

Region: Detroit, MI

Appendix A, Table 1: Population

Population ¹	Detroit, MI			2000		
	2006			2000		
	N	Percent	CI	N	Percent	% Change
Total Population	4,874,287	100%	(n/a)	4,833,493	100.0%	0.8%
Race/Ethnicity						
White ²	3,465,351	71.1%	(67.8, 74.4)	3,481,652	72.0%	-0.5%
Black or African American ²	1,065,271	21.9%	(18.6, 25.2)	1,057,674	21.9%	0.7%
Hispanic or Latino (of any race) ³	168,273	3.5%	(3.3, 3.7)	136,136	2.8%	23.6%
Asian ²	172,512	3.6%	(3.2, 4.0)	123,949	2.6%	39.2%
American Indian and Alaska Native ²	13,528	0.3%	(0.26, 0.28)	16,452	0.3%	-17.8%
Native Hawaiian and Other Pac. Is. ²	351	0.0%	(n/a)	1,196	0.0%	-70.7%
Gender						
Male	2,383,698	48.9%	(48.8, 49.0)	2,352,836	48.7%	1.3%
Female	2,490,589	51.1%	(51.0, 51.2)	2,480,657	51.3%	0.4%
Age						
Median age ⁴	37.3	(n/a)	(37.0, 37.6)	35.2	(n/a)	6.0%
Pop. under 5	314,373	6.4%	(6.3, 6.5)	336,177	7.0%	-6.5%
Pop. 18 years and older	3,646,781	74.8%	(n/a)	3,564,892	73.8%	(n/a)
Pop. 65 years and older	570,490	11.7%	(n/a)	567,210	11.7%	(n/a)
Cultural						
Foreign born	418,466	8.6%	(8.0, 9.2)	371,089	7.7%	12.8%
Other language spoke at home (age 5 and older)	529,697	13.0%	(12.8, 13.3)	495,649	11.0%	6.9%
Economic/Education						
Per capita income ⁵	\$ 26,750	(n/a)	(25571, 27929)	\$ 24,716	(n/a)	8.2%
Median family income ⁵	\$ 66,110	(n/a)	(63405, 68815)	\$ 60,516	(n/a)	9.2%
% Pop. living below poverty ⁶	(n/a)	12.9%	(11.7, 14.1)	(n/a)	10.6%	21.7%
% Pop. 25 and older w/ H.S. diploma/GED or higher ⁷	(n/a)	87.0%	(86.2, 87.8)	(n/a)	82.8%	5.1%
% Pop. 25 and older w/ Bachelor's Degree or higher ⁷	(n/a)	27.8%	(25.5, 30.1)	(n/a)	24.6%	13.0%
Disability status (age 5 and older)	699,579	15.6%	(15.0, 16.2)	835,788	18.8%	-16.3%

Notes:

1. U.S. Bureau of the Census, 2006 American Community Survey, 2000 Census. Detroit is comprised of Wayne, Oakland, Macomb, St.Clair, Livingston, Washtenaw, and Monroe Counties.
 2. Includes persons reporting only one race.
 3. Hispanics may be of any race and are included in multiple race categories which apply.
 4. Weighted mean of median age in years.
 5. Median per capita income and median family income for 2000 are in 1999 dollars; 2006 figures are inflation-adjusted to 1999 dollars.
 6. Weighted mean of percentage of population living below the federal poverty level.
 7. All counties represented in a weighted mean of percentage of population 25 and older.
- (n/a): Not applicable or not available.
(x): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 1: Population

Population ¹	2006			United States		
	N	Percent	CI	N	Percent	% Change
Total Population	299,398,485	100%	(n/a)	281,421,906	100%	6.4%
Race/Ethnicity						
White ²	221,331,507	73.9%	(73.0, 73.9)	211,460,626	75.1%	4.7%
Black or African American ²	37,051,483	12.4%	(12.4, 12.4)	34,658,190	12.3%	6.9%
Hispanic or Latino (of any race) ³	44,252,278	14.8%	(14.8, 14.8)	35,305,818	12.5%	25.3%
Asian ²	13,100,095	4.4%	(4.4, 4.4)	10,242,998	3.6%	27.9%
American Indian and Alaska Native ²	2,369,431	0.8%	(0.8, 0.8)	2,475,956	0.9%	-4.3%
Native Hawaiian and Other Pac. Is. ²	426,194	0.1%	(0.1, 0.1)	398,835	0.1%	6.9%
Gender						
Male	147,434,940	49.2%	(49.2, 49.2)	138,053,563	49.1%	6.8%
Female	151,963,545	50.8%	(50.8, 50.8)	143,368,343	50.9%	6.0%
Age						
Median age ⁴	36.4	(n/a)	(36.2, 36.6)	35.3	(n/a)	3.1%
Pop. under 5	20,385,773	6.8%	(6.8, 6.8)	19,175,708	6.8%	6.3%
Pop. 18 years and older	225,633,342	75.4%	(n/a)	209,128,094	74.3%	7.9%
Pop. 65 years and older	37,191,004	12.4%	(n/a)	34,991,753	12.4%	6.3%
Cultural						
Foreign born	37,547,789	12.5%	(12.5, 12.5)	31,107,889	11.1%	20.7%
Other language spoke at home (age 5 and older)	54,858,424	19.7%	(12.5, 12.5)	46,951,595	17.9%	16.8%
Economic/Education						
Per capita income ⁵	\$ 25,267	(n/a)	(25,217, 25,317)	\$ 21,587	(n/a)	17.0%
Median family income ⁵	\$ 58,526	(n/a)	(58,407, 58,645)	\$ 50,046	(n/a)	16.9%
% Pop. living below poverty ⁶	(n/a)	13.3%	(13.2, 13.4)	33,899,812	12.4%	7.3%
% Pop. 25 and older w/ H.S. diploma/GED or higher ⁷	(n/a)	84.1%	(84.0, 84.2)	146,496,014	80.4%	4.5%
% Pop. 25 and older w/ Bachelor's Degree or higher ⁷	(n/a)	27.0%	(26.9, 27.1)	44,462,605	24.4%	10.7%
Disability status (age 5 and older)	41,259,809	15.1%	(15.1, 15.1)	49,746,248	19.3%	-17.1%

Notes:

1. U.S. Bureau of the Census, 2006 American Community Survey, 2000 Census. Detroit is comprised of Wayne, Oakland, Macomb, St.Clair, Livingston, Washtenaw, and Monroe Counties.
 2. Includes persons reporting only one race.
 3. Hispanics may be of any race and are included in multiple race categories which apply.
 4. Weighted mean of median age in years.
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(x): Insufficient numbers for an estimate.

Region: Detroit, MI
Appendix A, Table 2: Health Status

Detroit, MI										
Health Status	All		White		Black		Hispanic		Bl:Wh Ratio	Hi:Wh Ratio
Health Status of Adults (2006) ¹	%	CI	%	CI	%	CI	%	CI		
% Uninsured (18-64)	14.3%	(12.9, 15.6)	11.7%	(10.4, 13.1)	22.4%	(18.5, 26.3)	(n/a)	(n/a)	1.91	(n/a)
% Fair or poor health status	14.8%	(13.9, 15.7)	13.1%	(12.2, 14.0)	20.6%	(18.0, 23.2)	(n/a)	(n/a)	1.57	(n/a)
% Asthma (current)	9.1%	(8.3, 9.8)	9.0%	(8.1, 9.8)	10.3%	(8.3, 12.3)	(n/a)	(n/a)	1.15	(n/a)
% Diabetes	9.0%	(8.3, 9.7)	8.4%	(7.7, 9.1)	12.4%	(10.4, 14.4)	(n/a)	(n/a)	1.48	(n/a)
% Current smoker	20.5%	(19.3, 21.7)	18.0%	(16.8, 19.2)	28.9%	(25.5, 32.3)	(n/a)	(n/a)	1.60	(n/a)
% Obese (BMI >= 30)	31.3%	(30.0, 32.6)	28.8%	(27.5, 30.2)	41.4%	(37.9, 44.9)	(n/a)	(n/a)	1.43	(n/a)
Vital Statistics²										
Infant mortality rate per 1000 births ^{3,4}	8.5	(8.0, 9.0)	5.5	(5.4, 5.6)	17.5	(17.2, 17.8)	(n/a)	(n/a)	3.18	(n/a)
Total number of births (1999-2003)	(n/a)	330,569	(n/a)	231,239	(n/a)	84,193	(n/a)	14,584	0.36	0.06
Age-adjusted Death Rates per 100,000 pop.^{5,6}										
Total death rate	872.0	(853.6, 890.4)	829.7	(819.3, 840.1)	1041.5*	(1014, 1069)	621.8	(613.5, 630.1)	1.26	0.75
Cancer death rate	197.5	(194.7, 200.3)	192.4	(190.4, 194.4)	219.5**	(212.2, 226.8)	127.3***	(123, 131.7)	1.14	0.66
Heart disease death rate	276.0	(267.2, 284.8)	262.7	(256.3, 269.1)	332.9*	(323.1, 342.7)	205.9***	(203.3, 208.5)	1.27	0.78
Stroke death rate	49.8	(49.3, 50.4)	46.7	(45.9, 47.5)	65.4**	(63.4, 67.4)	39.8****	(n/a)	1.40	0.85
Number of Deaths	N		N		N		N			
Total number of deaths	41,397	(n/a)	31,465	(n/a)	9,564	(n/a)	474	(n/a)	0.30	0.02
Number of cancer deaths	9,389	(n/a)	7,320	(n/a)	1,982	(n/a)	81	(n/a)	0.27	0.01
Number of heart disease deaths	13,124	(n/a)	9,998	(n/a)	3,037	(n/a)	110	(n/a)	0.30	0.01
Number of stroke deaths	2,349	(n/a)	1,809	(n/a)	505	(n/a)	15	(n/a)	0.28	0.01

Notes:

1. CDC, Behavioral Risk Factor Surveillance System, 2006.
 2. U.S. DHHS, Office on Women's Health, Quick Health Data Online, 2003.
 3. Five year average 1999-2003.
 4. Weighted mean of infant mortality rate per 1000 births for counties in this region.
 5. Age-adjusted death rates per 100,000 pop calculated using the regional interpolated population estimate for 2003.
 6. Weighted mean of age-adjusted death rates per 100,000 pop for specific counties in this region.
- (n/a): Not applicable or not available.
(x): Insufficient numbers for an estimate.
*Data were not available for Livingston County
** Data were not available for Livingston County and Monroe County
*** Data were only available for Wayne County, Oakland County, and Macomb County
**** Data were only available for Wayne County

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Appendix A, Table 2: Health Status

United States										
Health Status	All		White		Black		Hispanic		Bl:Wh Ratio	Hi:Wh Ratio
Health Status of Adults (2006) ¹	%	CI	%	CI	%	CI	%	CI		
% Uninsured (18-64)	17.0%	(n/a)	13.3%	(n/a)	20.8%	(n/a)	44.4%	(n/a)	1.56	3.34
% Fair or poor health status	14.7%	(n/a)	12.9%	(n/a)	20.2%	(n/a)	20.1%	(n/a)	1.57	1.56
% Asthma (current)	8.5%	(n/a)	8.6%	(n/a)	9.5%	(n/a)	5.8%	(n/a)	1.10	0.67
% Diabetes	7.5%	(n/a)	7.2%	(n/a)	11.9%	(n/a)	6.3%	(n/a)	1.65	0.88
% Current smoker	20.1%	(n/a)	19.1%	(n/a)	22.3%	(n/a)	18.8%	(n/a)	1.17	0.98
% Obese (BMI >= 30)	25.1%	(n/a)	24.2%	(n/a)	36.8%	(n/a)	25.5%	(n/a)	1.52	1.05
Vital Statistics²										
Infant mortality rate per 1000 births ^{3,4}	6.9	(6.9, 6.9)	5.7	(5.7, 5.7)	14.2	(14.1, 14.3)	(n/a)	(n/a)	2.49	(n/a)
Total number of births (1999-2003)	20,155,840	(n/a)	15,904,740	(n/a)	3,028,262	(n/a)	4,221,029	(n/a)	0.19	0.27
Age-adjusted Death Rates per 100,000 pop.^{5,6}										
Total death rate	844.1	(843.0, 845.2)	827.5	(826.4, 828.6)	1083.7	(1079.8, 1087.6)	634.4	(630.8, 638.0)	1.31	0.77
Cancer death rate	190.1	(189.6- 190.6)	188.5	(188.0, 189.0)	233.3	(231.5, 235.1)	126.6	(125.0, 128.2)	1.24	0.67
Heart disease death rate	232.3	(231.7- 232.9)	228.2	(227.6, 228.8)	300.2	(298.1, 302.3)	173.2	(171.2, 175.2)	1.32	0.76
Stroke death rate	53.5	(53.2- 53.8)	51.4	(51.1, 51.7)	74.3	(73.2, 75.4)	40.5	(39.5, 41.5)	1.45	0.79
Number of Deaths										
Total number of deaths	2,448,288	(n/a)	2,103,714	(n/a)	291,300	(n/a)	122,026	(n/a)	0.14	0.06
Number of cancer deaths	556,902	(n/a)	481,556	(n/a)	62,660	(n/a)	24,070	(n/a)	0.13	0.05
Number of heart disease deaths	685,089	(n/a)	594,842	(n/a)	77,372	(n/a)	28,298	(n/a)	0.13	0.05
Number of stroke deaths	157,689	(n/a)	134,705	(n/a)	18,806	(n/a)	6,658	(n/a)	0.14	0.05

Notes:

1. CDC, Behavioral Risk Factor Surveillance System, 2006.
 2. U.S. DHHS, Office on Women's Health, Quick Health Data Online, 2003.
 3. Five year average 1999-2003.
 4. Weighted mean of infant mortality rate per 1000 births for counties in this region.
 5. Age-adjusted death rates per 100,000 pop calculated using the regional interpolated population estimate for 2003.
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- (n/a): Not applicable or not available.
(x): Insufficient numbers for an estimate.
*Data were not available for Livingston County
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*** Data were only available for Wayne County, Oakland County, and Macomb County
**** Data were only available for Wayne County

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Appendix A, Table 3: Health Care Capacity

<i>Health Care Capacity</i> ¹	Detroit, MI		United States	
	Number	Rate *	Number	Rate *
Health Professionals ²				
Total Non-Federal MDs (2005)	16,993	34.9	864,931	29.2
Primary Care MDs (2005) ³	4,089	8.4	256,771	8.7
Specialty Care MDs (2005) ⁴	12,904	26.5	608,160	20.5
Total Active Dentists (1998)	2,982	6.2	141,859	5.2
Registered Nurses (2000)	40,000	82.8	2,268,000	80.6
Licensed Practical and Licensed Vocational Nurses (2000)	6,915	14.3	596,355	21.2
Short Term Hospitals				
Total Number of Hospitals (2004)	43	(x)	4,787	(x)
Short Term General Beds (2004) ⁵	12,372	2.5	811,594	2.8
Other Facilities				
No. of Federally Qualified Health Centers (2005)	10	(x)	3,212	(x)

Notes:

1. HRSA, Area Resource Files, 2006.

2. Rates of medical and health professionals are per 10,000 population.

3. Primary Care is calculated as the sum of Office Based MDs for General Practice, General Family Practice, General Internal Medicine and General Pediatrics (based on Area Regional Files' definition of primary care).

4. Specialty Care MDs is the difference between Total MDs and Primary Care MDs.

5. Rate is per 1,000 population.

(n/a): Not applicable or not available.

(X): Insufficient numbers for an estimate.

* Rates were calculated by using interpolated population estimates for the year in which the data were collected.

Region: Detroit, MI

Appendix A, Table 4: Regional Hospital Quality of Care

CMS Quality Indicators ⁴	Detroit, MI		United States	
	(%) Weighted Average (by Total Discharges)	Number of Valid Hospitals	Number of Sampled Patients	%
Acute Myocardial Infarction (AMI)				
Heart Attack Patients Given Aspirin at Arrival	97%	38	6,507	93%
Heart Attack Patients Given Aspirin at Discharge	97%	37	7,170	90%
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	92%	35	1,966	84%
Heart Attack Patients Given Smoking Cessation Advice/Counseling	96%	35	2,552	90%
Heart Attack Patients Given Beta Blocker at Discharge	98%	37	7,539	90%
Heart Attack Patients Given Beta Blocker at Arrival	95%	38	5,237	88%
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	12%	2	6	34%
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	65%	22	675	58%
Heart Failure (HF)				
Heart Failure Patients Given Discharge Instructions	74%	39	15,447	65%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	98%	39	18,777	83%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	90%	39	6,892	85%
Heart Failure Patients Given Smoking Cessation Advice/Counseling	95%	38	3,666	85%
Pneumonia (PN)				
Pneumonia Patients Given Oxygenation Assessment	100%	39	13,324	100%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	76%	39	8,586	73%
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	90%	39	10,245	90%
Pneumonia Patients Given Smoking Cessation Advice/Counseling	90%	39	3,686	83%
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	80%	39	10,805	81%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	91%	38	7,075	85%
Pneumonia Patients Assessed and Given Influenza Vaccination	78%	39	3,455	70%
Surgical Infection Prevention (SIP)				
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	92%	40	22,308	81%
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	95%	39	16,760	90%
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	88%	40	21,088	76%

Notes:

1. CMS Hospital Compare, 2005.

(n/a): Not applicable or not available.

(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	ST MARY MERCY HOSPITAL		NORTH OAKLAND MEDICAL CENTERS		PROVIDENCE HOSPITAL		OAKWOOD HOSPITAL AND MEDICAL CENTER - DEARBORN		SINAI-GRACE HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	99	228	100	15	98	344	96	457	95	348
Heart Attack Patients Given Aspirin at Discharge	99	151	100	7	97	485	99	827	97	327
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	97	36	(n/a)	0	98	127	94	295	82	79
Heart Attack Patients Given Smoking Cessation Advice/Counseling	100	28	(n/a)	0	97	141	100	361	96	130
Heart Attack Patients Given Beta Blocker at Discharge	99	159	100	5	98	488	99	939	95	326
Heart Attack Patients Given Beta Blocker at Arrival	99	209	100	14	95	302	98	302	95	264
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	63	27	(n/a)	0	56	25	41	46	44	34
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	72	365	77	120	75	887	77	1135	93	940
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	99	560	97	213	96	1052	99	1334	99	1073
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	92	157	93	59	96	415	93	611	85	490
Heart Failure Patients Given Smoking Cessation Advice/Counseling	100	32	89	38	94	176	100	296	97	402
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	631	100	178	100	692	100	712	100	526
Pneumonia Patients Assessed and Given Pneumococcal Vacci(n/a)tion	82	507	82	88	68	404	82	488	78	252
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	92	444	90	81	88	473	94	470	89	411
Pneumonia Patients Given Smoking Cessation Advice/Counseling	100	86	87	38	92	172	100	238	91	184
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	84	516	69	147	85	584	76	585	81	451
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	88	353	93	94	96	412	92	354	91	242
Pneumonia Patients Assessed and Given Influenza Vacci(n/a)tion	95	183	79	38	72	162	85	170	95	122
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	88	654	88	168	96	1200	94	1563	95	817
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	96	492	86	56	99	950	95	1193	99	641
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	86	631	90	162	93	1100	86	1473	92	754

Notes:

1. CMS Hospital Compare, 2005.
 2. Rate for each measure reflects a percentage score based on sampled cases.
 3. Where the number of cases is too small (i.e., total sample is less than 25 for a condition), estimates may not be reliable for predicting hospital performance.
- (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

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Appendix A, Table 5: Hospital Quality Measures

Hospital Name	ST JOSEPH MERCY OAKLAND		MERCY HOSPITAL - PORT HURON		UNIVERSITY OF MICHIGAN HEALTH SYSTEM		HENRY FORD MACOMB HOSPITAL		HENRY FORD HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	100	298	88	49	100	269	99	344	99	233
Heart Attack Patients Given Aspirin at Discharge	100	434	90	30	100	376	99	336	100	317
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	88	85	13	99	77	100	58	88	73
Heart Attack Patients Given Smoking Cessation Advice/Counseling	100	153	100	8	99	107	100	94	98	115
Heart Attack Patients Given Beta Blocker at Discharge	100	414	91	33	100	364	99	338	100	317
Heart Attack Patients Given Beta Blocker at Arrival	99	252	93	42	98	231	99	308	99	196
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	0	1	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	86	36	(n/a)	0	88	24	93	44	64	11
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	94	564	97	174	94	577	88	595	67	403
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	100	646	96	203	100	650	100	778	98	458
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	249	75	67	97	276	100	173	87	182
Heart Failure Patients Given Smoking Cessation Advice/Counseling	100	92	97	32	97	106	100	69	93	121
Pneumonia (PN)										
Pneumonia Patients Given Oxygen Assessment	100	380	98	187	100	565	100	434	100	249
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	84	254	78	130	92	297	89	316	80	129
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	93	286	87	132	83	484	67	367	93	215
Pneumonia Patients Given Smoking Cessation Advice/Counseling	87	107	95	56	91	139	100	105	87	71
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	88	304	82	159	73	380	84	344	70	199
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	92	187	91	103	92	212	90	259	93	128
Pneumonia Patients Assessed and Given Influenza Vaccination	84	104	90	61	96	124	92	113	85	60
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	99	1191	94	687	95	1738	96	1274	95	514
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	99	881	97	512	97	1269	95	961	97	414
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	97	1114	82	574	79	1634	91	1221	91	507

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a case (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	SAINT JOSEPH MERCY LIVINGSTON HOSPITAL		STRAITH HOSPITAL FOR SPECIAL SURGERY		BEAUMONT HOSPITAL, GROSSE POINTE		MERCY MEMORIAL HOSPITAL		HARPER UNIVERSITY HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	96	24	(n/a)	(n/a)	100	64	93	106	99	84
Heart Attack Patients Given Aspirin at Discharge	100	19	(n/a)	(n/a)	98	53	96	48	95	131
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	6	(n/a)	(n/a)	88	24	62	13	83	64
Heart Attack Patients Given Smoking Cessation Advice/Counseling	100	1	(n/a)	(n/a)	75	8	91	11	96	69
Heart Attack Patients Given Beta Blocker at Discharge	100	21	(n/a)	(n/a)	98	60	98	57	95	162
Heart Attack Patients Given Beta Blocker at Arrival	86	14	(n/a)	(n/a)	98	62	90	58	93	55
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	(n/a)	0	20	5	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	(n/a)	0	(n/a)	0	40	5
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	73	114	(n/a)	(n/a)	55	427	60	300	77	787
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	100	167	(n/a)	(n/a)	90	496	83	397	100	856
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	92	38	(n/a)	(n/a)	76	167	80	88	86	375
Heart Failure Patients Given Smoking Cessation Advice/Counseling	100	7	(n/a)	(n/a)	71	75	99	68	94	187
Pneumonia (PN)										
Pneumonia Patients Given Oxygen(n/a)tion Assessment	100	251	(n/a)	(n/a)	98	254	100	298	100	200
Pneumonia Patients Assessed and Given Pneumococcal Vacca(n/a)tion	93	174	(n/a)	(n/a)	74	187	81	154	67	101
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	97	205	(n/a)	(n/a)	87	142	95	241	96	113
Pneumonia Patients Given Smoking Cessation Advice/Counseling	90	49	(n/a)	(n/a)	88	72	96	99	88	67
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	87	193	(n/a)	(n/a)	73	220	87	227	65	149
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	94	130	(n/a)	(n/a)	80	201	88	190	87	79
Pneumonia Patients Assessed and Given Influenza Vacca(n/a)tion	90	68	(n/a)	(n/a)	72	88	44	68	56	39
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	91	181	(n/a)	(n/a)	87	549	84	533	91	683
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	96	136	(n/a)	(n/a)	95	370	92	399	86	449
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	82	178	(n/a)	(n/a)	85	527	74	520	71	645

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a case (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	ST JOHN DETROIT RIVERVIEW HOSPITAL		WILLIAM BEAUMONT HOSPITAL		HENRY FORD COTTAGE HOSPITAL		OAKWOOD ANNAPOLIS HOSPITAL		HENRY FORD WYANDOTTE HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	100	39	96	365	(n/a)	(n/a)	98	113	94	266
Heart Attack Patients Given Aspirin at Discharge	100	25	98	412	(n/a)	(n/a)	99	69	90	176
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	4	92	113	(n/a)	(n/a)	96	27	80	46
Heart Attack Patients Given Smoking Cessation Advice/Counseling	75	4	99	156	(n/a)	(n/a)	100	31	100	50
Heart Attack Patients Given Beta Blocker at Discharge	100	24	98	463	(n/a)	(n/a)	100	79	89	196
Heart Attack Patients Given Beta Blocker at Arrival	95	41	93	287	(n/a)	(n/a)	99	82	93	240
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	(n/a)	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	(n/a)	0	86	50	(n/a)	(n/a)	29	21	64	36
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	82	457	70	481	(n/a)	(n/a)	74	361	57	232
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	99	568	100	605	(n/a)	(n/a)	95	463	94	284
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	98	199	92	212	(n/a)	(n/a)	92	141	80	91
Heart Failure Patients Given Smoking Cessation Advice/Counseling	94	195	96	68	(n/a)	(n/a)	98	118	100	42
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	174	100	495	(n/a)	(n/a)	100	405	100	173
Pneumonia Patients Assessed and Given Pneumococcal Vacci(n/a)tion	70	76	75	368	(n/a)	(n/a)	94	241	71	137
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	75	125	94	356	(n/a)	(n/a)	98	309	87	152
Pneumonia Patients Given Smoking Cessation Advice/Counseling	91	66	89	92	(n/a)	(n/a)	97	158	100	53
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	78	154	69	402	(n/a)	(n/a)	83	353	92	160
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	90	81	91	251	(n/a)	(n/a)	94	179	94	102
Pneumonia Patients Assessed and Given Influenza Vacci(n/a)tion	23	31	86	132	(n/a)	(n/a)	94	100	75	48
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	89	233	95	537	86	7	96	383	80	280
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	93	175	92	423	100	1	95	285	83	212
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	69	232	89	514	100	7	85	361	98	249

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a con (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	BOTSFORD HOSPITAL		ST JOSEPH MERCY HOSPITAL		ST JOHN HOSPITAL & MEDICAL CENTER		OAKWOOD SOUTHSORE MEDICAL CENTER		ST JOHN MACOMB-OAKLAND HOSPITAL-MACOMB CENTER	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	99	271	99	383	97	332	99	76	98	320
Heart Attack Patients Given Aspirin at Discharge	91	197	99	615	99	493	94	47	98	358
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	95	58	98	136	94	150	100	17	97	98
Heart Attack Patients Given Smoking Cessation Advice/Counseling	90	41	100	221	97	225	100	9	98	135
Heart Attack Patients Given Beta Blocker at Discharge	95	190	99	620	98	562	98	57	97	358
Heart Attack Patients Given Beta Blocker at Arrival	98	258	94	297	98	266	98	56	92	245
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	17	18	72	43	60	45	(n/a)	0	76	59
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	78	495	76	753	73	624	84	211	80	550
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	97	653	100	905	99	722	98	286	95	686
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	90	210	90	324	96	278	90	92	93	202
Heart Failure Patients Given Smoking Cessation Advice/Counseling	97	118	88	140	96	170	100	57	87	95
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	518	100	626	100	642	100	316	99	583
Pneumonia Patients Assessed and Given Pneumococcal Vacca(n/a)tion	86	333	61	548	75	360	88	227	74	468
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	87	427	95	454	88	498	98	236	87	521
Pneumonia Patients Given Smoking Cessation Advice/Counseling	90	105	72	163	84	198	100	90	82	157
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	78	411	83	491	81	533	92	252	85	513
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	86	231	93	283	96	312	96	152	85	333
Pneumonia Patients Assessed and Given Influenza Vacca(n/a)tion	88	157	69	203	74	170	90	72	81	169
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	91	585	91	445	97	1332	93	296	85	904
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	96	455	96	355	99	984	96	221	90	814
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	90	562	91	421	93	1282	88	267	85	835

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a con (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	HENRY FORD BI-COUNTY HOSPITAL		POH MEDICAL CENTER		SAINT JOSEPH MERCY SALINE HOSPITAL		PORT HURON HOSPITAL		ST JOHN MACOMB-OAKLAND HOSPITAL-OAKLAND CENTER	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	96	83	87	46	78	9	93	194	96	45
Heart Attack Patients Given Aspirin at Discharge	91	46	72	29	86	7	96	268	100	19
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	77	22	80	10	(n/a)	0	90	49	80	5
Heart Attack Patients Given Smoking Cessation Advice/Counseling	92	13	62	13	(n/a)	0	93	70	100	2
Heart Attack Patients Given Beta Blocker at Discharge	98	48	84	32	86	7	98	264	96	24
Heart Attack Patients Given Beta Blocker at Arrival	92	63	89	45	67	6	94	174	97	31
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	0	71	21	(n/a)	0
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	46	257	29	186	67	39	79	299	82	296
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	97	319	97	237	95	63	94	373	99	331
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	71	99	75	110	100	11	88	128	98	128
Heart Failure Patients Given Smoking Cessation Advice/Counseling	86	49	71	73	100	4	92	59	95	85
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	289	100	170	100	82	100	294	100	212
Pneumonia Patients Assessed and Given Pneumococcal Vacca(n/a)tion	39	194	41	73	79	62	78	201	71	104
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	99	242	50	125	96	68	91	217	98	191
Pneumonia Patients Given Smoking Cessation Advice/Counseling	93	113	62	74	90	20	99	92	86	69
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	79	229	89	133	89	71	85	248	93	170
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	91	150	92	107	91	46	93	204	93	107
Pneumonia Patients Assessed and Given Influenza Vacca(n/a)tion	39	87	11	35	67	12	81	81	63	49
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	100	234	89	161	96	47	82	657	95	131
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	98	176	93	111	100	35	98	479	98	93
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	94	219	82	154	87	47	87	629	98	123

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a con (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	MOUNT CLEMENS REGIONAL MEDICAL CENTER		ST JOHN RIVER DISTRICT HOSPITAL		GARDEN CITY HOSPITAL		CRITTENTON HOSPITAL MEDICAL CENTER		ST JOHN NORTH SHORES HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	98	196	95	21	99	143	97	116	(n/a)	0
Heart Attack Patients Given Aspirin at Discharge	98	157	90	10	98	105	98	109	(n/a)	0
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	73	64	80	5	93	29	85	27	(n/a)	0
Heart Attack Patients Given Smoking Cessation Advice/Counseling	97	94	100	1	96	47	97	36	(n/a)	0
Heart Attack Patients Given Beta Blocker at Discharge	96	196	86	14	99	119	97	103	(n/a)	0
Heart Attack Patients Given Beta Blocker at Arrival	89	159	94	18	98	94	91	90	(n/a)	0
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	62	29	(n/a)	0	92	25	61	18	(n/a)	0
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	58	440	89	111	60	298	61	272	25	4
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	97	528	95	134	95	394	96	334	71	7
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	74	261	100	32	93	95	81	108	100	1
Heart Failure Patients Given Smoking Cessation Advice/Counseling	97	79	85	20	97	70	96	28	(n/a)	0
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	283	97	131	100	432	100	285	100	31
Pneumonia Patients Assessed and Given Pneumococcal Vacci(n/a)tion	71	163	95	87	65	281	58	238	86	21
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	95	244	87	108	97	395	91	236	86	22
Pneumonia Patients Given Smoking Cessation Advice/Counseling	96	98	89	18	82	93	100	62	33	3
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	75	202	87	102	87	351	86	223	89	27
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	85	172	87	90	92	237	92	169	86	21
Pneumonia Patients Assessed and Given Influenza Vacci(n/a)tion	67	87	97	30	60	101	74	90	90	10
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	84	763	92	145	95	419	89	628	(n/a)	0
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	80	498	99	107	98	324	98	466	(n/a)	0
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	74	720	89	132	93	398	82	605	(n/a)	0

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a con (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	CHELSEA COMMUNITY HOSPITAL		SOUTHEAST MICHIGAN SURGICAL HOSPITAL		WILLIAM BEAUMONT HOSPITAL-TROY		OAKWOOD HERITAGE HOSPITAL		DETROIT REC HOSP & UNIV HLTH CENTER	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}										
Acute Myocardial Infarction (AMI)										
Heart Attack Patients Given Aspirin at Arrival	100	23	(n/a)	(n/a)	97	274	100	44	98	191
Heart Attack Patients Given Aspirin at Discharge	100	19	(n/a)	(n/a)	100	230	100	26	96	156
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	4	(n/a)	(n/a)	94	84	100	8	95	43
Heart Attack Patients Given Smoking Cessation Advice/Counseling	100	1	(n/a)	(n/a)	100	89	100	9	91	74
Heart Attack Patients Given Beta Blocker at Discharge	100	22	(n/a)	(n/a)	98	250	100	31	96	144
Heart Attack Patients Given Beta Blocker at Arrival	100	19	(n/a)	(n/a)	93	192	95	21	96	170
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	(n/a)	0	(n/a)	0	(n/a)	0
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	46	39	(n/a)	0	63	19
Heart Failure (HF)										
Heart Failure Patients Given Discharge Instructions	79	34	(n/a)	(n/a)	51	603	96	140	89	665
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	98	40	(n/a)	(n/a)	99	720	100	222	99	714
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	16	(n/a)	(n/a)	86	264	99	68	94	396
Heart Failure Patients Given Smoking Cessation Advice/Counseling	100	3	(n/a)	(n/a)	100	68	100	47	85	337
Pneumonia (PN)										
Pneumonia Patients Given Oxyge(n/a)tion Assessment	100	128	(n/a)	(n/a)	100	545	100	309	100	355
Pneumonia Patients Assessed and Given Pneumococcal Vaccci(n/a)tion	95	99	(n/a)	(n/a)	81	397	99	199	65	78
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	96	118	(n/a)	(n/a)	89	404	97	224	85	293
Pneumonia Patients Given Smoking Cessation Advice/Counseling	96	26	(n/a)	(n/a)	99	107	100	101	77	186
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	90	94	(n/a)	(n/a)	78	421	88	261	75	321
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	98	91	(n/a)	(n/a)	94	296	95	144	85	252
Pneumonia Patients Assessed and Given Influenza Vaccci(n/a)tion	86	28	(n/a)	(n/a)	76	147	100	79	78	58
Surgical Infection Prevention (SIP)										
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	99	692	0	1	94	742	94	145	95	76
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	99	520	(n/a)	0	99	564	99	104	91	65
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	98	688	100	1	88	691	93	143	70	69

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a con (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Region: Detroit, MI

Appendix A, Table 5: Hospital Quality Measures

Hospital Name	HURON VALLEY-SINAI HOSPITAL		BRIGHTON HOSPITAL		KARMANOS CANCER CENTER		OAKLAND REGIONAL HOSPITAL	
	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size	QI %	Sample Size
A. CMS Quality Indicators^{1, 2, 3}								
Acute Myocardial Infarction (AMI)								
Heart Attack Patients Given Aspirin at Arrival	95	93	(n/a)	(n/a)	0	1	(n/a)	(n/a)
Heart Attack Patients Given Aspirin at Discharge	98	56	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	100	14	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Attack Patients Given Smoking Cessation Advice/Counseling	60	5	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Attack Patients Given Beta Blocker at Discharge	98	53	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Attack Patients Given Beta Blocker at Arrival	96	73	(n/a)	(n/a)	100	1	(n/a)	(n/a)
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	(n/a)	0	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Heart Failure (HF)								
Heart Failure Patients Given Discharge Instructions	70	242	(n/a)	(n/a)	89	9	(n/a)	(n/a)
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	99	292	(n/a)	(n/a)	64	14	(n/a)	(n/a)
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	93	74	(n/a)	(n/a)	60	5	(n/a)	(n/a)
Heart Failure Patients Given Smoking Cessation Advice/Counseling	95	37	(n/a)	(n/a)	33	3	(n/a)	(n/a)
Pneumonia (PN)								
Pneumonia Patients Given Oxygen Assessment	100	221	(n/a)	(n/a)	100	68	(n/a)	(n/a)
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	69	137	(n/a)	(n/a)	54	13	(n/a)	(n/a)
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	94	178	(n/a)	(n/a)	95	38	(n/a)	(n/a)
Pneumonia Patients Given Smoking Cessation Advice/Counseling	93	46	(n/a)	(n/a)	23	13	(n/a)	(n/a)
Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	86	167	(n/a)	(n/a)	78	58	(n/a)	(n/a)
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	88	121	(n/a)	(n/a)	(n/a)	0	(n/a)	(n/a)
Pneumonia Patients Assessed and Given Influenza Vaccination	76	66	(n/a)	(n/a)	62	13	(n/a)	(n/a)
Surgical Infection Prevention (SIP)								
Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	97	577	(n/a)	(n/a)	93	136	(n/a)	(n/a)
Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	98	429	(n/a)	(n/a)	94	141	(n/a)	(n/a)
Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	93	563	(n/a)	(n/a)	89	136	(n/a)	(n/a)

Notes:

1. CMS Hospital Compare, 2005.
2. Rate for each measure reflects a percentage score based on sampled cases.
3. Where the number of cases is too small (i.e., total sample is less than 25 for a case) (n/a): Not applicable or not available.
(X): Insufficient numbers for an estimate.

Appendix A, Table 6: Hospital Operational and Financial Characteristics

Hospital Name		ST MARY MERCY HOSPITAL	NORTH OAKLAND MEDICAL CENTERS*	PROVIDENCE HOSPITAL*	OAKWOOD HOSPITAL AND MEDICAL CENTER - DEARBORN*	SINAI - GRACE HOSPITAL*	ST JOSEPH MERCY OAKLAND	MERCY HOSPITAL - PORT HURON
A. Operational ^{1,2}								
1. Hospital Characteristics								
Ownership	(n/a)	Not For Profit	Not For Profit	Not For Profit	Not For Profit	Not For Profit	Not For Profit	Not For Profit
Teaching Status	(n/a)	Minor	Minor	Major	Major	Major	Minor	No
Beds ³	(n/a)	324	184	416	587	404	424	119
Number of Discharges	(n/a)	16,496	8,479	26,500	32,629	21,588	21,154	5,017
Occupancy Rate ⁴	(n/a)	78.0%	68.9%	0.884	76.8%	80.8%	59.2%	56.1%
Case Mix Index ⁵	(n/a)	1.56	1.37	1.57	1.72	1.55	1.60	1.37
% Medicare	(n/a)	37.0%	30.0%	44.0%	45.0%	38.0%	39.0%	58.0%
% Medicaid	(n/a)	12.0%	26.0%	9.0%	11.0%	13.0%	8.0%	3.0%
% Outpatient Revenue ⁶	(n/a)	50.0%	46.0%	0.49	34.0%	37.0%	44.0%	48.0%
Operating revenue in millions ⁷	(n/a)	\$305.1	\$128.1	\$499.5	\$497.8	\$310.4	\$295.0	\$81.8
2. Financial Ratios⁸								
Profitability ^{9,10}								
Decile ranking among U.S. hospitals	(n/a)	4	(n/a)	4	4	9	5	7
Leverage ^{11,12}								
Decile ranking among U.S. hospitals	(n/a)	4	(n/a)	7	8	10	6	6
Liquidity ^{13,14}								
Decile ranking among U.S. hospitals	(n/a)	6	(n/a)	9	8	10	5	5
Efficiency ^{15,16}								
Decile ranking among U.S. hospitals	(n/a)	7	(n/a)	7	5	7	4	8
B. Nursing Data¹⁷								
		National Average						
Nursing Intensity: Nursing Hours Per Patient Day	10.25	7.16	8.10	12.08	11.45	8.02	10.53	9.06
Skill mix: Percent RN to Total Nursing	90%	96%	91%	100%	99%	98%	99%	77%
Adjusted Daily Census to FTE RNs	0.87	1.17	1.08	0.66	0.71	1.02	0.77	1.15
Adjusted Daily Census per FTE LPNs	7.75	25.77	11.50	209.33	60.73	53.44	88.00	3.78
Adjusted Daily Census per RN + LPN	0.78	1.12	0.99	0.66	0.70	1.00	0.76	0.88
Adjusted to Daily Census per Total nursing staff	0.61	0.77	0.99	0.53	0.56	0.73	0.62	0.70
Ratio of RN:LPN	0.70	0.66	0.91	0.80	0.80	0.71	0.81	0.61

Appendix A, Table 6: Hospital Operational and Financial Ch

Hospital Name		UNIVERSITY OF MICHIGAN HEALTH SYSTEM*	HENRY FORD MACOMB HOSPITAL	HENRY FORD HOSPITAL*	SAINT JOSEPH MERCY LIVINGSTON HOSPITAL	STRAITH HOSPITAL FOR SPECIAL SURGERY	BEAUMONT HOSPITAL, GROSSE POINTE	MERCY MEMORIAL HOSPITAL	HARPER UNIVERSITY HOSPITAL*
A. Operational ^{1,2}									
1. Hospital Characteristics									
Ownership	(n/a)	Government	(n/a)	Not For Profit	Not For Profit	Not For Profit	(n/a)	Not For Profit	Not For Profit
Teaching Status	(n/a)	Major	(n/a)	Major	No	No	(n/a)	No	Major
Beds ³	(n/a)	785	(n/a)	731	86	34	(n/a)	179	(n/a)
Number of Discharges	(n/a)	42,870	(n/a)	39,616	3,731	973	(n/a)	9,113	(n/a)
Occupancy Rate ⁴	(n/a)	(n/a)	(n/a)	82.1%	45.9%	41.3%	(n/a)	60.0%	(n/a)
Case Mix Index ⁵	(n/a)	1.86	(n/a)	1.60	1.15	0.94	(n/a)	1.21	(n/a)
% Medicare	(n/a)	28.0%	(n/a)	35.0%	50.0%	52.0%	(n/a)	47.0%	(n/a)
% Medicaid	(n/a)	9.0%	(n/a)	7.0%	13.0%	(n/a)	(n/a)	5.0%	(n/a)
% Outpatient Revenue ⁶	(n/a)	43.0%	(n/a)	49.0%	72.0%	73.0%	(n/a)	57.0%	(n/a)
Operating revenue in millions ⁷	(n/a)	\$1,425.1	(n/a)	\$941.8	\$76.4	\$13.8	(n/a)	\$111.0	(n/a)
2. Financial Ratios⁸									
Profitability ^{9,10}									
Decile ranking among U.S. hospitals	(n/a)	1	(n/a)	10	5	2	(n/a)	8	(n/a)
Leverage ^{11,12}									
Decile ranking among U.S. hospitals	(n/a)	6	(n/a)	9	6	6	(n/a)	3	(n/a)
Liquidity ^{13,14}									
Decile ranking among U.S. hospitals	(n/a)	4	(n/a)	9	8	2	(n/a)	9	(n/a)
Efficiency ^{15,16}									
Decile ranking among U.S. hospitals	(n/a)	10	(n/a)	10	3	1	(n/a)	2	(n/a)
B. Nursing Data¹⁷									
		National Average							
Nursing Intensity: Nursing Hours Per Patient Day	10.25	20.39	8.92	13.53	10.69	6.34	(n/a)	10.24	8.95
Skill mix: Percent RN to Total Nursing	90%	97%	98%	99%	98%	100%	(n/a)	86%	94%
Adjusted Daily Census to FTE RNs	0.87	0.40	0.92	0.60	0.76	1.26	(n/a)	0.91	0.95
Adjusted Daily Census per FTE LPNs	7.75	13.31	38.07	95.62	42.67	(n/a)	(n/a)	5.68	14.71
Adjusted Daily Census per RN + LPN	0.78	0.39	0.90	0.59	0.75	1.26	(n/a)	0.78	0.89
Adjusted to Daily Census per Total nursing staff	0.61	0.36	0.62	0.45	0.59	0.90	(n/a)	0.67	0.89
Ratio of RN:LPN	0.70	0.89	0.68	0.76	0.77	0.71	(n/a)	0.74	0.94

Appendix A, Table 6: Hospital Operational and Financial Ch

Hospital Name		ST JOHN DETROIT RIVERVIEW HOSPITAL*	WILLIAM BEAUMONT HOSPITAL - ROYAL OAK	HENRY FORD COTTAGE HOSPITAL	OAKWOOD ANNAPOLIS HOSPITAL*	HENRY FORD WYANDOTTE HOSPITAL	BOTSFORD HOSPITAL*	ST JOSEPH MERCY HOSPITAL	ST JOHN HOSPITAL & MEDICAL CENTER*
A. Operational ^{1,2}									
1. Hospital Characteristics									
Ownership	(n/a)	Not For Profit	Not For Profit	(n/a)	Not For Profit	(n/a)	Not For Profit	Not For Profit	Not For Profit
Teaching Status	(n/a)	Minor	Major	(n/a)	Minor	(n/a)	Minor	Major	Major
Beds ³	(n/a)	281	1060	(n/a)	196	(n/a)	330	489	623
Number of Discharges	(n/a)	13,309	56,435	(n/a)	10,749	(n/a)	16,321	31,655	32,356
Occupancy Rate ⁴	(n/a)	72.6%	80.7%	(n/a)	64.6%	(n/a)	65.6%	90.0%	80.7%
Case Mix Index ⁵	(n/a)	1.33	1.75	(n/a)	1.30	(n/a)	1.33	1.58	1.73
% Medicare	(n/a)	39.0%	47.0%	(n/a)	50.0%	(n/a)	50.0%	48.0%	43.0%
% Medicaid	(n/a)	18.0%	5.0%	(n/a)	9.0%	(n/a)	6.0%	6.0%	11.0%
% Outpatient Revenue ⁶	(n/a)	29.0%	40.0%	(n/a)	39.0%	(n/a)	45.0%	42.0%	33.0%
Operating revenue in millions ⁷	(n/a)	\$152.1	\$1,075.4	(n/a)	\$111.8	(n/a)	\$242.3	\$534.7	\$556.0
2. Financial Ratios⁸									
Profitability ^{9,10}									
Decile ranking among U.S. hospitals	(n/a)	10	6	(n/a)	9	(n/a)	6	4	4
Leverage ^{11,12}									
Decile ranking among U.S. hospitals	(n/a)	10	2	(n/a)	(n/a)	(n/a)	9	8	8
Liquidity ^{13,14}									
Decile ranking among U.S. hospitals	(n/a)	9	2	(n/a)	2	(n/a)	7	3	3
Efficiency ^{15,16}									
Decile ranking among U.S. hospitals	(n/a)	9	8	(n/a)	4	(n/a)	7	7	7
B. Nursing Data¹⁷									
	National Average								
Nursing Intensity: Nursing Hours Per Patient Day	10.25	7.69	13.22	(n/a)	8.88	7.18	9	18.11	13.01
Skill mix: Percent RN to Total Nursing	90%	100%	99%	(n/a)	98%	99%	1	99%	100%
Adjusted Daily Census to FTE RNs	0.87	1.04	0.61	(n/a)	0.92	1.13	0.92	0.45	0.62
Adjusted Daily Census per FTE LPNs	7.75	(n/a)	59.58	(n/a)	42.00	91.80	56.29	53.33	244.67
Adjusted Daily Census per RN + LPN	0.78	1.04	0.61	(n/a)	0.90	1.11	0.90	0.44	0.61
Adjusted to Daily Census per Total nursing staff	0.61	0.77	0.51	(n/a)	0.66	1.11	0.74	0.41	0.45
Ratio of RN:LPN	0.70	0.74	0.83	(n/a)	0.72	0.99	0.81	0.91	0.74

Appendix A, Table 6: Hospital Operational and Financial Ch

Hospital Name		OAKWOOD SOUTHSHORE MEDICAL CENTER	ST JOHN MACOMB- OAKLAND HOSPITAL MACOMB CENTER	HENRY FORD BI-COUNTY HOSPITAL	POH MEDICAL CENTER	SAINT JOSEPH MERCY SALINE HOSPITAL	PORT HURON HOSPITAL	ST JOHN MACOMB- OAKLAND HOSPITAL OAKLAND CENTER	MOUNT CLEMENS REGIONAL MEDICAL CENTER*
A. Operational ^{1,2}									
1. Hospital Characteristics									
Ownership	(n/a)	Not For Profit	Not For Profit	(n/a)	(n/a)	Not For Profit	Not For Profit	Not For Profit	Not For Profit
Teaching Status	(n/a)	Minor	Minor	(n/a)	(n/a)	No	No	Minor	Minor
Beds ³	(n/a)	195	343	(n/a)	(n/a)	80	186	343	285
Number of Discharges	(n/a)	6,342	18,107	(n/a)	(n/a)	1,252	10,710	18,107	15,232
Occupancy Rate ⁴	(n/a)	40.1%	80.3%	(n/a)	(n/a)	13.8%	72.5%	80.3%	64.8%
Case Mix Index ⁵	(n/a)	1.20	1.41	(n/a)	(n/a)	1.01	1.62	1.41	1.52
% Medicare	(n/a)	54.0%	61.0%	(n/a)	(n/a)	64.0%	47.0%	61.0%	49.0%
% Medicaid	(n/a)	5.0%	9.0%	(n/a)	(n/a)	1.0%	7.0%	9.0%	9.0%
% Outpatient Revenue ⁶	(n/a)	45.0%	37.0%	(n/a)	(n/a)	83.0%	44.0%	37.0%	44.0%
Operating revenue in millions ⁷	(n/a)	\$83.3	\$224.1	(n/a)	(n/a)	\$32.9	\$129.9	\$224.1	\$266.6
2. Financial Ratios⁸									
Profitability ^{9,10}									
Decile ranking among U.S. hospitals	(n/a)	7	5	(n/a)	(n/a)	1	6	5	8
Leverage ^{11,12}									
Decile ranking among U.S. hospitals	(n/a)	(n/a)	7	(n/a)	(n/a)	4	7	7	8
Liquidity ^{13,14}									
Decile ranking among U.S. hospitals	(n/a)	1	9	(n/a)	(n/a)	3	6	9	9
Efficiency ^{15,16}									
Decile ranking among U.S. hospitals	(n/a)	5	6	(n/a)	(n/a)	1	2	6	8
B. Nursing Data¹⁷									
		National Average			***				
Nursing Intensity: Nursing Hours Per Patient Day	10.25	10.04	10.46	8.40	3.75	6.93	12.23	9.79	9.64
Skill mix: Percent RN to Total Nursing	90%	98%	96%	90%	83%	100%	94%	98%	99%
Adjusted Daily Census to FTE RNs	0.87	0.82	0.80	1.06	2.58	1.15	0.69	0.84	0.84
Adjusted Daily Census per FTE LPNs	7.75	34.25	18.78	9.14	12.32	(n/a)	11.25	36.60	62.40
Adjusted Daily Census per RN + LPN	0.78	0.80	0.76	0.95	2.13	1.15	0.65	0.82	0.83
Adjusted to Daily Census per Total nursing staff	0.61	0.59	0.56	0.95	1.31	0.98	0.65	0.63	0.70
Ratio of RN:LPN	0.70	0.72	0.71	0.90	0.51	0.85	0.94	0.75	0.83

Appendix A, Table 6: Hospital Operational and Financial Ch

Hospital Name		ST JOHN RIVER DISTRICT HOSPITAL	GARDEN CITY HOSPITAL	CRITTENTON HOSPITAL MEDICAL CENTER	ST JOHN NORTH SHORES HOSPITAL	CHELSEA COMMUNITY HOSPITAL	SOUTHEAST MICHIGAN SURGICAL HOSPITAL	WILLIAM BEAUMONT HOSPITAL-TROY	OAKWOOD HERITAGE HOSPITAL	DETROIT REC HOSP & UNIV HLTH CENTER*
A. Operational ^{1,2}										
1. Hospital Characteristics										
Ownership	(n/a)	Not For Profit	Not For Profit	Government	Owned	Not For Profit	Investor Owned	Not For Profit	Not For Profit	Not For Profit
Teaching Status	(n/a)	Minor	Minor	No	Minor	No	Minor	Minor	No	Major
Beds ³	(n/a)	68	229	213	55	113	13	254	233	261
Number of Discharges	(n/a)	2,523	10,300	10,009	1,288	4,070	61	21,083	8,795	13,748
Occupancy Rate ⁴	(n/a)	43.4%	64.6%	64.8%	62.2%	55.8%	2.3%	98.7%	65.5%	74.9%
Case Mix Index ⁵	(n/a)	1.22	1.40	1.35	0.98	1.21	2.19	1.45	1.33	1.52
% Medicare	(n/a)	55.0%	53.0%	47.0%	28.0%	42.0%	59.0%	45.0%	60.0%	28.0%
% Medicaid	(n/a)	10.0%	10.0%	4.0%	4.0%	1.0%	7.0%	3.0%	8.0%	12.0%
% Outpatient Revenue ⁶	(n/a)	62.0%	45.0%	46.0%	58.0%	63.0%	89.0%	55.0%	34.0%	25.0%
Operating revenue in millions ⁷	(n/a)	\$36.4	\$132.0	\$136.5	\$27.8	\$80.8	\$7.2	\$372.5	\$94.2	\$216.0
2. Financial Ratios⁸										
Profitability ^{9,10}										
Decile ranking among U.S. hospitals	(n/a)	7	7	(n/a)	1	5	10	3	8	7
Leverage ^{11,12}										
Decile ranking among U.S. hospitals	(n/a)	5	9	(n/a)	(n/a)	8	10	2	(n/a)	2
Liquidity ^{13,14}										
Decile ranking among U.S. hospitals	(n/a)	9	3	(n/a)	10	7	4	3	1	9
Efficiency ^{15,16}										
Decile ranking among U.S. hospitals	(n/a)	2	2	(n/a)	10	7	10	4	7	10
B. Nursing Data¹⁷										
	National Average									
Nursing Intensity: Nursing Hours Per Patient Day	10.25	11.77	8.00	6.75	3.00	8.83	48.00	12.68	7.14	11.08
Skill mix: Percent RN to Total Nursing	90%	93%	98%	98%	100%	99%	100%	100%	96%	97%
Adjusted Daily Census to FTE RNs	0.87	0.73	1.02	1.21	2.67	0.92	0.17	0.63	1.17	0.75
Adjusted Daily Census per FTE LPNs	7.75	10.00	64.50	63.75	(n/a)	86.50	(n/a)	272.50	26.88	21.00
Adjusted Daily Census per RN + LPN	0.78	0.68	1.00	1.19	2.67	0.91	0.17	0.63	1.12	0.72
Adjusted to Daily Census per Total nursing staff	0.61	0.58	1.00	0.90	2.05	0.83	0.17	0.50	0.86	0.54
Ratio of RN:LPN	0.70	0.80	0.98	0.74	0.77	0.91	1.00	0.79	0.74	0.72

Appendix A, Table 6: Hospital Operational and Financial Ch

Hospital Name		HURON VALLEY-SINAI HOSPITAL	BRIGHTON HOSPITAL	KARMANOS CANCER CENTER	OAKLAND REGIONAL HOSPITAL
A. Operational ^{1,2}					
1. Hospital Characteristics					
Ownership	(n/a)	Not For Profit	Not For Profit	(n/a)	Owned
Teaching Status	(n/a)	Minor	No	(n/a)	No
Beds ³	(n/a)	151	83	(n/a)	71
Number of Discharges	(n/a)	9,340	2,977	(n/a)	151
Occupancy Rate ⁴	(n/a)	79.7%	69.5%	(n/a)	17.1%
Case Mix Index ⁵	(n/a)	1.40	0.61	(n/a)	(n/a)
% Medicare	(n/a)	40.0%	25.0%	(n/a)	69.0%
% Medicaid	(n/a)	5.0%	(n/a)	(n/a)	1.0%
% Outpatient Revenue ⁶	(n/a)	51.0%	12.0%	(n/a)	7.0%
Operating revenue in millions ⁷	(n/a)	\$134.1	\$13.1	(n/a)	\$3.0
2. Financial Ratios⁸					
Profitability ^{9,10}					
Decile ranking among U.S. hospitals	(n/a)	4	7	(n/a)	(n/a)
Leverage ^{11,12}					
Decile ranking among U.S. hospitals	(n/a)	8	9	(n/a)	(n/a)
Liquidity ^{13,14}					
Decile ranking among U.S. hospitals	(n/a)	8	3	(n/a)	(n/a)
Efficiency ^{15,16}					
Decile ranking among U.S. hospitals	(n/a)	3	7	(n/a)	(n/a)
B. Nursing Data¹⁷					
	National Average				***
Nursing Intensity: Nursing Hours Per Patient Day	10.25	11.11	2.22	7.40	8.00
Skill mix: Percent RN to Total Nursing	90%	100%	91%	94%	77%
Adjusted Daily Census to FTE RNs	0.87	0.72	3.95	1.15	1.30
Adjusted Daily Census per FTE LPNs	7.75	(n/a)	41.50	17.14	4.33
Adjusted Daily Census per RN + LPN	0.78	0.72	3.61	1.08	1.00
Adjusted to Daily Census per Total nursing staff	0.61	0.57	3.61	0.88	1.00
Ratio of RN:LPN	0.70	0.79	0.91	0.76	0.77

Notes

1. Thomson Healthcare Profiles of U.S. Hospitals 2007 - Reflects federal fiscal year 2004-2005 cost data available for each hospital
 2. Based on 2005 Medicare cost reports
 3. Average number of total facility beds in service operated by the hospital.
 4. Ratio of the hospitals average daily census to the number of beds in service
 5. Complexity of the Medicare cases treated by a hospital relative to the complexity of the national average of all Medicare hospital cases
 6. Ratio of outpatient gross revenue to total gross patient revenue, expressed as a percentage
 7. Sum of net patient revenue and all other operating revenue, does not include investment income or donations (Millions)

 8. 1-10 ranked format on the basis of the decile that the indicator fell into when compared with other hospitals in a given geographical region. 1 designates the top decile rank and represents the most favorable position for a hospital.
 9. Total profit margin (difference between total revenue and total expense, divided by total revenue)

 10. Profitability Ratio for median decile rank in U.S. is 3.93.
 11. Ratio of long-term debt to net fixed assets

 12. Leverage ratio for median decile rank in U.S. is 0.68.
 13. Ratio of current assets to current liabilities

 14. Liquidity ratio for median decile rank in U.S. is 1.99.
 15. Case Mix Index and Wage Adjusted Expense per Discharge

 16. Efficiency ratio for median decile rank in U.S. is 5,465
 17. Source: 2006 American Hospital Association Annual Survey.
- * Hospital CMS reimbursement type: disproportionate share of low-income patients
- (n/a) Not applicable or not available