



Joseph Parker, Ph.D.
Director
Healthcare Outcomes Center
Office of Statewide Health Planning and Development
400 R Street, Room 250
Sacramento, CA 95811

Dear Dr. Parker,

As consumers take more personal responsibility for evaluating the quality of care available at providers in their communities, OSHPD's publication of AHRQ inpatient mortality indicators is another piece in a complex puzzle. This letter serves to amplify the hospital's results posted on OSHPD's website.

Regional Medical Center of San Jose's performance on the selected indicators shows the hospital's mortality rates improved on four of five measures, and the hospital is performing on a par with community hospitals throughout the state.

In addition to substantive improvement on craniotomy, stroke and hip fracture mortality, the hospital posted dramatic improvement in mortality related to gastro-intestinal bleeding.

Because snapshots like this presentation of data by OSHPD must by their nature have specific end-dates for reporting, they cannot reflect progress made since 2007 nor can they measure the improved use of processes that can improve patient outcomes.

Regional's mortality rate for PTCA, commonly known as cardiac cath procedures, in 2006 and 2007 was not as good as other hospitals. Since those data collection periods, the hospital has taken substantial steps to improve the care of cardiac patients.

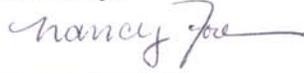
For example, evidence shows that heart attack patients are more likely to have good outcomes when the time from arrival at the emergency department to intervention in a cardiac cath lab is 90 minutes or less. In 2006, about half our heart attack patients met this threshold. In 2007, almost 70 percent of our heart attack patients did. In the first two quarters of 2008, 100 percent of our heart attack patients received cath lab intervention in 90 minutes or less. This is significant improvement. Preliminary internal data indicates that this and other process improvements will substantially impact our PTCA mortality rates positively for this year.

Regional Medical Center is accredited by the Joint Commission as a Primary Stroke Center. Regional is an American College of Surgeons verified Level II Trauma Center. Recently, Regional became part of the first network of Silicon Valley hospitals to earn accreditation as a Chest Pain Center.

These accreditations are achievements in themselves. More importantly, undergoing the accreditation process is an indication of the hospital's willingness to open our processes to objective third party review. As part of our continuous evaluation and performance improvement processes, these in-depth surveys increase our opportunity to improve outcomes for patients. The accreditation process dives deep into the hospital's use of evidence-based medicine and best demonstrated practices.

Consumers who access OSHPD's website are taking an important step in informing themselves about their healthcare choices. We encourage consumers to utilize this website and other objective sources of widely-accepted benchmarked data as part of their decision-making process. Use the information as part of your conversation with your physician about where you will receive your hospital-based services.

Sincerely,

A handwritten signature in cursive script that reads "Nancy Fore". The signature is written in black ink and includes a long horizontal flourish at the end.

Nancy Fore, RN
Chief Quality Officer