

Accreditation Quality Report





Version: 3 Date: 2/17/2022 540 Litchfield Street, Torrington, CT Org ID: 5697

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.

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care and Human Services	Accredited	6/12/2019	6/11/2019	6/11/2019
Hospital	Accredited	6/15/2019	6/14/2019	7/26/2019
Laboratory	Accredited	10/27/2021	10/26/2021	10/26/2021

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

Pathology and Clinical Laboratory Hospital

Advanced Certification	Certification Decision	Effective	Last Full Rev	view Last On-Site
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	2/7/2022	12/14/2021	12/14/2021

Other Accredited Programs/Services

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

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Behavioral Health Care and Human Services	2019National Patient Safety Goals	Ø	*	
Hospital	2019National Patient Safety Goals	Ø	№ *	
	National Quality Improvement Goals:			
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	2 °	№ ²	
Laboratory	2021National Patient Safety Goals	Ø	*	

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

Symbol Key 1

- 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

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 3. The number of patients is not enough for comparison purposes.
- 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.
- 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.

 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."

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Locations of Care

Locations of Care	Available Services
sehavioral Health Senter - Winsted Satellite 00 New Hartford Road Vinsted, CT 06098	Services: Behavioral Health (Non 24 Hour Care - Adult) Family Support (Non 24 Hour Care)
Center for Cancer Care 00 Kennedy Drive Forrington, CT 06790	Services: • Single Specialty Practitioner (Outpatient)
enter for Youth & amilies 0 Litchfield Street orrington, CT 06790	Other Clinics/Practices located at this site: • Bridges Extended Day Services: • Behavioral Health (Day Programs - Child/Youth) (Non 24 Hour Care - Child/Youth) (Partial Hospitalization - Child/Youth) • Community Integration (Non 24 Hour Care) • Family Support (Non 24 Hour Care)
Charlotte Hungerford lospital Ear, Nose and hroat 0 Amenia Road Charon, CT 06069	Services: • Single Specialty Practitioner (Outpatient)
Charlotte Hungerford Iospital Ear, Nose and Chroat 39 West Main Street Ovon, CT 06001	Services: • Single Specialty Practitioner (Outpatient)
Charlotte Hungerford lospital Multispecialty Group 40 Litchfield Street Forrington, CT 06790	Other Clinics/Practices located at this site:
Charlotte Hungerford lospital Multispecialty Group 38 Litchfield St, Forrington, CT 06790	Other Clinics/Practices located at this site: Outpatient PT Surgical Office Urology Office Services: Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
charlotte Hungerford lospital ET,Mammography 20 Kennedy Drive orrington, CT 06790	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)

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Locations of Care

*	Primary	Location

Locations of Care	Available Services
Charlotte Hungerford Hospital Rehabilitation Services 1012 East Main Street Torrington, CT 06790 The Charlotte Hungerford Hospital * 540 Litchfield Street Torrington, CT 06790	Other Clinics/Practices located at this site: • Physical Therapy • Speech Therapy Services: • Outpatient Clinics (Outpatient) Joint Commission Advanced Certification Programs: • Primary Stroke Center
	Services: Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult/Ohild/Youth) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization - Adult) (Partial Hospitalization - Adult) (Community Integration (Non 24 Hour Care) CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) General Laboratory Tests Gl or Endoscopy Lab (Imaging/Diagnostic Services) General Laboratory Tests Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Interventional Radiology (Inpatient, Outpatient, Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services)
The Charlotte Hungerford Hospital Cardiovascular Medicine 1215 New Litchfield Street Torrington, CT 06790	Services: Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)

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Locations of Care

*	Primary	Location

Locations of Care	Available Services
The Charlotte Hungerford Hospital Specialty Care Office 76 Watertown Road Thomaston, CT 06787	Other Clinics/Practices located at this site:
The Charlotte Hungerford Sleep Center 1151 East Main Street Torrington, CT 06790	Services: • Outpatient Clinics (Outpatient)
The Charlotte Hungerford Winsted ED and Health Center 80 South Main Street Winsted, CT 06098	Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient)
The Charlotte Hungerford Wound Care and Hyperbaric Medicine 7 Felicity Lane Torrington, CT 06790	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
The Hungerford Center 780 Litchfield Street Torrington, CT 06790	Other Clinics/Practices located at this site:

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2019 National Patient Safety Goals

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."

Behavioral Health Care and Human Services

Safety Goals	Safety Goals Organizations Should	
Improve the accuracy of the identification of individuals served.	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

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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
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
	Preventing Infections that are difficult to treat	Ø
	Preventing Central-Line Associated Blood Stream Infections	<u> </u>
	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	⊘
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Accredited Organizations Measure Area Explanation Nationwide Statewide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Coi	mpared to c	other Joint	Commissio	n
			Accredit	ed Organiz	ations	
Measure	Explanation	Hospital	Nationwide Top 10%	Average		ewide
Measure	Explanation	Results	Scored	Rate:	Top 10% Scored	Rate:
			at Least:		at Least:	
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.	34% of 137 eligible Patients	16%	25%	19%	27%
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.	5% of 39 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 350 eligible Patients	71%	50%	58%	50%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	593% of 337 eligible Patients	212%	1780%	307%	1162%
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.	1780% of 337 eligible Patients	1508%	3084%	1260%	3235%

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.

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Compared to other Joint

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Measure Area

Perinatal Care





National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

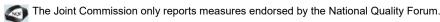
Commission
Accredited Organizations

Explanation Nationwide Statewide

This category of evidenced based measures assesses the care of mothers and newborns.

Compared to other Joint

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1186% of 337 eligible Patients	501%	1303%	519%	2073%



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2021 National Patient Safety Goals

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Laboratory

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
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø