



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.

Mark R. Chassin, MD, MPP, MPH
President of the Joint Commission



Summary of Quality Information

Symbol Key

- This organization achieved the best possible results.
- This organization's performance is above the target range/value.
- This organization's performance is similar to the target range/value.
- This organization's performance is below the target range/value.
- This Measure is not applicable for this organization.
- Not displayed

Footnote Key

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

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

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	6/6/2015	6/5/2015	10/28/2015

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

Hospital

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

Ventricular Assist Device

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Advanced Palliative Care	Certification	5/18/2017	5/17/2017	5/17/2017
Heart Failure	Certification	10/21/2015	9/20/2017	9/20/2017
Primary Stroke Center	Certification	9/20/2017	9/19/2017	9/19/2017
Ventricular Assist Device	Certification	3/15/2017	3/14/2017	3/14/2017

Other Accredited Programs/Services

- Laboratory (Accredited by American Society for Histocompatibility and Immunogenetics (ASHI))

Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2013 Gold Plus Get With The Guidelines - Stroke

2012 ACS National Surgical Quality Improvement Program

Hospital

2015 National Patient Safety Goals

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



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



Summary of Quality Information

Symbol Key

-  This organization achieved the best possible results.
-  This organization's performance is above the target range/value.
-  This organization's performance is similar to the target range/value.
-  This organization's performance is below the target range/value.
-  This Measure is not applicable for this organization.
-  Not displayed

Footnote Key

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

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

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide

National Quality Improvement Goals:

Reporting Period:
Apr 2016 -
Mar 2017

Emergency Department

 ²

 ²

Immunization

 ²

 ²

Perinatal Care

 ²

 ²



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



Locations of Care

* Primary Location

Locations of Care	Available Services
Adult Psychiatry 181 N. Belle Mead Rd, Suite 2 Stony Brook, NY 11794	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Ambulatory Care Pavilion East Campus Edmund D. Pelligrino Road Stony Brook, NY 11794	Services: <ul style="list-style-type: none"> Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Ambulatory Surgical Center Nicolls Road Stony Brook, NY 11794	Services: <ul style="list-style-type: none"> Ambulatory Surgery Center (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient)
Family Practice 181 North Belle Meade Road East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
G.I.Services 3 Technology Drive East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Greenport Prenatal Center 300 Atlantic Avenue Gladys Brooks Med Village Greenport, NY 11944	Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient)
Neurology & EEG 179 Belle Meade Road East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Neuropsychology Services DBA: Neuropsychology Services 14 Technology Drive suite 12B Stony Brook, NY 11794	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Non Invasive Cardiology 200 Motor Pkwy Hauppauge, NY 11788	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
OB/GYN 6 Technology Drive East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Orthopaedics Hand & Spine Center 14 Research Way East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Outpatient Imaging Extension Clinic DBA: Outpatient Imaging Extension Clinic 182 West Montauk Highway, Building B Hampton Bays, NY 11946	Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient)
Outpatient Services in Hampton Bays 225 West Montauk Highway Hampton Bays, NY 11946	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Peconic Regional Dialysis 184 West Montauk Highway Hampton Bays, NY 11946	Services: <ul style="list-style-type: none"> Dialysis (Outpatient) Single Specialty Practitioner (Outpatient)
Pediatrics 450 Waverly Avenue Patchogue, NY 11772	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Pediatrics 600 Montauk Highway Center Moriches, NY 11934	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Pediatrics 2701 Sunrise Highway Islip Terrace, NY 11752	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Preoperative Services DBA: Preoperative Services 1320 Stony Brook Road Suite E Stony Brook, NY 11794	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Risk Reduction & Disease Management 26 Research Way East Setauket, NY 11733	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Rogers HIV/AIDS Center 335D Meeting House Lane Southampton, NY 11968	Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient)
Shinnecock Indian Health Service Church Street Southampton, NY 11968	Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Southampton Hospital 240 Meeting House Lane Southampton, NY 11968	Services: <ul style="list-style-type: none"> • Cardiac Catheterization Lab (Surgical Services) • 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) • 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) • Normal Newborn Nursery (Inpatient) • Nuclear Medicine (Imaging/Diagnostic Services) • Ophthalmology (Surgical Services) • Orthopedic Surgery (Surgical Services) • Pediatric Unit (Inpatient) • Plastic Surgery (Surgical Services) • Positron Emission Tomography (PET) (Imaging/Diagnostic Services) • Post Anesthesia Care Unit (PACU) (Inpatient) • Teleradiology (Imaging/Diagnostic Services) • Thoracic Surgery (Surgical Services) • Ultrasound (Imaging/Diagnostic Services) • Urology (Surgical Services) • Vascular Surgery (Surgical Services)
Speech, Language & Hearing/Ophthalmology/Pediatrics/PT-OT 33 Reasearch Way East Setauket, NY 11733	Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Stony Brook Primary Care Center, Internal Medicine 205 North Belle Meade Road East Setauket, NY 11733	Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient)
Stony Brook Sleep Lab 240 Middle Country Road Smithtown, NY 11787	Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient)
Surgical Care Center ENT Pediatric Specialty 37 Research Way East Setauket, NY 11733	Services: <ul style="list-style-type: none"> • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
University Hospital (Stony Brook) * DBA: Stony Brook University Hospital Nicolls Road Stony Brook, NY 11794-8503	Joint Commission Advanced Certification Programs: <ul style="list-style-type: none"> Advanced Palliative Care Heart Failure Primary Stroke Center Ventricular Assist Device Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Stony Brook University Physician Cardiology Outpatient- Haup Stony Brook University Physician Cardiology Outpatient- Tech Services: <ul style="list-style-type: none"> Brachytherapy (Imaging/Diagnostic Services) Burn Unit (Inpatient) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) 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) Hematology/Oncology Unit (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) Neuro/Spine ICU (Intensive Care Unit) Neuro/Spine Unit (Inpatient) Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Ophthalmology (Surgical Services) Orthopedic Surgery (Surgical Services) Orthopedic/Spine Unit (Inpatient) 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) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Thoracic Surgery (Surgical Services) Transplant Surgery (Surgical Services) Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services)



University Hospital (Stony Brook)

DBA: Stony Brook University Hospital,

Health Sciences Center Suny Stony Brook, Stony Brook, NY

Org ID: 5188



Locations of Care




* Primary Location

Locations of Care	Available Services
Urology/Neuro Surgery/Plastics 24 Research Way East Setauket, NY 11733	Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Westhampton Primary Care 147 Beach Lane Westhampton Beach, NY 11978	Services: <ul style="list-style-type: none"> • Single Specialty Practitioner (Outpatient)
Westhampton Sports Rehab 147 Beach Lane Westhampton Beach, NY 11978	Services: <ul style="list-style-type: none"> • Single Specialty Practitioner (Outpatient)



















2015 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	
	Eliminating Transfusion Errors	
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	
Improve the safety of using medications.	Labeling Medications	
	Reducing Harm from Anticoagulation Therapy	
	Reconciling Medication Information	
Use Alarms Safely	Use Alarms Safely on Medical Equipment	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
	Preventing Multi-Drug Resistant Organism Infections	
	Preventing Central-Line Associated Blood Stream Infections	
	Preventing Surgical Site Infections	
	Preventing Catheter-Associated Urinary Tract Infection	
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	
Universal Protocol	Conducting a Pre-Procedure Verification Process	
	Marking the Procedure Site	
	Performing a Time-Out	



National Quality Improvement Goals

Reporting Period: April 2016 - March 2017

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.
- Not displayed

Footnote Key

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

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

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Statewide	Nationwide	Statewide
			Top 10% Scored at Most:	Weighted Median:	Top 10% Scored at Most:	Weighted 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.	2 367.00 minutes 636 eligible Patients	55.00	129.00	81.96	194.21
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.	2 620.00 minutes 637 eligible Patients	205.00	316.00	259.98	427.85



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

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

---- Null value or data not displayed.






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



National Quality Improvement Goals

Reporting Period: April 2016 - March 2017

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.
-  Not displayed


Footnote Key

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

Compared to other Joint Commission
Accredited Organizations

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

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation					
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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 indicated.	 92% of 511 eligible Patients	100%	94%	99%	93%



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

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

---- Null value or data not displayed.

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



National Quality Improvement Goals

Reporting Period: April 2016 - March 2017

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.
- Not displayed

Footnote Key

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

Compared to other Joint 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

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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.	8 100% of 17 eligible Patients	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. 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.	8 2% of 48 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.	8 36% of 619 eligible Patients	74%	53%	66%	40%



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

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

---- Null value or data not displayed.

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