

## **Appendix G: Hospital Statements**

CCORP provided each hospital with a preliminary report containing the risk-adjusted models, explanatory materials, and results for all hospitals. Hospitals were given a 60-day review period to submit statements to CCORP for inclusion in this report. Two hospitals submitted statements, which are included here.



**Kaweah Delta  
Health Care District**

August 1, 2012

Holly Hoegh, Ph.D.  
Manager, Clinical Data Programs  
Office of Statewide Health Planning and Development  
400 R Street, Room 250  
Sacramento, CA 95811

#### CCORP Statement

We appreciate the opportunity to comment on the 2010 California CABG Outcomes Reporting Program (CCORP) results. As part of our commitment to patient safety and clinical quality we have reported our outcome data since our program began in 1996. In the Spring of 2011, from our own analysis of our 2010 data, we identified the need to improve our risk-adjusted mortality rate for isolated CABG surgery. Between Spring and Fall 2011 we took actions that resulted in the following:

- We retained an outside firm to review the data from 100% of 2010 CABG cases. This external audit confirmed our need to take action.
- We instituted weekly Physician meetings to discuss cases, to monitor results, and to identify and to implement improvements in our processes.
- We reviewed our order sets, protocols and practices to assure they are consistent with proven best practices.
- We terminated our existing exclusive contract for cardiac surgery and we contracted with a new group that includes two of the four surgeons previously performing heart surgery at Kaweah Delta.

When we become aware of opportunities to improve, we investigate and implement changes to achieve improvements without delay. Thanks to the hard work of the Medical Staff and of our employees we know our 2011 risk-adjusted mortality rate for isolated CABG to be better than expected per Society of Thoracic Surgeons (STS) criteria. We are confident when the next wave of CCORP data is released, the improvement will be evident.

Sincerely,

Mark D. Garfield, MD, FACP, FCCP  
Vice President/CMO Kaweah Delta Medical Center

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## **WESTERN MEDICAL CENTER SANTA ANA**

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August 3, 2012

Holly Hoegh, Ph.D.  
Manager, Clinical Data Programs  
Office of Statewide Health Planning and Development  
400 R Street Room 250  
Sacramento CA 95811

Dear Dr. Hoegh:

Western Medical Center Santa Ana has been providing quality patient care and services to our community since 1902.

We are a tertiary referral center, providing a level of complex care to many specialties including cardiovascular service, Level II trauma, neurosurgical receiving, Burn Services and Stroke Receiving Center.

In the 2009-2010 report for CABG patients an error was identified in the reporting under Post Operative Stroke results.

A data entry error occurred for the one case indicating a post operative stroke. In review of the medical record and coding at discharge, there was no post operative stroke of the patient. The error was discovered after the period available for data correction.

Therefore, for WMCSA the observed post operative stroke rate would be **zero (0) not 1.23** for the 2009-2010 review period.

Sincerely,



Dan Brothman  
Chief Executive Officer

*Western Medical Center  
Celebrating 100 Years of Caring*