Quality Check®

Org ID: 7635

Accreditation Quality Report





Version: 9 Date: 11/18/2023 DBA: SSM HEALTH ST. AGNES HOSPITAL FOND DU LAC, 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.

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Surve Date	ey Last On-Site Survey Date
Behavioral Health Care and Human Services	Accredited	2/15/2023	2/14/2023	2/14/2023
Home Care	Accredited	2/18/2023	2/17/2023	2/17/2023
Hospital	Accredited	2/18/2023	2/17/2023	2/17/2023

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

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Sit	
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	10/6/2021	9/29/2023	9/29/2023

		Compared to other Joint Commission Accredite Organizations		
		Nationwide	Statewide	
Behavioral Health Care and Human Services	2023National Patient Safety Goals	Ø	*	
Home Care	2023National Patient Safety Goals	Ø	₩ *	
Hospital	2023National Patient Safety Goals	Ø	WA *	
	National Quality Improvement Goals:			
Reporting Period: Jan 2021 - Dec 2021	Perinatal Care	2	© 2	

Symbol Key

- This organization achieved the best possible results.
- This organization's performance is better than the target range/value.
- This organization's performance is similar to the target range/value.
- This organization's performance is
- worse than the target range/value.

 This Measure is not applicable for this
- organization.
- Not displayed

Footnote Key

- 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.
- 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.
- 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.
- 12. The measure rate is within optimal range.

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

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Locations of Care

Locations of Care	Available Services
Agnesian Healthcare Inc DBA: SSM Health Therapy Services 130 Corporate Drive Beaver Dam, WI 53916	Services: • Outpatient Clinics (Outpatient)
Agnesian HealthCare, Inc DBA: SSM Health Cancer Care 480 East Division Street Fond Du Lac, WI 54935	Services: • Single Specialty Practitioner (Outpatient)
Agnesian HealthCare, Inc DBA: SSM Health at Home Home Health/Hospice Fond du Lac 239 Trowbridge Drive Fond Du Lac, WI 54937	Services: • Home Health Aides • Home Health, Non-Hospice Services • Hospice Care • Medical Social Services • Occupational Therapy • Physical Therapy • Skilled Nursing Services • Speech Language Pathology
Agnesian HealthCare, Inc DBA: SSM Health Therapy Services 421 Camelot Drive Fond Du Lac, WI 54935	Services: • Single Specialty Practitioner (Outpatient)
Agnesian HealthCare, Inc DBA: SSM Health Hospice Home of Hope 400 County K Fond Du Lac, WI 54935	Services: • Hospice Care
Agnesian HealthCare, Inc DBA: SSM Health at Home Hospice-Green Lake 745 South Street, Suite 4 Green Lake, WI 54941	Services: • Hospice Care
Agnesian HealthCare, Inc DBA: SSM Health St. Agnes Hospital Outpatient Surgery 421 Camelot Drive Fond Du Lac, WI 54935	Services:
Agnesian HealthCare, Inc DBA: SSM Health Pain Care 421 Camelot Drive Fond Du Lac, WI 54935	Services:
Agnesian HealthCare, Inc DBA: SSM Health Therapy Services 360 S. Mountin Drive Mayville, WI 53050	Services: • Single Specialty Practitioner (Outpatient)

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Locations of Care

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services
Agnesian Healthcare, Inc DBA: SSM Health 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 Healthcare, Inc DBA: SSM Health Behavioral Health 40 Camelot Drive Fond Du Lac, WI 54935	Other Clinics/Practices located at this site: • Agnesian Beyond Boundaries of Autism • Treffert Center Services: • Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) (In-Home Behavioral Health Care Services - Child/Youth) • Developmental Disabilities - Programs / Services (Non 24 Hour Care - Adult/Child/Youth)
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)

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Locations of Care

* Primary Location

Locations of Care

St. Agnes Hospital *
DBA: SSM Health St.
Agnes Hospital -Fond du
Lac
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)
- Gastroenterology (Surgical Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)

- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- 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)
- Technology-Based Addiction Services (Non 24 Hour Care -Adult/Child/Youth) (Detox/Non-detox - Adult)
- Technology-Based Behavioral Health Srvs (Non 24 Hour Care - Adult/Child/Youth)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

Locations of Care	Available Services
	 Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit)

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2023 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

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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

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2023 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
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
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	Ø

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National Quality Improvement Goals

Reporting Period: January 2021 - December 2021

		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	

		Cor	npared to c	other Joint ed Organiz		n
			lationwide		State	
Measure	Explanation	Hospital Results	Top Perform er Threshol d:	Average Rate:	Top Perform er Threshol d:	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.	⊕	12	26%	(ND) 12	24%
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 45 eligible Patlents	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 160 eligible Patlents	71%	49%	76%	63%
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	6 per 1000	5	13	6	13

This information can also be viewed at https://hospitalcompare.io/
---- Null value or data not displayed.

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