

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

2001 West 86th Street, Indianapolis, IN



Summary of Quality Information

C	hal	IZ ar
Sym	DOI	Key

0	This organization achieved the best possible results.
•	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.
•••	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	Last Full Survey	Last On-Site
		Date	Date	Survey Date
🥝 Behavioral Health Care	Accredited	1/23/2015	8/29/2017	8/29/2017
🥝 Hospital	Accredited	3/21/2015	9/1/2017	9/1/2017
📀 Laboratory	Accredited	10/4/2016	4/6/2016	4/6/2016

Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS) Pathology and Clinical Laboratory

Hospital

Certification programs recognized by the Centers for Medicare and Medicaid Services (CMS) Ventricular Assist Device

Advanced Certification	Certification Decision	Effective	Last Full Review	w Last On-Site
Programs		Date	Date	Review Date
🥝 Heart Failure	Certification	1/27/2016	1/26/2016	1/26/2016
🥝 Primary Stroke Center	Certification	1/26/2016	1/25/2016	1/25/2016
🥝 Ventricular Assist Device	Certification	6/14/2017	6/13/2017	6/13/2017

Special Quality Awards

2013 Top Performer on Key Quality Measures®

- 2014 Silver Plus Get With The Guidelines Heart Failure
- 2012 ACS National Surgical Quality Improvement Program
- 2012 Hospital Magnet Award
- 2012 Silver The Medal of Honor for Organ Donation

		Compared to other Joint Organiz	
		Nationwide	Statewide
Behavioral Health Care	2014National Patient Safety Goals	${igodot}$	⊙ *
Hospital	2015National Patient Safety Goals	Ø	*

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

2001 West 86th Street, Indianapolis, IN

Compared to other Joint Commission Accredited



Summary of Quality Information

Symbol Key	7
------------	---

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.
	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."

		Organizations	
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	1 1 1 1 1 1 1 1 1 1	1
Apr 2016 - Mar 2017	Immunization	NO ²	1
	Perinatal Care	O ²	1
Laboratory	2016National Patient Safety Goals	${igodot}$	*

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



Locations of Care

2001 West 86th Street, Indianapolis, IN

* Primary Location	
Locations of Care	Available Services
Northwest Physical Therapy DBA: St. Vincent Hospital and Health Care Services, Inc 8227 Northwest Blvd	Services: • Outpatient Clinics (Outpatient)
Indianapolis, IN 46278	
St Vincent Abdominal Transplant Services DBA: St Vincent Hospital and Heath Care Services, Inc 8402 Harcourt Road, Suite 500 Indianapolis, IN 46260	Services: • Outpatient Clinics (Outpatient)
St Vincent Breast Center MRI DBA: St. Vincent Hospital and Health Care Services, Inc 8550 Naab Road, Suite 110 Indianapolis, IN 46260	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
St Vincent Cardiac Transplant Services DBA: St. Vincent Hospital and Health Care Services, Inc 8333 Naab Road, Suite 300 Indianapolis, IN 46260	Services: • Outpatient Clinics (Outpatient)
St Vincent Indianapolis Breast Center DBA: St. Vincent Hospital and Health Care Services, Inc 8550 Naab Road, Suite 300 Indianapolis, IN 46260	Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
St Vincent Medication Management DBA: St. Vincent Hospital and Health Care Services, Inc 8220 Naab Road, Suite 102 Indianapolis, IN 46260	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
St Vincent Nuclear and Echo Lab DBA: St. Vincent Hospital and Health Care Services, Inc 10590 N Meridian Street, Suite 300 Indianapolis, IN 46290	Services: • Outpatient Clinics (Outpatient)

Quality Check[®]

St. Vincent Hospital and Health Care Services, Inc.

2001 West 86th Street, Indianapolis, IN



Locations of Care

* Primary Location	
Locations of Care	Available Services
St. Vincent Cardiovascular Lab, Suite 400 DBA: St. Vincent Hospital and Health Care Services, Inc 8333 Naab Rd, Suite 400 Indianapolis, IN 46260	Services: Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

2001 West 86th Street, Indianapolis, IN



Locations of Care

* Primary Location **Available Services** Locations of Care St. Vincent Outpatient Cath Lab Services: DBA: St. Vincent Hospital Administration of High Risk Medications (Outpatient) and Health Care Services, • Anesthesia (Outpatient) Inc General Laboratory Tests 10590 North Meridian, Outpatient Clinics (Outpatient) Suite 100 • Perform Invasive Procedure (Outpatient) Indianapolis, IN 46290 St. Vincent Pediatric **Therapy Center Suite** Services: 300 Outpatient Clinics (Outpatient) DBA: St. Vincent Hospital and Health Care Services, Inc 8220 Naab Road Indianapolis, IN 46260 St. Vincent Physical Therapy Services: DBA: St. Vincent Hospital Outpatient Clinics (Outpatient) and Health Care Services, Inc 10801 North Michigan Road, Suite 200 Zionsville, IN 46077 St. Vincent Primary Care **Other Clinics/Practices located at this site:** Center • Family Medicine Clinic Suite • Primary Care Center OB-GYN DBA: St. Vincent Hospital 120 Clinic Suite 210 and Health Care Services, Primary Care Center Pediatric • Multidisciplinary Clinic, Suite Inc Clinic Suite 200 215 8414 Naab Rd St.Vincent Diagnostic Imaging • Primary Care Center Internal Indianapolis, IN 46260 Medicine Clinic Suite 100 Suite 130 Services: General Laboratory Tests • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) St. Vincent Women's **Rehabilitation Center** Services: DBA: St. Vincent Hospital • Outpatient Clinics (Outpatient) and Health Care Services, Inc 8550 Naab Road, Suite 100 Indianapolis, IN 46260 St.Vincent Broadripple **Physical Therapy** Services: DBA: St. Vincent Hospital Outpatient Clinics (Outpatient) and Health Care Services, Inc 1001 Broad Ripple Avenue Indianapolis, IN 46220

2001 West 86th Street, Indianapolis, IN



Locations of Care

* Primary Location Available Services Locations of Care St.Vincent Cardiovascular Lab, Services: **First Floor** Administration of Blood Product (Outpatient) DBA: St. Vincent Hospital Administration of High Risk Medications (Outpatient) and Health Care Services, Anesthesia (Outpatient) Inc • Outpatient Clinics (Outpatient) 8333 Naab Road • Perform Invasive Procedure (Outpatient) Indianapolis, IN 46260 St.Vincent Oncology Services Services: DBA: St. Vincent Hospital General Laboratory Tests and Health Care Services, Outpatient Clinics (Outpatient) Inc 8301 Harcourt Road Indianapolis, IN 46260 St.Vincent Outpatient **Imaging Center** Services: DBA: St. Vincent Hospital General Laboratory Tests and Health Care Services, Outpatient Clinics (Outpatient) Inc 10801 N. Michigan Rd Zionsville, IN 46077 St.Vincent Outpatient **Treatment Center** Services: DBA: St. Vincent Hospital • Administration of High Risk Medications (Outpatient) and Health Care Services, • Outpatient Clinics (Outpatient) Inc Perform Invasive Procedure (Outpatient) 11455 North Meridian, Suite 250 Carmel, IN 46032 St.Vincent Pediatric **Physical & Occupational** Services: Therapy • Outpatient Clinics (Outpatient) DBA: St. Vincent Hospital and Health Care Services, Inc 12425 Old Meridian St. A-1 Carmel, IN 46032 St.Vincent Physical Therapy Services: DBA: St. Vincent Hospital • Outpatient Clinics (Outpatient) and Health Care Services, Inc 14828 Greyhound Ct, Suite 150 Carmel, IN 46032 St.Vincent Physical Therapy Services: DBA: St. Vincent Hospital Outpatient Clinics (Outpatient) and Health Care Services, Inc 1185 W. Carmel Drive, Building C Carmel, IN 46032

2001 West 86th Street, Indianapolis, IN



Locations of Care

Locations of Care	Available Services
St.Vincent Rehabilitation Services, Anson DBA: St. Vincent Hospital and Health Care Services, Inc 6085 Heartland Drive, Suite 201 Zionsville, IN 46077 St.Vincent Stress Center DBA: St. Vincent Hospital and Health Care Services, Inc 8401 Harcourt Road Indianapolis, IN 46260	Services: • Outpatient Clinics (Outpatient) Other Clinics/Practices located at this site: • Sleep Center Services: • Addiction Care/Adult/Child/Youth) (Non-detox - Adult) • Behavioral Health (Day Programs - Adult/Child/Youth) (Non 24 Hour Care - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Non-detox - Adult) Family Support (Non 24 Hour Care) General Laboratory Tests
St.Vincent Women's Hospital DBA: St. Vincent Hospital and Health Care Services, Inc 8111 Township Line Road Indianapolis, IN 46260	 Services: CT Scanner (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) Gastroenterology (Surgical Services) General Laboratory Tests GI or Endoscopy Lab (Imaging/Diagnostic Services) Goynecological Surgery (Surgical Services) Gynecology (Inpatient) Inpatient Unit (Inpatient)

2001 West 86th Street, Indianapolis, IN



2014 National Patient Safety Goals

Behavioral Health Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two Identifiers	Ø
Improve the safety of using medications.	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	Ø

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.

2001 West 86th Street, Indianapolis, IN



2015 National Patient Safety Goals

Hospital

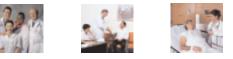
Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigcirc
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	\bigotimes
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ଭ</u> ତ୍ତ 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	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigotimes

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.

Reporting Period: April 2016 - March 2017

2001 West 86th Street, Indianapolis, IN



National Quality Improvement Goals

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

- 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.
- 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.
- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
 There were no eligible relients that me
- **1.** 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	
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	1 2

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
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.	ND 2 126.00 minutes 444 eligible Patients	55.00	129.00	50.14	106.73
Median Time from ED Arrival to ED Departure for Admitted ED Patients	The amount of time (in minutes) from the time the patient arrives in the Emergency Department until the patient is admitted as an inpatient into the hospital.	2 317.00 minutes 451 eligible Patients	205.00	316.00	199.12	267.93

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

This information can also be viewed at www.hospitalcompare.hhs.gov -- Null value or data not displayed.

2001 West 86th Street, Indianapolis, IN



National Quality Improvement Goals

Reporting Period: April 2016 - March 2017

		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			n	
		1	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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.	96% of 542 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

-- Null value or data not displayed.

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 organization's performance is below the target range/value.
 Not displayed

Footnote Key

- 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.
- 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.
- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
 There were no eligible rations that me
- 1. There were no eligible patients that met the denominator criteria.

Symbol Key

ossible results

ot displayed

reported.

overall result.

Ð

 \oslash

e

ND

2.

3.

4.

5.

8.

9.

11

valid.

sample of patients.

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

The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

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."

The measure meets the Privacy Disclosure Threshold rule.

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

St. Vincent Hospital and Health Care Services, Inc.

2001 West 86th Street, Indianapolis, IN



National Quality Improvement Goals

Depenting De	riadi Amil 2016 Marah 2017				
Reporting Period: April 2016 - March 2017					
			o other Joint nission		
		Accredited C	Organizations		
Measure Area	Explanation	Nationwide	Statewide		
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	™ ²	1 2		
	Measure Area	Perinatal Care This category of evidenced based measures assesses the	Measure Area Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the		

		Compared to other Joint Commission Accredited Organizations			n	
		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 51 eligible Patients	100%	98%	100%	100%
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.	3% of 33 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.	48% of 387 eligible Patients	74%	53%	71%	60%



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

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

Null value or data not displayed. ____

2001 West 86th Street, Indianapolis, IN



2016 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 Goal.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.