

Accreditation Quality Report





Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the prevention of medical errors such as surgery on the wrong side of the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

DBA: Texas NeuroRehab Center, 1106 West Dittmar Road, Austin, TX



Summary of Quality Information

Accreditation Programs A	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care Act and Human Services	ccredited	11/11/2020	10/3/2023	10/3/2023
🎯 Hospital 🛛 🛛 🗛	ccredited	11/13/2020	10/5/2023	10/5/2023

		Compared to other Joint Organiz	
		Nationwide	Statewide
Behavioral Health Care and Human Services	2020National Patient Safety Goals	Ø	*
Hospital	2020National Patient Safety Goals	\bigotimes	*
	National Quality Improvement Goals:		
Reporting Period: Jan 2021 - Dec 2021	Hospital-Based Inpatient Psychiatric Services	2 c	@ ²

Symbol Key

0	This organization achieved the best possible results.
•	This organization's performance is better than the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is worse than the target range/value.
•	This Measure is not applicable for this organization.
•••	Not displayed

Footnote Key

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
 Test Measure: a measure being
- evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- **11.** There were no eligible patients that met the denominator criteria.
- **12.** The measure rate is within optimal range.





Locations of Care

* Primary Location

Locations of Care	Available Services
Neuro Institute of Austin, L.P. * DBA: Texas NeuroRehab Center 1106 W. Dittmar Road Austin, TX 78745	Services: • Behavioral Health/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Child/Youth) (Residential Care - Child/Youth)

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2020 National Patient Safety Goals

Behavioral Health Care and Human Services

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two 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
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	Ø

Symbol Key

The organization has met the National Patient Safety Goal.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

DBA: Texas NeuroRehab Center, 1106 West Dittmar Road, Austin, TX



2020 National Patient Safety Goals

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	\bigotimes
	Reconciling Medication Information	Ø
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigotimes

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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National Quality Improvement Goals

Reporting Period: January 2021 - December 2021

		Compared to other Joint Commission	
		Accredited C	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

			Accredit	other Joint ed Organiz			
Measure	Explanation	Hospital Results	Vationwide Top Perform er Threshol d:	Average Rate:	State Top Perform er Threshol d:	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.	2 79% of 24 eligible Patients	100%	95%	100%	92%	

This information can also be viewed at https://hospitalcompare.io/ --- Null value or data not displayed.

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Reporting	remou: Ja	nuary 2021 - December 2021					
					npared to c Commis	sion	
Measure Area		Explanation		Nationwi		anizations Statewid	e
Hospital-Based Inpatient Psychiatri Services		ategory of evidenced based measures a quality of care given to psychiatric patie			2	™ ²	
					other Joint ed Organiz	zations	
Measure		Explanation	N Hospital Results	Jationwide Top Perform er Threshol d:	Average Rate:	State Top Perform er Threshol d:	ewide Averaç Rate:
Assessment of viole substance use diso rauma and patient completed - Childre /ears)	der, strengths	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.	92% of 12 eligible Patients	100%	97%	100%	97%

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National Quality Improvement Goals

Reporting Peri	od: January 2021 - December 2021					
			Accr	npared to o Commiss edited Org	sion anizations	
Measure Area	Explanation		Nationwi	de	Statewid	е
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures as overall quality of care given to psychiatric patien		•	2	○ ²	
				other Joint ed Organiz	ations	
Measure	Explanation	N Hospital Results	lationwide Top Perform er Threshol d:	Average Rate:	Top Perform er Threshol d:	ewide Avera Rate
Assessment of violence substance use disorder, rauma and patient stren completed - Adolescent (rears)	adolescent age (13-17 years) screened for violence risk to self and	O 73% of 11 eligible Patients	100%	97%	100%	97%

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the patient recover.

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

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Neuro Institute of Austin, L.P.

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National Quality Improvement Goals

Reporting Per	riod: January 2021 - December 2021				
				ared to other Join Commission	
			Accredi	ted Organization	S
Measure Area	Explanation		Nationwide	Statewi	de
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assess overall quality of care given to psychiatric patients.	ses the	⊘ ²		2
		Com		er Joint Commiss Organizations	ion
		Na	ationwide	Sta	tewid
Measure	Explanation He	ospital	Ton A	verage Ton	Δν

The number of patients is not enough
for comparison purposes.

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The measure meets the Privacy Disclosure Threshold rule.

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

		N	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top Perform er Threshol d:	Average Rate:	Top Perform er Threshol d:	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.	€€€) ⁴	100%	95%	100%	92%

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Not displayed	Measure Area		Explanation		Nationwi	de	Statewide	Э
	Hospital-Based Inpatient Psychiatric Services		tegory of evidenced based measures as quality of care given to psychiatric patie		0	2	⊘ ²	
Footnote Key	00111003							
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The Measure Set does not have an overall result.				١	lationwide			wide
The number of patients is not enough for comparison purposes.	Measure		Explanation	Hospital Results	Top Perform	Average Rate:	Top Perform	Aver Rat
The measure meets the Privacy Disclosure Threshold rule.					er Threshol d:		er Threshol d:	
The organization scored above 90% but was below most other organizations.	Assessment of violence	e risk.	This measure reports the number of		ч.		u.	
The Measure results are not statistically valid.	substance use disorder trauma and patient stre	r, engths	older adult (>= 65 years) screened for violence risk to self and others, substance and alcohol use,					
The Measure results are based on a sample of patients.	completed - Older Adult years)	t (>= 65	psychological trauma history and					

patient strengths. Screening for violence risk to self determines if

themselves. Screening for violence

risk to others determines if patients

are likely to harm others. Screening

determines if patients need help for

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

for substance and alcohol use

psychological trauma history

determines if patients have experienced terrible events in their

their use. Screening for

patients are likely to harm

7.	The Measure results are based on a
	sample of patients.
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	data is below the reporting requirement.

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

the patient recover. This information can also be viewed at https://hospitalcompare.io/ Null value or data not displayed.

100%

94%

100%

83%

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Mot displayed	Measure Area		Explanation		Nationwic	de	Statewide	e
Footnote Key	Hospital-Based Inpatient Psychiatric Services		tegory of evidenced based measures as quality of care given to psychiatric patier		0	2	⊘ ²	
1. The Measure or Measure Set was not				Cor	mpared to c	thor loint	Commissio	
reported.2. The Measure Set does not have an						ed Organiz	ations	wide
overall result. 3. The number of patients is not enough	Measure		Explanation	Hospital	Тор	Average	Тор	Average
for comparison purposes. 4. The measure meets the Privacy Disclosure Threshold rule.				Results	Perform er Threshol	Rate:	Perform er Threshol	Rate:
5. The organization scored above 90% but	Multiple Antipsychotic		This is a proportion measure A		d:		d:	
 was below most other organizations. 6. The Measure results are not statistically valid. 7. The Measure results are based on a sample of patients. 8. The number of months with Measure data is below the reporting requirement. 9. The measure results are temporarily suppressed pending resubmission of updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement. 11. There were no eligible patients that met the denominator criteria. 12. The measure rate is within optimal range. 	Medications at Discharg Appropriate Justification Overall Rate	Ĩ	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. This measure reports the number of patients age 1 through 12 years	2 2	100%	53%	100%	50%
For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."	Medications at Discharg Appropriate Justificatior Children Age 1 - 12		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 ene antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	€ 3 —	100%	34%	100%	60%

This information can also be viewed at https://hospitalcompare.io/

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updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting

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Not displayed	Measure Area	Explanation		Nationwi	de	Statewide	Э
Footnote Key		ategory of evidenced based measures as Il quality of care given to psychiatric patie			2	⊘ ²	
The Measure or Measure Set was not reported. The Measure Set does not have an					other Joint ed Organiz	ations	
overall result.				lationwide			wide
The number of patients is not enough for comparison purposes. The measure meets the Privacy Disclosure Threshold rule.	Measure	Explanation	Hospital Results	Top Perform er Threshol d:	Average Rate:	Top Perform er Threshol d:	Average Rate:
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12. The measure rate is within optimal range.

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

This information can also be viewed at https://hospitalcompare.io/ Null value or data not displayed. ----

addition of an antipsychotic

medication when the patient is also being treated with Clozapine.

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updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting

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Footnote Key			quality of care given to psychiatric patie		(2	№ ²	
The Measure or Measure Set was not reported. The Measure Set does not have an						other Joint ed Organiz	ations	
overall result.					Vationwide			ewide
The number of patients is not enough for comparison purposes.	Measure		Explanation	Hospital Results	Top Perform er	Average Rate:	Top Perform er	Average Rate:
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medication when the patient is also being treated with Clozapine.

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(19) Not displayed	Measure Area		Explanation		Nationwig	de	Statewide	э
	Hospital-Based Inpatient Psychiatric Services		egory of evidenced based measures as quality of care given to psychiatric patier		0	2	○ ²	
Footnote Key 1. The Measure or Measure Set was not	OCIVICES						• • •	_
reported.				Cor	npared to c Accredite	ether Joint ed Organiz		on
2. The Measure Set does not have an overall result.					lationwide		State	
3. The number of patients is not enough	Measure		Explanation	Hospital Results	Top Perform	Average Rate:	Top Perform	Average Rate:
for comparison purposes.4. The measure meets the Privacy Disclosure Threshold rule.					er Threshol d:		er Threshol d:	
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For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."	Use per 1000 Patient H Overall Rate		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.	0.0221 (6 Total Hours in Restraint)	N/A	0.8411	N/A	0.1954

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	Hospital-Based Inpatient Psychiatric Services		tegory of evidenced based measures as quality of care given to psychiatric patie		(2	∞ ²	
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for comparison purposes.4. The measure meets the Privacy					er		er	
Disclosure Threshold rule. 5. The organization scored above 90% but					Threshol d:		Threshol d:	
 was below most other organizations. 6. The Measure results are not statistically valid. 7. The Measure results are based on a sample of patients. 8. The number of months with Measure data is below the reporting requirement. 9. The measure results are temporarily suppressed pending resubmission of updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting 	Hours of Physical Restr 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	0.0092 (1 Total Hours in Restraint)	N/A	0.5600	N/A	0.1561
 individual data elements or awaiting National Quality Forum Endorsement. 11. There were no eligible patients that met the denominator criteria. 12. The measure rate is within optimal range. For further information and explanation of the Quality Report contents, refer to the ''Quality Report User Guide.'' 	Hours of Physical Restr Use Adolescents Age 13		patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition. 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.	0.0329 (4 Total Hours in Restraint)	N/A	0.4158	N/A	0.1722

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Neuro Institute of Austin, L.P.

DBA: Texas NeuroRehab Center, 1106 West Dittmar Road, Austin, TX



National Quality Improvement Goals

Symbol Key								
This organization achieved the best possible results	Reporting Per	iod: Jan	uary 2021 - December 2021					
This organization's performance is better than the target range/value.								
This organization's performance is similar to the target range/value.					Com	pared to o Commiss		
O This organization's performance is worse than the target range/value.					Accre	edited Org	anizations	
Not displayed	Measure Area		Explanation		Nationwic	de	Statewide	e
Footnote Key	Hospital-Based Inpatient Psychiatric Services		egory of evidenced based measures as quality of care given to psychiatric patie			2	O ²	
 The Measure or Measure Set was not reported. The Measure Set does not have an 						other Joint ed Organiz	ations	
 overall result. 3. The number of patients is not enough for comparison purposes. 4. The measure meets the Privacy Disclosure Threshold rule. 	Measure		Explanation	N Hospital Results	lationwide Top Perform er Threshol d:	Average Rate:	State Top Perform er Threshol d:	wide Average Rate:
 The organization scored above 90% but was below most other organizations. The Measure results are not statistically valid. The Measure results are based on a sample of patients. The number of months with Measure data is below the reporting requirement. The measure results are temporarily suppressed pending resubmission of updated data. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement. There were no eligible patients that met the denominator criteria. 	Hours of Physical Restr Use Adults Age 18 - 64	aint	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.	0.0000 (0 Total Hours in Restraint)	N/A	1.0167	N/A	0.2174
12. The measure rate is within optimal range. For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."	Hours of Physical Restr Use Older Adults Age 6 Older	5 and	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.	1 3	N/A	0.0925	N/A	0.0825
	Hours of Seclusion Use 1000 Patient Hours - Ov 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.	0.0341 (9 Total Hours in Seclusion)	N/A	0.4255	N/A	0.1076

This information can also be viewed at https://hospitalcompare.io/

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There were no eligible patients that the denominator criteria. 12. The measure rate is within optimal

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updated data. 10. Test Measure: a measure being evaluated for reliability of the

Neuro Institute of Austin, L.P.

DBA: Texas NeuroRehab Center, 1106 West Dittmar Road, Austin, TX



National Quality Improvement Goals

Reporting Period: Jar	uary 2021 - December 2021					
	•					
			Compared to other Joint			
			Accre			
Measure Area	Explanation		Nationwic	de	Statewide	9
			(2	№ ²	
Services			Ŭ		Ŭ	
		Со				n
		1		eu Organiz		wide
Measure	Explanation	Hospital Results	Top Perform	Average Rate:	Top Perform	Average Rate:
			Threshol		Threshol	
Hours of Seclusion Use	This measure reports the number of		a:		a:	
Children Age 1 - 12	hours patients age 1 through 12 years were kept in seclusion for	G				
	every 1,000 hours of patient care. Seclusion is the involuntary	0.0000	N/A	0.4104	N/A	0.3895
	confinement of a patient alone in a room or an area where the patient is	(0 Total Hours in Seclusion)				
Hours of Seclusion Use	.,,,,					
Adolescents Age 13 - 17	hours patients age 13 through 17	A				
	every 1,000 hours of patient care.	Ŭ	N/A	0.1564	N/A	0.1476
	confinement of a patient alone in a	(9 Total Hours				
	room or an area where the patient is physically prevented from leaving.	in coolidionity				
Hours of Seclusion Use Adults	This measure reports the number of hours patients age 18 through 64					
Aye 10 - 04	years were kept in seclusion for	\bigcirc				
	Seclusion is the involuntary	0.0000	N/A	0.5170	N/A	0.0882
	confinement of a patient alone in a room or an area where the patient is	(0 Total Hours in Seclusion)				
Hours of Sociusion Line Older	physically prevented from leaving.					
Adults Age 65 and Older	hours patients age 65 and older were					
	hours of patient care. Seclusion is	1 3	N/A	0 0487	N/A	0.0158
	patient alone in a room or an area		11/7	0.0407	11/73	0.0100
	where the patient is physically prevented from leaving.					
	Measure Area Hospital-Based This ca Inpatient Psychiatric overall Services Measure Measure Hours of Seclusion Use Hours of Seclusion Use Children Age 1 - 12 Hours of Seclusion Use Adolescents Age 13 - 17 Hours of Seclusion Use Adults Age 18 - 64 Hours of Seclusion Use Older Measure	Hospital-Based Inpatient Psychiatric ServicesThis category of evidenced based measures as overall quality of care given to psychiatric patie servicesMeasureExplanationHours of Seclusion Use Children Age 1 - 12This 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.Hours of Seclusion Use Adolescents Age 13 - 17This 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.Hours of Seclusion Use Adolescents Age 13 - 17This 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.Hours of Seclusion Use Adults Age 18 - 64This 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 	Measure Area Explanation Hospital-Based Inpatient Psychiatric Services This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. Measure Explanation Measure Explanation 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. 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. 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. Hours of Seclusion Use Adults Age 18 - 64 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. Hours of Seclusion Use Older Adults Age 65 and Older This measure reports the number of hours patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is	Measure Area Explanation Nationwide Hospital-Based Inpatient Psychiatric Services This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. Image: Compared to Compare to Compa	Measure Area Explanation Nationwide Hospital-Based Inpatient Psychiatric Services This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. © 2 Measure Area Explanation Image: Compared to other Joint Accredited Organiz Networks Measure Explanation Hospital - Based overall quality of care given to psychiatric patients. Image: Compared to other Joint Accredited Organiz Networks Measure Explanation Hospital - Top Results Top Perform Arerage Results 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 alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient alone in a room or an area where the patient is physically prevented from leaving. N/A 0.5170 Use Seclusion Use Adults This measure reports the number of hours patient age 65 and Older N/A 0.5170 Hours of Seclusion Use Other Adults Age 65 and Older <td< td=""><td>Measure Area Explanation Nationwide Statewide Hospital-Based Inspitatent Psychiatric Services This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. Image: Compared to other Joint Commission Accredited Organizations Measure Explanation Image: Compared to other Joint Commission Accredited Organizations Measure Explanation Hospital Results Top Average Top Measure Explanation Hospital Results Top Average Top Measure Explanation Hospital Results Top Average Top Null on Use Children Age 1 - 12 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. N/A 0.4104 N/A Hours of Seclusion Use Age 18 - 64 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. N/A 0.4104 N/A Hours of Seclusion Use Other Age 18 - 64 This measure reports the number of hours patients age 16 and older were Kept</td></td<>	Measure Area Explanation Nationwide Statewide Hospital-Based Inspitatent Psychiatric Services This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. Image: Compared to other Joint Commission Accredited Organizations Measure Explanation Image: Compared to other Joint Commission Accredited Organizations Measure Explanation Hospital Results Top Average Top Measure Explanation Hospital Results Top Average Top Measure Explanation Hospital Results Top Average Top Null on Use Children Age 1 - 12 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. N/A 0.4104 N/A Hours of Seclusion Use Age 18 - 64 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. N/A 0.4104 N/A Hours of Seclusion Use Other Age 18 - 64 This measure reports the number of hours patients age 16 and older were Kept

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