

Accreditation Quality Report





Version: 3 Date: 3/26/2021

Org ID: 4632

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.

2300 North Edward Street, Decatur, IL







Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
	Accredited	11/17/2018	11/16/2018	12/28/2018

Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS) 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	8/15/2020	8/14/2020	8/14/2020
Certified Programs	Certification Decision	Effective	Last Full Review Last On-	
		Date	Date	Review Date
Chronic Obstructive Pulmonary Disease	Certification	11/9/2018	3/25/2021	3/25/2021

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 other Joint Commission Accredite Organizations		
		Nationwide Statewide		
Hospital	2016National Patient Safety Goals	Ø	@ *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	(ND) 2	№ ²	
Jan 2019 - Dec 2019	Hospital-Based Inpatient Psychiatric Services	ND ²	²	
	Perinatal Care	ND 2	ND 2	

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

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Footnote Key

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2300 North Edward Street, Decatur, IL









Locations of Care

* Primary Location

Locations of Care

Decatur Memorial
Hospital
DBA: DMH OccHealth &
Wellness Partners
2120 N 27th St
Decatur, IL 62526

Available Services

Outpatient Clinics (Outpatient)

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







Locations of Care

* Primary Location

Locations of Care

Decatur Memorial Hospital 3 2300 N Edward St 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 - Suite 2400

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

- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Nuclear Pharmacy (Inpatient)
- 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

150 S Fairview Ave Decatur, IL 62522

Locations of Care	Available Services
	Neurosurgery (Surgical Services)
Decatur Memorial Hospital DBA: South Shores Imaging Center 1689 S Franklin St Rd Decatur, IL 62521	Services: • Single Specialty Practitioner (Outpatient)
Decatur Memorial Hospital DBA: Sullivan Medical Center 1220 W Jackson St Sullivan, IL 61951	Other Clinics/Practices located at this site: • Physical Therapy at Sullivan Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: DMH Physical Therapy 1830 S 44th St Decatur, IL 62521	Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: Forsyth Imaging Center 389 W Weaver Rd Forsyth, IL 62535	Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: Forsyth Medical Center 241 W Weaver Rd Forsyth, IL 62535	Other Clinics/Practices located at this site: • DMH Senior Life Enrichment Center - Suite 240 • Forsyth Medical Center - Suite 145D • Forsyth Medical Center - Suite 145A • Forsyth Medical Center - Suite 145B • Forsyth Medical Center - Suite 145C Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: Cancer Care Center of Decatur 210 W McKinley Ave Decatur, IL 62526	Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: DMH Millikin Health Clinic	Services: • Single Specialty Practitioner (Outpatient)







Locations of Care

*	Pri	marv	Location

Locations of Care	Available Services		
Decatur Memorial Hospital DBA: West Hay Medical Center 302 W Hay St Decatur, IL 62526	Other Clinics/Practices located at this site: Bailey & Gilman's Office - Suite 140 DMH Breast Center - Suite 117A DMH Lung Center - Suite 110 Services: Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)		
Decatur Memorial	Other Clinics/Practices located at this site:		
Hospital DBA: West Hay Medical Center 304 W Hay St Decatur, IL 62526	 Center for Advanced Surgery Suite 313 Dectur Memorial Hospital (DMH Surgery Center) - Suite 114 DMH Millennium Pain Center Suite 213 DMH Orthopedic Associates - Suite 111 Infectious Disease Specialists of Central Illniois - Suite 2 Internal Medicine Associates - Suite 312 West Hay Family Medicine - Suite 218 		
	Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)		
Decatur Memorial Hospital DBA: South Shores Medical Center 550 Southland Dr Decatur, IL 62521	Services: • Single Specialty Practitioner (Outpatient)		
Decatur Memorial	Other Clinics/Practices located at this site:		
Hospital DBA: Physician Plaza East 1 Memorial Dr Decatur, IL 62526	 DMH Vein and Vascular Institute - Suite 300 Jordan S Youngerman MD - Suite 110 Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient) 		
Decatur Memorial Hospital DBA: Physician Plaza West 2 Memorial Dr Decatur, IL 62526	Other Clinics/Practices located at this site: Decatur Neurosurgery Associates - Suite 202 Decatur Neurosurgery Associates - Suite 207 Dectur Memorial Hospital (Endoscopy Center) - Suite 102 DMG Gastroenterology - Suite 101 DMH Podiatry - Suite 305 Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient)		
	Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)		

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Medicine

241 W. Weaver Rd suite

Decatur, IL 62526





Locations of Care

Locations of Care	Available Services
Decatur Memorial Hospital DBA: DMH Family Medicine 4775 E Maryland St Decatur, IL 62521	Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: ENTA Allergy, Head and Neck Institute 101 W McKinley Ave Decatur, IL 62526	Services: • Single Specialty Practitioner (Outpatient)
Decatur Memorial Hospital DBA: Sports Medicine & Physical Therapy 2122 N 27th Street Decatur, IL 62526	Services: • Outpatient Clinics (Outpatient)
Decatur Memorial Hospital DBA: DMH Rock Springs Medical Center 330 N Wyckles Rd Decatur, IL 62522	Services: • Single Specialty Practitioner (Outpatient)
Decatur Memorial Hospital DBA: DMH Outpatient Senior Behavioral Health 441 W Hay St Decatur, IL 62526	Services:
Decatur Memorial Hospital DBA: Decatur Internal Medicine	Services: • Outpatient Clinics (Outpatient)

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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.

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

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	8888
	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

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National Quality Improvement Goals

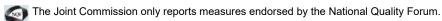
Reporting Period: January 2019 - December 2019

Commission				
Accredited Organizations				
Nationwide Statewide				
№ 2	(ND) 2			

Compared to other Joint

		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
		1	Nationwide		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.	109.00 minutes 767 eligible Patients	55.00	133.00	61.09	107.22



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2300 North Edward Street, Decatur, IL







National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

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

		Cor	npared to c Accredit	other Joint ed Organiz		n
		١	lationwide		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 - 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.	100% of 230 eligible Patients	100%	95%	100%	99%

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

This category of care given to psychiatric patients.

		Compared to other Joint Commission				
		Accredited Organizations Nationwide Statewic				wide
Measure	Explanation			Average		
weasure	Explanation	Hospital Results	Scored	Rate:	Scored	Average Rate:
		Results	at Least:	Rate.	at Least:	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.	№ 03 ————	100%	96%	3	3

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2300 North Edward Street, Decatur, IL

Org ID: 4632

Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission Accredited Organizations					
						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 - 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.	ND 3	100%	96%	100%	100%	

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

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

		Compared to other Joint Commission Accredited Organizations				
						ewide
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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 41 eligible Patients	100%	95%	100%	98%

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2300 North Edward Street, Decatur, IL

Measure Area

Services

Hospital-Based

Org ID: 4632







National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Compared to other Joint **Accredited Organizations** Nationwide Statewide Explanation This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients.

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	ewide
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.	100% of 189 eligible Patients	100%	95%	100%	98%

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National Quality Improvement Goals

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Compared to other Joint **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				
		Nationwide Statewide				ewide
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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.	40% of 5 eligible Patients	100%	63%	100%	67%
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 or the addition of an antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	€	100%	47%	3	3

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

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

		Compared to other Joint Commission Accredited Organizations				
		١	lationwide			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 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 or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	3	100%	48%	100%	74%

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

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

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewi			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 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.	33% of 3 eligible Pattents	100%	65%	100%	68%

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National Quality Improvement Goals

This organization achieved the best Reporting Period: January 2019 - December 2019

Compared to other Joint **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					
		Nationwide Statewide					
Measure	Explanation	Hospital		Average		•	
		Results	Scored at Least:	Rate:	Scored at Least:	Rate:	
Multiple Antipsychotic Medications at Discharge with	This measure reports the number of patients age 65 and older discharged on two or more antipsychotic		at Loast.		ut Loudt.		
Appropriate Justification Older Adults Age 65 and Older	medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	——————————————————————————————————————	100%	56%	100%	56%	
Hours of Physical Restraint Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.02 (2 Total Hours in Restraint)	N/A	0.48	N/A	0.37	

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission				
		Accredited Organizations Nationwide Statewide				ewide
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	
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.	№ 3 ———	N/A	0.40	N/A	0.23
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	0.29	N/A	0.09

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission				on
		Accredited Organizations Nationwide Statewide				wide
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
Hours of Physical Restraint Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.05 (1 Total Hours in Restraint) ³	N/A	0.56	N/A	0.47
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 (2 Total Hours in Restraint)	N/A	0.09	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.	0.01 (1 Total Hours in Seclusion)	N/A	0.40	N/A	0.04

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

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

56.11.665						
		Compared to other Joint Commission Accredited Organizations				
			Nationwide	cu Organiz	Statewide	
Measure	Explanation	Hospital		Average	Top 10%	
	· ·	Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	ND 3	N/A	0.69	N/A	0.15
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	0.21	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	0.45	N/A	0.03
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.	0.01 (1 Total Hours in Seclusion)	N/A	0.08	N/A	0.01

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Commission			
		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 Nationwide Statewide			wido		
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:		
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.		100%	98%	100%	99%	
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.	⊕	12%	25%	11%	24%	
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 47 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.	50% of 155 eligible Patients	73%	51%	60%	45%	
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	555.00 minutes 540 eligible Patients					

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Accredited Organizations Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide	tionwide		wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	0	Top 10% Scored at Least:	Average Rate:
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.	1851.00 minutes 540 eligible Patients				
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1296.00 minutes 540 eligible				

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