



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.
-  This organization's performance is similar to the target range/value.
-  This organization's performance is below the target range/value.
-  This Measure is not applicable for this organization.
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Footnote Key

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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.
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11. There were no eligible patients that met the denominator criteria.

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

| Accreditation Programs | Accreditation Decision | Effective Date | Last Full Survey Date | Last On-Site Survey Date |
|--|------------------------|----------------|-----------------------|--------------------------|
|  Behavioral Health Care | Accredited | 11/28/2018 | 11/27/2018 | 11/27/2018 |
|  Hospital | Accredited | 6/6/2015 | 11/30/2018 | 11/30/2018 |

Behavioral Health Care

Hospital

Reporting Period:
Apr 2017 - Mar 2018

2018 National Patient Safety Goals

2017 National Patient Safety Goals

National Quality Improvement Goals:

Immunization

Substance Use

Tobacco Treatment

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



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



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|--|---|
| BHA 2nd Recruit Training Battalion 598 Malecon St. Beaufort, SC 29902 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| BHA 3rd Recruit Training Battalion 686 3rd Battalion Rd Beaufort, SC 29902 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| BHA 4th Recruit Training Battalion 939 Santo Domingo St Beaufort, SC 29902 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| BHA Crucible 283 Henderson St Beaufort, SC 29902 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| BHC Marine Corps Recruit Depot Parris Island--Dental Bldg. 674 Blvd de France Parris Island, SC 29905 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient) |
| BHC Marine Corps Recruit Depot Parris Island--Medical Building 670 Boulevard DeFrance Parris Island, SC 29905 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| Branch Health Annex (BHA) 1st Recruit Training Battalion 592 Guantanamo St Beaufort, SC 29902 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |
| Branch Health Clinic (BHC) Marine Corps Air Station Beaufort Building 598 Geiger Blvd Beaufort, SC 29902 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Branch Dental Clinic Marine Corps Air Station Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |



Locations of Care

| * Primary Location | |
|---|---|
| Locations of Care | Available Services |
| <div>Naval Hospital Beaufort *</div> <div>1 Pinckney Boulevard</div> <div>Beaufort, SC 29902-6148</div> | <div>Other Clinics/Practices located at this site:</div> <div><ul style="list-style-type: none">Naval Hospital Beaufort Medical Home Port</div> <div>Services:</div> <div><div><ul style="list-style-type: none">Behavioral Health (Non 24 Hour Care - Adult)CT Scanner (Imaging/Diagnostic Services)Developmental Disabilities - Programs / Services (Non 24 Hour Care - Child/Youth)Employment Services (Non 24 Hour Care)Inpatient Unit (Inpatient)Magnetic Resonance Imaging (Imaging/Diagnostic Services)</div><div><ul style="list-style-type: none">Medical /Surgical Unit (Inpatient)Orthopedic Surgery (Surgical Services)Outpatient Clinics (Outpatient)Post Anesthesia Care Unit (PACU) (Inpatient)Teleradiology (Imaging/Diagnostic Services)Ultrasound (Imaging/Diagnostic Services)</div></div> |



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.

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

Symbol Key

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-  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 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: April 2017 - March 2018



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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 Top 10% Scored at Least: | Average Rate: | Statewide Top 10% Scored at Least: | Average Rate: |
| Influenza Immunization | This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated. |  90% of 145 eligible Patients | 100% | 94% | 100% | 94% |



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

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National Quality Improvement Goals

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Compared to other Joint Commission Accredited Organizations

| Measure Area | Explanation | Nationwide | Statewide |
|---------------|--|---|---|
| Substance Use | This category of evidence based measures assesses the overall quality of care provided for Substance Abuse |  2 |  2 |

Compared to other Joint Commission Accredited Organizations

| Measure | Explanation | | | | | |
|-----------------------|--|---|--------------------------|---------------|--------------------------|-------------------|
| | | Nationwide | | Statewide | | |
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| Alcohol Use Screening | The number of patients who were asked about unhealthy use of alcohol within the first three days of admission to the hospital. |  43% of 213 eligible Patients | 100% | 90% | ---- ³ | ---- ³ |



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Compared to other Joint Commission
Accredited Organizations

| Measure Area | Explanation | Nationwide | Statewide |
|-------------------|--|------------|-----------|
| Tobacco Treatment | This category of evidence based measures assesses the overall quality of care provided for tobacco use | 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: |
| Tobacco Use Screening | The number of patients who were asked about tobacco use within the first three days of admission to the hospital. | 99% of 213 eligible Patients | 100% | 98% | ---- ³ | ---- ³ |
| Tobacco Use Treatment | The number of patients who use tobacco who actually received counseling or medications to help them stop using tobacco. | 8% of 12 eligible Patients | 77% | 44% | ---- ³ | ---- ³ |
| Tobacco Use Treatment at Discharge | The number of patients who use tobacco who accepted counseling and/or medications to help them stop using tobacco after they leave the hospital. | 8% of 12 eligible Patients | 63% | 18% | ---- ³ | ---- ³ |
| Tobacco Use Treatment Provided or Offered | The number of patients who use tobacco who were offered or received counseling or medications to help them stop using tobacco. This measure also includes patients who were offered the counseling and/or medications but refused them. | 42% of 12 eligible Patients | 99% | 77% | ---- ³ | ---- ³ |
| Tobacco Use Treatment Provided or Offered at Discharge | The number of patients who use tobacco who were offered or accepted counseling or medications to help them stop using tobacco after they leave the hospital. This measure also includes patients who were offered the counseling and/or medications but refused them. | 33% of 12 eligible Patients | 94% | 52% | ---- ³ | ---- ³ |



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