

Accreditation Quality Report





Version: 7 Date: 5/9/2019 2300 North Edward Street, Decatur, IL



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

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Decatur Memorial Hospital

2300 North Edward Street, Decatur, IL







Summary of Quality Information

| Accreditation Programs | Accreditation Decision | Effective Date | Last Full Surve | y Last On-Site Survey Date |
|------------------------|-------------------------------|-------------------|-----------------|-------------------------------|
| Home Care | Accredited | 11/17/2018 | 11/16/2018 | 12/19/2018 |
| Hospital | Accredited | 2/6/2016 | 11/16/2018 | 12/28/2018 |

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

Home Health Agency

Hospice Agency

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

Decatur Memorial Hospital

2875 N Water St, Decatur, IL. 62526

Hospital

| Advanced Certification | Certification Decision | Effective | Last Full Review | v Last On-Site |
|---------------------------------------|-------------------------------|------------|-------------------------|--------------------|
| Programs | | Date | Date | Review Date |
| Chronic Obstructive Pulmonary Disease | Certification | 11/10/2018 | 11/9/2018 | 11/9/2018 |
| Primary Stroke Center | Certification | 9/11/2018 | 9/10/2018 | 9/10/2018 |
| Certified Programs | Certification Decision | Effective | Last Full Review | v Last On-Site |
| | | Date | Date | Review Date |
| Chronic Obstructive Pulmonary Disease | Certification | 11/9/2018 | 11/8/2018 | 11/8/2018 |

Other Accredited Programs/Services

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

Special Quality Awards

2012 Gold Plus Get With The Guidelines - Stroke

| | Compared to o | ther Joint Commission Accredited Organizations |
|---------------------------------------|---------------|---------------------------------------------------|
| | Nationwide | e Statewide |
| Home Care 2018National Patient Safety | Goals | ∞ * |

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

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

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- The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
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Summary of Quality Information

| | | Compared to other Joint Commission Accredited Organizations | | | |
|------------------------|-----------------------------------------------|-------------------------------------------------------------|-----------|--|--|
| | | Nationwide | Statewide | | |
| Hospital | 2016National Patient Safety Goals | Ø | ₩A * | | |
| | National Quality Improvement Goals: | | | | |
| Reporting Period: | Emergency Department | № 2 | ND 2 | | |
| Oct 2017 - Sep 2018 | Hospital-Based Inpatient Psychiatric Services | ND 2 | ND 2 | | |
| | Immunization | ND 2 | ND 2 | | |
| | Perinatal Care | ND 2 | ND 2 | | |

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2300 North Edward Street, Decatur, IL

Org ID: 4632







Locations of Care

* Primary Location

Locations of Care

Decatur Memorial

Hospital

DBA: DMH Corporate

Health Services 2120 North 27th Street Decatur, IL 62526 Available Services

Services:

• Outpatient Clinics (Outpatient)







Locations of Care

* Primary Location

Locations of Care

Decatur Memorial Hospital * 2300 North Edward:

2300 North Edward Street Decatur, IL 62526

Available Services

Joint Commission Advanced Certification Programs:

- Chronic Obstructive Pulmonary Disease
- Primary Stroke Center

Joint Commission Certified Programs:

• Chronic Obstructive Pulmonary Disease

Other Clinics/Practices located at this site:

• Illinois Heart Specialists

Services:

- Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)
- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Community Integration (Non 24 Hour Care)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- 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)
- Gynecology (Inpatient)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)

- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

2300 North Edward Street, Decatur, IL

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Locations of Care

| Locations of Care | Available Services |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Decatur Memorial Hospital DBA: South Shores Imaging Center 1689 South Franklin Decatur, IL 62521 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: DMH Medical Equipment Company 2875 N Water St Decatur, IL 62526 | Services: Blood Glucose Monitors (non-mail order) Breast Prostheses and Accessories Canes and Crutches Clinical Respiratory Commodes Continuous Passive Motion (CPM) Device Continuous Positive Airway Pressure Custom Orthoses Fabricated Durable Medical Equipment Enteral Equipment and/or Supplies Enteral Nutrients Hospital Beds - Electric Off The Shelf Orthoses Ostomy Supplies Oxygen Patient Lifts and Accessories Penile Pumps Prosthetics (Home Medical Equipment) Respiratory Assist Devices Suction Pump Supplies Support Surfaces for Beds (Used) Surgical Dressings Tracheostomy Supplies Urological Supplies Vertilators All Types Voice Prostheses Walkers, Canes and Crutches Wheelchairs - Manual Non-Custom Wheelchairs-Standard Manual Related Accessories and Repairs |
| Decatur Memorial Hospital DBA: Sullivan Medical Center 1220 West Jackson Street Sullivan, IL 61951 | Other Clinics/Practices located at this site: • Physical Therapy at Sullivan • Sullivan Medical Center Services: • Outpatient Clinics (Outpatient) |
| Decatur Memorial Hospital DBA: Physical Therapy at East Gate 1830 South 44th Street Decatur, IL 62521 | Services: • Outpatient Clinics (Outpatient) |
| Decatur Memorial Hospital DBA: Forsyth Imaging Center 389 West Weaver Road Forsyth, IL 62535 | Services: • Outpatient Clinics (Outpatient) |

Decatur, IL 62526

2300 North Edward Street, Decatur, IL

Org ID: 4632







Locations of Care

| Other Clinics/Practices located at this site: Forsyth Family Medicine Kidney Specialists of Central Illinois PT at Forsyth Medical Center Quershi Family Practice Services: Outpatient Clinics (Outpatient) Services: Single Specialty Practitioner (Outpatient) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| |
| |
| Services: • Single Specialty Practitioner (Outpatient) |
| Services: • Outpatient Clinics (Outpatient) |
| Services: Administration of High Risk Medications (Outpatient) Ambulatory Surgery Center (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient) |
| Services: • Single Specialty Practitioner (Outpatient) |
| Services: • Single Specialty Practitioner (Outpatient) |
| Other Clinics/Practices located at this site: |
| • |

Outpatient Clinics (Outpatient)Perform Invasive Procedure (Outpatient)

Services:

* Primary Location

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Locations of Care

| Locations of Care | Available Services |
|-----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Decatur Memorial Hospital DBA: West Hay Medical Center 304 West Hay Street Decatur, IL 62526 | Other Clinics/Practices located at this site: |
| Decatur Memorial Hospital DBA: South Shores Medical Center 550 Southland Drive Decatur, IL 62521 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: Physician Plaza East 1 Memorial Drive Decatur, IL 62526 | Other Clinics/Practices located at this site: • DMH Vein and Vascular Institute • Jordan Youngerman M.D. Services: • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) |
| Decatur Memorial Hospital DBA: Physician Plaza West 2 Memorial Drive Decatur, IL 62526 | Other Clinics/Practices located at this site: |

• Adm

- Administration of High Risk Medications (Outpatient)
- Anesthesia (Outpatient)
- Outpatient Clinics (Outpatient)
- Perform Invasive Procedure (Outpatient)

Decatur Memorial Hospital DBA: DMH Family Medicine

Hospital

Medicine
4775 E. Maryland Street
Decatur, IL 62521
Decatur Memorial

DBA: ENTA Allergy, Head and Neck Institute 101 West McKinley Ave Decatur, IL 62526

Services:

• Single Specialty Practitioner (Outpatient)

Services:

• Single Specialty Practitioner (Outpatient)

2300 North Edward Street, Decatur, IL Org ID: 4632







Locations of Care

| Locations of Care | Available Services |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Decatur Memorial Hospital DBA: Gowdar and Gowdar Family Practice 741 Pershing Road Decatur, IL 62526 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: Sports Medicine & Physical Therapy 2122 North 27th Street Decatur, IL 62526 | Services: • Outpatient Clinics (Outpatient) |
| Decatur Memorial Hospital DBA: Rock Springs Medical Center 330 N. Wyckles Road Decatur, IL 62522 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: DMH Outpatient Senior Behvaioral Health 441 West Hay Street Decatur, IL 62526 | Services: |
| Decatur Memorial Hospital DBA: DMH Shelbyville Medical Clinic 415 North Cedar Shelbyville, IL 62565 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: DMH Monticello Medical Center 777 W. Bridge Street Monticello, IL 61856 | Services: • Single Specialty Practitioner (Outpatient) |
| Decatur Memorial Hospital DBA: DMH Home Health Services 2870 N Main St Decatur, IL 62526 | Other Clinics/Practices located at this site: • DMH Home Health Services-Hospice Services: • Home Health Aides • Occupational Therapy • Physical Therapy • Skilled Nursing Services • Hospice Care • Medical Social Services |
| Decatur Memorial Hospital DBA: Decatur Internal Medicine 2975 N Water St Decatur, IL 62526 | Services: • Outpatient Clinics (Outpatient) |

2300 North Edward Street, Decatur, IL







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.

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 |

Org ID: 4632

2300 North Edward Street, Decatur, IL Org ID: 4632







2016 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 | Ø |
| | Eliminating Transfusion Errors | 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 |
| 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 | Ø |
| | Preventing Central-Line Associated Blood Stream Infections | 0000 |
| | Preventing Surgical Site Infections | Ø |
| | Preventing Catheter-Associated Urinary Tract Infection | 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 |

2300 North Edward Street, Decatur, IL

Org ID: 4632







National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

| | | Compared to other Joint Commission | | |
|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------|--|
| | | Accredited Organizations | | |
| 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. | ⊚ ² | © ² | |

| Compared to other Joint Commission Accredited Organizations | | | | | | |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------|-------------------|-------------------------------|-------------------------|
| | | N | lationwide | | State | ewide |
| Measure | Explanation | Hospital Results | Top 10% Scored at Most: | Weighte d Median: | 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. | 105.00 minutes 707 eligible Patients | 56.00 | 136.00 | 59.99 | 108.34 |
| 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. | 290.00 minutes 707 eligible Patients | 207.00 | 320.00 | 222.48 | 283.92 |

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2300 North Edward Street, Decatur, IL







National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

| | | 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 | | | | n |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------|------------------|--------------------------------|------------------|
| | | | Accredit lationwide | eu Organiz | | wide |
| Measure | Explanation | Hospital Results | | 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 255 eligible Patients | 100% | 94% | 100% | 97% |

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Compared to other Joint

2300 North Edward Street, Decatur, IL







National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

| | | Compared to other Joint Commission Accredited Organizations | | | | on |
|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | | Nationwide | Statewide | | |
| Measure | Explanation | 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. | 3 | 100% | 95% | 100% | 98% |

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Compared to other Joint

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Org ID: 4632







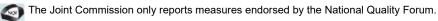
National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Compared to other Joint Commission

| | | 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 | | | | n |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------|------------------|--------------------------------|------------------|
| | | 1 | Nationwide | ou organiz | | ewide |
| Measure | Explanation | Hospital Results | | 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. | ₩ D 3 | 100% | 95% | 100% | 98% |



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2300 North Edward Street, Decatur, IL

Org ID: 4632



Measure Area

Services

Hospital-Based

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Compared to other Joint **Accredited Organizations** Nationwide Statewide This category of evidenced based measures assesses the

№ 2

| Symbol | Key |
|--------|-----|
| | |

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| | | Compared to other Joint Commission Accredited Organizations | | | | n |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | 1 | Nationwide | | State | wide |
| Measure | Explanation | 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 - 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. | 100% of 60 eligible Patients | 100% | 94% | 100% | 97% |

Explanation

overall quality of care given to psychiatric patients.

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2300 North Edward Street, Decatur, IL







National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Accredited Organizations Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

| | | | | other Joint ed Organiz | | on |
|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------|---------------------------|--------------------------------|------------------|
| | | | Nationwide | | State | |
| Measure | Explanation | 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 195 eligible Patients | 100% | 93% | 100% | 97% |

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Org ID: 4632

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2300 North Edward Street, Decatur, IL

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

| | | 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 | |

| | | Cor | npared to o | other Joint ed Organiz | | on |
|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--------------------------------|---------------------------|--------------------------------|------------------|
| | | N | Nationwide | eu Organiz | | ewide |
| Measure | Explanation | 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 persons capacity to meet lifes everyday demands. | 6% of 17 eligible Patients | 100% | 63% | 100% | 65% |
| 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 medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine. | № 3 ———— | 100% | 41% | 3 | 3 |

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| | | Compared to other Joint Commission | | |
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| | | 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 | | | | n |
|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | ١ | lationwide | | State | wide |
| Measure | Explanation | 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 medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine. | 3 | 100% | 51% | 3 | 3 |

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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 | | | | |
|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | ١ | lationwide | | | wide |
| Measure | Explanation | 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 is also being treated with Clozapine. | 17% of 6 eligible Pattents | 100% | 64% | 100% | 73% |

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Measure Area

Explanation

Nationwide

Hospital-Based
Inpatient Psychiatric
Services

Commission
Accredited Organizations

Nationwide

Statewide

This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.

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| | | Compared to other Joint Commission Accredited Organizations | | | | on |
| | | N | lationwide | | | ewide |
| Measure | Explanation | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | |
| 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 medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine. | 0% of 11 eligible Patients | 100% | 57% | 100% | 42% |
| 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. | 0.01 (1 Total Hours in Restraint) | N/A | 0.45 | N/A | 0.55 |

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Measure Area

Services

Hospital-Based

Inpatient Psychiatric





National Quality Improvement Goals

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Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

Compared to other Joint **Accredited Organizations**

| Nationwide | Statewide |
|-------------|------------|
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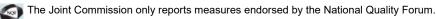
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| | | Compared to other Joint Commission Accredited Organizations | | | | |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | Nationwide Statewide | | | ewide | |
| Measure | Explanation | 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 3 ——— | N/A | 0.34 | 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. | № 03 | N/A | 0.25 | N/A | 0.13 |



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National Quality Improvement Goals

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| | | 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 | | | | n |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | 1 | Nationwide | | State | wide |
| Measure | Explanation | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| 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. | 0.00 (0 Total Hours in Restraint) ³ | N/A | 0.51 | N/A | 0.71 |
| 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. | 0.01 (1 Total Hours in Restraint) | N/A | 0.17 | N/A | 0.07 |
| 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. | 0.04 (5 Total Hours in Seclusion) | N/A | 0.35 | N/A | 0.08 |

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Accredited Organizations Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

| | | Compared to other Joint Commission Accredited Organizations | | | on | |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | Nationwide Statewick | | | ewide | |
| Measure | Explanation | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| 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. | ND 3 | N/A | 0.61 | N/A | 0.14 |
| 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. | ND 3 | N/A | 0.23 | N/A | 0.05 |
| 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. | 0.00 (0 Total Hours in Seclusion) | N/A | 0.39 | N/A | 0.08 |
| 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. | 0.05 (5 Total Hours in Seclusion) | N/A | 0.04 | N/A | 0.02 |

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Measure Area

Immunization





National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Compared to other Joint **Accredited Organizations** Nationwide Statewide This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza

Org ID: 4632

| | | 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: |
| 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 | 95% of 556 eligible Patients | 100% | 94% | 100% | 94% |

Explanation

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| | | Commission | | |
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| | | Accredited Organizations | | |
| Measure Area | Explanation | Nationwide | Statewide | |
| Perinatal Care | This category of evidenced based measures assesses the care of mothers and newborns. | № 2 | № 2 | |

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|-------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------|------------------|--------------------------------|------------------|
| | | 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. | WD 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. | 2% of 45 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. | 55% of 169 eligible Patients | 73% | 51% | 63% | 46% |

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