

Hospital Equity Measures Report

General Information

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|---|---|
| Report Type: | Hospital Equity Measures Report |
| Year: | 2024 |
| Hospital Name: | DOMINICAN HOSPITAL |
| Facility Type: | General Acute Care Hospital |
| Hospital HCAI ID: | 106440755 |
| Report Period: | 1/1/2024 - 12/31/2024 |
| Status: | Submitted |
| Due Date: | 09/30/2025 |
| Last Updated: | 02/03/2026 |
| Hospital Location with Clean Water and Air: | Y |
| Hospital Web Address for Equity Report: | https://www.dignityhealth.org/bayarea/locations/dominican |

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.

60429

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 | 53588 | 60429 | 88.7 |
| Spanish Language | 6701 | 60429 | 11.1 |
| Asian Pacific Islander Languages | 74 | 60429 | 0.1 |
| Middle Eastern Languages | 14 | 60429 | 0 |
| American Sign Language | 15 | 60429 | 0 |
| Other Languages | 37 | 60429 | 0.1 |

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

5348

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

6874

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

77.8

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 | 536 | 10.0 | 0 | 0 |
| Housing Instability | 263 | 4.9 | 0 | 0 |
| Transportation Problems | 967 | 18.1 | 0 | 0 |
| Utility Difficulties | 311 | 5.8 | 0 | 0 |
| Interpersonal Safety | 216 | 4.0 | 0 | 0 |

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?"

868

Total number of respondents to HCAHPS Question 19

914

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

95

Total number of people surveyed on HCAHPS Question 19

4155

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

22

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 | | | | | |
| 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 "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 | | | | | |
| Age 18 to 34 | | | | | |
| Age 35 to 49 | | | | | |
| Age 50 to 64 | | | | | |
| Age 65 Years and Older | | | | | |

| 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 | | | | | |
| Male | | | | | |
| Unknown | | | | | |

| 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 | | | | | |
| Medicaid | | | | | |
| Private | | | | | |
| Self-Pay | | | | | |
| 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 | | | | | |
| Spanish Language | | | | | |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign Language | | | | | |
| Other/Unknown Languages | | | | | |

| 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 | | | | | |
| 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 "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 | | | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | | | |
| Male | | | | | |
| Male-to-female (MTF)/ transgender female/trans | | | | | |
| Non-conforming gender | | | | | |
| Additional gender category or other | | | | | |
| Not disclosed | | | | | |

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?"

795

Total number of respondents to HCAHPS Question 17

914

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

87

Total number of people surveyed on HCAHPS Question 17

4155

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

22

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 | | | | | |
| 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 "yes" responses | Total number of responses | Percentage of "yes" responses (%) | Total number of patients surveyed | Response rate of patients surveyed (%) |
|-------------------------------|----------------------------------|----------------------------------|--|--|---|
| Age < 18 | | | | | |
| Age 18 to 34 | | | | | |
| Age 35 to 49 | | | | | |
| Age 50 to 64 | | | | | |
| Age 65 Years and Older | | | | | |

| 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 | | | | | |
| Male | | | | | |
| Unknown | | | | | |

| 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 | | | | | |
| Medicaid | | | | | |
| Private | | | | | |
| Self-Pay | | | | | |
| 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 | | | | | |
| Spanish Language | | | | | |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign | | | | | |
| Other/Unknown Languages | | | | | |

| 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 | | | | | |
| Has a mobility disability | | | | | |
| Has a cognition | | | | | |
| Has a hearing disability | | | | | |
| Has a vision disability | | | | | |
| 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 | | | | | |
| 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 | | | | | |

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

24

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

409

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

58.7

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 | | | |
| Asian | suppressed | suppressed | suppressed |
| Black or African American | suppressed | suppressed | suppressed |
| Hispanic or Latino | suppressed | suppressed | suppressed |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more) | suppressed | suppressed | suppressed |
| Native Hawaiian or Pacific Islander | | | |
| White | 19 | 317 | 59.9 |

| 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 | | | |
| Age 18 to 34 | suppressed | suppressed | suppressed |
| Age 35 to 49 | suppressed | suppressed | suppressed |
| Age 50 to 64 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | 20 | 311 | 64.3 |

| 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 | suppressed | suppressed | suppressed |
| 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 | 22 | 308 | 71.4 |
| Medicaid | suppressed | suppressed | suppressed |
| Private | suppressed | suppressed | suppressed |
| Self-Pay | suppressed | suppressed | suppressed |
| Other | suppressed | suppressed | suppressed |

| 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 | suppressed | suppressed | suppressed |
| Spanish Language | suppressed | suppressed | suppressed |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| 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 | | | |
| 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 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 | | | |
| 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 | | | |

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

15

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

95

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

157.9

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 | | | |
| Asian | suppressed | suppressed | suppressed |
| Black or African American | suppressed | suppressed | suppressed |
| Hispanic or Latino | suppressed | suppressed | suppressed |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | 11 | 63 | 174.6 |

| 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 | | | |
| Age 18 to 34 | suppressed | suppressed | suppressed |
| Age 35 to 49 | suppressed | suppressed | suppressed |
| Age 50 to 64 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | 13 | 63 | 206.3 |

| 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 | suppressed | suppressed |
| Male | suppressed | suppressed | 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 | 66 | 197 |
| Medicaid | suppressed | suppressed | suppressed |
| Private | suppressed | suppressed | suppressed |
| Self-Pay | suppressed | suppressed | suppressed |
| Other | suppressed | suppressed | suppressed |

| 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 | suppressed | suppressed | suppressed |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| 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 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 | | | |
| 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 | | | |

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

58

Total number of nulliparous NTSV patients

244

Rate of NTSV patients with Cesarean deliveries

0.238

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

| 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 | suppressed | suppressed | suppressed |
| Age 30 to 39 | suppressed | suppressed | suppressed |
| Age 40 Years and Older | suppressed | suppressed | suppressed |

| Sex assigned at birth | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|------------------------------|---|--------------------------------------|---|
| Female | | | |
| Male | | | |
| Unknown | | | |

| Payer Type | Number of NTSV patients with cesarean deliveries | Total number of NTSV patients | Rate of NTSV patients with Cesarean deliveries (%) |
|-------------------|---|--------------------------------------|---|
| Medicare | 0 | | |
| Medicaid | 0 | | |
| Private | 0 | | |
| Self-Pay | 0 | | |
| Other | suppressed | suppressed | suppressed |

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

| 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 | | | |
| 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 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 | | | |
| 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 | | | |

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

30

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
260.9

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

| 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 | | | |
| Male | | | |
| Unknown | | | |

| 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 | | |
| Medicaid | 0 | | |
| Private | 0 | | |
| Self-Pay | 0 | | |
| Other | suppressed | suppressed | suppressed |

| 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 | suppressed | suppressed | suppressed |
| Spanish Language | suppressed | suppressed | suppressed |
| Asian Pacific Islander Languages | 0 | | |
| Middle Eastern Languages | 0 | | |
| American Sign Language | 0 | | |
| Other/Unknown Languages | 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 | | | |
| 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 | | | |

| 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 | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or | | | |
| Not disclosed | | | |

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

NA

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

NA

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

NA

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 | | | |
| 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 | | | |
| White | | | |

| 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 | | | |
| 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 | | | |
| Male | | | |
| Unknown | | | |

| 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 | | | |
| Medicaid | | | |
| Private | | | |
| Self-Pay | | | |
| 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 | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| 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 | | | |

| 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 | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or | | | |
| Not disclosed | | | |

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

975

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

7825

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

12.5

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 | suppressed | suppressed | suppressed |
| Asian | 16 | 136 | 11.8 |
| Black or African American | suppressed | suppressed | suppressed |
| Hispanic or Latino | 156 | 1410 | 11.1 |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | suppressed | suppressed | suppressed |
| Native Hawaiian or Pacific Islander | suppressed | suppressed | suppressed |
| White | 730 | 5602 | 13 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------------------|---|--|-----------------------------|
| Age 18 to 34 | 44 | 726 | 6.1 |
| Age 35 to 49 | 95 | 914 | 10.4 |
| Age 50 to 64 | 215 | 1489 | 14.4 |
| Age 65 Years and Older | 621 | 4696 | 13.2 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 418 | 3976 | 10.5 |
| Male | 557 | 3849 | 14.5 |
| Unknown | | | |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | 654 | 4787 | 13.7 |
| Medicaid | 202 | 1483 | 13.6 |
| Private | 98 | 1371 | 7.1 |
| Self-Pay | suppressed | suppressed | suppressed |
| Other | suppressed | suppressed | suppressed |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|---|--|-----------------------------|
| English Language | 886 | 7237 | 12.2 |
| Spanish Language | suppressed | suppressed | suppressed |
| Asian Pacific Islander Languages | suppressed | suppressed | suppressed |
| Middle Eastern Languages | | | |
| American Sign Language | suppressed | suppressed | suppressed |
| Other/Unknown Languages | suppressed | suppressed | suppressed |

| 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 | | | |

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

215

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

1776

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

12.1

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

| 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 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | suppressed | suppressed | suppressed |

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

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

| 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 | suppressed | suppressed | suppressed |
| Middle Eastern Languages | | | |
| American Sign Language | suppressed | suppressed | suppressed |
| Other/Unknown Languages | suppressed | suppressed | suppressed |

| 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 | | | |

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

123

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

809

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

15.2

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 | suppressed | suppressed | suppressed |
| Asian | suppressed | suppressed | suppressed |
| Black or African American | suppressed | suppressed | suppressed |
| Hispanic or Latino | suppressed | suppressed | suppressed |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | suppressed | suppressed | suppressed |
| 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 | suppressed | suppressed | suppressed |
| Age 35 to 49 | suppressed | suppressed | suppressed |
| Age 50 to 64 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | suppressed | suppressed | suppressed |

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

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-------------------|---|--|-----------------------------|
| Medicare | suppressed | suppressed | suppressed |
| Medicaid | suppressed | suppressed | suppressed |
| Private | suppressed | suppressed | suppressed |
| Self-Pay | suppressed | suppressed | suppressed |
| Other | 0 | 20 | 0 |

| 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 | | | |
| 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 | | | |

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

133

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

659

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

20.2

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 | | | |
| Asian | suppressed | suppressed | suppressed |
| Black or African American | suppressed | suppressed | suppressed |
| Hispanic or Latino | suppressed | suppressed | suppressed |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | suppressed | suppressed | suppressed |
| 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 | suppressed | suppressed | suppressed |
| Age 35 to 49 | suppressed | suppressed | suppressed |
| Age 50 to 64 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | suppressed | suppressed | suppressed |

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

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

| 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 | | | |
| 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 | | | |

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

504

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

4581

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

11

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

| 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 | suppressed | suppressed | suppressed |
| Age 65 Years and Older | suppressed | suppressed | suppressed |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------------|---|--|-----------------------------|
| Female | 198 | 2288 | 8.7 |
| Male | 306 | 2293 | 13.3 |
| Unknown | | | |

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

| 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 | suppressed | suppressed | suppressed |
| 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 | | | |
| 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 | Age (excluding maternal measures) | 50 to 64 | 14.4 | 18 to 34 | 6.1 | 2.4 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Age (excluding maternal measures) | 65 and older | 13.2 | 18 to 34 | 6.1 | 2.2 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Expected Payor | Medicare | 13.7 | Private | 7.1 | 1.9 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Expected Payor | Medicaid | 13.6 | Private | 7.1 | 1.9 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Age (excluding maternal measures) | 35 to 49 | 10.4 | 18 to 34 | 6.1 | 1.7 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (No Behavioral Health Diagnosis) | Sex Assigned at Birth | Male | 13.3 | Female | 8.7 | 1.5 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Sex Assigned at Birth | Male | 14.5 | Female | 10.5 | 1.4 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Race and/or Ethnicity | White | 13 | Hispanic or Latino | 11.1 | 1.2 |
| HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate | Race and/or Ethnicity | Asian | 11.8 | Hispanic or Latino | 11.1 | 1.1 |
| | | | | | | |

Plan to address disparities identified in the data

Dominican Hospital analyzed the health status and access for the population we serve. The analysis revealed that all-cause unplanned 30-day hospital readmission rates were higher than reference rates. The top 10 identified disparities are in these four categories:

- Higher rates in age groups 35 to 65+ compared to the 18 to 34 year old reference group.

- Race: Higher rates in Medicare and Medicaid populations compared to the privately insured reference group.

- Sex: Higher rates in the male population compared to the female reference population.

- Race: Higher rates in White and Asian populations compared to the Hispanic or Latino reference group.

To address the identified disparities Dominican Hospital will continue its efforts to decrease the Adult All-Cause Readmission rates. Ongoing efforts are focused on initiatives conducted by Care Coordination and involved departments. A Readmission workgroup has been established.

To improve patient care and reduce readmission risks, we have identified several actions, including utilizing an electronic application to proactively determine readmission risks before discharge, implementing post-discharge follow-up calls by hospital healthcare workers to help patients manage social needs and arrange follow-up appointments, providing education on readmission risks to Home Health services, and offering mobile-van clinic services to enhance healthcare access for patients.

We will continue to conduct patient audits for populations with two types of disposition, which have the highest readmission rates: Home to Self-Care and Home Health.

Additionally, we will continue to educate staff on, promote, and utilize our electronic system to identify patients with high-risk scores for readmission.

ð
We have implemented several initiatives to support at-risk patients and reduce readmission rates. Our approach includes providing home healthcare orders, assisting patients with scheduling prompt primary care follow-up appointments, and ensuring at-risk patients are provided necessary medications at discharge.ð
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To further support these efforts, we have increased our staffing by hiring two Community Health Workers, an RN Care Coordinator, and a Care Coordination Assistant.ð
ð
Our goal is to reduce the readmission rate from our CY 2024 baseline by the end of CY 2025.

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

Affiliated with Dignity Health, the hospital aims to provide compassionate, high-quality treatment tailored to individual needs. As supported and reflected in our system-wide policy, we ensure equal access to individualized care for all patients with different races, national origins, physical abilities and limitations, ages, sexual orientations, gender identities, or any other protected classifications. We offer free-of-charge interpreter services to patients with language barriers. Our policy promotes and reinforces patients' right to be respected for their cultural, psychosocial, spiritual, personal values, beliefs and preferences. ð

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Dominican Hospital emphasizes personalized care through various patient-centered services, including specialized programs for cancer and maternity, home health care, and initiatives to improve the patient experience. ð

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Cancer Care: The Mary & Richard Solari Cancer Center offers individualized, comprehensive care that addresses a patient's physical, emotional, and spiritual needs. The Oncology rehabilitation program provides one-on-one therapy to help cancer patients regain function, reduce pain, and decrease fatigue. Dominican Hospital's nationally recognized cancer program delivers personalized treatment informed by advanced diagnostic procedures.ð

ð
Maternity and Birth Center: The Birth Center offers highly personalized care with certified nurse midwives for those who prefer this approach during pregnancy, labor, and delivery. The birthing team guides and supports new mothers throughout labor and delivery, adapting care to the baby's position and the mother's progress.ð

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Community Outreach: Dominican Hospital's community outreach efforts include initiatives like the Mobile Wellness Clinic, which provides tailored healthcare access and education to underserved community members in both English and Spanish.ð

ð
Outpatient Rehabilitation Services: Dominican Hospital's Outpatient Rehabilitation Services are integrated with the Medical Foundation's outpatient rehabilitation services and medically integrated wellness center. This provides a robust continuum of care and a safety net for patients post-discharge.ð

Faith-based Support: Recognizing diverse religious needs, the hospital offers chaplains representing Catholicism, Buddhism, and various other faiths to support patients.

Patient safety

Patient race, ethnicity, gender, age, and unique comorbidities are tracked and trended for all healthcare acquired infections (HAI). Patient-level factors, such as cultural background, language barrier, and/or health literacy level are taken into consideration when providing HAI prevention education to patients and families, which is crucial for surgical site infection (SSI) prevention ? particularly with hand hygiene, wound care, pre-surgery chlorhexidine gluconate (CHG) shower prep kits, and post-operative care instructions.Ð

Ð

Isolation signage, hand hygiene posters, and written HAI prevention education are translated into Spanish, to support the large Hispanic population living in Santa Cruz County.Ð

Ð

Additionally, patients and families are offered seasonal influenza vaccines during the flu season. Care providers educate families in a culturally appropriate manner, building trust and improving herd immunity within the community at large.Ð

Ð

The hospital conducts Suicide Risk Assessment screening for all patients to assess the risk of self-harm. All patients are triaged using the Columbia Suicide Severity Rating Scale (C-SSRS) Screener. For direct admissions, a licensed nurse does C-SSRS Screener at the earliest point of contact. High risk and moderate risk patients are provided appropriate environments and follow-up to ensure patient safety.Ð

Ð

The hospital requires staff training on specialized patient handling equipment to facilitate safe mobility. Patients are screened for risk for falls and the staff are trained on methods to ensure fall-reduction techniques are employed for all patients.

Addressing patient social drivers of health

The hospital's community health workers screen our patients for the following social needs: transportation, clothing assistance, Rx medication, insurance, substance abuse disorders, enhanced care management, translation assistance, housing assistance, EDD/Social security disability insurance assistance, food connections, appointment with medical providers and other resources. Our hospital's community health workers also assist the patients who have these needs by making referrals to community benefit organizations, which provide vital services to patients in the community who have specific needs. A screening tool for social determinants of health has been integrated into our electronic health record (EHR) system to screen all adult inpatients for needs related to food insecurity, housing and utilities needs, transportation needs, and interpersonal violence concerns. Ð

In 2024, Dominican Hospital had 6,874 qualifying encounters, with 5,348 of these resulting in completed SDOH screenings. The overall screening rate was 0.78, reflecting a high level of screening coverage among eligible encounters.Ð

Among the domains screened, transportation needs were the most frequently identified, present in 18% of screenings. Food insecurity was identified in 10% of cases, while housing instability and utilities difficulties were less common, at 5% and 6% respectively. Interpersonal safety concerns were identified in 4% of screenings.Ð

Care Coordination ensures social work and community health work staff members are trained on the importance of social determinants of health and intervention and resources to address these needs. When a need is identified, social needs screening tool reports are run monthly to determine if priority populations are being provided necessary intervention.Ð

Dominican Hospital fosters partnerships with community-based organizations, such as Teen

Kitchen, CAI The Care, and Community bridges. We train our community health workers in the use of Central Coast Alliance (Medi-cal Payor Source) patient portal and "Jiva" referral and authorization request platform. We utilize a community referral platform "Unite Us" to foster a bidirectional referral process to ensure patients connect with referrals that we have initiated. ð Our community health workers also provide targeted patient education to prevent readmissions for patients with social needs.

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

At Dominican Hospital, our nationally recognized heart and vascular program offers the most comprehensive cardiac services in the Monterey Bay area. As a designated STEMI (heart attack) Receiving Center for Santa Cruz County and a Joint Commission-certified Chest Pain Center, we provide expert care. We treat a wide range of conditions including Atrial Fibrillation (AFib), Heart Disease, Mitral Valve Disease, Congestive Heart Failure, Hypertension (High Blood Pressure), Peripheral Artery Disease (PAD) and other conditions. Reducing Heart Failure mortalities has been an ongoing Quality goal for the hospital. Various initiatives are in place to ensure goals are achieved: we established a cross-functional Cardiovascular Heart Failure team consisting of representatives from Emergency department, Pharmacy, Quality, Nephrology, Nursing, Coding, Cardiac Rehab/Wellness Center and Hospitalists. We have developed provider education, pocket cards, documentation templates (or dot phrases), arranged (Clinical Informatics) support to reduce the time/learning curve for providers to adopt documentation aids, we have implemented CS/DSC Heart Failure order sets, addressed cost issues via community assistance and payor programs, and developed patient resource guides/handouts. We have implemented a heart failure clinical documentation improvement initiative with participation from providers, CDI, and Coding teams. To improve discharge follow-up/appointment scheduling/documentation rate, we developed a ?call-out? process for providers and staff to identify primary Cardiovascular Heart Failure patients, engaged nurse leaders to develop a scheduling process, and provided patients and their family members self-scheduling options while the patient is hospitalized.ð

ð The Quality Team reviews heart failure rate data and looks at disparities based on ethnicity-race, age, gender and language on a quarterly basis. ð

?"†V t Failure Mortality based on Ethnicity-Race: year-over-year trend from 2023 onward has shown improvement for most groups except American Indian/Alaska Native populations. Hispanic or Latino having the lowest mortality rate followed by White, Black and Asian, American Indian/Alaska Native populations. ð

?"†V t Failure Mortality based on Age: year-over-year trend from 2023 to 204 showed improvements for all age groups with patients aged 65 and over having better than expected outcomes, while the 18 to 44 age group had worse-than-expected mortality outcomes. Rolling 12 months ending July 2025 mortality ratio for the 18 to 44 age group has improved, whereas the 45-64 and 65+ age group mortality rates have remained the same - all indicating better than expected outcomes.ð

?"†V t Failure Mortality based on Gender: Both Male and Female groups are performing better than expected, with Males having a higher rate of mortality than females.ð

?"†V t Failure Mortality based on Language: Both English and Non-English speakers have better-than-expected outcomes with minimal disparity between them.

Care coordination

Patients with complex or chronic health conditions, with specific needs are eligible for the Dignity Health Care Coordination Program. The participants receive a call to set up an appointment and discuss personal health care needs. Members are assigned a registered nurse (RN) personal care manager to provide them with the individual support and assistance. A personal care manager works with primary care physicians with additional support from other care providers as necessary. To ensure that the members reach their health care goals, the Care Coordination team has been expanded to include social workers, community resource aides (navigators), and clinical pharmacists. Members are offered the option to meet with their Care Coordination team in person or over the phone. In addition, the Care Coordinators may even attend doctor appointments with a member to ensure all of their questions are answered.Đ

Đ
The Community Health Workers (CHW) care provision data from August 2024 to August 2025 shows that they provided Medical Provider Appointment support 786 times, CHW played a crucial role in facilitating appointments with medical providers.Đ

CHW made 649 referrals for Substance Use Disorder services, highlighting their impact in connecting individuals to necessary support. There were 498 instances of assistance with insurance or Getix referrals, demonstrating CHW's contribution to healthcare access. CHW provided transportation assistance 280 times, which is vital for patients to access appointments and resources. These findings suggest that CHW's highest impact is in connecting individuals to essential services, including medical care, substance use disorder support, and various other resources.Đ

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There is an upward trend from 2024 to 2025, indicating an increased engagement and impact of CHW services. Other Resource/Service provided categories experienced the most significant increase, rising from 204 activities in 2024 to 619 in 2025. There was a substantial increase in facilitating medical appointments, from 301 in 2024 to 485 in 2025. Referrals for Substance Use Disorder services also saw a notable rise, from 221 in 2024 to 428 in 2025. Assistance with insurance and Getix referrals increased from 161 in 2024 to 337 in 2025. Transportation assistance grew from 103 activities in 2024 to 177 in 2025. This consistent growth highlights the expanding role and effectiveness of CHWs in connecting individuals with critical resources and support.

Access to care

Patients and surrogate decision-makers, who are Limited English Proficient (LEP), have services provided to them in their primary language during the delivery of all significant healthcare services. Interpreter services are made available within a reasonable time during all hours of operation, at no cost to patients. Đ

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The hospital provides accessible entrances, parking for visitors with disabilities, and healthcare services via mobile-van clinic. Dignity Health's Patient Rights and Responsibilities document also highlights the right to be free from discrimination on the basis of disability. This also includes the right to reasonable continuity of care. Đ

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Dominican Hospital allows patients to designate a support person or visitor of their choosing to be with them, with some restrictions to ensure the health and safety of other patients and staff.Đ

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The Graduate Medical Education (GME) program offered by Dominican Hospital provides patients access to culturally and linguistically appropriate providers. Diversity, Equity, Inclusion and Belonging (DEIB) is the major focus of the hospital's Family Medicine residency program. The Residency Diversity, Equity, Inclusion, and Belonging Committee (DEIB) includes 30+ members with expertise and passion for DEIB and will include all interested Family Medicine Residents. Members include

the Morehouse School of Medicine Designated Institutional Officer (DIO) and Associate Dean, Assistant Dean, Chief Officer for Diversity and Inclusion; More in Common Alliance Chief Administrative Officer; Dominican Hospital President and CEO, Chief Medical Officer; California Medical Association President; Salud Para La Gente Chief Medical Officer; Santa Cruz Community Health Chief Medical Officer and other leaders from collaborating medical groups and community organizations sharing our mission to advance health equity. This committee meets on a quarterly basis, and as needed to ensure all aspects of the GME and UME programs align with the principles and practices of DEIB.

The RN Residency program at Dominican Hospital incorporates coursework on Social Determinants of Health (SDOH) and Vulnerable Populations to educate new nurses. The SDOH curriculum provides context for health inequities, demonstrating how environmental conditions impact patient health functioning, quality of life, and overall health management risks. The Vulnerable Populations curriculum teaches nurses to identify risk factors, maltreatment, abuse, and neglect that can cause or worsen mental health symptoms. It also equips them with the skills to develop appropriate nursing interventions for mental health and substance use conditions.

Methodology Guidelines

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

Y