

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

DBA: Mission Hospital,

509 Biltmore Avenue, Asheville, NC



Summary of Quality Information

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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	Last Full Survey	
		Date	Date	Survey Date
🎯 Hospital	Accredited	4/28/2018	4/27/2018	12/3/2019
olimitation and the second sec	Accredited	3/23/2018	9/10/2020	9/10/2020

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	v Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	9/28/2019	9/27/2019	9/27/2019
🧼 Ventricular Assist Device	Certification	6/27/2018	6/26/2018	6/26/2018

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

		Compared to other Joint Organiz	
		Nationwide	Statewide
Hospital	2019National Patient Safety Goals	Ø	*

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





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ure is not applicable for this on.	Dec 2019	Hospital-Based Inpatient Psychiatric Services		1
yed		Perinatal Care	2 ²	() ²
ote Key	Laboratory	2018National Patient Safety Goals	Ø	*

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509 Biltmore Avenue, Asheville, NC



Locations of Care

* Primary Location

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Locations of Care	Available Services
MH Mission Hospital, LLLP * DBA: Mission Hospital 509 Biltmore Avenue Asheville, NC 28801	 Joint Commission Advanced Certification Programs: Advanced Comprehensive Stroke Center Ventricular Assist Device Other Clinics/Practices located at this site: Advance Cardiac Care Clinic Advanced Cardiac Care Clinic Advanced Cardiac Care Clinic Advance Cardiac Care Clinic Services: Brachytherapy (Imaging/Diagnostic Services) Cardioxascular Unit (Inpatient) Cardioxascular Surgery (Surgical Services) Castroenterology (Surgical Services) General Laboratory Tests G or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Cynecological Surgery (Surgical Services) Cardioxascular Unit (Inpatient) Hermatology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Hermatology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Urology (Surgical Ser



Locations of Care	Available Services	
Mission Hospital, LLLP 5 Medical Park Drive Asheville, NC 28803	Other Clinics/Practices located at this site: • Asheville Surgery Center Services: • Administration of High Risk Medications (Outpatient) • Ambulatory Surgery Center (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)	
Mission Hospital, LLLP 11 Vanderbilt Park Drive Asheville, NC 28803	 Other Clinics/Practices located at this site: Mission Child Safety Mission Children's Radiology Mission Hospital Pediatric GI Mission Huff Therpay Mission Olson Huff Center Practice Mission Pediatric Audiology Mission Pediatric Audiology Mission Pediatric Culmonology Mission Pediatric Endocrinology 	
	Services: • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)	
Mission Hospital, LLLP 360 Hospital Drive Clyde, NC 28721	Other Clinics/Practices located at this site: Asheville Orthopedics Clyde PSA Carolina Spine and Neurosurgery PSA Mission Wound Center Clyde Mission Wound Healing Center-Clyde Services: General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient) 	
Mission Hospital, LLLP 21 Hospital Drive Asheville, NC 28801	Other Clinics/Practices located at this site: • Mission Hospital PET and Radiology • Mission Hospital PET/CT Center • Mission Hospital Radiation Therapy • Mission Outpatient Infusion • Mission Pediatric Hematology and Oncology Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • Anesthesia (Outpatient) • General Laboratory Tests	



Locations of Care	Available Services
Mission Hospital, LLLP 1388 Sand Hill Road Candler, NC 28715	Other Clinics/Practices located at this site: Mission Radiology Candler Services: Outpatient Clinics (Outpatient)
Mission Hospital, LLLP	Other Clinics/Practices located at this site:
100 Ridgefield Court Asheville, NC 28816	 Hope Women's Cancer Center PSA Mission Outpatient Infusion at Hope Mission Radiology at Hope Mission's Outpatient Radiology at Hope
	Services: • Administration of High Risk Medications (Outpatient) • General Laboratory Tests • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 5 Vanderbilt Park Drive Asheville, NC 28803	Other Clinics/Practices located at this site: Mission Cardiovascular Diagnostics Mission Heart Path Mission Hospital OP Heart Services Mission Sleep Lab Services: General Laboratory Tests Outpatient Clinics (Outpatient)
Mission Hospital, LLLP 1 Hospital Dr Asheville, NC 28801	Other Clinics/Practices located at this site:• Anti-Coagulation Clinic• Mission Outpatient Behavioral Health• Chronic Condition Clinic• Mission Radiology (OrthoTrauma)• Mission Health Education Center• Mission SATU• Mission Hospital Disease Management• Mission Wound Center • Mission Wound Center/SATU
	Services: • Behavioral Health (Day Programs - Adult) (Partial - Adult) • General Laboratory Tests • Outpatient Clinics (Outpatient) • Peer Support (Non 24 Hour Care) • Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 2 Medical Park Dr. Asheville, NC 28803	Other Clinics/Practices located at this site: • Mission Breastfeeding Center Services:
	 Outpatient Clinics (Outpatient)



Locations of Care	Available Services
Mission Hospital, LLLP 534 Biltmore Ave. Asheville, NC 28801-4601	Other Clinics/Practices located at this site: Mission Breast Center Mission Breast Center Services: General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 2695 Hendersonville Rd. Arden, NC 28704-8576	Other Clinics/Practices located at this site: Mission Spine Center Mission Spine Center Services: General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 2 Town Square Blvd. Ste. 110 Asheville, NC 28803	Other Clinics/Practices located at this site: Mission Breast Center Services: Outpatient Clinics (Outpatient)
Mission Hospital, LLLP 9 Vanderbilt Park Dr. Asheville, NC 28803	Other Clinics/Practices located at this site: Fullerton Genetics Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 310 Long Shoals Rd. Arden, NC 28704	Other Clinics/Practices located at this site: Mission Radiology at Biltmore Park Mission Vein Treatment Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mission Hospital, LLLP 7 Vanderbilt Park Dr Asheville, NC 28803	Other Clinics/Practices located at this site: Mission Interventional Spine Mission MRI Mission Outpatient MRI Mission Pain Center Services: General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)



* Primary Location	
Locations of Care	Available Services
Mission Hospital, LLLP 691 Blythe Street Hendersonville, NC 28739	Other Clinics/Practices located at this site: • Mission Cardiovascular Diagnostics Services: • Outpatient Clinics (Outpatient)
Mission Hospitals, LLLP 428 Biltmore Avenue Asheville, NC 28801	 Other Clinics/Practices located at this site: Mission Hyperbaric Chamber Services: Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) Community Integration (Non 24 Hour Care) Family Support (Non 24 Hour Care) General Laboratory Tests Outpatient Clinics (Outpatient) Peer Support (Non 24 Hour Care) Adult/Child/Youth) General Laboratory Tests
Mission Hosptial, LLLP 222 Asheland Ave Asheville, NC 28801	Other Clinics/Practices located at this site: Mission Intervention and Vascular Mission Vascular and Interventional Clinic Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)

DBA: Mission Hospital,

509 Biltmore Avenue, Asheville, NC

Org ID: 6468



2019 National Patient Safety Goals

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigcirc
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	\bigcirc
	Reconciling Medication Information	\bigcirc
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Infections that are difficult to treat	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ୍ତ୍ର ତ
	Preventing Surgical Site Infections	\bigcirc
	Preventing Catheter-Associated Urinary Tract Infection	\bigcirc
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	\bigcirc
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigcirc

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.



National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

			o other Joint hission
		Accredited C	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				
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d Median:
Admit Decision Time to ED Departure Time for Admitted Patients	The amount of time (in minutes) it takes from the time the physician decides to admit a patient into the hospital from the Emergency Department until the patient actually leaves the ED to go to the inpatient unit.	RED ² 149.00 minutes 597 eligible Patients	55.00	133.00	52.84	126.26

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to Comm	o other Joint hission
		Accredited C	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

		Cor	npared to o Accredit	other Joint ed Organiz		n
		١	lationwide			wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Overall Rate	This measure reports the overall number of patients screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	91% of 708 eligible Patients	100%	95%	100%	94%

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			o other Joint hission
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Measure Area	Explanation	Nationwide	Statewid
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 Comm Accredited Organizations				on
		١	Vationwide			wide
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years) This measure reports children age (1-12 years) substance and alcoho psychological trauma patient strengths. Screening violence risk to self de patients are likely to harm other for substance and alcoho psychological trauma are likely to harm other for substance and alcoho psychological trauma determines if patients experienced terrible e lives which have left th anxious and unable to	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag 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.	96% of 144 eligible Patients	100%	96%	3	3

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		Compared to other Joint Commission Accredited Organizations				n
		٨	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag 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.	91% of 151 eligible Patients	100%	96%	3	3

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Measure Area	Explanation	Accredited C Nationwide	rganizations) 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 Comm Accredited Organizations				ons	
		١	lationwide		State	wide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag 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.	88% of 282 eligible Patients	100%	95%	100%	97%	

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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.	O ²	○ ²

		Compared to other Joint Commission Accredited Organizations					
		١	lationwide	le Statewi			
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag 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.	92% of 131 eligible Patients	100%	95%	100%	98%	

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Measure Area		Explanation			Commis	other Joint sion ganizations Statewide	9
Hospital-Based Inpatient Psychiatric Services		egory of evidenced based measures a quality of care given to psychiatric patie				@ ²	
				ompared to c Accredite Nationwide	other Joint ed Organi	zations	on ewide
Measure		Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		
Multiple Antipsychotic Medications at Discharg Appropriate Justification Overall Rate	0	This is a proportion measure. A proportion measure is a measure which shows the number of occurrences over the entire group within which the occurrence should take place. The numerator is expressed as a subset of the denominator. This measure reports the overall number of patients discharged on two or more antipsychotic medications. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a persons capacity to meet lifes everyday demands.	84% of 32 eligible Patients	100%	63%	100%	90
Multiple Antipsychotic Medications at Discharg 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	600 ³	100%	47%	3	

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

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

attempts to control psychosis with one antipsychotic medication, a plan

This information can also be viewed at www.hospitalcompare.hhs.gov

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updated data. **10.** Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

below the target range/value.

Footnote Key

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The measure meets the Privacy Disclosure Threshold rule.

above the target range/value. This organization's performance is

DBA: Mission Hospital, 509 Biltmore Avenue, Asheville, NC



National Quality Improvement Goals

iod: January 2019 - December 2019		
	Compared to Comm	
	Accredited Organizations	
Explanation	Nationwide	Statewide
This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	2 ²	∞ ²
	Explanation This category of evidenced based measures assesses the	Compared to Commendation Accredited Commendation Nationwide

		Compared to other Joint Commission Accredited Organizations					
		1	Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:	
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	00% of 4 eligible Patients	100%	48%	3	3	



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DBA: Mission Hospital, 509 Biltmore Avenue, Asheville, NC



National Quality Improvement Goals

riod: January 2019 - December 2019				
Compared to other Joint Commission				
	Accredited Organizations			
Explanation	Nationwide	Statewide		
This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	2	™ ²		
	This category of evidenced based measures assesses the	Compared t Comm Accredited C Explanation Nationwide		

		Compared to other Joint Commissior Accredited Organizations						
		Nationwide			Statewid			
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:		
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	76% of 17 eligible Patients	100%	65%	100%	91%		

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

the denominator criteria.

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National Quality Improvement Goals

Reporting Per	iod: January 2019 - Decer	mber 2019					
Measure Area	Explan	nation			npared to o Commiss edited Org de	sion	e
Hospital-Based Inpatient Psychiatric Services	This category of evidenced ba overall quality of care given to				2	⊘ ²	
				mpared to c Accredite Nationwide	other Joint ed Organiz		
Measure	Explanat	tion	Hospital Results		Average Rate:		
Multiple Antipsychotic Medications at Dischar Appropriate Justificatio Adults Age 65 and Old	Older on two or more antips	older discharged sychotic in there was an on. tions are a to treat is a mental interferes with a meet life's Appropriate previous sychosis with dication, a plan r of tions to one tions to one tion or the rchotic patient is also	01% of 11 eligible Patients	100%	56%	100%	
Hours of Physical Rest Use per 1000 Patient H Overall Rate		physical 000 hours of I restraint is any sysical or naterial, or bilizes or a patient to s, legs, body or	0.05 (41 Total Hours in Restraint)	N/A	0.48	N/A	

Symbol Key

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0	This organization achieved the best possible results
Ð	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below the target range/value.
•	Not displayed
	Footnote Key
1.	The Measure or Measure Set was not

- reported.The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
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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.

This information can also be viewed at www.hospitalcompare.hhs.gov

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Footnote Key

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019 Compared to other Joint

		Comm	ission	
		Accredited C	rganizations	
Measure Area	Explanation	Nationwide	Statewid	
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				
		Nationwide Statev				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.08 (6 Total Hours in Restraint)	N/A	0.40	3	3
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.	0.04 (5 Total Hours in Restraint)	N/A	0.29	3	3



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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission	
		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	@ ²	○ ²

		Compared to other Joint Commission Accredited Organizations				
			lationwide			ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.05 (28 Total Hours in Restraint)	N/A	0.56	N/A	0.09
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.	0.03 (3 Total Hours in Restraint)	N/A	0.09	N/A	0.04
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.	0.17 (143 Total Hours in Seclusion)	N/A	0.40	N/A	0.10

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Symbol Key

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission	
		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	⊘ ²	○ ²

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	Hand the second	N/A	0.69	³	3
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.	0.08 (10 Total Hours in Seclusion)	N/A	0.21	<u></u> 3	3
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.	0.07 (38 Total Hours in Seclusion)	N/A	0.45	N/A	0.11
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	0.08	N/A	0.00



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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		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				
		Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	100% of 27 eligible Patients	100%	98%	100%	99%
Elective Delivery	This measure reports the overall number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to less than 39 weeks gestation. An elective delivery is the delivery of a newborn(s) when the mother was not in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section.	0% of 42 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.	70% of 371 eligible Patients	73%	51%	70%	45%



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2018 National Patient Safety Goals

Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø

Symbol Key

The organization has met the National Patient Safety Cool Patient Safety Goal. The organization has not met the e National Patient Safety Goal. The Goal is not applicable for this organization.