



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

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Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care	Accredited	5/2/2014	4/12/2017	4/12/2017
Home Care	Accredited	5/3/2014	4/14/2017	4/14/2017
Hospital	Accredited	5/3/2014	4/14/2017	5/31/2017

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

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
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Primary Stroke Center	Certification	7/1/2016	6/30/2016	6/30/2016
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Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
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Joint Replacement - Hip	Certification	6/9/2016	6/8/2016	6/8/2016
Joint Replacement - Knee	Certification	6/9/2016	6/8/2016	6/8/2016

Other Accredited Programs/Services

- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

Special Quality Awards

- 2014 Top Performer on Key Quality Measures®
- 2012 Top Performer on Key Quality Measures®
- 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- 2014 Hospital Magnet Award
- 2012 ACS National Surgical Quality Improvement Program
- 2012 Gold Get With The Guidelines - Heart Failure

Behavioral
Health
Care

2014 National Patient Safety Goals

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



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		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	2014National Patient Safety Goals		 *
Hospital	2014National Patient Safety Goals		 *
National Quality Improvement Goals:			
Reporting Period: Oct 2015 - Sep 2016	Emergency Department	 ²	 ²
	Hospital-Based Inpatient Psychiatric Services	 ²	 ²
	Immunization	 ²	 ²
	Perinatal Care	 ²	 ²
	Stroke Care	 ²	 ²
	Venous Thromboembolism (VTE)	 ²	 ²



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Locations of Care

* Primary Location

Locations of Care	Available Services
Center for Behavioral Health DBA: Adult Outpatient Services 21 Pleasant Street Middletown, Ct. Middletown, CT 06457	Services: Behavioral Health (Non 24 Hour Care - Adult)
Center for Behavioral Health Day Treatment Program DBA: Behavioral Health Day Treatment 33 Pleasant Street Middletown, CT 06457	Services: Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial - Adult)
Center for Behavioral Health Family Advocacy Program DBA: outpatient behavioral 51 Broad Street Middletown, CT 06457	Other Clinics/Practices located at this site: - There is no additional site Services: - Behavioral Health (Non 24 Hour Care - Child/Youth) - In-Home Behavioral Health Services (Non 24 Hour Care - Child/Youth)
Center for Behavioral Health Outpatient DBA: OutPatient Center for Behavioral Health 103 South Main Street Middletown, CT 06457	Services: Behavioral Health (Non 24 Hour Care - Adult)



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital * DBA: General Acute 28 Crescent Street Middletown, CT 06457	Joint Commission Advanced Certification Programs: - Primary Stroke Center Joint Commission Certified Programs: - Joint Replacement - Hip - Joint Replacement - Knee Services: - Cardiac Catheterization Lab (Surgical Services) - Coronary Care Unit (Inpatient) - CT Scanner (Imaging/Diagnostic Services) - Dialysis Unit (Inpatient) - 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) - Neurosurgery (Surgical Services) - Normal Newborn Nursery (Inpatient) - Nuclear Medicine (Imaging/Diagnostic Services) - Ophthalmology (Surgical Services) - Orthopedic Surgery (Surgical Services) - Orthopedic/Spine 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) - Surgical ICU (Intensive Care Unit) - Surgical Unit (Inpatient) - Teleradiology (Imaging/Diagnostic Services) - Thoracic Surgery (Surgical Services) - Ultrasound (Imaging/Diagnostic Services) - Urology (Surgical Services) - Vascular Surgery (Surgical Services)
Middlesex Hospital Behavioral Health, Old Saybrook 154 Main Street, Old Saybrook Old Saybrook, CT 06475	Services: Behavioral Health (Non 24 Hour Care - Adult)
Middlesex Hospital Family Medicine 90 South Main Street Middletown, CT 06457	Services: Single Specialty Practitioner (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital Family Medicine 42 East High Street East Hampton, CT 06424	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Family Medicine DBA: Family Medicine 13 High Street Portland, CT 06480	Services: Single Specialty Practitioner (Outpatient)
Middlesex Hospital Homecare 5 Pequot Park Road Suite 204 Westbrook, CT 06498	Services: - Home Health Aides - Home Health, Non-Hospice Services - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Homecare 770 Saybrook Road Middletown, CT 06457	Services: - Home Health Aides - Home Health, Non-Hospice Services - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Homecare Hospice Program DBA: Hospice Unit and Hospice Homecare 28 Crescent Street Middletown, CT 06457	Services: - Home Health Aides - Home Health, Non-Hospice Services - Hospice Care - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Outpatient Center DBA: Outpatient Tests and Treatments, South Campus 534 Saybrook Road Middletown, CT 06457	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Physical Rehabilitation in Madison DBA: Outpatient Physical Rehabilitation 1347 Boston Post Road, Madison Madison, CT 06443	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Physical Rehabilitation, North Campus DBA: Physical Rehabilitation 512 Saybrook Road, Lower Level Middletown, CT 06457	Services: Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498	Services: Anesthesia (Outpatient)
Middlesex Medical Center Marlborough 14 Jones Hollow Road Marlborough, CT 06447	Services: Anesthesia (Outpatient)
Middlesex MultiSpecialty Group 80 South Main Street Middletown, CT 06457	Services: Outpatient Clinics (Outpatient)
Middlesex Surgical Center 530 Saybrook Road Middletown, CT 06457	Services: - Ambulatory Surgery Center (Outpatient) - Anesthesia (Outpatient) - Perform Invasive Procedure (Outpatient)
Physical Rehabilitation Center of Old Saybrook DBA: Physical Rehabilitation Center 1687 Boston Post Road Old Saybrook, CT 06475	Services: Outpatient Clinics (Outpatient)
Rehabilitation Services and Hand Therapy 6 Independence Drive Suite 1 Marlborough, CT 06447	Services: Outpatient Clinics (Outpatient)
Rehabilitation Services and Hand Therapy 192 Westbrook Road Essex, CT 06426	Services: Outpatient Clinics (Outpatient)



2014 National Patient Safety Goals

Symbol Key

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Behavioral Health Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	



2014 National Patient Safety Goals

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Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	



2014 National Patient Safety Goals

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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: October 2015 - September 2016

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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	
			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.	2 130.00 minutes 575 eligible Patients	53.00	124.00	98.88	147.61
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.	2 327.00 minutes 576 eligible Patients	202.00	311.00	273.83	340.73



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Accredited 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

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			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 713 eligible Patients	100%	94%	100%	94%



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National Quality Improvement Goals

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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

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		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 - 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 637 eligible Patients	100%	94%	100%	94%



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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

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		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 76 eligible Patients	100%	92%	100%	89%



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Compared to other Joint
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Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	2	2

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average Rate:	Statewide	Average Rate:
			Top 10% Scored at Least:		Top 10% Scored 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 person's capacity to meet life's everyday demands.	 100% of 31 eligible Patients	100%	62%	100%	64%
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 when the patient is also being treated with Clozapine.	 100% of 27 eligible Patients	100%	63%	100%	66%



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Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	2	2

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Older Adults Age 65 and Older	This measure reports the number of patients age 65 and older 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 when the patient is also being treated with Clozapine.	 100% of 4 eligible Patients	100%	56%	---- ³	---- ³
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.	 0.15 (23 Total Hours in Restraint)	N/A	0.49	N/A	0.52



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Compared to other Joint
Commission

Accredited 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

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	 0.16 (21 Total Hours in Restraint)	N/A	0.53	N/A	0.54
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.	³ 0.08 (2 Total Hours in Restraint) ³	N/A	0.38	N/A	0.68
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.	 0.06 (9 Total Hours in Seclusion)	N/A	0.36	N/A	0.18



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National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

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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.
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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

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Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	 0.07 (9 Total Hours in Seclusion)	N/A	0.41	N/A	0.18
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.	³ 0.02 (0 Total Hours in Seclusion) ³	N/A	0.08	N/A	0.01



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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.	 97% of 787 eligible Patients	100%	94%	99%	94%



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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.	3 67% of 3 eligible Patients ³	100%	98%	100%	97%
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.	 2% of 85 eligible Patients	0%	2%	0%	3%
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.	 65% of 977 eligible Patients	75%	53%	65%	54%



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Accredited Organizations

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

Measure	Explanation	Hospital Results	Nationwide		Statewide	
			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.	 100% of 5 eligible Patients	100%	90%	100%	91%



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Measure Area	Explanation	Nationwide	Statewide
Venous Thromboembolism (VTE)	This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots.	2	2

Compared to other Joint Commission
Accredited Organizations

Measure	Explanation	Hospital Results	Statewide			
			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 30 eligible Patients	100%	93%	100%	94%



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