



# 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](mailto:qualityreport@jointcommission.org) with your comments and suggestions.



## 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
Behavioral Health Care and Human Services	Accredited	10/28/2020	10/27/2020	10/27/2020
Hospital	Accredited	10/31/2020	10/30/2020	10/30/2020

### 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)

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	1/22/2021	1/21/2021	1/21/2021
Perinatal Care Certification	Certification	10/21/2020	10/20/2020	10/20/2020
Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Depression	Certification	9/6/2019	9/5/2019	9/5/2019
Hip Fracture	Certification	6/19/2021	6/18/2021	6/18/2021
Primary Care Medical Home - Hospital	Primary Care Medical Home	10/31/2020	10/30/2020	10/30/2020
Spine Surgery	Certification	3/20/2021	3/19/2021	3/19/2021
Wound Care	Certification	6/17/2021	6/16/2021	6/16/2021

### Other Accredited Programs/Services

- Hospital ( Accredited by UHMS Clinical Hyperbaric Facility - Level 2)
- Hospital ( Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

### Special Quality Awards

2015 ACS National Surgical Quality Improvement Program

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program



## 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."

Behavioral  
Health  
Care and  
Human  
Services

#### 2020 National Patient Safety Goals

Hospital

#### 2020 National Patient Safety Goals

#### National Quality Improvement Goals:

Reporting  
Period:  
Jan 2019 -  
Dec 2019

Emergency Department

Immunization

Perinatal Care

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



\*



\*



<sup>2</sup>



<sup>2</sup>



<sup>2</sup>



<sup>2</sup>



<sup>2</sup>



<sup>2</sup>



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



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>Overlook Medical Center</b> DBA: Atlantic Behavioral Health Services 2 Walnut Street Summit, NJ 07901	<b>Services:</b> <ul style="list-style-type: none"> <li>Addiction Services/Adult (Non-detox - Adult)</li> <li>Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization - Adult)</li> <li>Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization - Adult) (Non-detox - Adult)</li> </ul>
<b>Overlook Medical Center</b> DBA: Overlook Medical Center - Union Campus 1000 Galloping Hill Road Union, NJ 07083	<b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>Wound Care</li> </ul> <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Atlantic Rehabilitation - Union Campus</li> <li>Overlook Medical Center - Atlantic Laboratory - Union PSC</li> <li>Overlook Medical Center - Union Infusion Center</li> <li>Overlook Medical Center - Vascular Lab at Union</li> <li>Overlook Medical Center Emergency Department - Union Campus</li> <li>Overlook Medical Center Imaging - Union Campus</li> <li>Overlook Medical Center Wound Healing Center at Union</li> <li>Suburban Heart Group - Cardiac Imaging at Union</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Overlook Imaging at One Springfield Avenue 1 Springfield Ave Summit, NJ 07901	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Pulmonary Allergy Associates - Testing only</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Associates in Cardiovascular Disease (cardiac testing only) 211 Mountain Ave. Springfield, NJ 07081	<b>Services:</b> <ul style="list-style-type: none"> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Associates in Cardiovascular Disease (Cardiac Testing only) 571 Central Ave., Suite 115 New Providence, NJ 07974	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>Overlook Medical Center</b> DBA: Cardiac Imaging at MDA Cardiology 215 North Ave. Westfield, NJ 07090	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Cardiac Imaging at MDA Cardiology 1511 Park Ave. South Plainfield, NJ 07080	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Springfield Infusion Center 385 Morris Ave., Suite 100 Springfield, NJ 07081	<b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Atlantic Rehabilitation 550 Central Ave. New Providence, NJ 07974	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Atlantic Rehabilitation - Chatham 14-B Roosevelt Ave. Chatham, NJ 07928	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Cardiovascular Imaging at Livingston 340 East Northfield Ave. Livingston, NJ 07039	<b>Services:</b> <ul style="list-style-type: none"> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Northfield Infusion Center 741 Northfield Ave., West Orange, NJ West Orange, NJ 07052	<b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Cardiac Rehabilitation 571 Central Ave. Suite 118 New Providence, NJ 07974	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Atlantic Rehab Services - Aquatic Center 629 Central Avenue New Providence, NJ 07974	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>Overlook Medical Center</b> DBA: Atlantic Rehabilitation 23 Mountain Boulevard Warren, NJ 07059	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>Overlook Medical Center *</b> 99 Beauvoir Avenue Summit, NJ 07901	<p><b>Joint Commission Advanced Certification Programs:</b></p> <ul style="list-style-type: none"> <li>Advanced Comprehensive Stroke Center</li> <li>Perinatal Care Certification</li> </ul> <p><b>Joint Commission Certified Programs:</b></p> <ul style="list-style-type: none"> <li>Depression</li> <li>Hip Fracture</li> <li>Primary Care Medical Home - Hospital</li> <li>Spine Surgery</li> <li>Wound Care</li> </ul> <p><b>Primary Care Medical Home Certified Clinics/Practices:</b></p> <ul style="list-style-type: none"> <li>Overlook Family Medicine</li> </ul> <p><b>Other Clinics/Practices located at this site:</b></p> <ul style="list-style-type: none"> <li>Goryeb Pediatric Subspecialties</li> <li>MDA Oncology - Infusion Center</li> <li>Overlook Medical Center - Non-Invasive Cardiology</li> <li>Overlook Medical Center - EEG</li> <li>Overlook Medical Center Ambulatory Surgery</li> <li>Overlook Medical Center Bariatric Medicine</li> <li>Overlook Medical Center Breast Center</li> <li>Overlook Medical Center Cardiac Catheterization</li> <li>Overlook Medical Center Concussion Care and Physical Rehabil</li> <li>Overlook Medical Center Dental Clinic</li> <li>Overlook Medical Center Eating Disorders Program</li> <li>Overlook Medical Center GI/Endoscopy Center</li> <li>Overlook Medical Center Healthstart Clinic</li> <li>Overlook Medical Center Infusion Center</li> <li>Overlook Medical Center Interventional Pain Management</li> <li>Overlook Medical Center Maternal-Fetal Medicine</li> <li>Overlook Medical Center MEG</li> <li>Overlook Medical Center Radiation Therapy</li> <li>Overlook Medical Center Radiology Services</li> <li>Overlook Medical Center Vascular Lab</li> <li>Overlook Medical Center Wound Healing Center</li> </ul> <p><b>Services:</b></p> <ul style="list-style-type: none"> <li>Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)</li> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiovascular Unit (Inpatient)</li> <li>Coronary Care Unit (Inpatient)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Dialysis Unit (Inpatient)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Neurosurgery (Surgical Services)</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Ophthalmology (Surgical Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Orthopedic/Spine Unit (Inpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Pediatric Unit (Inpatient)</li> </ul>





## Locations of Care

### \* Primary Location

Locations of Care	Available Services
	<ul style="list-style-type: none"> <li>• Ear/Nose/Throat Surgery (Surgical Services)</li> <li>• Eating Disorders/Adult/Child/Youth (Outpatient - Adult/Child/Youth) (Day Programs - Adult/Child/Youth) (Non 24 Hour Care - Adult/Child/Youth) (Partial Hospitalization - Adult/Child/Youth)</li> <li>• EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>• Gastroenterology (Surgical Services)</li> <li>• GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>• Gynecological Surgery (Surgical Services)</li> <li>• Gynecology (Inpatient)</li> <li>• Hazardous Medication Compounding (Inpatient)</li> <li>• Hematology/Oncology Unit (Inpatient)</li> <li>• Inpatient Unit (Inpatient)</li> <li>• Interventional Radiology (Imaging/Diagnostic Services)</li> <li>• Labor &amp; Delivery (Inpatient)</li> <li>• Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>• Medical /Surgical Unit (Inpatient)</li> <li>• Medical ICU (Intensive Care Unit)</li> <li>• Neuro/Spine ICU (Intensive Care Unit)</li> <li>• Plastic Surgery (Surgical Services)</li> <li>• Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>• Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>• Radiation Oncology (Imaging/Diagnostic Services)</li> <li>• Sterile Medication Compounding (Inpatient)</li> <li>• Surgical ICU (Intensive Care Unit)</li> <li>• Surgical Unit (Inpatient)</li> <li>• Teleradiology (Imaging/Diagnostic Services)</li> <li>• Thoracic Surgery (Surgical Services)</li> <li>• Ultrasound (Imaging/Diagnostic Services)</li> <li>• Urology (Surgical Services)</li> <li>• Vascular Surgery (Surgical Services)</li> </ul>
<b>Overlook Medical Center Chatham Family Practice</b> 492 Main Street Chatham, NJ 07928	<b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>• Primary Care Medical Home - Hospital</li> </ul> <b>Primary Care Medical Home Certified Clinics/Practices:</b> <ul style="list-style-type: none"> <li>• Overlook Medical Center Chatham Family Practice</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• Outpatient Clinics (Outpatient)</li> </ul>
<b>Rehabilitation &amp; Physical Therapy at Clark North Pavilion</b> 140 Central Avenue Street Clark, NJ 07066	<b>Services:</b> <ul style="list-style-type: none"> <li>• Single Specialty Practitioner (Outpatient)</li> </ul>









## 2020 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.

### Behavioral Health Care and Human Services




Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	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	

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














## 2020 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	
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	
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
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: January 2019 - December 2019

### 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.	 <sup>2</sup>	 <sup>2</sup>

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.	 <sup>2</sup> 108.00 minutes 572 eligible Patients	55.00	133.00	98.21	167.07
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.	 <sup>2</sup> 349.00 minutes 434 eligible Patients	200.00	350.00	---- <sup>3</sup>	---- <sup>3</sup>



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

\*

This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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: January 2019 - December 2019

### 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	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:
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.	 96% of 510 eligible Patients	99%	92%	---- <sup>3</sup>	---- <sup>3</sup>



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

\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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: January 2019 - December 2019

### 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	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average	Statewide	Average
			Top 10% Scored at Least:	Rate:	Top 10% Scored at Least:	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.	 97% of 35 eligible Patients	100%	98%	100%	99%
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.	 ---	12%	25%	15%	24%
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.	 0% of 217 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.	 56% of 2258 eligible Patients	73%	51%	54%	44%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	10 986.00 minutes 2229 eligible Patients				



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

\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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: January 2019 - December 2019

### 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	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	10 1570.00 minutes 2229 eligible Patients				
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	10 583.00 minutes 2229 eligible Patients				



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

\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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."