

# Accreditation Quality Report





Quality Check<sup>®</sup>



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: DivineSavior Healthcare, Inc., 2817 New Pinery Road, Portage, WI



# **Summary of Quality Information**

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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.
Э	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	Last Full Survey	Last On-Site
		Date	Date	Survey Date
🮯 Home Care	Accredited	11/30/2016	8/28/2019	8/28/2019
🥝 Hospital	Accredited	12/2/2016	8/30/2019	10/7/2019
olimitation States and	Accredited	11/30/2018	11/29/2018	11/29/2018
Ø Nursing Care Center	Accredited	12/2/2016	8/28/2019	8/28/2019

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

Hospital

#### **Special Quality Awards**

2013 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Home Care	2016National Patient Safety Goals	${}^{\bigcirc}$	<b>*</b>	
Hospital	2016National Patient Safety Goals	$\bigotimes$	· • •	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	2 <sup>2</sup>	<b>()</b> <sup>2</sup>	
Apr 2018 - Mar 2019	Perinatal Care	(m) <sup>2</sup>		
Laboratory	2018National Patient Safety Goals	Ø	<b>*</b>	
Nursing Care Center	2016National Patient Safety Goals	Ø	<b>∞</b> *	

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

DBA: DivineSavior Healthcare, Inc., 2817 New Pinery Road, Portage, WI



# **Locations of Care**

#### \* Primary Location Available Services Locations of Care **Divine Savior Healthcare Crossroads Clinic** Services: DBA: Divine Savior General Laboratory Tests Healthcare, Inc. • Outpatient Clinics (Outpatient) N4390 Crossroads Clinic Road Oxford, WI 53952-9465 **Divine Savior** Healthcare, Inc. \* Services: DBA: Divine Savior • CT Scanner Normal Newborn Nursery Healthcare, Inc. (Imaging/Diagnostic (Inpatient) 2817 New Pinery Road Nuclear Medicine Services) Portage, WI 53901-0387 • Ear/Nose/Throat Surgery (Imaging/Diagnostic Services) (Surgical Services) Ophthalmology (Surgical EEG/EKG/EMG Lab Services) Orthopedic Surgery (Surgical (Imaging/Diagnostic • Services) Services) Gastroenterology (Surgical • Outpatient Clinics (Outpatient) Services) Positron Emission Tomography • General Laboratory Tests (PET) (Imaging/Diagnostic • GI or Endoscopy Lab Services) (Imaging/Diagnostic Post Anesthesia Care Unit (PACU) (Inpatient) Services) Gynecological Surgery Sleep Laboratory (Sleep (Surgical Services) Laboratory) Gynecology (Inpatient) Sterile Medication Hazardous Medication Compounding (Inpatient) Compounding (Inpatient) Surgical ICU (Intensive Care Inpatient Unit (Inpatient) Unit) Labor & Delivery (Inpatient) Teleradiology Magnetic Resonance (Imaging/Diagnostic Services) Imaging (Imaging/Diagnostic Toxicology Services) Ultrasound Medical /Surgical Unit (Imaging/Diagnostic Services) Urology (Surgical Services)

- (Inpatient) Medical ICU (Intensive Care
- Unit)Non-Sterile Medication Compounding (Inpatient)

#### Services:

Divine Savior Healthcare, Inc.-

Healthcare, Inc. 102 Gillette St Pardeeville, WI 53954 Tivoli at Divine Savior Healthcare, Inc.

Pardeeville Clinic

DBA: Divine Savior

DBA: Tivoli at Divine

2805 Hunters Trail

Portage, WI 53901

Savior Healthcare, Inc.

- General Laboratory Tests
- Outpatient Clinics (Outpatient)

#### Services:

- Dementia Care
- General Laboratory Tests
- Home Health Aides
- Home Health, Non-Hospice Services
- Medical Social Services
  - Occupational Therapy
- Physical Therapy
- Rehabilitation Services
- Skilled Nursing Care
- Skilled Nursing Services
- Speech Language Pathology
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# **2016 National Patient Safety Goals**

### 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

#### 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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# **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	Ø
	Reconciling Medication Information	$\bigcirc$
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	$\bigcirc$
	Preventing Surgical Site Infections	$\bigcirc$
	Preventing Catheter-Associated Urinary Tract Infection	<u>ତ</u> ତ୍ର ତ
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	$\bigcirc$

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# **National Quality Improvement Goals**

e best	Reporting Per	riod: April 2018 - March 2019		
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ice is ie. ice is			Compared to Comm	o other Joint iission
			Accredited C	rganizations
	Measure Area	Explanation	Nationwide	Statewide
	Emergency Department	This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	<b>⊙</b> <sup>2</sup>	<b>™</b> <sup>2</sup>

		Со	mpared to c Accredit	other Joint ed Organiz		on
		1	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Scored	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.	VCD <sup>2</sup> 71.00 minutes 1090 eligible Patients	55.00	136.00	42.26	73.70

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

--- Null value or data not displayed.

### Symbol Key

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 This organization's performance is similar to the target range/value.
 This organization's performance is below the target range/value.
 Not displayed

#### **Footnote Key**

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# **National Quality Improvement Goals**

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This organization's performance is similar to the target range/value.				to other Joint nission
This organization's performance is below the target range/value.				Organizations
Not displayed	Measure Area	Explanation	Nationwide	Statewide
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>⊘</b> <sup>2</sup>	<b>™</b> 2

		Compared to other Joint Commission Accredited Organizations				n
Measure	Explanation	N Hospital Results	Top 10% Scored at Least:	Average Rate:	State Top 10% Scored at Least:	wide 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.	<b>ND</b> <sup>4</sup>	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.	0% of 28 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.	75% of 187 eligible Patients	73%	52%	79%	62%

#### This organization's performance i above the target range/value.

Symbol Key

This organization's performance i  $\oslash$ similar to the target range/value. This organization's performance i e below the target range/value.

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# **2018 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

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 The Goal is not applicable for this organization.

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# **2016 National Patient Safety Goals**

## **Nursing Care Center**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	$\bigotimes$
Improve the safety of using medications.	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	$\bigotimes$
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Central-Line Associated Blood Stream Infections	$\bigotimes$
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
Prevent health care-associated pressure ulcers (decubitus ulcers).	Assessing Resident Risk for Pressure Ulcers	Ø

### 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.