



# 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](mailto: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

-  This organization achieved the best possible results.
-  This organization's performance is above the target range/value.
-  This organization's performance is similar to the target range/value.
-  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.
7. The Measure results are based on a sample of patients.
8. The number of months with Measure data is below the reporting requirement.
9. The measure results are temporarily suppressed pending resubmission of updated data.
10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
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             | 10/27/2018     | 10/26/2018            | 12/7/2018                |

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

Hospital

|  |  | Compared to other Joint Commission Accredited Organizations  |  |
|--|--|--|--|
|  |  | Nationwide   | Statewide  |
| Hospital                                 | <b>2018 National Patient Safety Goals</b>  |                 |  *              |
| Reporting Period:<br>Apr 2017 - Mar 2018 | <b>National Quality Improvement Goals:</b> |  |  |
|  | Immunization                               |  <sup>2</sup> |  <sup>2</sup> |



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



# Locations of Care




\* Primary Location

| Locations of Care   | Available Services  |
|---|---|
| <b>Levindale Hebrew Geriatric Center and Hospital, Inc. *</b><br>2434 West Belvedere Avenue<br>Baltimore, MD 21215-5299 | <b>Services:</b> <ul style="list-style-type: none"> <li>Behavioral Health (Day Programs - Adult) (Partial - Adult)</li> <li>Dementia Care</li> <li>Geriatric Psychiatric Unit</li> <li>Inpatient Unit (Inpatient)</li> <li>Long Term Acute Care Unit (Inpatient)</li> <li>On Site Pharmacy</li> <li>Rehabilitation Services</li> <li>Skilled Nursing Care</li> <li>Traumatic Brain Injury</li> <li>Ventilator Services</li> </ul> |



















## 2018 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.

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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

Reporting Period: April 2017 - March 2018



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Compared to other Joint Commission Accredited Organizations

| Measure Area | Explanation  | Nationwide  | Statewide   |
|--------------|--|---|---|
| Immunization | This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza. |  2 |  2 |

Compared to other Joint Commission Accredited Organizations

| Measure                | Explanation   |   |                          |         |                          |         |
|------------------------|---|---|--------------------------|---------|--------------------------|---------|
|                        |   | Hospital Results  | Nationwide               | Average | Statewide                | Average |
|                        |   |   | Top 10% Scored at Least: | Rate:   | Top 10% Scored at Least: | 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. | <br>99% of 308 eligible Patients | 100%                     | 94%     | 100%                     | 94%     |



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\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)

---- Null value or data not displayed.

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