

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

-  This organization achieved the best possible results.
-  This organization's performance is above the target range/value.
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Footnote Key

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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 | 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 | 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 | 3/9/2019 | 3/8/2019 | 3/8/2019 |

| Certified Programs | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|---|------------------------|----------------|-----------------------|--------------------------|
|  Heart Failure | Certification | 5/18/2019 | 5/17/2019 | 5/17/2019 |

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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| | | Compared to other Joint Commission Accredited Organizations | |
|--|---|---|---|
| | | Nationwide | Statewide |
| Behavioral Health Care | 2017National Patient Safety Goals |  |  * |
| Home Care | 2017National Patient Safety Goals |  |  * |
| Hospital | 2017National Patient Safety Goals |  |  * |
| National Quality Improvement Goals: | | | |
| Reporting Period: Oct 2017 - Sep 2018 | Emergency Department |  ² |  ² |
| | Hospital-Based Inpatient Psychiatric Services |  ² |  ² |
| | Immunization |  ² |  ² |
| | Perinatal Care |  ² |  ² |
| Laboratory | 2017National Patient Safety Goals |  |  * |



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



Locations of Care

| * Primary Location | | | |
|--|---|--|---|
| Locations of Care | Available Services | | |
| Occupational Health Services 1000 Tuckerton Court Reading, PA 19605 | Other Clinics/Practices located at this site: <ul style="list-style-type: none">• 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: <ul style="list-style-type: none">• General Laboratory Tests• Outpatient Clinics (Outpatient) | | |
| Reading Health Rehabilitation Hospital 2802 Papermill Road Wyomissing, PA 19610 | Other Clinics/Practices located at this site: <ul style="list-style-type: none">• TRH Post Acute Rehab Therapy Services Services: <table><tr><td><ul style="list-style-type: none">• General Laboratory Tests• Inpatient Unit (Inpatient)• Neuro/Spine Unit (Inpatient)• Non-Sterile Medication Compounding (Inpatient)• On Site Pharmacy• Outpatient Clinics (Outpatient)</td><td><ul style="list-style-type: none">• Rehabilitation Services• Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)• Skilled Nursing Care• Sterile Medication Compounding (Inpatient)• Ultrasound (Imaging/Diagnostic Services)</td></tr></table> | <ul style="list-style-type: none">• General Laboratory Tests• Inpatient Unit (Inpatient)• Neuro/Spine Unit (Inpatient)• Non-Sterile Medication Compounding (Inpatient)• On Site Pharmacy• Outpatient Clinics (Outpatient) | <ul style="list-style-type: none">• Rehabilitation Services• Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)• Skilled Nursing Care• Sterile Medication Compounding (Inpatient)• Ultrasound (Imaging/Diagnostic Services) |
| <ul style="list-style-type: none">• General Laboratory Tests• Inpatient Unit (Inpatient)• Neuro/Spine Unit (Inpatient)• Non-Sterile Medication Compounding (Inpatient)• On Site Pharmacy• Outpatient Clinics (Outpatient) | <ul style="list-style-type: none">• 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 | Available Services |
|--|--|
| Reading Hospital * 420 S. 5th Ave. West Reading, PA 19611 | <p>Joint Commission Advanced Certification Programs:</p> <ul style="list-style-type: none"> Advanced Total Hip and Total Knee Replacement Primary Stroke Center <p>Joint Commission Certified Programs:</p> <ul style="list-style-type: none"> Heart Failure <p>Other Clinics/Practices located at this site:</p> <ul style="list-style-type: none"> 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 <p>Services:</p> <ul style="list-style-type: none"> 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) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|--|--|
| | <ul style="list-style-type: none"> • 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) • Interventional Radiology (Imaging/Diagnostic Services) • Labor & Delivery (Inpatient) • Magnetic Resonance Imaging (Imaging/Diagnostic Services) • Medical /Surgical Unit (Inpatient) • Radiation Oncology (Imaging/Diagnostic Services) • Sleep Laboratory (Sleep Laboratory) • Sterile Medication Compounding (Inpatient) • Surgical ICU (Intensive Care Unit) • Surgical Unit (Inpatient) • Teleradiology (Imaging/Diagnostic Services) • Thoracic Surgery (Surgical Services) • Toxicology • Ultrasound (Imaging/Diagnostic Services) • Urology (Surgical Services) • Vascular Surgery (Surgical Services) |
| Reading Hospital Children's Health Center 206 South Sixth Avenue West Reading, PA 19611 | Services: <ul style="list-style-type: none"> • General Laboratory Tests • Single Specialty Practitioner (Outpatient) |
| Reading Hospital Imaging 957 Benjamin Franklin Highway Douglassville, PA 19518 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> • Reading Hospital Laboratory Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient) |
| Reading Hospital Imaging at Wyomissing Family Practice 1350 Broadcasting Road Reading, PA 19610 | Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient) |
| Reading Hospital Lab at Kenhorst 600 High Boulevard Reading, PA 19607 | Services: <ul style="list-style-type: none"> • Laboratory Draw Station (Outpatient) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|--|---|
| Reading Hospital Outpatient Therapy 7189 Bernville Rd. Bernville, PA 19506 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| Reading Hospital Outpatient Therapy 1920 Kutztown Rd. Reading, PA 19604 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| Reading Hospital Outpatient Therapy 3701 Perkiomen Ave Reading, PA 19606 | Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient) |
| The Reading Hospital at Elverson 310 Darby Square Elverson, PA 19520 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> The Reading Hospital Imaging Services at Elverson The Reading Hospital Laboratory Services at Elverson Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| The Reading Hospital at Spring Ridge 2603 Keiser Blvd Wyomissing, PA 19610 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> The Reading Hospital Imaging Services at Spring Ridge The Reading Hospital Laboratory Services at Spring Ridge The Reading Hospital Wound Healing & Hyperbaric Medicine Cen Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> TRHMC Outpatient Therapy Services TRHMC Speech & Hearing Services Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| The Reading Hospital Drug & Alcohol Center 401 Buttonwood Street West Reading, PA 19611 | Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> The Reading Hospital Imaging at Berkshire Heights The Reading Hospital Laboratory at Berkshire Heights Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|--|---|
| The Reading Hospital Imaging and Laboratory at Hamburg 31 Industrial Drive Hamburg, PA 19526 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Reading Hospital Miller Regional Heart Center Cardiac Testin Reading Hospital Outpatient Therapy, Suite 129 RH Miller Regional Heart Center Cardiac Testing Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Heart Health & Fitness, Suite 111 Miller Regional Heart Center RH Miller Regional Heart Center Cardiac Testing Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| The Reading Hospital Imaging Center at Exeter 2 Hearthstone Court Reading, PA 19606 | Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Reading Hospital Physical Therapy Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Reading Hospital Physical Therapy Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| The Reading Hospital Lab & Imaging Services at Leesport 5479 Pottsville Pike Leesport, PA 19533 | Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| The Reading Hospital Lab Services at Boyertown 146 South Reading Avenue Boyertown, PA 19512 | Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient) |
| The Reading Hospital Lab Services at West Lawn 25 Stevens Avenue West Lawn, PA 19609 | Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient) |



Locations of Care




* Primary Location

| Locations of Care | Available Services |
|---|--|
| The Reading Hospital Laboratory at Bernville 7169 Bernville Road Bernville, PA 19506 | Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient) |
| The Reading Hospital Laboratory at Womelsdorf 1137 West Penn Avenue Womelsdorf, PA 19567 | Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient) |
| The Reading Hospital Laboratory Services at Reiffton 3703 Perkiomen Avenue Reading, PA 19606 | Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> TRH Behavioral Medicine Center, Suite 204 TRH Center for Mental Health, Suite 301 and 308 Services: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Behavioral Health (Non 24 Hour Care - Child/Youth) |







2017 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




| 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 |  |

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2017 National Patient Safety Goals

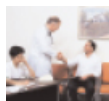
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Home Care




| 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 |  |

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2017 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 |  |
| 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 |  |
| | 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 2017 - September 2018

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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. | 2 116.00 minutes 778 eligible Patients | 56.00 | 136.00 | 70.91 | 140.19 |
| 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. | 2 314.00 minutes 790 eligible Patients | 207.00 | 320.00 | 234.65 | 304.49 |

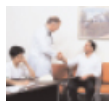


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Compared to other Joint Commission Accredited Organizations

| 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 | 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. |  99% of 486 eligible Patients | 100% | 94% | 100% | 95% |

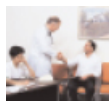


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Compared to other Joint Commission Accredited Organizations

| 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 - 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% | 95% | 100% | 99% |



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National Quality Improvement Goals

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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: |
| 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: October 2017 - September 2018



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| Measure Area | Explanation | Nationwide | Statewide |
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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 | Nationwide Top 10% Scored at Least: | Average Rate: | Statewide 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 363 eligible Patients | 100% | 94% | 100% | 94% |

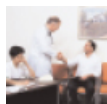


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| Hospital-Based Inpatient Psychiatric Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. |  ² |  ² |

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: |
| 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 122 eligible Patients | 100% | 93% | 100% | 88% |



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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: |
| 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. | 47% of 32 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 when the patient is also being treated with Clozapine. | ³ ---- | 100% | 41% | ---- ³ | ---- ³ |



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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: |
| 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% | 51% | 100% | 64% |

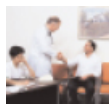


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Compared to other Joint Commission Accredited Organizations

| 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: |
| 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. |  43% of 21 eligible Patients | 100% | 64% | 100% | 62% |



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| Measure Area | Explanation | Nationwide | Statewide |
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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. |  55% of 11 eligible Patients | 100% | 57% | 100% | 75% |
| 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. |  0.62 (190 Total Hours in Restraint) | N/A | 0.45 | N/A | 0.61 |



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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 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 | 0.39 |
| 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 | 0.25 | N/A | 0.21 |



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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. |  0.65 (161 Total Hours in Restraint) | N/A | 0.51 | N/A | 0.47 |
| 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. |  0.50 (30 Total Hours in Restraint) | N/A | 0.17 | N/A | 2.77 |
| 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 | 0.33 |



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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: | |
| 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 | 0.55 |
| 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 | 0.23 | N/A | 0.27 |
| 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 | 0.39 | N/A | 0.36 |
| 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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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 | | | | | |
|------------------------|---|---|--------------------------|---------|--------------------------|---------|
| | | Hospital Results | Nationwide | Average | Statewide | Average |
| | | | Top 10% Scored at Least: | Rate: | Top 10% Scored at Least: | 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: October 2017 - September 2018



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 | Nationwide | | Statewide | |
|-------------------------------|---|--|--------------------------|---------------|--------------------------|---------------|
| | | | 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 90 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. 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 256 eligible Patients | 0% | 2% | 0% | 1% |
| 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. |  49% of 2737 eligible Patients | 73% | 51% | 65% | 48% |



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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2017 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.

Laboratory

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

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