

# 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.



1910 South Avenue, La Crosse, WI



# **Summary of Quality Information**

Sym	hal	IZ ar
SVIII	DOL	nev

0	This organization achieved the best possible results.
•	This organization's performance is better than the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is worse than 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.
- The Measure results are based on a sample of patients.
   The number of months with Measure
- data is below the reporting requirement.
- 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.
- **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	V Last On-Site Survey Date
🥝 Home Care	Accredited	12/3/2022	12/2/2022	12/2/2022
🥝 Hospital	Accredited	12/3/2022	12/2/2022	1/18/2023

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

Hospital

<b>Advanced Certification</b>	<b>Certification Decision</b>	Effective	Last Full Review	w Last On-Site
Programs		Date	Date	<b>Review Date</b>
o Primary Stroke Center	Certification	4/7/2021	5/12/2023	5/12/2023

#### **Other Accredited Programs/Services**

• Hospital ( Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

		•	Compared to other Joint Commission Accredited Organizations			
		Nationwide	Statewide			
Home Care	2022National Patient Safety Goals	Ø	™ *			
Hospital	2022National Patient Safety Goals	Ø	*			
	National Quality Improvement Goals:					
Reporting Period: Jan 2021 - Dec 2021	Perinatal Care	<b>1</b>	@ <sup>2</sup>			



### **Locations of Care**

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#### \* Primary Location Available Services Locations of Care **Gundersen Lutheran** Joint Commission Advanced Certification Programs: Medical Center, Inc. • Primary Stroke Center 1910 South Avenue La Crosse, WI 54601 Services: Addiction Services/Adult) Medical /Surgical Unit (Non-detox - Adult) (Inpatient) Behavioral Health (Non 24 Medical ICU (Intensive Care Hour Care -Unit) Adult/Child/Youth) Neuro/Spine Unit (Inpatient) (24-hour Acute Care/Crisis Neurosurgery (Surgical • Stabilization -Services) Adult/Child/Youth) Non-Sterile Medication Cardiac Catheterization Lab Compounding (Inpatient) (Surgical Services) Normal Newborn Nursery Cardiac Surgery (Surgical (Inpatient) Services) **Nuclear Medicine** Cardiothoracic Surgery (Imaging/Diagnostic Services) (Surgical Services) Ophthalmology (Surgical Cardiovascular Unit Services) (Inpatient) Orthopedic Surgery (Surgical Chemical Dependency (Day Services) Orthopedic/Spine Unit Programs - Adult) (Non 24 Hour Care -(Inpatient) **Outpatient Clinics (Outpatient)** Adult/Child/Youth) (Partial Hospitalization -Pediatric Unit (Inpatient) Adult) Plastic Surgery (Surgical ٠ (Non-detox - Adult) Services) CT Scanner Post Anesthesia Care Unit (Imaging/Diagnostic (PACU) (Inpatient) Services) Rehabilitation Unit (Inpatient, • Ear/Nose/Throat Surgery 24-hour Acute Care/Crisis (Surgical Services) Stabilization) Sterile Medication Eating Disorders/Adult/Child/Youth) Compounding (Inpatient) (Outpatient -Surgical Unit (Inpatient) Adult/Child/Youth) Thoracic Surgery (Surgical • (Non 24 Hour Care -Services) Adult/Child/Youth) Ultrasound EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Urology (Surgical Services) (Imaging/Diagnostic Services) Vascular Surgery (Surgical Gastroenterology (Surgical Services) Services) GI or Endoscopy Lab (Imaging/Diagnostic Services) • Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hematology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic

Services)

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# **Locations of Care**

Locations of Care	Available Services
	<ul> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> </ul>
Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center Onalaska Annex 123 16th Avenue South Onalaska, WI 54650	Services: • Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult/Child/Youth) (Partial Hospitalization - Adult) • Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult/Child/Youth) (Partial Hospitalization - Adult) (Non-detox - Adult)
Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center Onalaska Clinic 3111 Gundersen Drive Onalaska, WI 54650	<ul> <li>Services:</li> <li>Administration of Blood Product (Outpatient)</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Behavioral Health (Non 24 Hour Care - Adult/Child/Youth)</li> <li>Chemical Dependency (Non 24 Hour Care - Adult)</li> <li>Chemical Dependency (Non 24 Hour Care - Adult)</li> <li>Hazardous Medication Compounding (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center East Building 724 Denton La Crosse, WI 54601	Services:• Administration of Blood Product (Outpatient)• Hazardous Medication Compounding (Outpatient)• Administration of High Risk Medications (Outpatient)• Utpatient Clinics (Outpatient)• Anesthesia (Outpatient)• Perform Invasive Procedure (Outpatient)
Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center La Crosse Clinic 1836 South Avenue La Crosse, WI 54601	Services: • Administration of High Risk Medications (Outpatient) • Hazardous Medication Compounding (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center Founders Building 710 Denton Street La Crosse, WI 54601	Services: • Outpatient Clinics (Outpatient)



# **Locations of Care**

#### \* Primary Location

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Gundersen Lutheran Medical Center, Inc. DBA: Gundersen Lutheran Medical Center Winona Campus 1122 West Highway 61 Winona, MN 55987Services: <ul><li>Administration of Blood Product (Outpatient)</li><li>Administration of High Risk Medications (Outpatient)</li><li>Anesthesia (Outpatient)</li><li>Behavioral Health (Non 24</li></ul> <ul><li>Hazardous Medication Compounding (Outpatient)</li><li>Outpatient Clinics (Outpatient)</li><li>Perform Invasive Procedure (Outpatient)</li></ul>	Locations of Care	Available Services
Hour Care - Adult/Child/Youth)	Medical Center, Inc. DBA: Gundersen Lutheran Medical Center Winona Campus 1122 West Highway 61	<ul> <li>Administration of Blood Product (Outpatient)</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Behavioral Health (Non 24 Hour Care -</li> <li>Administration of Blood Product (Outpatient)</li> <li>Hazardous Medication Compounding (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
Gundersen LutheranMedical Center, Inc.DBA: Gundersen Hospice333 Front St. NLa Crosse, WI 54601	Medical Center, Inc. DBA: Gundersen Hospice 333 Front St. N	

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# **2022 National Patient Safety Goals**

### **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

#### 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.

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# **2022 National Patient Safety Goals**

### 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	$\bigcirc$
	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	$\bigcirc$

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## **National Quality Improvement Goals**

#### Reporting Period: January 2021 - December 2021

			o other Joint hission
		Accredited Organization	
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> <sup>2</sup>	<b>0</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				on
		Nationwide Statewide			ewide	
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.	<b>⊕</b>	34%	26%	33%	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.	1% of 80 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.	70% of 1460 eligible Patients	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 www.hospitalcompare.hhs.gov

---- Null value or data not displayed.

possible results
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 This organization's performance is similar to the target range/value.
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