

Accreditation Quality Report







Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the prevention of medical errors such as surgery on the wrong side of the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

Mark R. Chassin, MD, MPP, MPH President of the Joint Commission

DBA: Adventist Health St. Helena, 10 Woodland Road, Saint Helena, CA



Summary of Quality Information

Symbol Key

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below the target range/value.
••	This Measure is not applicable for this organization.
•	Not displayed

Footnote Key

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
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- **11.** There were no eligible patients that met the denominator criteria.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🮯 Hospital	Accredited	2/25/2016	2/24/2016	2/24/2016
olimitation Laboratory	Accredited	12/11/2015	12/21/2017	12/21/2017

Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS) Pathology and Clinical Laboratory

Hospital

Advanced Certification	Certification Decision	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	Review Date
Advanced Total Hip and Total Knee Replacement	Certification	1/11/2017	11/11/2016	11/11/2016

		Compared to other Joint Organiz	
		Nationwide	Statewide
Hospital	2016National Patient Safety Goals	\odot	*
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(m) ²	2 ²
Jul 2016 - Jun 2017	Immunization	(m) ²	1 1 1 1 1 1 1 1 1 1
	Perinatal Care	2 ²	1
Laboratory	2015National Patient Safety Goals	${}^{\odot}$	*

The Joint Commission only reports measures endorsed by the National Quality Forum.



Locations of Care

* Primary Location

Locations of Care	Available Services		
St. Helena Hospital DBA: St. Helena Physical Therapy-Napa Valley 661 Main Street, Suite 100 Saint Helena, CA 94574 St. Helena Hospital *	Services: • Outpatient Clinics (Outpatient) Joint Commission Advanced Certification Programs:		
DBA: Adventist Health St.	Advanced Total Hip and Total Knee Replacement		
Helena 10 Woodland Road Saint Helena, CA 94574	Other Clinics/Practices located at this site: • Martin-O'Neil Cancer Center Services: • Behavioral Health (24-hour • Medical ICU (Intensive Care		
	Acute Care/Crisis Stabilization - Adult) Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiotonacic Surgery (Surgical Services) Cardiotonacic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Eastroes) Cardiotonacic Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Cardiotonacic Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Cantore Those Care Unit (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Canto Endoscopy Lab (Imaging/Diagnostic Services) Care Endoscopy Lab (Imaging/Diagnostic Services) Cares) Eabor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Aute and the services (Intervice) Medical /Surgical Unit (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient)		



Locations of Care

* Primary Location

Locations of Care	Available Services
St. Helena Hospital DBA: St. Helena Medical Specialties-Cardiology 999 Adams Street, Suite 106 Saint Helena, CA 94574	Other Clinics/Practices located at this site: • Cardiac Rehabilitaion Clinic Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
St. Helena Hospital DBA: Coon Joint Replacement Institute 6 Woodland Road, Suite 202 Saint Helena, CA 94574	Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
St. Helena Hospital DBA: St. Helena Women's Center-Mammography Unit 821 S. St. Helena Highway Saint Helena, CA 94574	Services: • Outpatient Clinics (Outpatient)



2016 National Patient Safety Goals

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigotimes
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	\bigotimes
	Reconciling Medication Information	Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ୍ର ତ
	Preventing Surgical Site Infections	\bigcirc
	Preventing Catheter-Associated Urinary Tract Infection	\bigcirc
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	\bigotimes
	Marking the Procedure Site	\bigotimes
	Performing a Time-Out	\bigotimes

Symbol Key

The organization has met the National Patient Safety Goal. The organization has not met the e National Patient Safety Goal. The Goal is not applicable for this organization.



National Quality Improvement Goals

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	М	leasure Area	Explanation	Nationwide	Statewide
		mergency epartment	This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	™ ²	○ ²

			Accredit	other Joint ed Organiz		
Measure	Explanation	Hospital Results	Iationwide Top 10% Scored at Most:	Weighte d Median:	State Top 10% Scored at Most:	Weighte d Median:
Admit Decision Time to ED Departure Time for Admitted Patients	The amount of time (in minutes) it takes from the time the physician decides to admit a patient into the hospital from the Emergency Department until the patient actually leaves the ED to go to the inpatient unit.	2 105.00 minutes 176 eligible Patients	55.00	131.00	75.61	177.85
Median Time from ED Arrival to ED Departure for Admitted ED Patients	The amount of time (in minutes) from the time the patient arrives in the Emergency Department until the patient is admitted as an inpatient into the hospital.	240.00 minutes 199 eligible Patients	204.00	317.00	251.63	380.79

The Joint Commission only reports measures endorsed by the National Quality Forum.

This information can also be viewed at www.hospitalcompare.hhs.gov -- Null value or data not displayed.

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National Quality Improvement Goals

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	Evalenation	Nationwide	Statewide
Measure Area	Explanation	Hadoninao	

		Со	mpared to c Accredit	other Joint ed Organiz		n
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Measure	Explanation	Hospital Results	Top 10% Scored at Least:	0	Top 10% Scored at Least:	Average Rate:
Influenza Immunization	This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated.	92% of 544 eligible Patients	100%	94%	100%	94%

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10 Woodland Road, Saint Helena, CA



National Quality Improvement Goals

Reporting Po	eriod: July 2016 - June 2017		
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	Comr	to other Joint nission Organizations	
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	∞ ²	№ ²

		Compared to other Joint Commission Accredited Organizations				
		Nationwide			Statewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	№ ⁴	100%	98%	100%	98%
Elective Delivery	This measure reports the overall number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to less than 39 weeks gestation. An elective delivery is the delivery of a newborn(s) when the mother was not in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section.	3% of 30 eligible Patients	0%	2%	0%	2%
Exclusive Breast Milk Feeding	This measure reports the overall number of newborns who are exclusively breast milk fed during the newborns entire hospitalization. Exclusive breast milk feeding is when a newborn receives only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines.	76% of 99 eligible Patients	74%	52%	80%	63%



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2015 National Patient Safety Goals

Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø

Symbol Key

The organization has met the National Patient Safety Goal.
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