



# Accreditation Quality Report





Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals - safety guidelines that target the prevention of medical errors such as surgery on the wrong side of the body and safe medication use.
- National Quality Improvement Goals - measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at [qualityreport@jointcommission.org](mailto:qualityreport@jointcommission.org) with your comments and suggestions.

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 |
|------------------------|------------------------|----------------|-----------------------|--------------------------|
| Hospital               | Accredited             | 4/28/2018      | 4/27/2018             | 6/18/2019                |
| Laboratory             | Accredited             | 3/23/2018      | 3/22/2018             | 3/22/2018                |

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

Pathology and Clinical Laboratory

Hospital

| Advanced Certification Programs      | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|--------------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Advanced Comprehensive Stroke Center | Certification          | 8/24/2017      | 9/27/2019             | 9/27/2019                |
| Ventricular Assist Device            | Certification          | 6/27/2018      | 6/26/2018             | 6/26/2018                |

| Certified Programs           | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Coronary Artery Bypass Graft | Certification          | 7/24/2018      | 7/23/2018             | 7/23/2018                |

### Other Accredited Programs/Services

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

### Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2014 ACS National Surgical Quality Improvement Program

2013 Gold Plus Get With The Guidelines - Stroke

2012 Gold Get With The Guidelines - Heart Failure

Hospital

2019 National Patient Safety Goals

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide









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|  |   | Compared to other Joint Commission Accredited Organizations                                      |  |
|--|---|--|--|
|  |   | Nationwide   | Statewide  |
| <b>National Quality Improvement Goals:</b> |   |  |  |
| Reporting Period:<br>Apr 2018 - Mar 2019   | Emergency Department                          |  <sup>2</sup> |  <sup>2</sup> |
|  | Hospital-Based Inpatient Psychiatric Services |  <sup>2</sup> |  <sup>2</sup> |
|  | Perinatal Care                                |  <sup>2</sup> |  <sup>2</sup> |
| Laboratory                                 | <b>2018 National Patient Safety Goals</b>     |               |  *            |



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## Locations of Care

### \* Primary Location

| Locations of Care  | Available Services   |
|--|--|
| <b>Mission Hospital, LLLP</b><br>5 Medical Park Drive<br>Asheville, NC 28803     | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Asheville Surgery Center</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Ambulatory Surgery Center (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>  |
| <b>Mission Hospital, LLLP</b><br>11 Vanderbilt Park Drive<br>Asheville, NC 28803 | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Huff Therapy</li> <li>Mission Child Safety</li> <li>Mission Pediatric Audiology Suite</li> <li>Mission Pediatric Endocrinology</li> <li>Mission Pediatric Genetics</li> <li>Mission Pediatric GI</li> <li>Mission Pediatric Orthopedics</li> <li>Mission Pediatric Pulmonary</li> <li>Mission Pediatric Sedation Suite</li> <li>Mission Pediatric Surgery</li> <li>Mission Radiology at Reuters</li> <li>Olson Huff Center</li> <li>Pediatric Community Transition</li> <li>Pediatric Neurology</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>          |
| <b>Mission Hospital, LLLP</b><br>360 Hospital Drive<br>Clyde, NC 28721           | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Asheville Orthopedic Associates</li> <li>Carolina Spine and Neurosurgery Center</li> <li>Mission Wound Healing Center-Clyde</li> <li>Wound Healing Center</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>   |
| <b>Mission Hospital, LLLP</b><br>21 Hospital Drive<br>Asheville, NC 28801        | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Cancer Care Western North Carolina</li> <li>Mission Cancer Care Multidisciplinary Clinic</li> <li>Mission Hospital PET/CT Center</li> <li>Mission Hospital Radiation Therapy</li> <li>Mission Outpatient Infusion Center</li> <li>Mission PET and Radiology Center</li> <li>Mission Radiation Therapy-Peds Hem Onc</li> <li>Pediatric Hematology/Oncology</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of Blood Product (Outpatient)</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>General Laboratory Tests</li> <li>Hazardous Medication Compounding (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul> |



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| <b>Mission Hospital, LLLP</b><br>1388 Sand Hill Road<br>Candler, NC 28715       | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Mission Radiology</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>  |
| <b>Mission Hospital, LLLP</b><br>100 Ridgefield Court<br>Asheville, NC 28816    | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Hope Women's Cancer Center</li> <li>Mission Outpatient Infusion at Hope</li> <li>Mission Radiology at Hope</li> <li>Mission's Outpatient Radiology at Hope</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>  |
| <b>Mission Hospital, LLLP</b><br>5 Vanderbilt Park Drive<br>Asheville, NC 28803 | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Mission Cardiovascular Diagnostics - Peds</li> <li>Mission Cardiovascular Diagnostics - Adult</li> <li>Mission Heart Path and Heart Path ICR</li> <li>Mission Hospital OP Heart Services</li> <li>Mission Sleep Lab</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>  |
| <b>Mission Hospital, LLLP</b><br>1 Hospital Dr<br>Asheville, NC 28801           | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Anticoagulation Clinic</li> <li>Anticoagulation, Diabetes and Health Education</li> <li>Diabetes Clinic</li> <li>Mission Outpatient Behavioral Health</li> <li>Mission Radiology at Ortho-Trauma Clinic</li> <li>Mission Wound Healing</li> <li>Mission Wound Healing and Hyperbaric Center</li> <li>Surgical Admissions Testing Unit</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul> |
| <b>Mission Hospital, LLLP</b><br>2 Medical Park Dr.<br>Asheville, NC 28803      | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>WNC Breastfeeding Center</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |





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| <b>Mission Hospital, LLLP</b><br>534 Biltmore Ave.<br>Asheville,<br>NC 28801-4601       | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Mission Breast Center</li> <li>• Mission Breast Center</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Outpatient Clinics (Outpatient)</li> <li>• Perform Invasive Procedure (Outpatient)</li> </ul>   |
| <b>Mission Hospital, LLLP</b><br>2695 Hendersonville Rd.<br>Arden, NC 28704-8576        | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Mission Spine Center</li> <li>• Mission Spine Center</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Outpatient Clinics (Outpatient)</li> <li>• Perform Invasive Procedure (Outpatient)</li> </ul>   |
| <b>Mission Hospital, LLLP</b><br>2 Town Square Blvd. Ste.<br>110<br>Asheville, NC 28803 | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Mission Breast Center - Biltmore Park</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Mission Hospital, LLLP</b><br>9 Vanderbilt Park Dr.<br>Asheville, NC 28803           | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Fullerton Genetics</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• Outpatient Clinics (Outpatient)</li> <li>• Perform Invasive Procedure (Outpatient)</li> </ul>   |
| <b>Mission Hospital, LLLP</b><br>310 Long Shoals Rd.<br>Arden, NC 28704                 | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Mission Radiology at Biltmore Park</li> <li>• Mission Vein Treatment at Biltmore Park</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• Outpatient Clinics (Outpatient)</li> <li>• Perform Invasive Procedure (Outpatient)</li> </ul>  |
| <b>Mission Hospital, LLLP</b><br>7 Vanderbilt Park Dr<br>Asheville, NC 28803            | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Mission Interventional Spine</li> <li>• Mission Interventional Spine</li> <li>• Mission Outpatient MRI</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Outpatient Clinics (Outpatient)</li> <li>• Perform Invasive Procedure (Outpatient)</li> </ul> |



Locations of Care

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| Locations of Care   | Available Services   |
|---|--|
| <b>Mission Hospital, LLLP</b><br>691 Blythe Street<br>Hendersonville,<br>NC 28739 | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"><li>Mission Cardiovascular Diagnostics</li></ul> <b>Services:</b> <ul style="list-style-type: none"><li>Outpatient Clinics (Outpatient)</li></ul> |





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| <b>Mission Hospitals, Inc. *</b><br>509 Biltmore Avenue<br>Asheville, NC 28801 | <b>Joint Commission Advanced Certification Programs:</b> <ul style="list-style-type: none"> <li>Advanced Comprehensive Stroke Center</li> <li>Ventricular Assist Device</li> </ul><br><b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>Coronary Artery Bypass Graft</li> </ul><br><b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Advance Cardiac Care Clinic</li> <li>Advanced Cardiac Care Clinic</li> </ul><br><b>Services:</b> <ul style="list-style-type: none"> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiac Surgery (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>Cardiovascular Unit (Inpatient)</li> <li>Coronary Care Unit (Inpatient)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Dialysis Unit (Inpatient)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (Inpatient)</li> <li>Hematology/Oncology Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Neuro/Spine ICU (Intensive Care Unit)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Neurosurgery (Surgical Services)</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Ophthalmology (Surgical Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Orthopedic/Spine Unit (Inpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Pediatric Unit (Inpatient)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Sterile Medication Compounding (Inpatient)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Surgical Unit (Inpatient)</li> <li>Teleradiology (Imaging/Diagnostic Services)</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul> |



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| <b>Mission Hospitals, LLLP</b><br>428 Biltmore Avenue<br>Asheville, NC 28801 | <b>Services:</b> <ul style="list-style-type: none"> <li>Behavioral Health (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial - Adult)</li> <li>Community Integration (Non 24 Hour Care)</li> <li>Family Support (Non 24 Hour Care)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Peer Support (Non 24 Hour Care)</li> <li>Technology-Based Behavioral Health Svcs (Non 24 Hour Care - Adult/Child/Youth)</li> </ul> |
| <b>Mission Hospital, LLLP</b><br>222 Asheland Ave<br>Asheville, NC 28801     | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Mission Intervention and Vascular Center</li> <li>Mission Vascular and Interventional Clinic</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>             |



















## 2019 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.

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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 Infections that are difficult to treat          |  |
|  | 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: April 2018 - March 2019

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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. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure  | Explanation   | Hospital Results  | Nationwide              |                  |                         |                  | Statewide               |                  |
|--|---|---|-------------------------|------------------|-------------------------|------------------|-------------------------|------------------|
|  |   |   | Top 10% Scored at Most: | Weighted Median: | Top 10% Scored at Most: | Weighted Median: | Top 10% Scored at Most: | Weighted Median: |
| Admit Decision Time to ED Departure Time for Admitted Patients | The amount of time (in minutes) it takes from the time the physician decides to admit a patient into the hospital from the Emergency Department until the patient actually leaves the ED to go to the inpatient unit. | <sup>2</sup><br><br>142.00 minutes<br>563 eligible Patients | 55.00                   | 136.00           | 58.54                   | 128.59           |                         |                  |



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

Compared to other Joint Commission  
Accredited Organizations

| Measure  | Explanation   | Hospital<br>Results                        | Nationwide                     |                  |                                |                  | Statewide                      |                  |
|--|---|--|--------------------------------|------------------|--------------------------------|------------------|--------------------------------|------------------|
|  |   |  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>83% of<br>825 eligible<br>Patients | 100%                           | 95%              | 100%                           | 91%              |                                |                  |



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Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation  | Compared to other Joint Commission<br>Accredited Organizations |  |                  |   |                   |
|---|--|--|--|------------------|---|-------------------|
|   |  | Hospital<br>Results  | Nationwide<br>Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Statewide<br>Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>94% of<br>194 eligible<br>Patients                     | 100%   | 95%              | ---- <sup>3</sup>                           | ---- <sup>3</sup> |



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## National Quality Improvement Goals

Reporting Period: April 2018 - March 2019

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Compared to other Joint  
Commission

Accredited Organizations

| Measure Area  | Explanation   | Nationwide   | Statewide    |
|---|---|--------------|--------------|
| Hospital-Based<br>Inpatient Psychiatric<br>Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure  | Explanation   | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                   |
|--|---|--|--------------------------------|------------------|--------------------------------|-------------------|
|  |   | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>79% of<br>203 eligible<br>Patients                     | 100%                           | 95%              | ---- <sup>3</sup>              | ---- <sup>3</sup> |



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Accredited Organizations

| Measure Area  | Explanation   | Nationwide   | Statewide    |
|---|---|--------------|--------------|
| Hospital-Based<br>Inpatient Psychiatric<br>Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation   | Compared to other Joint Commission<br>Accredited Organizations |  |                  |   |                  |
|---|---|--|--|------------------|---|------------------|
|   |   | Hospital<br>Results  | Nationwide<br>Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Statewide<br>Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>79% of<br>250 eligible<br>Patients                     | 100%   | 95%              | 100%  | 95%              |



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| Measure Area  | Explanation   | Nationwide   | Statewide    |
|---|---|--------------|--------------|
| Hospital-Based<br>Inpatient Psychiatric<br>Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation  | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                  |
|---|--|--|--------------------------------|------------------|--------------------------------|------------------|
|   |  | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>80% of<br>178 eligible<br>Patients                     | 100%                           | 94%              | 100%                           | 95%              |



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

Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation   | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                   |
|---|---|--|--------------------------------|------------------|--------------------------------|-------------------|
|   |   | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>Rate:  |
| Multiple Antipsychotic<br>Medications at Discharge with<br>Appropriate Justification<br>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.   | <br><br>75% of<br>24 eligible<br>Patients                      | 100%                           | 62%              | 99%                            | 84%               |
| Multiple Antipsychotic<br>Medications at Discharge with<br>Appropriate Justification<br>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. | <sup>3</sup><br><br>----                                       | 100%                           | 48%              | ---- <sup>3</sup>              | ---- <sup>3</sup> |



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Compared to other Joint  
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Accredited Organizations

| Measure Area  | Explanation   | Nationwide   | Statewide    |
|---|---|--------------|--------------|
| Hospital-Based<br>Inpatient Psychiatric<br>Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation  | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                   |
|---|--|--|--------------------------------|------------------|--------------------------------|-------------------|
|   |  | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>Rate:  |
| Multiple Antipsychotic<br>Medications at Discharge with<br>Appropriate Justification<br>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. | <sup>4</sup><br>----   | 100%                           | 53%              | ---- <sup>3</sup>              | ---- <sup>3</sup> |



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| Measure Area  | Explanation   | Nationwide   | Statewide    |
|---|---|--------------|--------------|
| Hospital-Based<br>Inpatient Psychiatric<br>Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | <sup>2</sup> | <sup>2</sup> |

Compared to other Joint Commission  
Accredited Organizations

| Measure  | Explanation  | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                  |
|--|--|--|--------------------------------|------------------|--------------------------------|------------------|
|  |  | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>Rate: |
| Multiple Antipsychotic<br>Medications at Discharge with<br>Appropriate Justification<br>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. | <br><br>64% of<br>11 eligible<br>Patients                      | 100%                           | 64%              | 99%                            | 84%              |



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Compared to other Joint  
Commission

Accredited Organizations

| Measure Area  | Explanation   | Nationwide | Statewide |
|---|---|------------|-----------|
| Hospital-Based<br>Inpatient Psychiatric<br>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<br>Results                    | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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. | <br>82% of 11 eligible Patients        | 100%                           | 54%              | 100%                           | 88%              |
| 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.  | <br>0.10 (96 Total Hours in Restraint) | N/A                            | 0.48             | N/A                            | 0.13             |



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

Compared to other Joint Commission  
Accredited Organizations

| Measure  | Explanation  | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |                                |                   |
|--|--|--|--------------------------------|------------------|--------------------------------|-------------------|
|  |  | Hospital<br>Results  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>Rate:  |
| Hours of Physical Restraint<br>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.  | <br>0.22<br>(18 Total Hours<br>in Restraint)                   | N/A                            | 0.37             | ---- <sup>3</sup>              | ---- <sup>3</sup> |
| Hours of Physical Restraint<br>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. | <br>0.03<br>(4 Total Hours<br>in Restraint)                    | N/A                            | 0.26             | ---- <sup>3</sup>              | ---- <sup>3</sup> |



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|---|---|------------|-----------|
| Hospital-Based<br>Inpatient Psychiatric<br>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                           | 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. | <br>0.12<br>(73 Total Hours in Restraint)  | N/A                      | 0.55          | N/A                      | 0.12          |
| 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.        | <br>0.00<br>(0 Total Hours in Restraint)   | N/A                      | 0.14          | N/A                      | 0.20          |
| 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.   | <br>0.26<br>(249 Total Hours in Seclusion) | N/A                      | 0.37          | N/A                      | 0.16          |



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

Compared to other Joint Commission  
Accredited Organizations

| Measure   | Explanation  | Hospital<br>Results                        | Compared to other Joint Commission<br>Accredited Organizations |                  |                                |                   |
|---|--|--|--|------------------|--------------------------------|-------------------|
|   |  |  | Nationwide   | Average<br>Rate: | Statewide                      | Average<br>Rate:  |
|   |  |  | Top 10%<br>Scored<br>at Least:                                 |                  | Top 10%<br>Scored<br>at Least: |                   |
| Hours of Seclusion Use<br>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.  | <br>1.98<br>(166 Total Hours in Seclusion) | N/A  | 0.60             | ---- <sup>3</sup>              | ---- <sup>3</sup> |
| Hours of Seclusion Use<br>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. | <br>0.07<br>(11 Total Hours in Seclusion)  | N/A  | 0.22             | ---- <sup>3</sup>              | ---- <sup>3</sup> |
| Hours of Seclusion Use Adults<br>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. | <br>0.12<br>(72 Total Hours in Seclusion)  | N/A  | 0.42             | N/A                            | 0.18              |
| Hours of Seclusion Use Older<br>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.        | <br>0.00<br>(0 Total Hours in Seclusion)   | N/A  | 0.04             | N/A                            | 0.01              |



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

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

---- Null value or data not displayed.

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



## National Quality Improvement Goals

Reporting Period: April 2018 - March 2019

### Symbol Key

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is similar to the target range/value.
- This organization's performance is below the target range/value.
- Not displayed

### Footnote Key

1. The Measure or Measure Set was not reported.
2. The Measure Set does not have an overall result.
3. The number of patients is not enough for comparison purposes.
4. The measure meets the Privacy Disclosure Threshold rule.
5. The organization scored above 90% but was below most other organizations.
6. The Measure results are not statistically valid.
7. The Measure results are based on a sample of patients.
8. The number of months with Measure data is below the reporting requirement.
9. The measure results are temporarily suppressed pending resubmission of updated data.
10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
11. There were no eligible patients that met the denominator criteria.

Compared to other Joint  
Commission

Accredited Organizations

| Measure Area   | Explanation  | Nationwide | Statewide |
|----------------|--|------------|-----------|
| Perinatal Care | This category of evidenced based measures assesses the care of mothers and newborns. | 2          | 2         |

Compared to other Joint Commission  
Accredited Organizations

| Measure                       | Explanation   | Hospital<br>Results              | Nationwide                     |                  | Statewide                      |                  |
|-------------------------------|---|----------------------------------|--------------------------------|------------------|--------------------------------|------------------|
|                               |   |                                  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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.   | <br>100% of 23 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. | <br>0% of 52 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.   | <br>66% of 379 eligible Patients | 73%                            | 52%              | 66%                            | 46%              |



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## 2018 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                         |  |

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