



# 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.
-  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.
-  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.

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
 Home Care	Accredited	6/17/2015	6/16/2015	6/16/2015
 Hospital	Accredited	6/20/2015	6/19/2015	5/2/2017
 Laboratory	Accredited	10/31/2015	10/30/2015	10/30/2015





### 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
 Heart Failure	Certification	4/29/2015	6/5/2017	6/5/2017
 Primary Stroke Center	Certification	12/21/2016	12/20/2016	12/20/2016

### Special Quality Awards

2014 Top Performer on Key Quality Measures®  
 2013 Top Performer on Key Quality Measures®  
 2012 Top Performer on Key Quality Measures®  
 2015 ACS National Surgical Quality Improvement Program  
 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program  
 2014 Magnet Award  
 2014 Silver Plus Get With The Guidelines - Heart Failure

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	<b>2015 National Patient Safety Goals</b>		 *
Hospital	<b>2017 National Patient Safety Goals</b>		 *









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



## 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.
-  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.

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

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
<b>National Quality Improvement Goals:</b>			
Reporting Period: Jan 2016 - Dec 2016	Emergency Department	 <sup>2</sup>	 <sup>2</sup>
	Immunization	 <sup>2</sup>	 <sup>2</sup>
	Perinatal Care	 <sup>2</sup>	 <sup>2</sup>
	Stroke Care	 <sup>2</sup>	 <sup>2</sup>
	Venous Thromboembolism (VTE)	 <sup>2</sup>	 <sup>2</sup>
Laboratory	<b>2015 National Patient Safety Goals</b>		 *



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



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>HCMG Bayview</b> 1124 Bayview Dr Fort Lauderdale, FL 33304	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Boca Raton Orthopedics</b> 9970 Central Park Blvd, #400 Boca Raton, FL 33428	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG Broward Medical Group</b> 1106 E. Broward Blvd. Fort Lauderdale, FL 33301	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Cardiology Associates of Boca Raton</b> 9980 Central Park Blvd, #304 Boca Raton, FL 33428	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Perform Invasive Procedure (Outpatient)</li> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>HCMG Cardiology Associates of Boynton Beach</b> 10151 Enterprise Center, #203 Boynton Beach, FL 33437	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Cardiopulmonary Associates</b> 333 NW 70th Ave, Ste 116 Plantation, FL 33317	<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>HCMG Coconut Creek</b> 4917 Coconut Creek Parkway Coconut Creek, FL 33063	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Colorectal Surgery</b> 1940 Northeast 47th Street, Suite 101 Fort Lauderdale, FL 33308	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG Coral Springs</b> 2901 Coral Hills Dr, Ste 240 Coral Springs, FL 33065	<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

### \* Primary Location

Locations of Care	Available Services
<b>HCMG Coral Springs Primary Care</b> 3080 NW 99 Ave, Ste 200 Coral Springs, FL 33065	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Dr. Loza, Internal Medicine</b> 2000 Northeast 49 St. Fort Lauderdale, FL 33308	<b>Services:</b> <ul style="list-style-type: none"> <li>Single Specialty Practitioner (Outpatient)</li> </ul>
<b>HCMG Family Life Center</b> 114 Flagler Avenue Pompano Beach, FL 33060	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Gallagher Adult/Peds/GI</b> 1900 East Commercial Blvd #101, #202, #201 Fort Lauderdale, FL 33308	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Adult Clinic</li> <li>GI Clinic</li> <li>Pediatric Clinic</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>HCMG Galt Medical Office</b> 4004 North Ocean Boulevard Fort Lauderdale, FL 33308	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Lighthouse Orthopedics</b> 2850 N. Federal Highway, 2nd Floor Lighthouse Point, FL 33064	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG Lighthouse Point</b> 2100 E Sample Rd, Ste 101 Pompano Beach, FL 33064	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Mellin/Schwartz</b> 4800 NE 20th Terrace, #211, #303 Fort Lauderdale, FL 33308	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>General Surgery - Dr. Perez/Seaver</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Multispecialty Group of West Broward</b> 8391 W. Oakland Park Blvd. Sunrise, FL 33351	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>HCMG North Broward Cardiology</b> 2800 N.State Road 7, Ste 101 Margate, FL 33063	<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>HCMG North Ridge Internal Med/Infect Dis/Pain Mgmt/Pulm Med</b> 5601 N. Dixie Hwy, #412, #107, #209, #407 Ft Lauderdale, FL 33334	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Infectious Disease</li> <li>Pain Management</li> <li>Pulmonary Medicine</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Anesthesia (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG OB/GYN/Endocrinology/Internal Med</b> 4701 North Federal Hwy, #A27, #B Fort Lauderdale, FL 33308	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>HCMG Endocrinology and Adult Medicine</li> <li>Internal Medicine/Endocrinology</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>HCMG Orthopedics/Podiatry</b> 5597 N. Dixie Hwy, 2nd Floor Oakland Park, FL 33334	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG Pompano Beach</b> 2335 E. Atlantic Blvd., Suite 200 Pompano Beach, FL 33062	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Pulmonary</b> 1930 NE 47th Street , #205 Fort Lauderdale, FL 33308	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>HCMG Rio Vista</b> 1309 S. Federal Highway Fort Lauderdale, FL 33316	<b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>HCMG Wilton Manors</b> 1402 NE 26th Street Wilton Manors, FL 33305	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Internal Medicine</li> <li>Pediatrics</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>





## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>HCMG Women's Center/Leone Center/HCH Wound Care/Imaging</b> 1000 NE 56th Street, 1st Floor, 2nd Floor Oakland Park, FL 33334	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Diagnostic Imaging</li> <li>• HCMG The Leone Center for Orthopedic Care</li> <li>• HCMG Womens Center</li> <li>• Wound Care 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>





## Locations of Care

### \* Primary Location

Locations of Care	Available Services
<b>Holy Cross Hospital *</b> DBA: Holy Cross Hospital 4725 North Federal Highway Fort Lauderdale, FL 33308	<b>Joint Commission Advanced Certification Programs:</b> <ul style="list-style-type: none"> <li>Heart Failure</li> <li>Primary Stroke Center</li> </ul> <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Advanced Cardiac Therapeutics Department</li> <li>Advanced Cardiac Therapeutics Department</li> <li>HCMG Cardiology Associates</li> <li>HCMG Cardiovascular &amp; Thoracic Surgery</li> <li>HCMG Ft. Lauderdale (FLIM)</li> <li>HCMG Hematology/Oncology</li> <li>HCMG Neuroradiology</li> <li>HCMG Neurosurgery</li> <li>HCMG Palliative Medicine</li> <li>HCMG Physiatry</li> <li>HCMG Radiation Oncology</li> <li>HCMG Surgical Oncology</li> <li>HCMG Urology</li> </ul> <hr/> <b>Services:</b> <ul style="list-style-type: none"> <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>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>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>Neurosurgery (Surgical Services)</li> <li>Normal Newborn Nursery (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>Plastic Surgery (Surgical Services)</li> <li>Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Radiation Oncology (Imaging/Diagnostic Services)</li> <li>Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)</li> <li>Sleep Laboratory (Sleep Laboratory)</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>Toxicology</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> </ul>



## Locations of Care




### \* Primary Location

Locations of Care	Available Services
	<ul style="list-style-type: none"> <li>• Neuro/Spine ICU (Intensive Care Unit)</li> <li>• Neuro/Spine Unit (Inpatient)</li> <li>• Vascular Surgery (Surgical Services)</li> </ul>
<b>Holy Cross Hospital Home Health Services</b> 5601 North Dixie Highway, Suite 208 Fort Lauderdale, FL 33334	<b>Services:</b> <ul style="list-style-type: none"> <li>• Home Health Aides</li> <li>• Home Health, Non-Hospice Services</li> <li>• Medical Social Services</li> <li>• Occupational Therapy</li> <li>• Physical Therapy</li> <li>• Skilled Nursing Services</li> <li>• Speech Language Pathology</li> </ul>
<b>Holy Cross Urgent Care &amp; Imaging Center</b> 23071 State Road 7 Boca Raton, FL 33428	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>• Physical Therapy</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Urgent Care (Outpatient)</li> </ul>
<b>Holy Cross Urgent Care &amp; Imaging Center</b> 1115 S. Federal Hwy Fort Lauderdale, FL 33316	<b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Urgent Care (Outpatient)</li> </ul>
<b>Holy Cross Urgent Care Center &amp; Imaging Center Boca Raton</b> 1799-A S. Federal Hwy Boca Raton, FL 33432	<b>Services:</b> <ul style="list-style-type: none"> <li>• General Laboratory Tests</li> <li>• Urgent Care (Outpatient)</li> </ul>








## 2015 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.

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




### Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	



















## 2017 National Patient Safety Goals

### Symbol Key

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

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

### 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: January 2016 - December 2016



### 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
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	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Most:	Weighted Median:	Top 10% Scored at Most:	Weighted Median:
Admit Decision Time to ED Departure Time for Admitted Patients	The amount of time (in minutes) it takes from the time the physician decides to admit a patient into the hospital from the Emergency Department until the patient actually leaves the ED to go to the inpatient unit.	 <sup>2</sup> 106.00 minutes 878 eligible Patients	54.00	126.00	69.80	130.41
Median Time from ED Arrival to ED Departure for Admitted ED Patients	The amount of time (in minutes) from the time the patient arrives in the Emergency Department until the patient is admitted as an inpatient into the hospital.	 <sup>2</sup> 298.00 minutes 880 eligible Patients	203.00	313.00	225.09	305.55



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

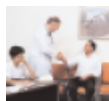
\*

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: January 2016 - December 2016



### 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
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	 2	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation					
		Hospital Results	Nationwide	Average	Statewide	Average
			Top 10% Scored at Least:	Rate:	Top 10% Scored at Least:	Rate:
Influenza Immunization	This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated.	 98% of 621 eligible Patients	100%	94%	100%	97%

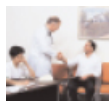


The Joint Commission only reports measures endorsed by the National Quality Forum.

\* 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: January 2016 - December 2016

### Symbol Key

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

### Footnote Key

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

Compared to other Joint Commission Accredited Organizations

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

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Hospital Results	Nationwide		Statewide	
			Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	 100% of 9 eligible Patients	100%	98%	100%	97%
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.	 0% of 106 eligible Patients	0%	2%	0%	2%
Exclusive Breast Milk Feeding	This measure reports the overall number of newborns who are exclusively breast milk fed during the newborns entire hospitalization. Exclusive breast milk feeding is when a newborn receives only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines.	 72% of 688 eligible Patients	75%	53%	66%	41%



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: January 2016 - December 2016



### 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
Stroke Care	This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients.	 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:
Thrombolytic Therapy	Acute ischemic stroke patients who receive a medicine that breaks up blood clots (thrombolytic therapy) within 180 minutes of stroke symptom onset. This measure reports how quickly ischemic stroke patients were given a medication that breaks up blood clots (thrombolytic therapy). Breaking up blood clots increases blood flow to the brain. If blood flow is returned to the brain quickly during a stroke, the risk of brain damage and loss of physical function is decreased. The medicine that breaks up clots in the arteries and allows the return of normal blood flow is called thrombolytic therapy or "t-PA". It is important that this medicine be given quickly after an ischemic stroke is diagnosed.	 100% of 57 eligible Patients	100%	90%	100%	95%



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: January 2016 - December 2016

### 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
Venous Thromboembolism (VTE)	This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots.	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:
VTE Discharge Instructions	Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions.	 100% of 31 eligible Patients	Top 10% Scored at Least: 100%	93%	Top 10% Scored at Least: 100%	95%



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."






## 2015 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."