

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.

Pascack Valley Health System, LLC





Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective	Last Full Survey	
		Date	Date	Survey Date
🞯 Hospital	Accredited	7/21/2022	7/20/2022	7/20/2022

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

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date	
Orimary Stroke Center	Certification	10/2/2021	10/1/2021	10/1/2021	
Certified Programs	Certification Decision	cation Decision Effective	Last Full Review Last On-Site		
		Date	Date	Review Date	
		Dutt	Dutt	Iteriew Dute	
🥝 Joint Replacement - Hip	Certification	10/28/2020	9/19/2022	9/19/2022	
 Joint Replacement - Hip Joint Replacement - Knee 	Certification Certification				

		Compared to other Joint Organiz	
		Nationwide	Statewide
Hospital	2022National Patient Safety Goals	\bigotimes	*
	National Quality Improvement Goals:		
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	() ²	2 °

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

Symbol Key 1

	~
0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	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.
- 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.

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

Pascack Valley Health System, LLC



DBA: HMH Pascack Valley Medical Center, 250 Old Hook Road, Westwood, NJ



Locations of Care

* Primary Location

Primary Location	
Locations of Care	Available Services
Locations of Care Pascack Valley Hospital, LLC * DBA: Hackensack Meridian Health Pascack Valley Medical Center 250 Old Hook Road Westwood, NJ 07675	Joint Commission Advanced Certification Programs: Primary Stroke Center Joint Commission Certified Programs: Joint Replacement - Hip Joint Replacement - Knee Sepsis Other Clinics/Practices located at this site: Wound Care Center Services: CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) Gastroenterology (Surgical Services) Gl 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) Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Post Anesthesia Care Unit (PACU) (Inpatient) Sleep Laboratory (Sleep Laboratory) Sterile Medication Compounding (Inpatient) Surgical Unit (Inpatient) Ultrasound (Imaging/Diagnostic Services) Ultrasound (Imaging/Diagnostic Services) Vascular Surgery (Surgical Services) Normal Newborn Nursery (Inpatient)

Pascack Valley Health System, LLC

DBA: HMH Pascack Valley Medical Center, 250 Old Hook Road, Westwood, NJ



2022 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	\bigotimes
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	\bigcirc

Symbol Key 3

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." Symbol Key 2

Footnote Key The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

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.''**

The measure meets the Privacy Disclosure Threshold rule.

reported.

overall result.

0

Ø

e

ND

2.

4.

5.

8.

9.

11

valid.

sample of patients.

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

Pascack Valley Health System, LLC

DBA: HMH Pascack Valley Medical Center, 250 Old Hook Road, Westwood, NJ



National Quality Improvement Goals

This organization achieved the best possible results This organization's performance is above the target range/value.	Reporting Po	eriod: April 2020 - March 2021		
This organization's performance is similar to the target range/value.			· · · · · · · · · · · · · · · · · · ·	o other Joint hission
This organization's performance is below the target range/value.			Accredited C	Organizations
Not displayed	Measure Area	Explanation	Nationwide	Statewide
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	№ ²	™ ²

		Cor	Compared to other Joint Commission Accredited Organizations			on
		Ν	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag Rate:
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.	(16%	25%	18%	23%
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 138 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.	51% of 1196 eligible Patients	71%	50%	51%	43%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	981% of 1223 eligible Patients	212%	1780%	366%	18499
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.	2125% of 1223 eligible Patients	1508%	3084%	1323%	28579



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.

Symbol Koy

Pascack Valley Health System, LLC

DBA: HMH Pascack Valley Medical Center, 250 Old Hook Road, Westwood, NJ

Compared to other Joint Commission



National Quality Improvement Goals

Reporting P	eriod: April 2020 - March 2021
Measure Area	Explanation
Perinatal Care	This category of evidenced based measures assesses care of mothers and newborns.
	Measure Area

- 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.
- 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.
 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."

				Accr	edited Org	anizations	
Measure Area Explanation			Nationwide		Statewide	е	
		tegory of evidenced based measures assesses the mothers and newborns.		№ ²		™ ²	
				mpared to c Accredit lationwide	ed Organiz	ations	on ewide
Measure		Explanation	Hospital Results	Top 10%		Top 10% Scored at Least:	Averaç Rate
Unexpected Complication Term Newborns per 1000 livebirths - Severe Rate		evere rate equals the number ents with severe complications.	1144% of 1223 eligible Patients	501%	1303%	326%	1008%



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.