

**Hospital Improvement Innovation Network (HIIN)  
Report Interpretation Guide  
Comprehensive Data System (CDS) Reports  
February 13, 2017**

**Contents**

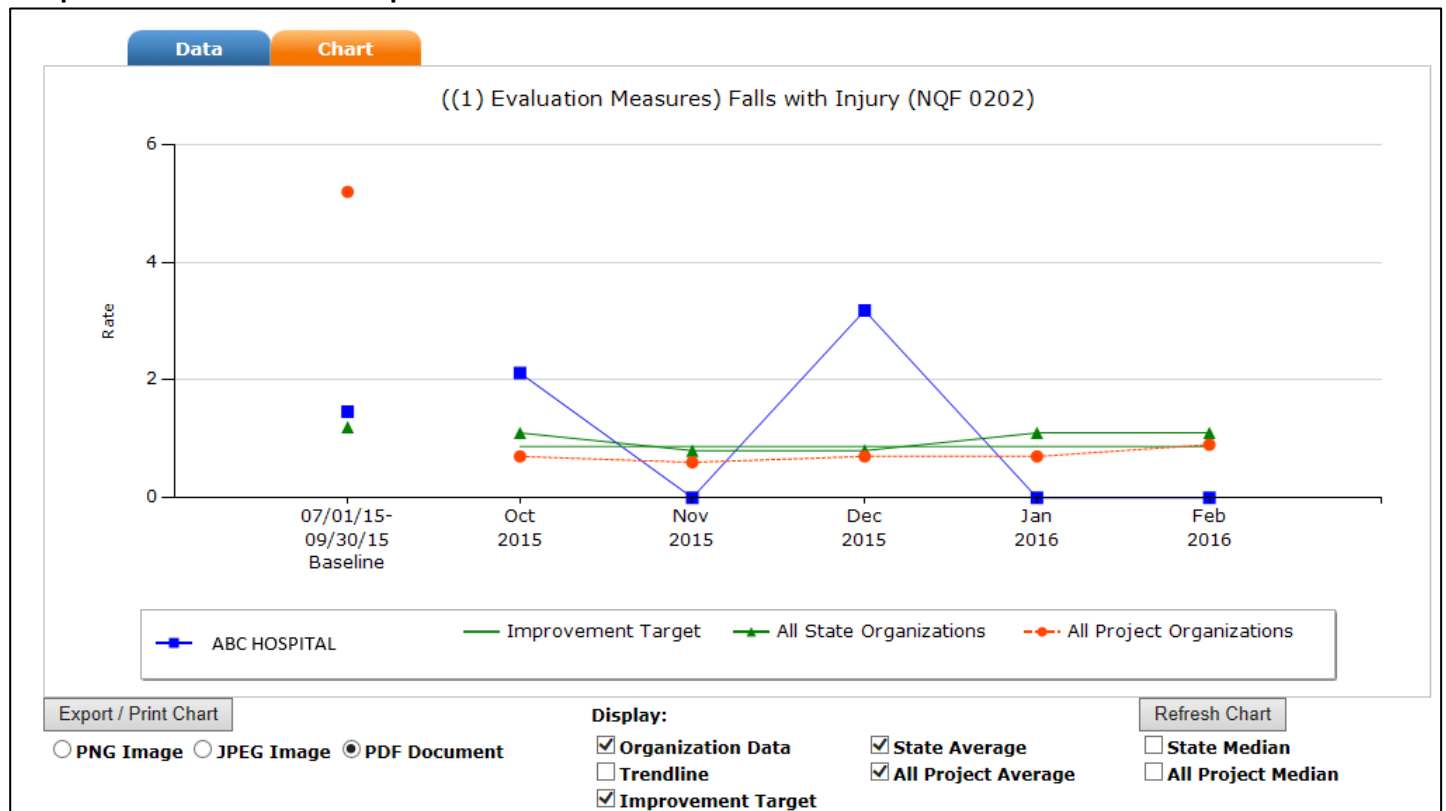
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**Introduction**

The following reports are available to hospital and state-level users of the Comprehensive Data System (CDS). Reports are available on an on-demand basis and users must be logged into the CDS at [www.hretcds.org](http://www.hretcds.org) using their unique account to access these reports. These reports assist facilities in tracking progress across the HIIN project. Please contact your State Partner or [hretdatasupport@aha.org](mailto:hretdatasupport@aha.org) if you have any questions.

Individual Measures	
<b>Overview</b>	This report displays your organization’s results for a selected measure, in table or chart format. The chart and table only show results for data that have been submitted.
<b>What does this report display?</b>	In the chart view, you may toggle between different measures by using the drop-downs at the top of the page. You may also select comparison results to display, by checking the boxes below the chart and clicking "Refresh Chart." The chart can be exported to graphic format as well as PDF. To view the data that supports the graph, select the "Data" tab. The data can be exported to Excel by clicking the "Export to Excel" button on the lower left. For HIIN, the HAC target is set to a 20% improvement and Readmissions is set at a 12% improvement. For users that have access to data for multiple facilities, please be aware that only hospitals that have actually submitted data for the project/measure being reviewed will show up in the drop-down listing.  <u>Note:</u> Newly entered data will display immediately; however, please allow one hour to pass after data entry to view state or project level aggregates.
<b>What should I do with this report?</b>	This report is used to track progress across time for a particular measure in the form of a run chart. You can customize the run chart based on your audience by adding various data series for facility data, a trend line, an improvement target, the state average, the all project average, the state median and the all-project median. Be sure to select “Refresh Chart” after selecting your data series.

**Sample Individual Measures Report**



## All Measures

<b>Overview</b>	The table shows the data that have been entered for your organization(s). To limit ( i.e., filter) results, you may enter criteria in the boxes just below the column headers. Click “Export to Excel” to download your results. Be sure to indicate whether you want all data or filtered data only.
<b>What does this report display?</b>	<p>This report shows all the data that has been submitted by your organization(s), for all measures and projects. The report can be filtered using the drop-down listings at the top of the columns.</p> <ul style="list-style-type: none"> <li>• Organization Name (most users will only see one organization)</li> <li>• State (most users will only see one state)</li> <li>• QI Initiative</li> <li>• Topic (only topics for which data have been submitted will appear in the drop-down listing)</li> <li>• Project (only projects for which data have been submitted will appear in the drop-down listing)</li> <li>• Measure (measures vary by project - only measures for which data have been submitted will appear in the drop-down listing)</li> <li>• Timeframe (baseline or monitoring, if applicable)</li> <li>• Start/End Date</li> <li>• Numerator/Denominator Definition</li> <li>• Numerator, Denominator, Measure Rate, All State Rate</li> <li>• Initial Submit Date</li> <li>• HRET Organizational ID</li> <li>• Measure Type</li> </ul> <p>The data can be downloaded to Excel. You may download all the data or only filtered data, by selecting the appropriate buttons.</p> <p><u>Note:</u> Newly entered data may take up to one hour to process and display.</p>
<b>What should I do with this report?</b>	This report provides you with a table of all reported data for all measures that have been submitted for a particular facility. You can also use this report to identify data validation issues and potential outlier data points by exporting your data to excel and sorting numerators and denominators for a particular measure by greatest to least.

### Sample All Measures Report

**All Measures** - The table below shows the data that have been entered for your organization(s). To limit (filter) results, you may enter criteria in the boxes just below the column headers. Click the "All Measures" help button on the top right of the table for further instructions. Click "Export to Excel" to download your results - be sure to indicate whether you want All Data or Filtered Data Only. This data was last refreshed on 3/15/2016 5:11:22 PM CST.

Timeframe	Start Date	End Date	Data Collected	Numerator Statement	Denominator State
[All] v x	<input type="text"/> x	<input type="text"/> x	<input type="text"/> x	<input type="text"/> x	<input type="text"/>
Baseline	07/01/2015	09/30/2015	Yes	Number of patients treated with opioids who received naloxone	Number of patients who received an opioid a
Monitoring	10/01/2015	10/31/2015	Yes	Number of patients treated with opioids who received naloxone	Number of patients who received an opioid a
Monitoring	11/01/2015	11/30/2015	Yes	Number of patients treated with opioids who received naloxone	Number of patients who received an opioid a
Monitoring	12/01/2015	12/31/2015	Yes	Number of patients treated with opioids who received naloxone	Number of patients who received an opioid a
Baseline	01/01/2015	09/30/2015	Yes	Total number of observed healthcare-associated CAUTI among patients in E	Total number of indwelling urinary catheter c
Monitoring	10/01/2015	10/31/2015	Yes	Total number of observed healthcare-associated CAUTI among patients in E	Total number of indwelling urinary catheter c
Baseline	01/01/2015	09/30/2015	Yes	Total number of observed healthcare-associated CAUTI among patients in E	Total number of indwelling urinary catheter c
Monitoring	10/01/2015	10/31/2015	Yes	Total number of observed healthcare-associated CAUTI among patients in E	Total number of indwelling urinary catheter c
Baseline	01/01/2015	09/30/2015	Yes	Number of observed infections	Number of predicted infections

Organization User	
<b>Overview</b>	The table below shows the users that have been assigned to your organization(s). To limit (i.e., filter) results, you may enter criteria in the boxes just below the column headers. Click “Export to Excel” to download your results – be sure to indicate whether you want all data or filtered data only.
<b>What does this report display?</b>	<p>This report shows the users associated with your organization(s) and the roles to which the users have been assigned. If you are assigned to multiple facilities in multiple states, you will be able to group the data by state.</p> <p>The report can be sorted by clicking the column headers and filtered by entering your parameters at the top.</p> <p>The data can be downloaded to Excel. You may download all the data or only filtered data, by selecting the appropriate button at the bottom.</p>
<b>What should I do with this report?</b>	This report is used for hospitals to add and maintain users within their facility.

**Sample Organization User Report**

**Organization User** - The table below shows the users that have been assigned to your organization(s). To limit (filter) results, you may enter criteria in the boxes just below the column headers. Click "Export to Excel" to download your results – be sure to indicate whether you want All Data or Filtered Data Only.

**Group by State**    **No Grouping**

Organization Name	State	HRET Id	Login Id	First Name	Last Name	Role	Created Date
test x	[, v] x	x	x	x	x	[All] v x	x

State: MP

Custom Data	
<b>Overview</b>	This reports allows you to customize a data set based on data that have been entered for your organization.
<b>What does this report display?</b>	<p>This table shows the data that have been entered for your organization(s). To limit (filter) results, you may enter criteria in the boxes just below the column headers. Click “Export to Excel” to download your results. Be sure to indicate whether you want all data or filtered data only.</p> <p><u>Note:</u> Newly entered data may take up to one hour to process and display.</p>
<b>What should I do with this report?</b>	This reports allows you to create a customized data set based on data that has been entered for your organization, by allowing you to filter fields, delete fields and re-arrange the order of fields (via a drag and drop function). You can also use the “Save My Settings” feature to retain the customized settings you have selected for the next time you log in to CDS.

**Sample Custom Data Report**

QI Initiative	Project	Measure	Timeframe	Start Date	End Date	Data Collected	
Hospital Improve <input type="text" value="x"/>	[All] <input type="text" value="x"/>	[All] <input type="text" value="x"/>	[All] <input type="text" value="x"/>	<input type="text" value="x"/>	<input type="text" value="x"/>	<input type="text" value="x"/>	<input type="text" value="x"/>
Hospital Improvement Innov	(1) HIIN Items	ADEs - excessive anticoagulation	Baseline	01/01/2014	12/31/2014	Yes	Inpatients receiving w
Hospital Improvement Innov	(1) HIIN Items	ADEs - excessive anticoagulation	Monitoring	10/01/2016	10/31/2016	Yes	Inpatients receiving w
Hospital Improvement Innov	(1) HIIN Items	ADEs - hypoglycemia	Baseline	01/01/2014	12/31/2014	Yes	Inpatients receiving in
Hospital Improvement Innov	(1) HIIN Items	ADEs - hypoglycemia	Monitoring	11/01/2016	11/30/2016	Yes	Inpatients receiving in
Hospital Improvement Innov	(1) HIIN Items	ADEs - opioids	Baseline	01/01/2014	12/01/2014	Yes	Number of patients wf
Hospital Improvement Innov	(1) HIIN Items	Catheter Utilization -all except NICUs	Baseline	01/01/2015	12/31/2015	Yes	Total number of patier
Hospital Improvement Innov	(1) HIIN Items	CAUTI Rate - all except NICUs	Baseline	01/01/2015	12/31/2015	Yes	Total number of indwe
Hospital Improvement Innov	(1) HIIN Items	CAUTI Rate - all except NICUs	Monitoring	10/01/2016	10/31/2016	Yes	Total number of indwe
Hospital Improvement Innov	(1) HIIN Items	CAUTI Rate - all except NICUs	Monitoring	11/01/2016	11/30/2016	Yes	Total number of indwe
Hospital Improvement Innov	(1) HIIN Items	CAUTI Rate - all except NICUs	Monitoring	12/01/2016	12/31/2016	Yes	Total number of indwe

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**Export All Data**  
 **Export Filtered Data Only**

## Data Submission

### Overview

The table below shows the data that have been entered for your organization(s). 'MISSING' indicates data yet to be entered and which is past due. To limit (filter) results, you may enter criteria in the boxes just below the column headers. Click "Export to Excel" to download your results – be sure to indicate whether you want All Data or Filtered Data Only. Please note: depending on the amount of data to be displayed, this report may take a bit of time to load.

### What does this report display?

This report shows all data that has been submitted by your organization(s), for all measures and projects, across time. If data are expected but have not yet been received within 30 days after the due date, the report will show "MISSING" in the timeframe. Data is "expected" if there is baseline data submitted for a particular facility and measure, but missing data monitoring data points. This report can be filtered to only show records where data are expected but have not been received.

The "No Rate" code is displayed for instances where a zero numerator and zero denominator had been entered into CDS.

Note: The "MISSING" feature does not take into consideration data for measures that are not applicable to a particular hospital based on the services it may or may not provide. Additionally, please allow one hour to pass after data entry to view newly entered data.

### What should I do with this report?

This report is used for facilities and states to view the current data that has been entered into the CDS. Users can also filter to "MISSING" data to aid in the collection of data that is past due.

## Sample Data Submission Report

		Monthly – BL	Monthly – Post BL							
5		04/01/2015	05/01/2015	06/01/2015	07/01/2015	10/01/2015	11/01/2015	12/01/2015	01/01/2016	02/01/2016
	x	x	x	x	x	x	x	x	x	x
						0.00	0.00	0.00	MISSING	
						0.00	MISSING	MISSING		
						0.00	MISSING	MISSING		
						MISSING	MISSING	MISSING	MISSING	
						0.00	6.25	10.00	MISSING	
						0.00	0.88	0.64	MISSING	
						4.65	4.92	3.39	MISSING	
						0.00	MISSING	MISSING		
						0.00	0.00	MISSING	MISSING	
						MISSING	MISSING	MISSING	MISSING	

Display:
 Only Records With Missing Data
   
 All Records

Export All Data
   
 Export Filtered Data Only

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<b>Current Improvement</b>	
<b>Overview</b>	The table below shows the percent improvement achieved by your organization(s). This report only includes those measures for which an improvement target has been set by the system administrator. To limit (filter) results, you may enter criteria in the boxes just below the column headers. Click "Export to Excel" to download your results. Be sure to indicate whether you want all data or filtered data only.
<b>What does this report display?</b>	<p>This report shows the percent improvement achieved by your organization(s) on measures for which an improvement target has been set by the system administrator, and for which baseline and at least one monitoring data point have been submitted. The percent improvement calculation compares the baseline rate to the most recent month rate. For HIIN, the HAC target is set to a 20% improvement and Readmissions is set to a 12% improvement.</p> <p>To limit (i.e., filter) results, you may enter criteria in the boxes just below the column headers or select from the drop-down lists. In addition, you can filter the report to display All Records, or only those organizations and measures that have "Met or Exceed the Improvement Target," "Improved," or "No Change or Worsened." The report can be downloaded to Excel, for all or filtered results.</p> <p><u>Note:</u> A facility will only show on the report if their average baseline rate is not null, and not zero. Additionally, please allow one hour to pass after data entry to view newly entered data.</p>
<b>What should I do with this report?</b>	This report is used to track progress for facilities across measures and determine which measures have reached improvement targets, which measures have made progress towards improvement targets and which measures may have worsening rates that need attention.

**Sample Current Improvement Report**

**Improvement:** All

HRET_OrganizationID	Reporting Entity	HRET Reporting Entity	Project
[All] x	x	[All] x	[All] x
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items ADEs - excessive ar
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items ADEs - hypoglycem
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items CAUTI Rate - all ex
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items CAUTI Rate - ICUs
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items Falls
HIIN-TEST-2	HIIN Test Hospital 2	HIIN-TEST-2-1 999999	Hospital Improvement Innov (1) HIIN Items Readmissions
9999999_PR	WONDERFUL HOSPITAL	9999999_GA-1 999999	Hospital Engagement Networ (1) Evaluation Measures CAUTI Rate - All IC
9999999_PR	WONDERFUL HOSPITAL	9999999_GA-1 999999	Hospital Engagement Networ (1) Evaluation Measures CAUTI Rate - All In
9999999_PR	WONDERFUL HOSPITAL	9999999_GA-1 999999	Hospital Engagement Networ (1) Evaluation Measures CAUTI SIR - All Inp
9999999_PR	WONDERFUL HOSPITAL	9999999_GA-1 999999	Hospital Engagement Networ (1) Evaluation Measures CAUTI SIR - ICUs E

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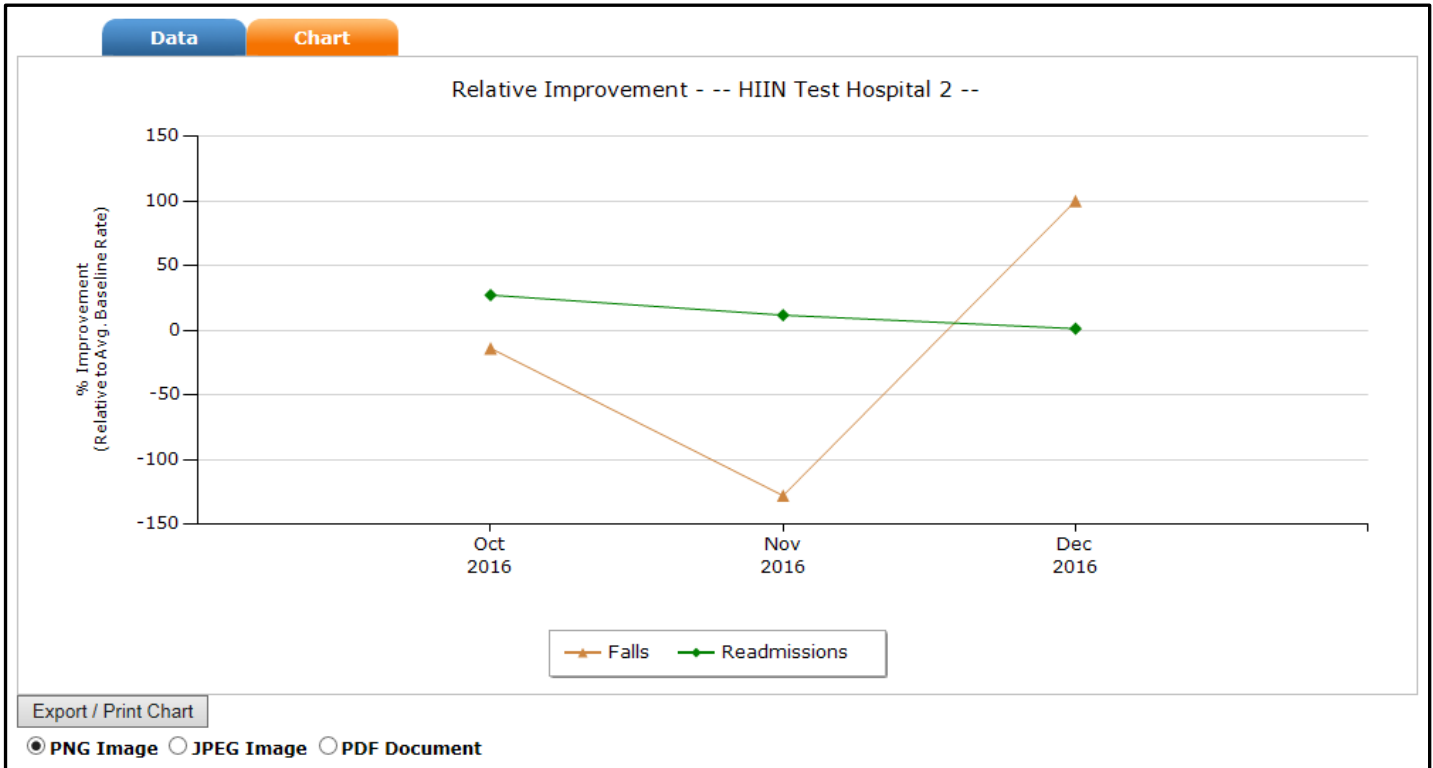
**Export All Data**

**Export Filtered Data Only**

<h2>Relative Improvement</h2>	
<b>Overview</b>	This report displays the percent improvement for one or more measures over time, relative to the baseline rate for the measure.
<b>What does this report display?</b>	<p>Only measures for which baseline data and at least one monitoring data point have been submitted are included.</p> <p>You may display one or more measures on the chart. To select more than one measure, hold the CTRL key and click on the measure(s) you wish to display from the Measure list, and then click the "Refresh Chart" button.</p> <p>If the baseline rate for a measure is zero, no line will be displayed.</p> <p>Hover your mouse over an individual data point to see the actual current rate, baseline rate and percent improvement for any given data point.</p> <p><u>Note:</u> A facility is only shown if its average baseline rate is not null (and the report will fail if the average baseline is 0, because a calculation cannot be made). Additionally, please allow one hour to pass after data entry to view newly entered data.</p>
<b>What should I do with this report?</b>	This report is used to track the percent improvement across time (monthly) for a particular facility for a particular measure. Multiple measures can be added to the run chart at once. This report also aids in the prioritization of improvement efforts across topics and measure s.

**Sample Relative Improvement Report**





Basic Items	
<b>Overview</b>	To support the use of the HIIN Improvement Calculator (IC), this raw data report provides you with a data file that is in the correct format for upload directly into the IC.
<b>What does this report display?</b>	<p>The report includes the following data elements for each record that has been submitted by your hospital:</p> <ul style="list-style-type: none"> <li>• Organization Name</li> <li>• HRET Organization ID</li> <li>• State</li> <li>• Timeframe</li> <li>• Start Date</li> <li>• End Date</li> <li>• HRET Measure ID</li> <li>• Numerator</li> <li>• Denominator</li> <li>• Reporting Entity</li> <li>• HRET Reporting Entity ID</li> </ul>
<b>What should I do with this report?</b>	This report is used auto populate the HIIN Improvement Calculator with hospital-level data for your facility. Select "Export All Data", then click "Export to Excel" and save this file as you will use it to import your HIIN data into the Improvement Calculator. More instructions on how to upload your data into the IC can be found directly in the Improvement Calculator which will soon be available on our website: <a href="http://www.hret-hiin.org/data/data.shtml">http://www.hret-hiin.org/data/data.shtml</a>

Sample Basic Items Report

Organization Name	HRET_OrganizationID	State	Timeframe	Start Date	End Date	HRET_MeasureID	Num	Denominat	Reporting Entity
[All] x	x	x	[All] x	x	x	x	x	x	
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2014	12/31/2014	HIIN-ADE-1a	10	2547	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-ADE-1a	13	100	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	11/01/2016	11/30/2016	HIIN-ADE-1a	2	50	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	12/01/2016	12/31/2016	HIIN-ADE-1a	8	52	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	01/01/2017	01/31/2017	HIIN-ADE-1a	3	45	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2014	12/31/2014	HIIN-ADE-1b	1	1500	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-ADE-1b	5	22	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	11/01/2016	11/30/2016	HIIN-ADE-1b	1	100	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	12/01/2016	12/31/2016	HIIN-ADE-1b	6	12	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	01/01/2017	01/31/2017	HIIN-ADE-1b	4	33	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2014	12/01/2014	HIIN-ADE-1c	1	100	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-ADE-1c	5	12	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	11/01/2016	11/30/2016	HIIN-ADE-1c	6	22	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	12/01/2016	12/31/2016	HIIN-ADE-1c	7	22	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	01/01/2017	01/31/2017	HIIN-ADE-1c	4	25	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2015	12/31/2015	HIIN-CAUTI-3a	25	1234	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2015	12/31/2015	HIIN-CAUTI-2a	5	6228	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-CAUTI-2a	0	587	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	11/01/2016	11/30/2016	HIIN-CAUTI-2a	1	422	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	12/01/2016	12/31/2016	HIIN-CAUTI-2a	0	655	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2015	12/31/2015	HIIN-CAUTI-2b	19	8053	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-CAUTI-2b	0	750	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Baseline	01/01/2014	12/31/2014	HIIN-Falls-1	11	38479	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	10/01/2016	10/31/2016	HIIN-Falls-1	1	3008	HIIN Test Hospital 2
-- HIIN Test Hospital 2 --	HIIN-TEST-2	MP	Monitoring	11/01/2016	11/30/2016	HIIN-Falls-1	2	3014	HIIN Test Hospital 2

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Export to Excel

Export All Data

Export Filtered Data Only