

Org ID: 7650

Accreditation Quality Report

700 West Avenue South, La Crosse, 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.

DBA: Mayo Clinic Health System in La Crosse, 700 West Avenue South, La Crosse, WI

Org ID: 7650



Summary of Quality Information

Accreditation Programs	s Accreditation Decision	Effective Date	Last Full Surve Date	ey Last On-Site Survey Date
🥝 Critical Access Hospital	Accredited	9/25/2021	9/24/2021	9/24/2021
📀 Home Care	Accredited	9/25/2021	9/24/2021	9/24/2021
📀 Hospital	Accredited	9/25/2021	9/24/2021	9/24/2021
🎯 Rural Health Clinic	Accredited	3/10/2023	3/9/2023	3/9/2023

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

Hospice Agency

Hospital

Advanced Certification Certification Decision		Effective	Last Full Review	v Last On-Site
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	4/16/2022	4/15/2022	4/15/2022

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	
Critical Access Hospital	2021National Patient Safety Goals	Ø		
	National Quality Improvement Goals:			
Reporting Period: Jan 2022 - Dec 2022	Perinatal Care	(in) ²	(in) ²	
Home Care	2021National Patient Safety Goals	\bigotimes	()) *	
Hospital	2021National Patient Safety Goals	Ø	₩ *	

Symbol Key

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.
Э	This organization's performance is worse than the target range/value.
•	This Measure is not applicable for this organization.
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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.
- 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.
- **12.** The measure rate is within optimal range.

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		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
	National Quality Improvement Goals:			
Reporting Period: Jan 2022 - Dec 2022	Perinatal Care	1	(v) ²	
Rural Health Clinic	2023National Patient Safety Goals	Ø	*	

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Locations of Care

* Primary Location Locations of Care Available Services Mayo Clinic Health System - Southwest Services: Wisconsin Region, Inc. Acute Care • Ophthalmology (Surgical DBA: Mayo Clinic Health CT Scanner Services) System in Sparta Swing Beds (Imaging/Diagnostic 310 West Main Street Teleradiology Services) Sparta, WI 54656 Gastroenterology (Surgical (Imaging/Diagnostic Services) Services) Trauma Center (Trauma GI or Endoscopy Lab Center) (Imaging/Diagnostic Ultrasound Services) (Imaging/Diagnostic Services) Mammography (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) **Mayo Clinic Health** System – Southwest Services: Wisconsin Region, Inc. • Outpatient Clinics (Outpatient) DBA: Mayo Clinic Health System Belle Square 232 3rd Street North Suite 100 La Crosse, WI 54601 **Mayo Clinic Health** System – Southwest Services: Wisconsin Region, Inc. Outpatient Clinics (Outpatient) DBA: Mayo Clinic Health System Sparta Eye Clinic 400 Jefferson Ave. Sparta, WI 54656 **Mayo Clinic Health** System - Southwest Services: Wisconsin Region, Inc. • Hospice Care DBA: Mayo Clinic Health System Southwest Wisconsin Hospice 700 West Avenue South La Crosse, WI 54601 **Mayo Clinic Health** System – Southwest Services: Wisconsin Region, Inc. • Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) DBA: Mayo Clinic Health Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care • System in La Crosse - Adult/Child/Youth) (Partial Hospitalization - Adult) (Non-detox -615 South 10th Street Adult) La Crosse. • Peer Support (Non 24 Hour Care) WI 54601-4783

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Locations of Care

Locations of Care	Available Services
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. * DBA: Mayo Clinic Health System in La Crosse 700 West Avenue, South La Crosse, WI 54601-4783	 Joint Commission Advanced Certification Programs: Primary Stroke Center Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) Dialysis Unit (Inpatient) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) G or tendoscopy Lab (Imaging/Diagnostic Services) G or tendoscopy Lab (Imaging/Diagnostic Services) G or tendoscopy Lab (Imaging/Diagnostic Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Mammography (Imaging/Diagnostic Services) Mammography (Imaging/Diagnostic Services) Mammography (Imaging/Diagnostic Services) Medical ICU (Intensive Care Unit) Neurosurgery (Surgical Services) Medical ICU (Intensive Care Unit) Neurosurgery (Surgical Services) Menurosurgery (Surgical Services) Medical ICU (Intensive Care Unit) Neurosurgery (Surgical Services) Non-Sterile Medication Compounding (Inpatient)

DBA: Mayo Clinic Health System in La Crosse, 700 West Avenue South, La Crosse, WI

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Locations of Care

* Primary Location

Locations of Care	Available Services
Mayo Clinic Health	
System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Holmen 1303 Main Street South Holmen, WI 54636-8927	 Services: Behavioral Health (Non 24 Hour Care - Adult) Community Integration (Non 24 Hour Care) Outpatient Clinics (Outpatient)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Caledonia 701 North Sprague Street Caledonia, MN 55921-1066	Services: Outpatient Clinics (Outpatient)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Prairie Du Chien 800 East Blackhawk Avenue Prairie Du Chien, WI 53821-1698	 Services: Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Chemical Dependency (Non 24 Hour Care - Adult/Child/Youth) (Non-detox - Adult) Community Integration (Non 24 Hour Care) Outpatient Clinics (Outpatient)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Tomah 325 Butts Avenue Tomah, WI 54660-1412	 Services: Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Outpatient Clinics (Outpatient) Peer Support (Non 24 Hour Care)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Arcadia 895 Dettloff Drive Arcadia, WI 54612	 Services: Behavioral Health (Non 24 Hour Care - Adult) Chemical Dependency (Non 24 Hour Care - Adult) (Non-detox - Adult) Community Integration (Non 24 Hour Care) Outpatient Clinics (Outpatient)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in La Crosse 800 West Avenue South La Crosse, WI 54601-4783	Services: Outpatient Clinics (Outpatient)
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Onalaska 191 Theatre Road Onalaska, WI 54650-8679	 Services: Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Chemical Dependency (Non 24 Hour Care - Adult) (Non-detox - Adult) Community Integration (Non 24 Hour Care) Outpatient Clinics (Outpatient)

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Locations of Care

* Primary Location

Locations of Care	Available Services
Mayo Clinic Health System – Southwest Wisconsin Region, Inc. DBA: Mayo Clinic Health System in Sparta Clinic 310 West Main Street Sparta, WI 54656	 Services: Addiction Services/Adult) (Non-detox - Adult) Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult/Child/Youth) (Partial Hospitalization - Adult) (Non-detox - Adult) Community Integration (Non 24 Hour Care) Outpatient Clinics (Outpatient)

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2021 National Patient Safety Goals

Critical Access 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	\bigcirc
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	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigcirc

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.

Symbol Key

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Footnote Key

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updated data. **10.** Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

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overall result.

This organization achieved the best

This organization's performance is

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

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There were no eligible patients that met

the denominator criteria.12. The measure rate is within optimal

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.

The Measure Set does not have an

Mayo Clinic Health System - Southwest Wisconsin Region, Inc.

DBA: Mayo Clinic Health System in La Crosse,

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National Quality Improvement Goals

Reporting Period: January 2022 - December 2022

		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	0 ²

		Co	mpared to c Accredit	other Joint ed Organiz		n	
				Nationwide Statewide			
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.	()	1 ²	26%	(12) ¹²	23%	
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 21 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 474 eligible Patients	72%	50%	75%	65%	
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	12 per 1000	5	13	1	16	

* This information can also be viewed at https://hospitalcompare.io/

---- Null value or data not displayed.

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2021 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.
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2021 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	\bigotimes
	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	\bigotimes
	Marking the Procedure Site	\bigcirc
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National Quality Improvement Goals

Reporting Period: January 2022 - December 2022

		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

		Co	Compared to other Joint Commission Accredited Organizations			
		1	Vationwide	ou organiz		wide
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.	()	1 ²	26%	(12) ¹²	23%
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 21 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 474 eligible Patients	72%	50%	75%	65%
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	12 per 1000	5	13	1	16

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13

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2023 National Patient Safety Goals

Rural Health Clinic

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Improve the accuracy of resident identification.	Ø
Improve the safety of using medications.	Labeling Medications.	Ø
	Reducing Harm from Anticoagulation Therapy.	\bigcirc
	Reconciling Medication Information.	\bigcirc
Reduce the risk of health care-associated infections	Reduce the risk of health care-associated infections.	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigcirc

Symbol Key

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