

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 Symbol Key

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This organization achieved the best

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

Reading Hospital 420 S. 5th Ave., West Reading, PA







Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care	Accredited	4/25/2017	4/24/2017	4/24/2017
Home Care	Accredited	4/26/2017	4/25/2017	4/25/2017
Hospital	Accredited	6/14/2017	4/28/2017	6/14/2017
Laboratory	Accredited	11/11/2017	11/10/2017	11/10/2017

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

Pathology and Clinical Laboratory

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

Reading Hospital

420 S. 5th Ave., West Reading, PA. 19611

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
Advanced Total Hip and Total Knee Replacement	Certification	11/3/2017	9/20/2017	9/20/2017
Primary Stroke Center	Certification	3/17/2017	3/16/2017	3/16/2017
Certified Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
Meart Failure	Certification	4/21/2017	4/20/2017	4/20/2017

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

2014 Top Performer on Key Quality Measures®

2013 Top Performer on Key Quality Measures®

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2012 ACS National Surgical Quality Improvement Program

2012 Silver - The Medal of Honor for Organ Donation

2010 Silver - The Medal of Honor for Organ Donation

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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Behavioral Health Care	2017National Patient Safety Goals	Ø	*
Home Care	2017National Patient Safety Goals	Ø	™ *
Hospital	2017National Patient Safety Goals	Ø	N/A *
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(ND) 2	ND 2
Jul 2017 - Jun 2018	Hospital-Based Inpatient Psychiatric Services	NO 2	ND 2
	Immunization	NO 2	ND ²
	Perinatal Care	ND 2	№ 2
Laboratory	2017National Patient Safety Goals	Ø	N/A *

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



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Reading Hospital 420 S. 5th Ave., West Reading, PA







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Locations of Care	Available Services		
Occupational Health Services 1000 Tuckerton Court Reading, PA 19605	Other Clinics/Practices located at this site: • The Reading Hospital at Muhlenberg Imaging & Lab • The Reading Hospital Imaging Center at Muhlenberg • The Reading Hospital Laboratory Services at Muhlenberg • The Reading Hospital Physical Therapy at Muhlenberg Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)		
Reading Health Rehabilitation Hospital 2802 Papermill Road Wyomissing, PA 19610	Other Clinics/Practices located at this site: • TRH Post Acute Rehab Therapy Services Services: • General Laboratory Tests • Inpatient Unit (Inpatient) • Neuro/Spine Unit (Inpatient) • Non-Sterile Medication Compounding (Inpatient) • On Site Pharmacy • Outpatient Clinics (Outpatient) Outpatient) Other Clinics/Practices located at this site: • Rehabilitation Services • Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization) • Skilled Nursing Care • Sterile Medication Compounding (Inpatient) • Ultrasound (Imaging/Diagnostic Services)		







Locations of Care

* Primary Location

Locations of Care

Reading Hospital * 420 S. 5th Ave. West Reading, PA 19611

Available Services

Joint Commission Advanced Certification Programs:

- · Advanced Total Hip and Total Knee Replacement
- Primary Stroke Center

Joint Commission Certified Programs:

Heart Failure

Other Clinics/Practices located at this site:

- Apheresis R3E
- Cancer Infusion Center
- Center for Public Health
- Center for Public Health
- Employee Health Services/Occupational Health Services, Suite
- Family Health Care Center
- Image Recovery Center
- Maternal Fetal Medicine
- Outpatient Nutrition Services, Suite 310

- Outpatient Services Clinic
- Reading Hospital Anticoagulation Clinic, Suite 375
- Reading Hospital Assertive Community Treatment Program
- Reading Hospital Imaging, Suite 365
- Reading Hospital Internal Medicine Practice
- TRHMC Imaging Services, Suite 135
- TRHMC Internal Medicine Practice
- TRHMC Laboratory Services, Suites 110
- Womens Health Center

Services:

- Assertive Community
 Treatment/Community
 Support Services (Non 24
 Hour Care Adult)
- Behavioral Health (Day Programs - Adult) (Non 24 Hour Care -Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult)
- Brachytherapy (Imaging/Diagnostic Services)
- Breast Prostheses and Accessories
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Chemical Dependency (Non 24 Hour Care - Adult) (Non-detox - Adult)
- Community Integration (Non 24 Hour Care)
- Coronary Care Unit (Inpatient)

- Medical ICU (Intensive Care Unit)
- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Peer Support (Non 24 Hour Care)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Prosthetics (Home Medical Equipment)







Primary Location	Available Services			
Locations of Care	CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Employment Services (Non 24 Hour Care) Family Support (Non 24 Hour Care) Gastroenterology (Surgical Services) General Laboratory Tests GI or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hematology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Index & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient)			
Reading Hospital Children's Health Center 206 South Sixth Avenue West Reading, PA 19611	Services: General Laboratory Tests Single Specialty Practitioner (Outpatient)			
Reading Hospital Imaging 957 Benjamin Franklin Highway Douglassville, PA 19518	Other Clinics/Practices located at this site: • Reading Hospital Laboratory Services: • Outpatient Clinics (Outpatient)			
Reading Hospital Imaging at Wyomissing Family Practice 1350 Broadcasting Road Reading, PA 19610	Services: • Outpatient Clinics (Outpatient)			
Reading Hospital Lab at Kenhorst 600 High Boulevard Reading, PA 19607	Services: • Laboratory Draw Station (Outpatient)			

Reading Hospital 420 S. 5th Ave., West Reading, PA







Locations of Care	Available Services
Reading Hospital Outpatient Therapy 7189 Bernville Rd. Bernville, PA 19506	Services: • Outpatient Clinics (Outpatient)
Reading Hospital Outpatient Therapy 1920 Kutztown Rd. Reading, PA 19604	Services: • Outpatient Clinics (Outpatient)
Reading Hospital Outpatient Therapy 3701 Perkiomen Ave Reading, PA 19606	Services: • Single Specialty Practitioner (Outpatient)
The Reading Hospital at Elverson 310 Darby Square Elverson, PA 19520	Other Clinics/Practices located at this site: • The Reading Hospital Imaging Services at Elverson • The Reading Hospital Laboratory Services at Elverson Services: • Outpatient Clinics (Outpatient)
The Reading Hospital at Spring Ridge 2603 Keiser Blvd Wyomissing, PA 19610	Other Clinics/Practices located at this site: • The Reading Hospital Imaging Services at Spring Ridge • The Reading Hospital Laboratory Services at Spring Ridge • The Reading Hospital Wound Healing & Hyperbaric Medicine Center Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
The Reading Hospital at Wyomissing Plaza 2101 State Hill Road Wyomissing, PA 19610	Other Clinics/Practices located at this site: • TRHMC Outpatient Therapy Services • TRHMC Speech & Hearing Services Services: • Outpatient Clinics (Outpatient)
The Reading Hospital Drug & Alcohol Center 401 Buttonwood Street West Reading, PA 19611	Services: • Chemical Dependency (Residential Care - Adult) (Detox/Non-detox - Adult) • General Laboratory Tests
The Reading Hospital Imaging and Lab at Berkshire Heights 950A & B North Wyomissing Boulevard Wyomissing, PA 19610	Other Clinics/Practices located at this site: • The Reading Hospital Imaging at Berkshire Heights • The Reading Hospital Laboratory at Berkshire Heights Services: • Outpatient Clinics (Outpatient)







Locations of Care	Available Services
The Reading Hospital maging and Laboratory at Hamburg 31 Industrial Drive Hamburg, PA 19526	Other Clinics/Practices located at this site: Reading Hospital Miller Regional Heart Center Cardiac Testin Reading Hospital Outpatient Therapy, Suite 129 RH Miller Regional Heart Center Cardiac Testing Services: General Laboratory Tests Outpatient Clinics (Outpatient)
The Reading Hospital Imaging Center at Broadcasting Road 1320 Broadcasting Road Wyomissing, PA 19610	Other Clinics/Practices located at this site: • Heart Health & Fitness, Suite 111 • Miller Regional Heart Center • RH Miller Regional Heart Center Cardiac Testing Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
The Reading Hospital Imaging Center at Exeter 2 Hearthstone Court Reading, PA 19606	Services: General Laboratory Tests Outpatient Clinics (Outpatient)
The Reading Hospital Lab & Imaging Services at Gateway 1020 Grings Hill Road Reading, PA 19608-8844	Other Clinics/Practices located at this site: • Reading Hospital Physical Therapy Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
The Reading Hospital Lab & Imaging Services at Kutztown 15050 Kutztown Road Kutztown, PA 19530	Other Clinics/Practices located at this site: • Reading Hospital Physical Therapy Services: • Outpatient Clinics (Outpatient)
The Reading Hospital Lab & Imaging Services at Leesport 5479 Pottsville Pike Leesport, PA 19533	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
The Reading Hospital Lab Services at Boyertown 146 South Reading Avenue Boyertown, PA 19512	Services: • Laboratory Draw Station (Outpatient)
The Reading Hospital Lab Services at West Lawn 25 Stevens Avenue West Lawn, PA 19609	Services: • Laboratory Draw Station (Outpatient)

Reading Hospital 420 S. 5th Ave., West Reading, PA







* Primary Location	
Locations of Care	Available Services
The Reading Hospital Laboratory at Bernville 7169 Bernville Road Bernville, PA 19506	Services: • Laboratory Draw Station (Outpatient)
The Reading Hospital Laboratory at Womelsdorf 1137 West Penn Avenue Womelsdorf, PA 19567	Services: • Laboratory Draw Station (Outpatient)
The Reading Hospital Laboratory Services at Reiffton 3703 Perkiomen Avenue Reading, PA 19606	Services: • Laboratory Draw Station (Outpatient)
TRH Center for Mental Health and Behavioral Medicine 560 Van Reed Road Wyomissing, PA 19610	Other Clinics/Practices located at this site: • TRH Behavorial Medicine Center, Suite 204 • TRH Center for Mental Health, Suite 301 and 308 Services: • Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) • Outpatient Clinics (Outpatient)
TRH Center for Mental Health at Birdsboro 321 Furnace Street, H60 Birdsboro, PA 19508	Services: • Chemical Dependency (Non 24 Hour Care - Adult) (Non-detox - Adult)
TRH Center for Mental Health at Kutztown University Boehm Science Hall, Main Street Kutztown, PA 19530	Services: • Chemical Dependency (Non 24 Hour Care - Adult) (Non-detox - Adult)
TRH Center for Mental Health at Wyomissing High School 630 Evans Avenue Wyomissing, PA 19610	Services: • Behavioral Health (Non 24 Hour Care - Child/Youth)









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."

Behavioral Health Care

Safety Goals	Organizations Should	Implemented
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







Symbol Key

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Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient 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
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø







Symbol Key

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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 Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	୭୭୭୭ ୭୭୭୭୭
	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





Measure Area

Emergency

Department





National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

	Commission					
	Accredited Organizations					
	Nationwide	Statewide				
)	№ 2	№ 2				

Compared to other Joint

		Cor	npared to c Accredit	other Joint ed Organiz		n
		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.	118.00 minutes 784 eligible Patients	56.00	135.00	70.47	138.64
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 posital	320.00 minutes 795 eligible	206.00	320.00	232.27	303.04

Explanation

This category of evidence based measures assesses the

time patients remain in the hospital Emergency Department prior to inpatient admission.

- 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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Measure Area

Hospital-Based

Services

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint			
Commission			
Accredited Organizations			
lationwide	Statewide		

This category of evidenced based measures assesses the **№** 2

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		Col	mpared to o	other Joint ed Organiz		on
		1	Nationwide			wide
Measure	Explanation	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 - 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.	99% of 641 eligible Patients	100%	95%	100%	95%

Explanation

overall quality of care given to psychiatric patients.

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Reading Hospital 420 S. 5th Ave., West Reading, PA





National Quality Improvement Goals

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Reporting	Period:	July	2017	- June	2018
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Compared to other Joint **Accredited Organizations**

Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Соі	mpared to o	other Joint ed Organiz		n
		١	Nationwide		State	wide
Measure	Explanation	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 - Children (1-12 years)	This measure reports the number of children age (1-12 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.	3	100%	96%	100%	99%

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Cor	npared to o Accredit	other Joint ed Organiz		n
		١	lationwide		State	ewide
Measure	Explanation	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 - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 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.	4 	100%	95%	100%	99%

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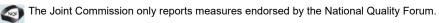
National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint Commission

		Commi	1001011
		Accredited O	rganizations
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

		Соі	mpared to o	other Joint ed Organiz		n
		١	Nationwide		State	wide
Measure	Explanation	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.	99% of 512 eligible Patients	100%	95%	100%	95%



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Measure Area

Hospital-Based

Services

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Nationwide Statewide

Org ID: 6220

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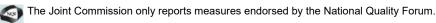
For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

		Соі	mpared to o	other Joint ed Organiz		on
		1	Nationwide		State	wide
Measure	Explanation	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.	98% of 128 eligible Patients	100%	93%	100%	88%

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.



This information can also be viewed at www.hospitalcompare.hhs.gov Null value or data not displayed.







National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint Commission		
Accredited Organizations		
Nationwide	Statewide	
<u>2</u>	№ 2	

		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						

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		Cor	npared to c	otner Joint ed Organiz		on
			Nationwide	eu Organiz		ewide
Measure	Explanation	Hospital		Average		Average
	<u> </u>	Results	Scored	Rate:	Scored	Rate:
			at Least:		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 persons capacity to meet lifes everyday demands.	39% of 51 eligible Patients	100%	63%	100%	63%
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 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 is also being treated with Clozapine.	3	100%	40%	3	3

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

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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				n
		١	lationwide	Ž	State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 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.	3	100%	50%	100%	68%

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission Accredited Organizations				on
		N	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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 is also being treated with Clozapine.	33% of 39 eligible Patients	100%	64%	100%	62%

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Accredited Organizations Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

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		Compared to other Joint Commission Accredited Organizations				on
		1	lationwide			ewide
Measure	Explanation	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 medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	58% of 12 eligible Patients	100%	58%	100%	73%
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.	0.87 (265 Total Hours in Restraint)	N/A	0.46	N/A	0.60

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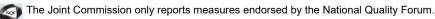


National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission Accredited Organizations				
		١	Nationwide	Statewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 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.	№ 3 ————	N/A	0.34	N/A	0.43
Hours of Physical Restraint Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 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.	0.00 (0 Total Hours in Restraint)	N/A	0.24	N/A	0.21



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Compared to other Joint









National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

		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				on
		N	Nationwide	ou organiz		wide
Measure	Explanation	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.	0.96 (236 Total Hours in Restraint)	N/A	0.53	N/A	0.48
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.	0.48 (29 Total Hours in Restraint)	N/A	0.17	N/A	2.62
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.	0.00 (0 Total Hours in Seclusion)	N/A	0.35	N/A	0.30

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint Accredited Organizations

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	Nationwide	Statewide
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Measure Area	Explanation			de	Statewide	Э
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 Commissior Accredited Organizations				
		Nationwide			State	wide
Measure	· · · · · · · · · · · · · · · · · · ·	ospital esults	Top 10% Scored	Average Rate:	Top 10% Scored	Avei Ra

		Compared to other Joint Commission Accredited Organizations			n	
					State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 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.	3	N/A	0.61	N/A	0.67
Hours of Seclusion Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 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.	0.00 (0 Total Hours in Seclusion)	N/A	0.21	N/A	0.23
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.	0.00 (0 Total Hours in Seclusion)	N/A	0.40	N/A	0.32
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.	0.00 (0 Total Hours in Seclusion)	N/A	0.04	N/A	0.04

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint		
Commission		
Accredited C	rganizations	
Nationwide	Statewide	

		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				on
		Nationwide			Statewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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.	99% of 542 eligible Patients	100%	94%	99%	94%

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018

Compared to other Joint Accredited Organizations

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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			n	
		Nationwide		Statewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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.	100% of 73 eligible Patients	100%	98%	100%	99%
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.	3% of 270 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.	48% of 2828 eligible Patients	73%	51%	65%	48%

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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."

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