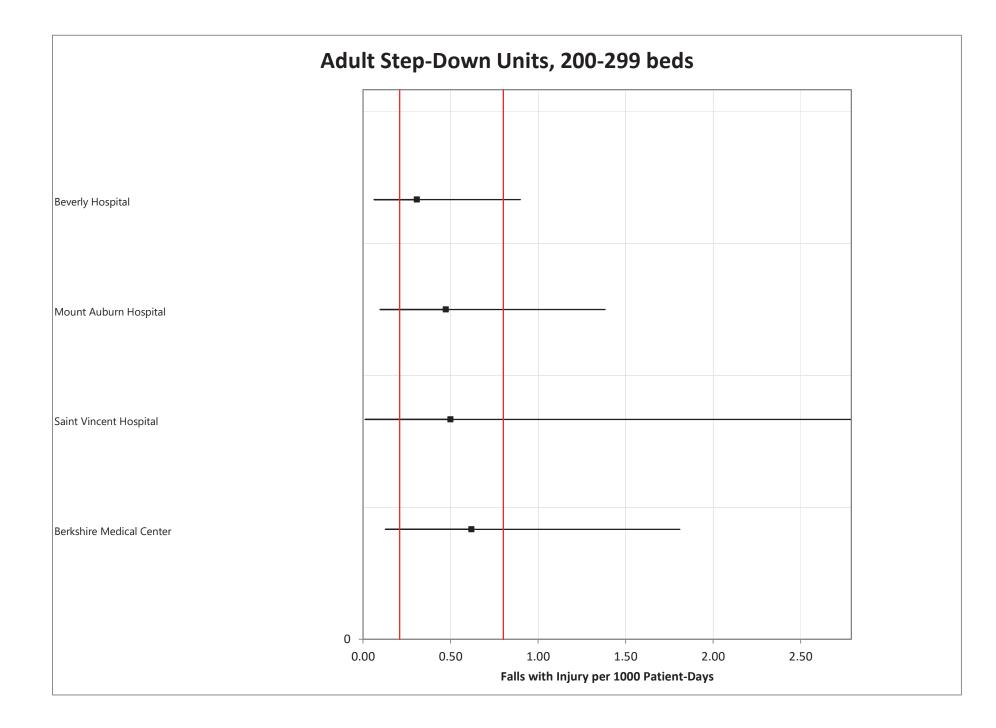


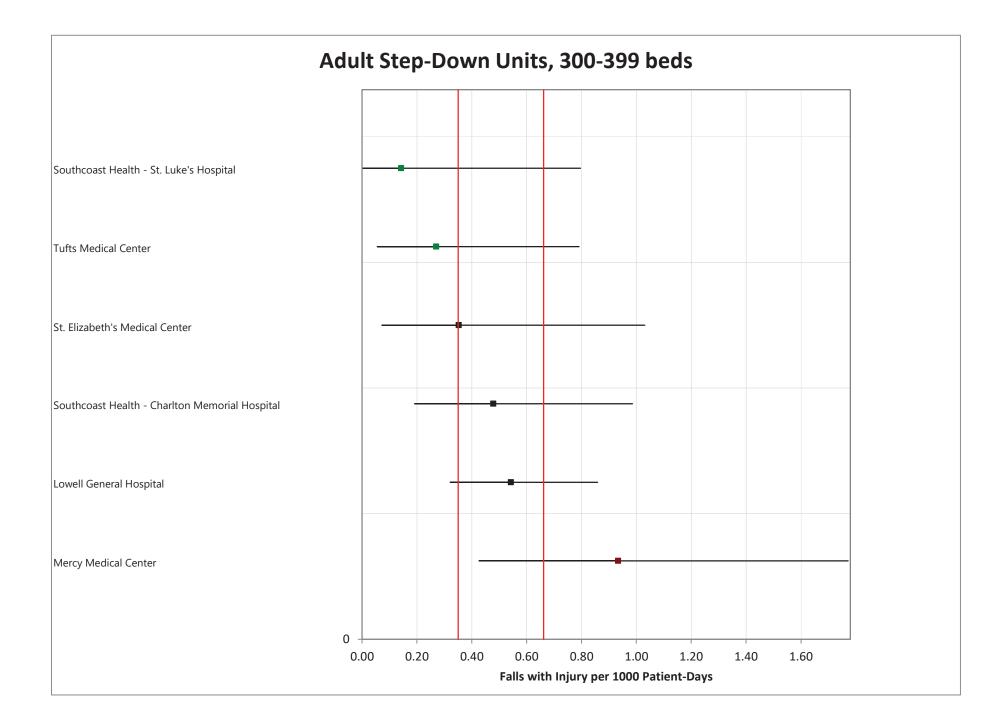


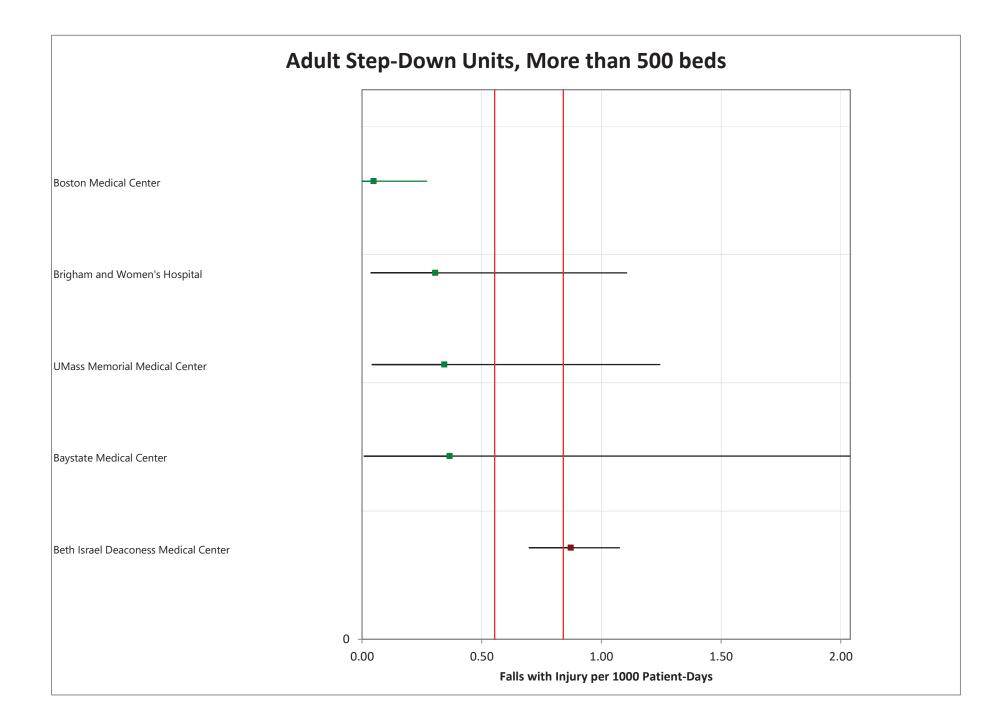


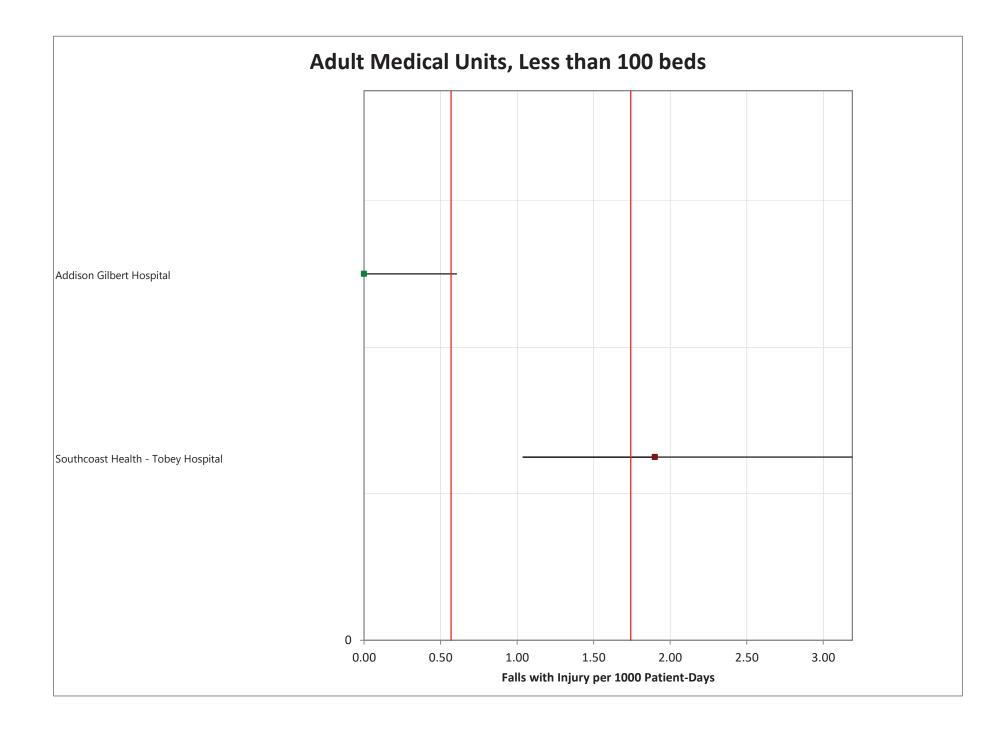


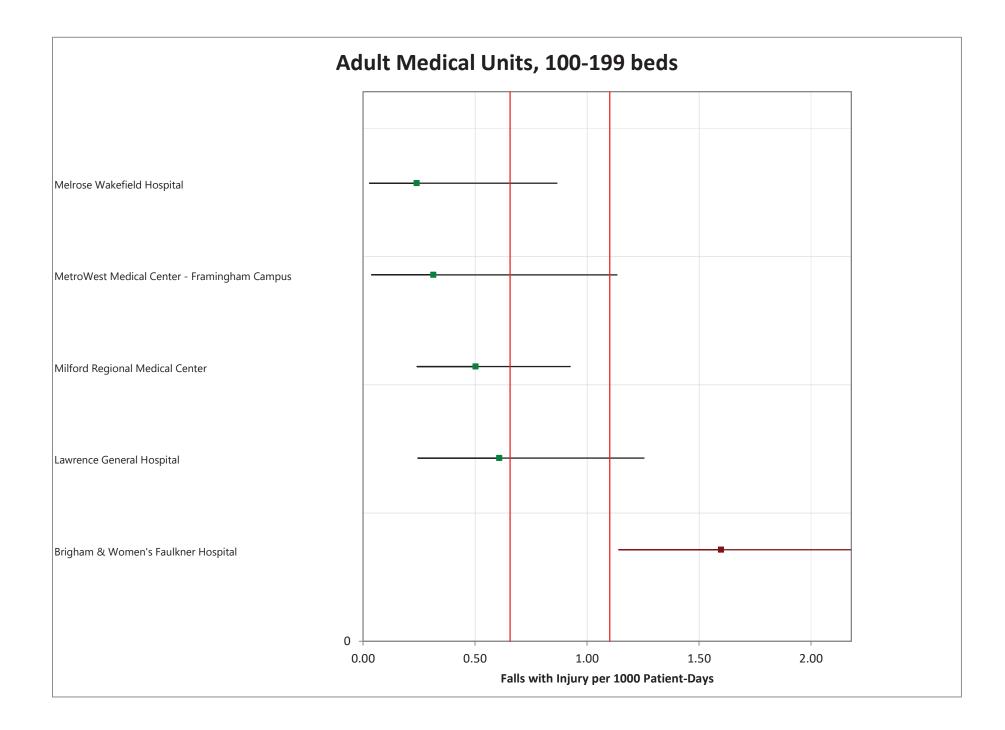


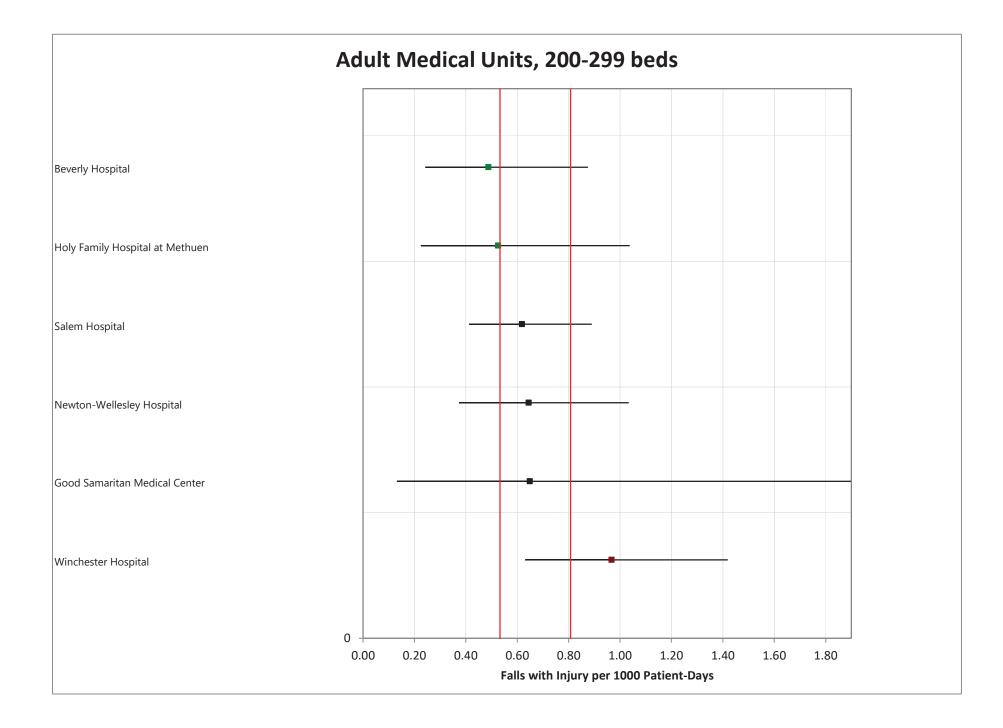


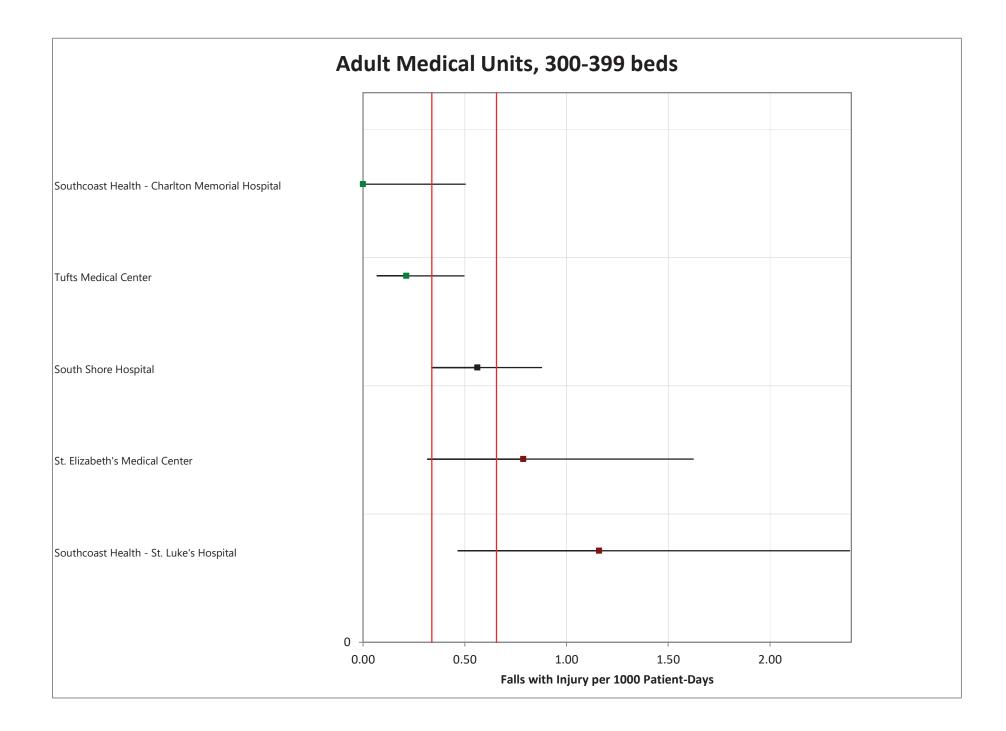


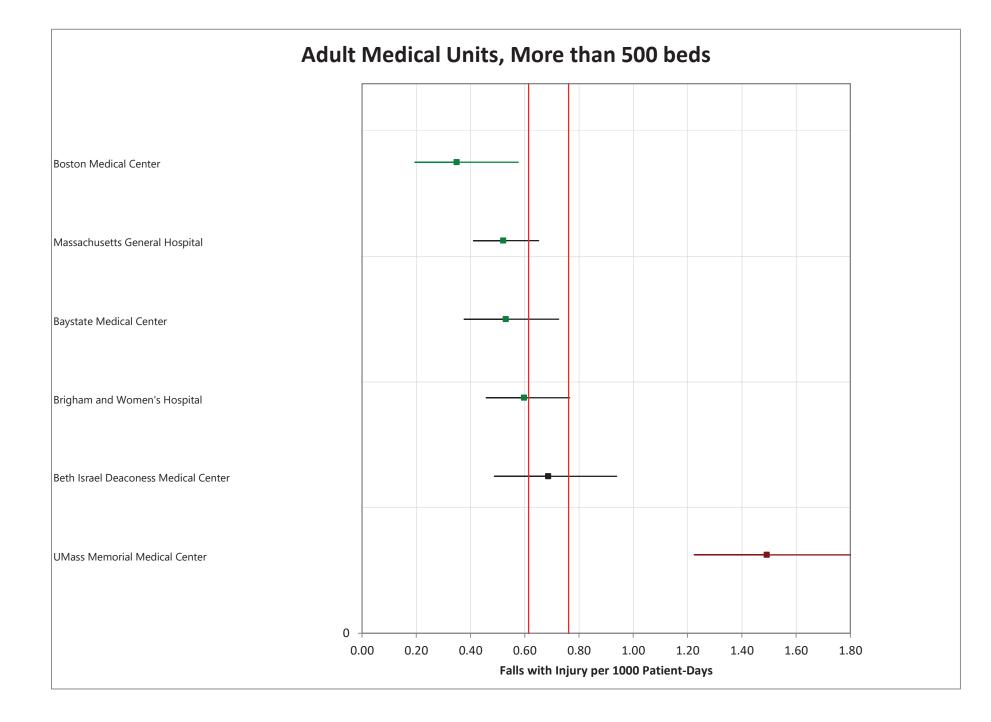


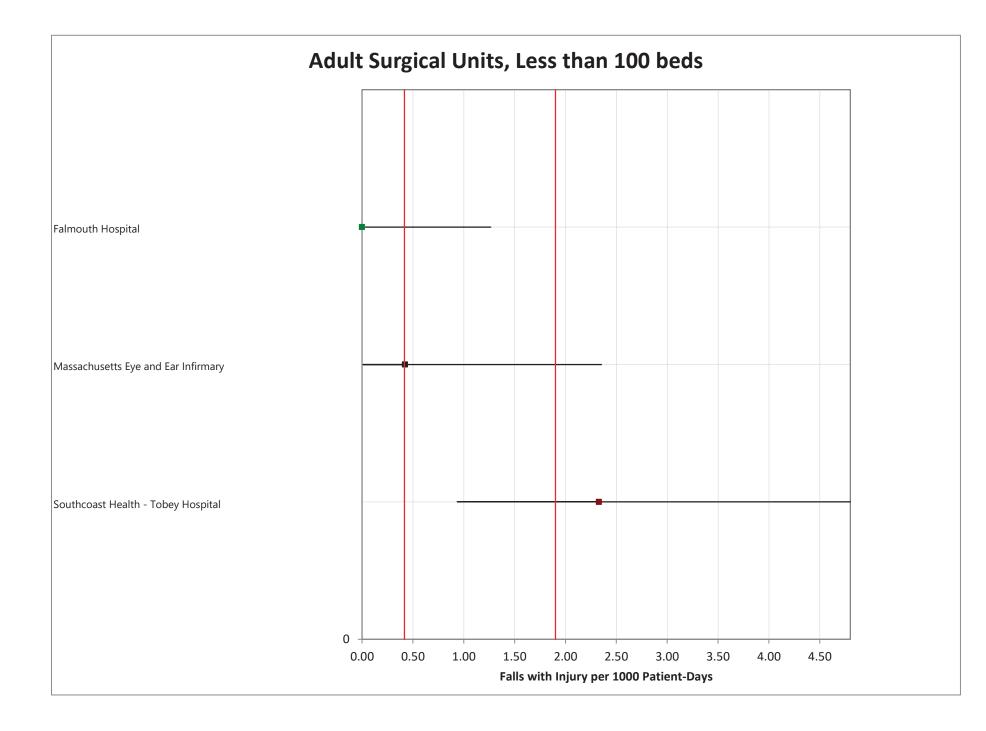


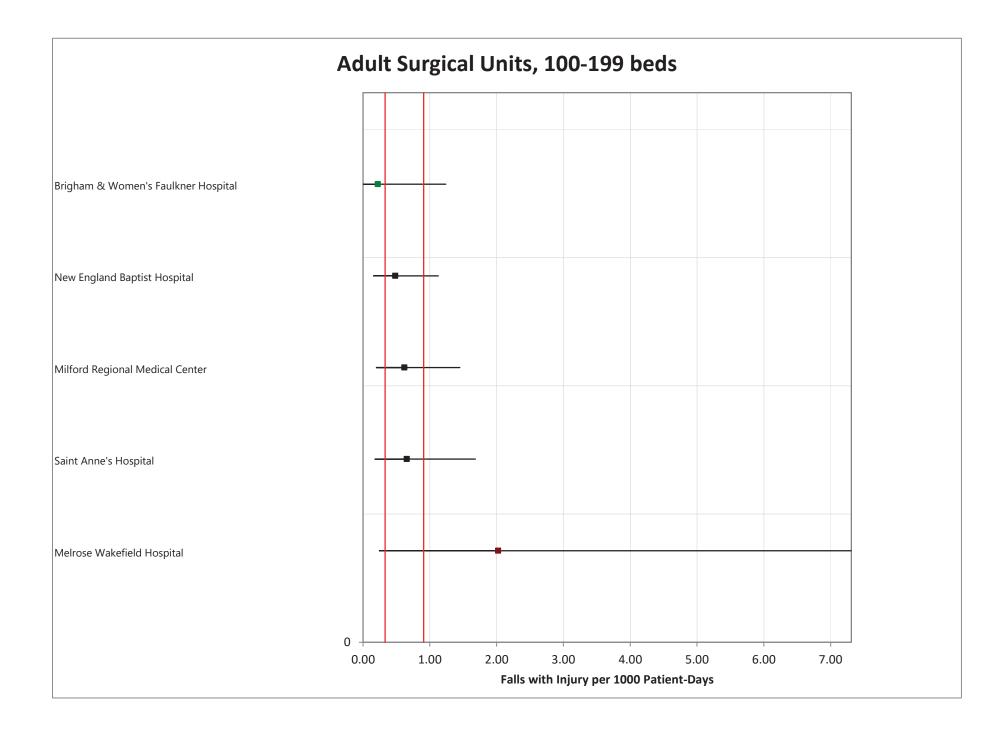


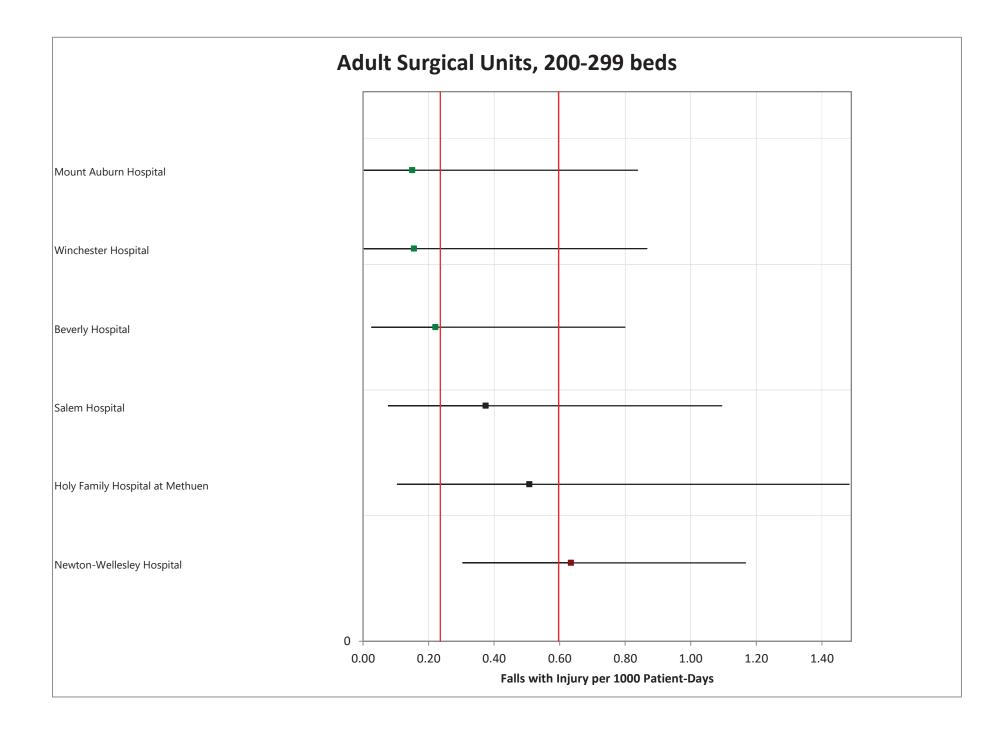


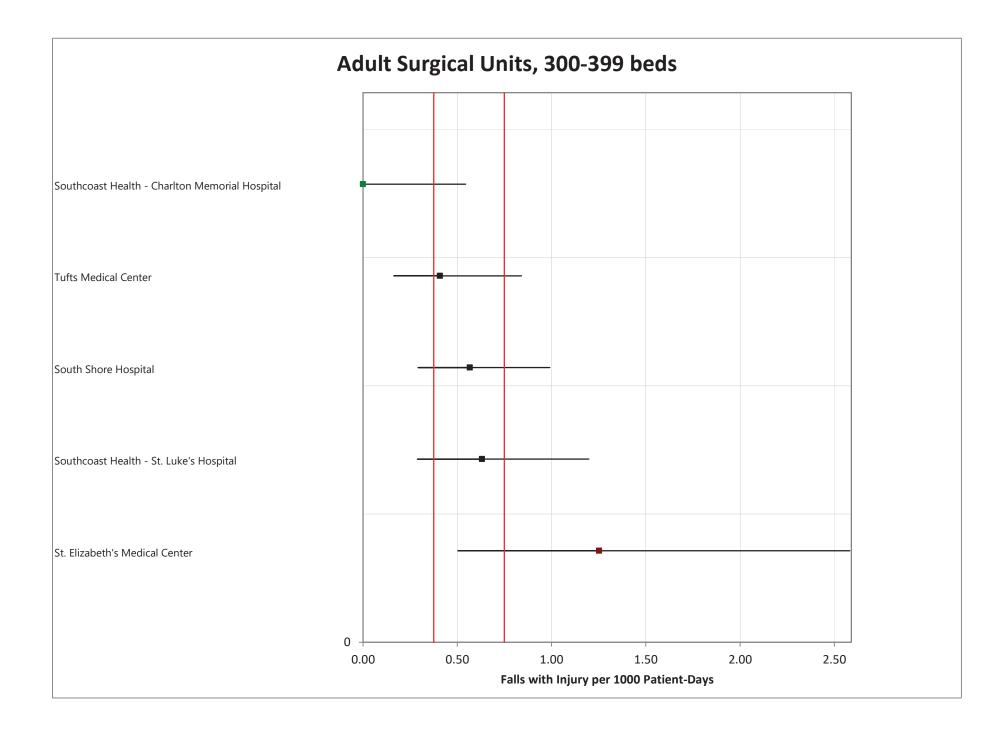


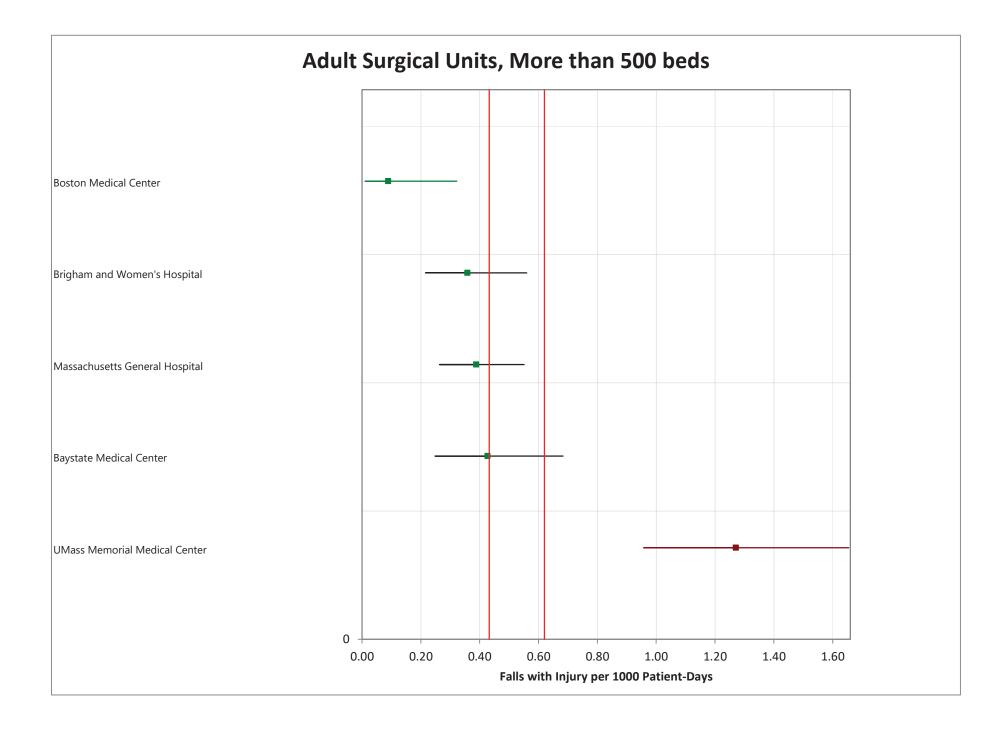


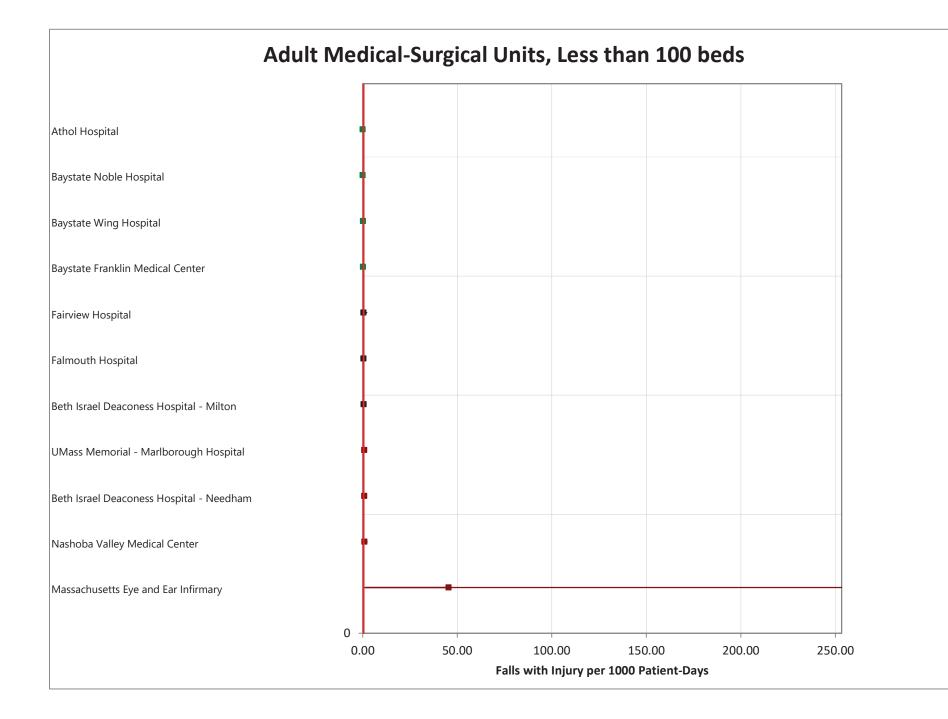


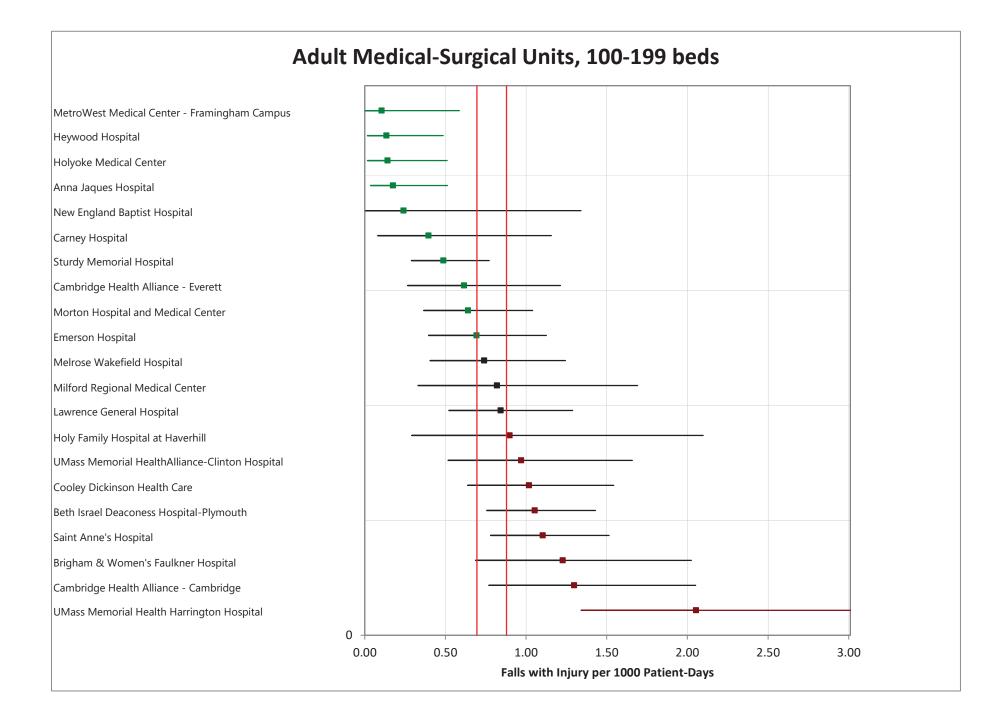


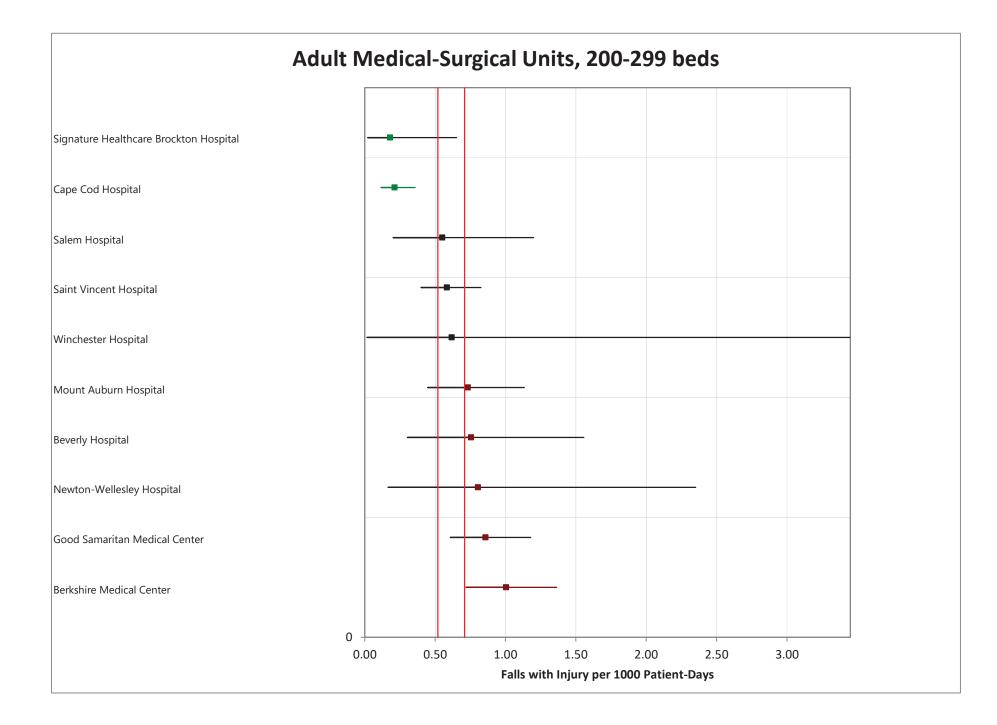


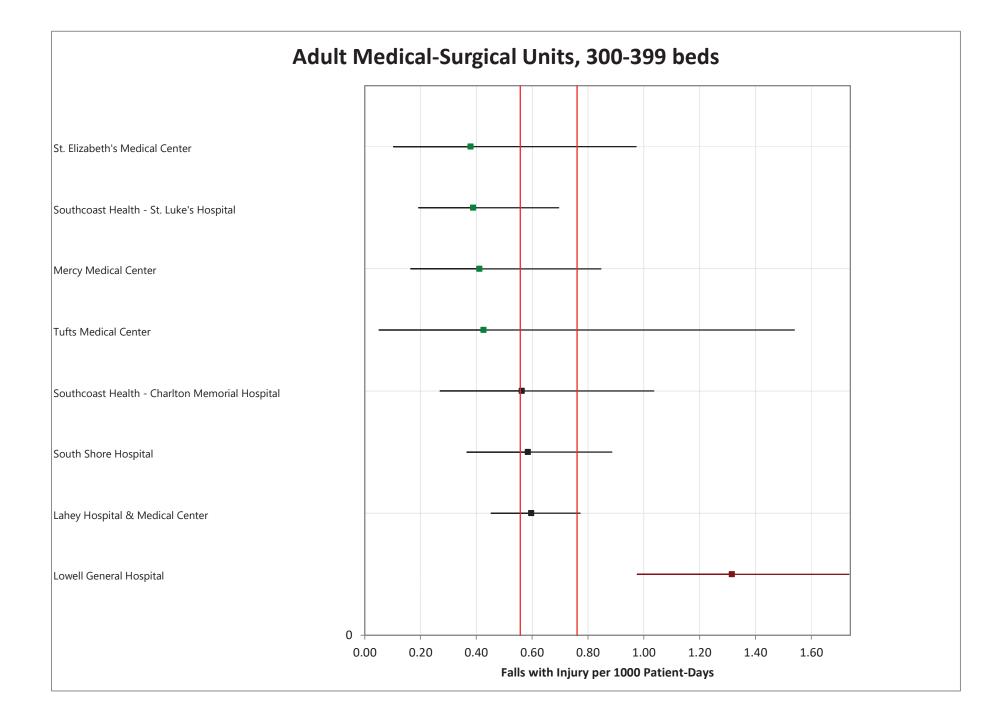


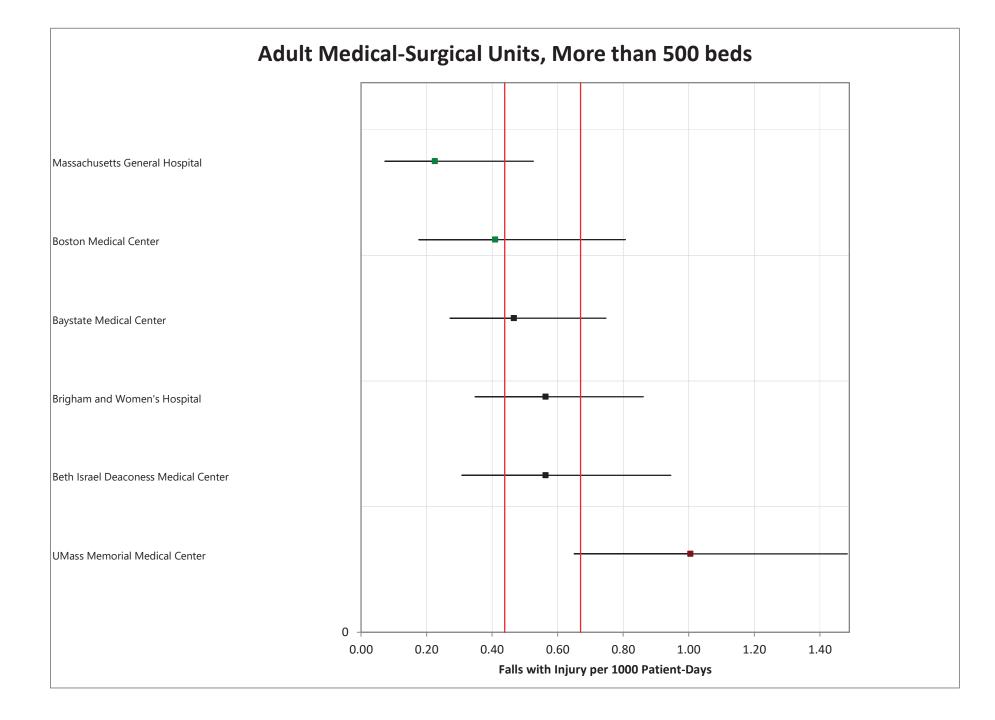












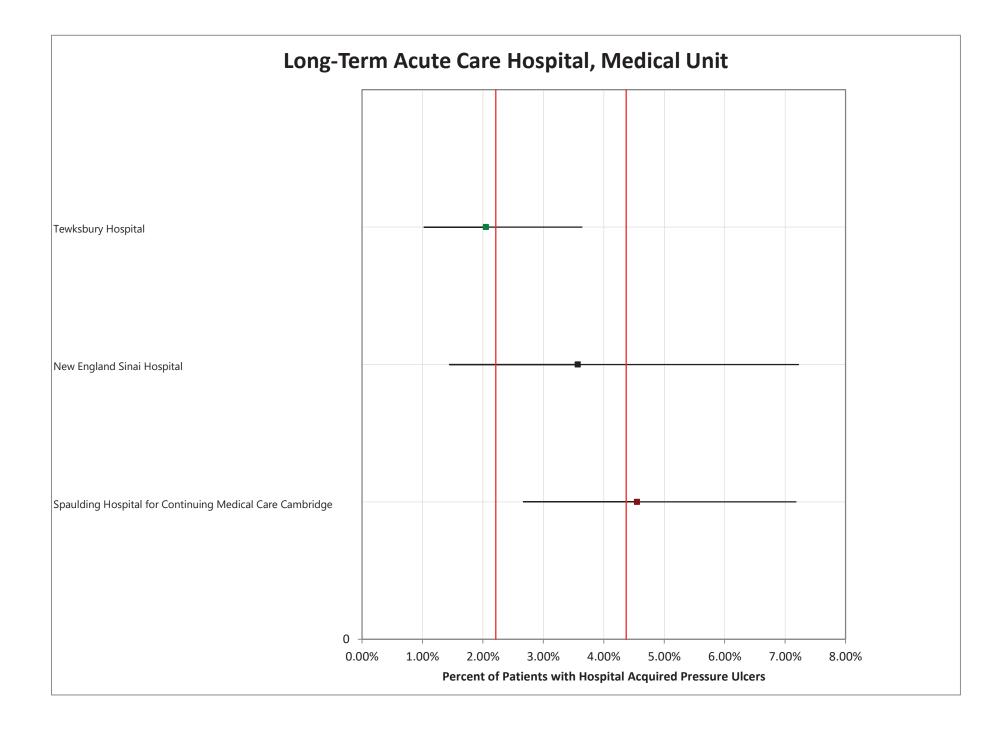
Post-Acute Care Hospitals

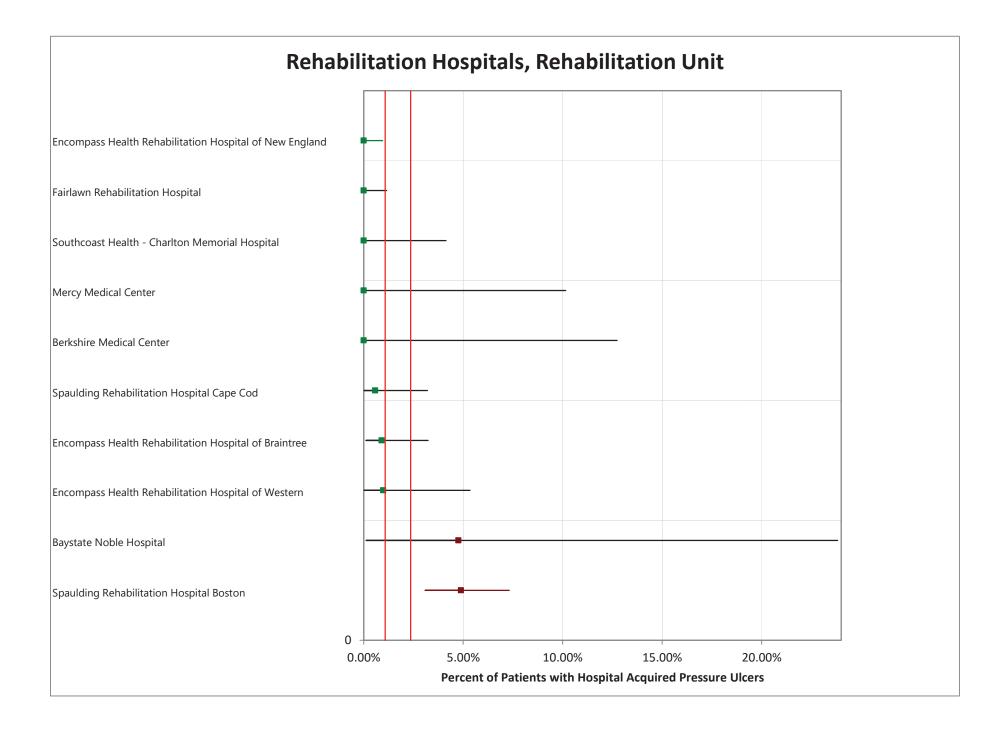


NSC-2 Pressure Ulcer Prevalence

September 2022 December 2022* March 2023 June 2023*

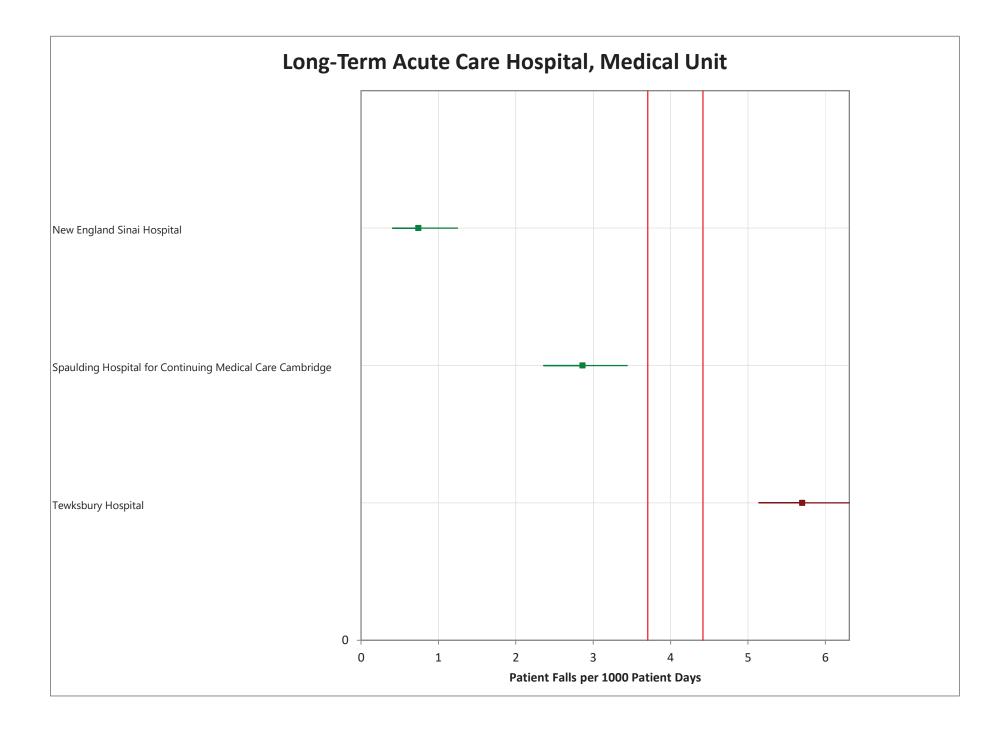
* Optional studies

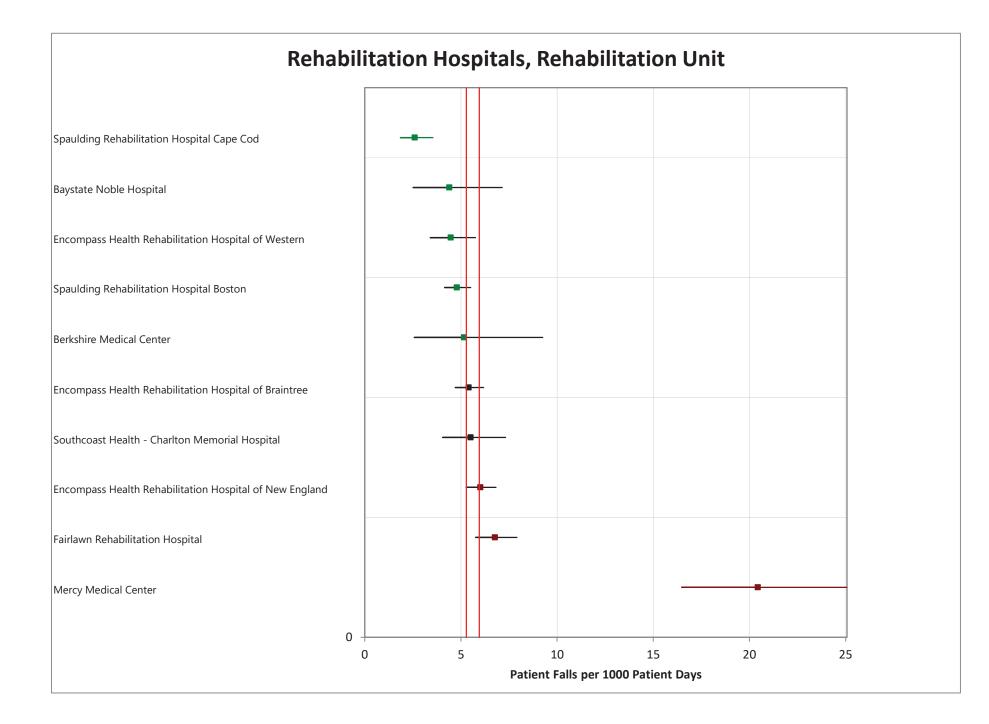




NSC-3 Patient Falls

July – September 2022 October – December 2022 January – March 2023 April – June 2023





NSC-4 Falls with Injury

July – September 2022 October – December 2022 January – March 2023 April – June 2023

