

# EXCEL WORKSHEETS FOR CHARTS ON DATA, TRENDS, AND RATES TO POPULATE THE POWERPOINT PRESENTATION

## Instructions

**What is this tool?** This tool takes the rates you have calculated about your hospital's performance on the AHRQ Quality Indicators (QIs) and displays the information graphically.

**Who are the target audiences?** The key users of this tool are the quality officers, quantitative analysts, and programmers who are involved in calculating the rates.

**How can it help you?** This tool helps you easily create graphs that display your hospital's results on the AHRQ QIs and how they compare to national benchmarks.

**How does this tool relate to others?** B2a (sample SAS program output) provides information on how to calculate the rates requested in this tool. Copy and paste the graphs produced by this tool into B3b (display QI results), which provides a PowerPoint template for presenting the results of your analysis.

### Instructions

1. Determine which benchmark comparisons and/or trend analyses you would like to perform (see Tool B1).
  - a. Worksheets "compare-PSI-rates-benchmark" and "compare-IQI-rates-benchmark" can be used to get an overall picture of the hospital's overall patient safety or inpatient quality performance relative to a national sample of hospitals.
  - b. The "trend-observed," "trend-observed-expected," and "trend-risk-adjusted-smoothed" worksheets can be used to compare performance for a single indicator over time. The "trend-observed" sheet also has a place to enter count data and a chart for monitoring changes in counts over time.
  - c. The "trend-risk-adjusted-smoothed" can be used to compare the risk-adjusted rate and smoothed rate for a single indicator over time.
  - d. The "trend-expected-benchmark" worksheet can be used to track how expected performance on a single indicator (based on case mix) relative to national benchmark performance fluctuates over time.
  - e. The "trend-risk-adjusted-benchmark" worksheet can be used to track how a hospital's performance on an indicator and the national benchmark performance for that indicator fluctuate over time.
2. Obtain your rates using the QI software for SAS or Windows (see Tool B2).
3. Erase the sample data and enter your data in the yellow cells.

See the other B tools for more information (B1 explains what the rates mean; B2a and B2b show how to use the software with your data and obtain these rates).

The **observed rate** is the actual rate at which events measured by the indicator occurred in your hospital. This can be acquired from the SAS output or the Windows QI output from the Quick Report. If another organization provides these data for you, you may also obtain it from them.

The **expected rate** is the rate a hospital would have if it had performed the same as the reference population given the hospital's actual case mix. This can be acquired from the SAS output or the Windows QI output from the Provider Report.

The **risk-adjusted rate** is the estimate of how a hospital would perform on an indicator for an average case mix of patients, rather than its own case mix. This rate can be found in the provider-level reports from the Windows or SAS QI programs.

The **confidence interval of the risk-adjusted rate** is identified in the SAS output as the lower CL (lower confidence limit) and upper CL (upper confidence limit). When creating provider-level reports using the Windows QI software, the user must specify that the confidence levels be included in the report. See Tools B2a and B2b for more information.

The **smoothed rate** is a weighted average of the hospital's risk-adjusted rate and the reference population rate, where the weight reflects the reliability of the hospital's risk-adjusted rate. This can be found in the SAS output or the Windows QI Provider Report.

4. Fill in the benchmark rates from the group of hospitals that you would like to use for comparison. Compare-PSI-rates-benchmark and compare-IQI-rates-benchmark will automatically compute percent difference and display how your hospital is performing relative to the national rate.

The **benchmark** is the rate used as a comparison point. You may choose your State's rate, the national rate, or any other rate that you may wish to use as a comparison. See Tool B5 for more information about benchmarking.

5. Modify the title of the graph or chart so that it reflects the years and indicators that you would like to observe over time.
6. Copy and paste the charts into the PowerPoint template or another document for display.