



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



Summary of Quality Information

Symbol Key

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Footnote Key

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4. The measure meets the Privacy Disclosure Threshold rule.
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Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care	Accredited	10/7/2015	8/16/2018	8/16/2018
Hospital	Preliminary Denial of Accreditation	8/18/2018	8/17/2018	8/17/2018

The following standard(s) were found to be out of compliance:

- Identify patients at risk for suicide. Note: This requirement applies only to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals.
- Medication orders are clear and accurate.
- Ongoing professional practice evaluation information is factored into the decision to maintain existing privilege(s), to revise existing privilege(s), or to revoke an existing privilege prior to or at the time of renewal.
- Staff and licensed independent practitioners performing waived tests are competent.
- Staff are competent to perform their responsibilities.
- The governing body is ultimately accountable for the safety and quality of care, treatment, and services.
- The hospital assesses and manages the patient's pain and minimizes the risks associated with treatment.
- The hospital assesses and reassesses its patients.
- The hospital assesses and reassesses the patient and his or her condition according to defined time frames.
- The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
- The hospital collects data to monitor its performance.
- The hospital defines and verifies staff qualifications.
- The hospital documents the patient's discharge information.
- The hospital effectively manages its programs, services, sites, or departments.
- The hospital establishes and maintains a safe, functional environment. Note: The environment is constructed, arranged, and maintained to foster patient safety, provide facilities for diagnosis and treatment, and provide for special services appropriate to the needs of the community.
- The hospital evaluates and reevaluates the patient who is restrained or secluded.
- The hospital evaluates the effectiveness of its Emergency Operations Plan.
- The hospital has a reliable emergency electrical power source.
- The hospital has an antimicrobial stewardship program based on current scientific literature.
- The hospital has policies and procedures that guide and support patient care, treatment, and services.
- The hospital implements its infection prevention and control plan.
- The hospital inspects, tests, and maintains emergency power systems. Note: This standard does not require hospitals to have the types of emergency power equipment discussed below. However, if these types of equipment exist within the building, then the following maintenance, testing, and inspection requirements apply.
- The hospital inspects, tests, and maintains utility systems. Note: At times, maintenance is performed by an external service. In these cases, hospitals are not required to possess maintenance documentation but must have access to such documentation during survey and as needed.
- The hospital maintains complete and accurate medical records for each individual patient.



Summary of Quality Information

- The hospital maintains fire safety equipment and fire safety building features. Note: This standard does not require hospitals to have the types of fire safety equipment and building features described below. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.
- The hospital manages risks associated with its utility systems.
- The hospital manages risks related to hazardous materials and waste.
- The hospital performs quality control checks for waived testing on each procedure. Note: Internal quality controls may include electronic, liquid, or control zone. External quality controls may include electronic or liquid.
- The hospital plans the patient's care.
- The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke.
- The hospital provides and maintains fire alarm systems.
- The hospital provides and maintains systems for extinguishing fires.
- The hospital provides care, treatment, and services as ordered or prescribed, and in accordance with law and regulation.
- The hospital uses restraint or seclusion safely.
- The medical record contains information that reflects the patient's care, treatment, and services.

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

Psychiatric Hospital

Special Quality Awards

- 2013 Top Performer on Key Quality Measures®
- 2012 Top Performer on Key Quality Measures®

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		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Behavioral Health Care	2015 National Patient Safety Goals		*
Hospital	2018 National Patient Safety Goals		*
Reporting Period: Jan 2017 - Dec 2017	National Quality Improvement Goals:		
	Hospital-Based Inpatient Psychiatric Services	²	²



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



Texas Laurel Ridge Hospital, LP

DBA: Laurel Ridge Treatment Center,
17720 Corporate Woods Drive, San Antonio, TX

Org ID: 1407



Locations of Care




* Primary Location

Locations of Care	Available Services
Texas Laurel Ridge Hospital, LP * DBA: Laurel Ridge Treatment Center 17720 Corporate Woods Drive San Antonio, TX 78259	Services: <ul style="list-style-type: none"> Addiction Care/Adult (Non-detox - Adult) Behavioral Health/Child/Youth (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Residential Care - Child/Youth) (Partial - Adult) Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult) (Non-detox - Adult) (Detox/Non-detox - Adult) Family Support (Non 24 Hour Care)
Texas Laurel Ridge Hospital, LP DBA: Laurel Ridge at Highpoint Center 1603 Babcock Suite 148 San Antonio, TX 78229	Services: <ul style="list-style-type: none"> Behavioral Health (Day Programs - Child/Youth) (Partial - Child/Youth) Family Support (Non 24 Hour Care)
Texas Laurel Ridge Hospital, LP DBA: Mission Resiliency at Laurel Ridge 1900 E. Elms Road Suite 203 Killeen, TX 76542	Services: <ul style="list-style-type: none"> Addiction Care/Adult (Non-detox - Adult) Behavioral Health (Day Programs - Adult) (Partial - Adult) Chemical Dependency (Day Programs - Adult) (Partial - Adult) (Non-detox - Adult) Family Support (Non 24 Hour Care)



2015 National Patient Safety Goals

Symbol Key

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

Behavioral Health Care




Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	

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2018 National Patient Safety Goals

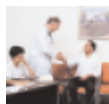
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Hospital

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



National Quality Improvement Goals

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Compared to other Joint
Commission

Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	²	²

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Overall Rate	This measure reports the overall number of patients screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	 99% of 1370 eligible Patients	100%	95%	100%	97%



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* This information can also be viewed at www.hospitalcompare.hhs.gov

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Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years)	This measure reports the number of children age (1-12 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	 99% of 269 eligible Patients	100%	97%	100%	98%



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Compared to other Joint
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Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	 99% of 321 eligible Patients	100%	96%	100%	97%



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Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	²	²

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Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adult (18-64 years)	This measure reports the number of adults age (18-64 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	 99% of 681 eligible Patients	100%	95%	100%	97%



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Compared to other Joint Commission Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	 ²	 ²

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Older Adult (≥ 65 years)	This measure reports the number of older adult (≥ 65 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	 99% of 99 eligible Patients	100%	94%	100%	95%



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Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	2	2

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Overall Rate	This is a proportion measure. A proportion measure is a measure which shows the number of occurrences over the entire group within which the occurrence should take place. The numerator is expressed as a subset of the denominator. This measure reports the overall number of patients discharged on two or more antipsychotic medications. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands.	4 ----	100%	62%	99%	73%
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	3 ----	100%	43%	100%	25%



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		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	⁴ ----	100%	50%	100%	47%



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Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	³ ----	100%	63%	99%	75%



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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

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Footnote Key

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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.
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11. There were no eligible patients that met the denominator criteria.

Compared to other Joint
Commission

Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	²	²

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Older Adults Age 65 and Older	This measure reports the number of patients age 65 and older discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	⁴ ----	100%	59%	100%	71%
Hours of Physical Restraint Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	 0.02 (37 Total Hours in Restraint)	N/A	0.48	N/A	0.20



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Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	 0.08 (15 Total Hours in Restraint)	N/A	0.33	N/A	0.18
Hours of Physical Restraint Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	 0.04 (11 Total Hours in Restraint)	N/A	0.23	N/A	0.23



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Compared to other Joint Commission
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Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average Rate:	Statewide	Average Rate:
			Top 10% Scored at Least:		Top 10% Scored at Least:	
Hours of Physical Restraint Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	 0.01 (12 Total Hours in Restraint)	N/A	0.57	N/A	0.21
Hours of Physical Restraint Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	 0.00 (0 Total Hours in Restraint)	N/A	0.13	N/A	0.04
Hours of Seclusion Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	 0.09 (148 Total Hours in Seclusion)	N/A	0.36	N/A	0.08



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Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average Rate:	Statewide	Average Rate:
			Top 10% Scored at Least:		Top 10% Scored at Least:	
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	 0.28 (52 Total Hours in Seclusion)	N/A	0.59	N/A	0.35
Hours of Seclusion Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	 0.21 (55 Total Hours in Seclusion)	N/A	0.20	N/A	0.14
Hours of Seclusion Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	 0.04 (41 Total Hours in Seclusion)	N/A	0.42	N/A	0.06
Hours of Seclusion Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	 0.00 (0 Total Hours in Seclusion)	N/A	0.04	N/A	0.03



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