

Accreditation Quality Report





Version: 5 Date: 11/19/2021 430 E. DIVISION ST., Fond Du Lac, WI

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.









Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care and Human Services	Accredited	9/25/2019	9/24/2019	9/24/2019
Home Care	Accredited	9/27/2019	9/26/2019	9/26/2019
Mospital	Accredited	9/28/2019	9/27/2019	11/8/2019

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

Advanced Certification	Certification Decision	Effective	Last Full Revie	ew Last On-Site
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	8/6/2019	10/5/2021	10/5/2021

Special Quality Awards

2013 Top Performer on Key Quality Measures® 2012 Gold Plus Get With The Guidelines - Stroke

		Compared to other Joint Organiz	
		Nationwide	Statewide
Behavioral Health Care and Human Services	2019National Patient Safety Goals	Ø	*
Home Care	2019National Patient Safety Goals	Ø	№ A *
Hospital	2019National Patient Safety Goals	Ø	™ *
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	№ ²	1 2
Jan 2020 - Dec 2020	Perinatal Care	© 2	№ ²

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

Symbol Key

- This organization achieved the best oossible 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 rganization.
- Not displayed

Footnote Key

- 1. The Measure or Measure Set was not
- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 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.
- The Measure results are based on a sample of patients.
- 8. The number of months with Measure
- data is below the reporting requirement. 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."

430 E. DIVISION ST., Fond Du Lac, WI







Locations of Care

* Primary Location	
Locations of Care	Available Services
Adult Day Services 420 East Merrill Avenue Fond Du Lac, WI 54935	Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)
Agnesian Cancer Center 480 East Division Street Fond Du Lac, WI 54935	Services: • Administration of High Risk Medications (Outpatient) • Single Specialty Practitioner (Outpatient)
Agnesian Healthcare dba Doll & Associates 40 Camelot Drive Fond Du Lac, WI 54935	Other Clinics/Practices located at this site:
Bereavement Services 1161 W. Johnson Street Fond Du Lac, WI 54937	Services: • Single Specialty Practitioner (Outpatient)
Department of Pain Management 421 Camelot Drive Fond Du Lac, WI 54935	Services: • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Domestic Violence 21 S. Marr Street Fond Du Lac, WI 54935	Services: Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Community Integration (Non 24 Hour Care) Family Support (Non 24 Hour Care) Peer Support (Non 24 Hour Care)
Hospice Home of Hope 400 County K Fond Du Lac, WI 54935	Services: • Hospice Care
Sport, Spine & Work Center 421 Camelot Drive Fond Du Lac, WI 54935	Services: • Single Specialty Practitioner (Outpatient)
Sports, Spine & Work Center 360 S. Mountin Drive Mayville, WI 53050	Services: • Single Specialty Practitioner (Outpatient)







Locations of Care

* Primary Location

Locations of Care

ST. AGNES HOSPITAL * 430 East Division Street Fond Du Lac, WI 54935

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Services:

- Addiction Services/Adult) (Detox/Non-detox - Adult)
- Behavioral Health (Day Programs - Adult) (Non 24 Hour Care -Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization -Adult)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Chemical Dependency (Day Programs Adult)
 (Non 24 Hour Care Adult/Child/Youth)
 (24-hour Acute Care/Crisis Stabilization Adult)
 (Partial Hospitalization Adult)
 (Detox Adult)
 (Non-detox Adult)
- (Detox/Non-detox Adult)Community Integration (Non 24 Hour Care)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- Eating
 Disorders/Adult/Child/Youth)
 (Outpatient Adult/Child/Youth)
 (Non 24 Hour Care Adult/Child/Youth)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)

- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Nuclear Pharmacy (Inpatient)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

ST. AGNES HOSPITAL

430 E. DIVISION ST., Fond Du Lac, WI

Org ID: 7635







Locations of Care

Locations of Care	Available Services			
	 Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) 			
St. Agnes Hospital Home Care/St. Agnes Hospital Hospice Hope 239 Trowbridge Drive Fond Du Lac, WI 54937	Services: Home Health Aides Home Health, Non-Hospice Services Hospice Care Medical Social Services Services Services Skilled Nursing Services Speech Language Pathology			
St. Agnes Hospital Hospice Hope 745 South Street, Suite 4 Green Lake, WI 54941	Services: • Hospice Care			
The Fond du Lac Surgery Center 421 Camelot Drive Fond Du Lac, WI 54935	Services:			







2019 National Patient Safety Goals

Symbol Key

The organization has met the National Patient Safety Goal.

The organization has not met the National Patient Safety Goal.

The Goal is not applicable for this organization.

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

Behavioral Health Care and Human Services

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







2019 National Patient Safety Goals

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Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient 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
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø







2019 National Patient Safety Goals

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
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
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	Ø
	Preventing Central-Line Associated Blood Stream Infections	8888
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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valid.

sample of patients.

updated data.

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Footnote Key
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Explanation

This category of evidence based measu

time patients remain in the hospital Eme Department prior to inpatient admission.



Measure Area

Emergency

Department





National Quality Improvement Goals

Reporting Period: January 2020 - December 2020

	Commission					
	Accredited Organizations					
	Nationwide Statewide					
ires assesses the ergency	№ ²	№ ²				

Compared to other Joint

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 Null value or data not displayed.

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Report User Guide."

the denominator criteria.

		Cor		other Joint ed Organiz	Commissic ations	on
		N	lationwide		State	ewide
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.	2	54.00	151.00	3	3
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 	221.00	370.00	3	3

Compared to other Joint









National Quality Improvement Goals

Reporting Period: January 2020 - December 2020

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

		Cor	npared to c	other loint	Commissio	n.
		001		ed Organiz		/11
			lationwide	Ĭ		wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	⊕	16%	25%	15%	21%
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 36 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.	69% of 330 eligible Patients	71%	51%	77%	63%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	638% of 313 eligible Patients	200%	1800%	0%	1400%
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	638% of 313 eligible Patients	1500%	3100%	1100%	2800%

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National Quality Improvement Goals

Reporting Period: January 2020 - December 2020

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		Compared to other Joint Commission Accredited Organizations				
		N	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	0% of 313 eligible Patients	500%	1300%	500%	1400%

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