

DBA: Centura Penrose Hospital, 2222 North Nevada Avenue, Colorado Springs, CO

Org ID: 1769

Accreditation Quality Report





Version: 8 Date: 11/4/2022

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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.

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Home Care	Accredited	3/14/2019	3/13/2019	3/13/2019
Hospital	Accredited	7/2/2022	7/1/2022	9/1/2022

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

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	w Last On-Site Review Date
Primary Stroke Center	Certification	1/8/2022	1/7/2022	1/7/2022

Other Accredited Programs/Services

• Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2014 Hospital Magnet Award

2012 Gold Plus Get With The Guidelines - Stroke

2012 Silver - The Medal of Honor for Organ Donation

For further information and explanation of the			Compared to other Joint Commission Acc		
Quality Report contents,			Nationwide	Statewide	
refer to the "Quality Report User Guide."	Home Care	2019National Patient Safety Goals	Ø	₩ *	
	Hospital	2022National Patient Safety Goals	Ø	((A) *	
		National Quality Improvement Goals:			
	Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	(4) 2	ND 2	

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

This organization's performance is below the target range/value.

Symbol Key

ossible results.

This Measure is not applicable for this

This organization achieved the best

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- rganization.
- Not displayed

Footnote Key

- 1. The Measure or Measure Set was not
- The Measure Set does not have an overall result.
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Locations of Care

Locations of Care	Available S	Services
Cardiac & Pulmonary Rehabilitation 3030 North Circle Drive, Suite 214, 215, & 217 Colorado Springs, CO 80909	Services: • Outpatient Clinics (Outpatient)	
Catholic Health	Joint Commission Advanced C	Certification Programs:
Initiatives of Colorado DBA: Centura St Francis Hospital 6001 East Woodmen Road	Primary Stroke Center Services: Cardiac Catheterization Lab	Nuclear Medicine
Colorado Springs, CO 80923	 Cardiac Catheterization Lab (Surgical Services) CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit) Neurosurgery (Surgical Services) 	 Nuclear Medicine (Imaging/Diagnostic Services) Ophthalmology (Surgical Services) Orthopedic Surgery (Surgical Services) Orthopedic/Spine Unit (Inpatient) Outpatient Clinics (Outpatien Plastic Surgery (Surgical Services) Post Anesthesia Care Unit (PACU) (Inpatient) Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization) Sleep Laboratory (Sleep Laboratory) Sterile Medication Compounding (Inpatient) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Ultrasound (Imaging/Diagnostic Services)

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Locations of Care

* Primary Location

Locations of Care

Penrose Hospital * 2222 N. Nevada Ave. Colorado Springs, CO 80907

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Services:

- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)

Medical ICU (Intensive Care Unit)

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- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

St. Francis Cancer Center

6031 East Woodmen Road Suite 150 Colorado Springs, CO 80923

Services:

- Anesthesia (Outpatient)
- Perform Invasive Procedure (Outpatient)
- Single Specialty Practitioner (Outpatient)

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Locations of Care

* Primary Location

Locations of Care

Available Services

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The Center for Women's Imaging at St. Peregrine 6031 East Woodmen Road Suite 240 Colorado Springs, CO 80923

Services:

- Outpatient Clinics (Outpatient)
- Perform Invasive Procedure (Outpatient)

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2019 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.

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

Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the safety of using medications.	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø

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2022 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	Ø
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	Ø
	Reconciling Medication Information	Ø
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Commission			
Accredited (Organizations		
Nationwide	Statewide		

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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				n
Measure	Explanation	Hospital Results	Top 10% Scored	Average Rate:	State Top 10% Scored	ewide Average Rate:
		, tooding	at Least:		at Least:	
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	⊕	16%	25%	14%	22%
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.	2% of 58 eligible Patients	0%	2%	0%	1%
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.	75% of 390 eligible Patients	71%	50%	84%	69%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	5908% of 2234 eligible Patients	212%	1780%	280%	1699%
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	6938% of 2234 eligible Patients	1508%	3084%	1196%	2683%

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National Quality Improvement Goals

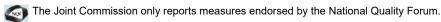
Reporting Period: April 2020 - March 2021

Compared to other Joint

Org ID: 1769

		Accredited 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				
		N	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1029% of 2234 eligible Patients	501%	1303%	414%	984%



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