DBA: Stony Brook University Hospital,

Health Sciences Center Suny Stony Brook, Stony Brook, NY

Org ID: 5188

Accreditation Quality Report





Version: 7 Date: 9/20/2017 DBA: Stony Brook University Hospital, Health Sciences Center Suny Stony Brook, Stony Brook, NY



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 Symbol Key

oossible results.

rganization.

Not displayed

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sample of patients.

updated data.

Footnote Key

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11. There were no eligible patients that met the denominator criteria.

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University Hospital (Stony Brook)

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Summary of Quality Information

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	v Last On-Site Review Date
Advanced Palliative Care	Certification	5/18/2017	5/17/2017	5/17/2017
Heart Failure	Certification	10/21/2015	10/20/2015	10/20/2015
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

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	
Hospital	2015National Patient Safety Goals	Ø	₩ *	

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

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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	ND 2	ND 2	
Jan 2016 - Dec 2016	Immunization	ND 2	ND 2	
	Stroke Care	N/D 2	ND 2	
	Venous Thromboembolism (VTE)	NOD 2	ND 2	

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Locations of Care

Locations of Care	Available Services
Adult Psychiatry 181 N. Belle Mead Rd, Suite 2 Stony Brook, NY 11794	Services: • Outpatient Clinics (Outpatient)
Ambulatory Care Pavilion East Campus Edmund D. Pelligrino Road Stony Brook, NY 11794	Services: 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:
Dermatology, Family Practice 181 North Belle Meade Road East Setauket, NY 11733	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
G.I.Services 3 Technology Drive East Setauket, NY 11733	Services: • Outpatient Clinics (Outpatient)
Neurology & EEG 179 Belle Meade Road East Setauket, NY 11733	Services: • Outpatient Clinics (Outpatient)
Neuropsychology Services DBA: Neuropsychology Services 14 Technology Drive suite 12B Stony Brook, NY 11794	Services: • Outpatient Clinics (Outpatient)
Non Invasive Cardiology 200 Motor Pkwy Hauppauge, NY 11788	Services: • Outpatient Clinics (Outpatient)
OB/GYN 6 Technology Drive East Setauket, NY 11733	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Orthopaedics Hand & Spine Center 14 Research Way East Setauket, NY 11733	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)

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Locations of Care

Locations of Care	Available Services
Outpatient Services in Hampton Bays 225 West Montauk Highway Hampton Bays, NY 11946	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Pediatrics 450 Waverly Avenue Patchogue, NY 11772	Services: • Outpatient Clinics (Outpatient)
Pediatrics 600 Montauk Highway Center Moriches, NY 11934	Services: • Outpatient Clinics (Outpatient)
Pediatrics 2701 Sunrise Highway Islip Terrace, NY 11752	Services: • Outpatient Clinics (Outpatient)
Preoperative Services DBA: Preoperative Services 1320 Stony Brook Road Suite E Stony Brook, NY 11794	Services: • Outpatient Clinics (Outpatient)
Risk Reduction& Disease Management, 26 Research Way East Setauket, NY 11733	Services: • Outpatient Clinics (Outpatient)
Speech, Language & Hearing/Opthomology/P ediatrics/PT-OT 33 Reasearch Way East Setauket, NY 11733	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Stony Brook Primary Care Center,Internal Medicine 205 North Belle Meade Road East Setauket, NY 11733	Services: • Outpatient Clinics (Outpatient)
Stony Brook Sleep Lab 240 Middle Country Road Smithtown, NY 11787	Services: • Outpatient Clinics (Outpatient)
Surgical Care Center ENT Pediatric Specialty 37 Research Way East Setauket, NY 11733	Services: • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)

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Locations of Care

* Primary Location

Locations of Care

University Hospital (Stony Brook) * DBA: Stony Brook University Hospital Nicolls Road Stony Brook, NY 11794-8503

Available Services

Joint Commission Advanced Certification Programs:

- Advanced Palliative Care
- Heart Failure
- Primary Stroke Center
- Ventricular Assist Device
- Other Clinics/Practices located at this site:
 - Stony Brook University Physician Cardiology Outpatient- Haup
 - Stony Brook University Physician Cardiology Outpatient- Tech

Services:

- 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)

Org ID: 5188

- 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)
- Imaging/Diagnostic Services
 Surgical ICU (Intensive Care
- Surgical Unit (Inpatient)

Unit)

- Thoracic Surgery (Surgical Services)
- Transplant Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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• Perform Invasive Procedure (Outpatient)







Locations of Care

* Primary Location

East Setauket, NY 11733

Locations of Care

Urology/Neuro
Surgery/Plastics
24 Research Way

Outpatient Clinics (Outpatient)

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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	Ø
	Eliminating Transfusion Errors	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	0000
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

		Commission	
		Accredited Organizations	
Measure Area	Explanation	Nationwide	Statewide
Emergency Department	This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	2	№ 2

		Compared to other Joint Commission Accredited Organizations				
		N	lationwide		State	wide
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.	349.00 minutes 633 eligible Patients	54.00	126.00	70.29	190.41
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.	605.00 minutes 634 eligible Patients	203.00	313.00	250.65	424.23

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- * This information can also be viewed at www.hospitalcompare.hhs.gov
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National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

		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 Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		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.	94% of 509 eligible Patients	100%	94%	99%	92%

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National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

		Commission	
		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Stroke Care	This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients.	№ 2	№ 2

			Compared to other Joint Commission Accredited Organizations				
			Nationwide			Statewide	
	Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
	Thrombolytic Therapy	Acute ischemic stroke patients who receive a medicine that breaks up blood clots (thrombolytic therapy) within 180 minutes of stroke symptom onset. This measure reports how quickly ischemic stroke patients were given a medication that breaks up blood clots (thrombolytic therapy). Breaking up blood clots increases blood flow to the brain. If blood flow is returned to the brain quickly during a stroke, the risk of brain damage and loss of physical function is decreased. The medicine that breaks up clots in the arteries and allows the return of normal blood flow is called thrombolytic therapy or "t-PA". It is important that this medicine be given quickly after an ischemic stroke is diagnosed.	96% of 27 eligible Patients ³	100%	90%	100%	90%

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Footnote Key

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

Accredited Organizations Measure Area Nationwide Explanation Statewide Venous This category of evidence-based measures assesses the **№** 2 Thromboembolism overall quality of care related to prevention and treatment of blood clots. (VTE)

		Compared to other Joint Commission Accredited Organizations					
		Nationwide			Statewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:	
VTE Discharge Instructions	Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions.	100% of 84 eligible Patients	100%	93%	100%	92%	

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