



# 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](mailto:qualityreport@jointcommission.org) with your comments and suggestions.

Mark R. Chassin, MD, MPP, MPH  
President of the Joint Commission



## Summary of Quality Information



### Symbol Key

-  This organization achieved the best possible results.
-  This organization's performance is above the target range/value.
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Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
 Home Care	Accredited	4/14/2016	4/13/2016	5/20/2016
 Hospital	Accredited	4/14/2016	4/13/2016	4/13/2016

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

Hospice Agency

Hospital

### 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	<b>2016National Patient Safety Goals</b>		 *
Hospital	<b>2016National Patient Safety Goals</b>		 *
<b>National Quality Improvement Goals:</b>			
Reporting Period: Jan 2015 - Dec 2015	Emergency Department	 <sup>2</sup>	 <sup>2</sup>
	Immunization	 <sup>2</sup>	 <sup>2</sup>
	Stroke Care		
	Venous Thromboembolism (VTE)		



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



# St. Joseph's Community Hospital of West Bend Inc.

DBA: Froedtert Health St. Joseph's Hospital,  
3200 Pleasant Valley Rd, West Bend, WI

Org ID: 7720



## Locations of Care




### \* Primary Location

Locations of Care	Available Services
<b>Sleep Center</b> 1201 Oak Street West Bend, WI 53095	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>
<b>St. Joseph's Community Hospital of West Bend Inc. *</b> DBA: Froedtert Health St. Joseph's Hospital 3200 Pleasant Valley Rd West Bend, WI 53095-3898	<b>Services:</b> <ul style="list-style-type: none"> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Ophthalmology (Surgical Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Radiation Oncology (Imaging/Diagnostic Services)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Teleradiology (Imaging/Diagnostic Services)</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul>
<b>The Kathy Hospice</b> 3232 Pleasant Valley Road West Bend, WI 53095	<b>Services:</b> <ul style="list-style-type: none"> <li>Hospice Care</li> </ul>








## 2016 National Patient Safety Goals

### Symbol Key

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### Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	



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### Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
	Eliminating Transfusion Errors	
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	
Improve the safety of using medications.	Labeling Medications	
	Reducing Harm from Anticoagulation Therapy	
	Reconciling Medication Information	
Use Alarms Safely	Use Alarms Safely on Medical Equipment	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
	Preventing Multi-Drug Resistant Organism Infections	
	Preventing Central-Line Associated Blood Stream Infections	
	Preventing Surgical Site Infections	
	Preventing Catheter-Associated Urinary Tract Infection	
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	
Universal Protocol	Conducting a Pre-Procedure Verification Process	
	Marking the Procedure Site	
	Performing a Time-Out	



## National Quality Improvement Goals

Reporting Period: January 2015 - December 2015

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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.	<sup>2</sup>	<sup>2</sup>

Compared to other Joint Commission  
Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Most:	Weighted Median:	Top 10% Scored at Most:	Weighted 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.	<sup>2</sup> 62 minutes 470 eligible Patients	52	122	45	65
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.	<sup>2</sup> 225 minutes 470 eligible Patients	201	308	175	211



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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

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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.	  97% of 397 eligible Patients	100%	94%	100%	96%



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Measure Area	Explanation	Nationwide	Statewide
Stroke Care	This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients.		

Compared to other Joint Commission  
Accredited Organizations

Measure	Explanation					
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	Average Rate:
Anticoagulation Therapy for Atrial Fibrillation/Flutter	Ischemic stroke patients with atrial fibrillation/flutter who receive a prescription for an anticoagulant medication when being discharged from the hospital. This measure reports how often an anticoagulant medication was prescribed to ischemic stroke patients with atrial fibrillation/flutter when they are leaving a hospital. Atrial fibrillation is a heart rhythm disturbance that can allow blood clots to form within the upper chambers of the heart. If these blood clots break off and get into the bloodstream, a stroke can result. Anticoagulant medications or "blood thinners" help to prevent blood clots from forming.	 100% of 13 eligible Patients	100%	97%	100%	97%
Antithrombotic Therapy By End of Hospital Day 2	Ischemic stroke patients receiving an antithrombotic medication by the end of hospital day 2. This measure reports what percent of ischemic stroke patients receive an antithrombotic medication, such as aspirin, the day of or day after hospital arrival. Antithrombotic medications are beneficial because they reduce the tendency of blood to clot in blood vessels of the brain and improve survival rates.	 100% of 61 eligible Patients	100%	98%	100%	99%



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			Nationwide	Average Rate:	Statewide	Average Rate:
Assessed for Rehabilitation	Stroke patients who have had their need for rehabilitation services assessed by a member of the rehabilitation team during their hospitalization. This measure reports what percent of stroke patients have a rehabilitation assessment completed or receive rehabilitation services during their hospitalization. Rehabilitation is a treatment(s) designed to facilitate the process of recovery from stroke or other injury, illness, or disease to as normal a condition as possible.	 100% of 75 eligible Patients	100%	99%	100%	99%
Discharged on Antithrombotic Therapy	Ischemic stroke patients who receive a prescription for an antithrombotic medication when discharged from the hospital. This measure reports how often an antithrombotic medication, such as aspirin, was prescribed to ischemic stroke patients when they are leaving a hospital. Antithrombotic medications are beneficial because they reduce the tendency of blood to clot in blood vessels of the brain and improve survival rates.	 99% of 75 eligible Patients	100%	99%	100%	100%
Discharged on Statin Medication	Ischemic stroke patients who receive a prescription for a statin medication when discharged from the hospital. This measure reports how often a statin medication was prescribed to ischemic stroke patients when they are leaving a hospital. Statin medications reduce the level of cholesterol circulating in the blood.	 100% of 63 eligible Patients	100%	97%	100%	98%



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			Nationwide	Average Rate:	Statewide	Average Rate:
Stroke Education	Stroke patients who receive specific educational material about their condition. This measure reports what percent of stroke patients are given written instructions or educational material about their condition and care when they leave the hospital. Patient education about medicines, follow-up care after discharge, risk factors for stroke, warning signs to watch for, and activation of the emergency medical system if these signs occur is important in order to prevent another stroke.	 95% of 37 eligible Patients	100%	94%	100%	95%
Thrombolytic Therapy	Acute ischemic stroke patients who receive a medicine that breaks up blood clots (thrombolytic therapy) within 180 minutes of stroke symptom onset. This measure reports how quickly ischemic stroke patients were given a medication that breaks up blood clots (thrombolytic therapy). Breaking up blood clots increases blood flow to the brain. If blood flow is returned to the brain quickly during a stroke, the risk of brain damage and loss of physical function is decreased. The medicine that breaks up clots in the arteries and allows the return of normal blood flow is called thrombolytic therapy or "t-PA". It is important that this medicine be given quickly after an ischemic stroke is diagnosed.	<sup>3</sup> 57% of 7 eligible Patients <sup>3</sup>	100%	87%	100%	91%



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Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Venous Thromboembolism (VTE) Prophylaxis	Stroke patients who receive treatment for the prevention of blood clots on the day of or day after hospital admission. Note: Treatment may be medication or mechanical devices for exercising the legs. This measure reports what percent of stroke patients receive treatment for the prevention of blood clots. Stroke patients are at increased risk of developing blood clots. The incidence of blood clots is lowest when patients are treated to prevent them.	 94% of 63 eligible Patients	100%	98%	100%	98%



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Measure Area	Explanation	Nationwide	Statewide
Venous Thromboembolism (VTE)	This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots.		

Compared to other Joint Commission  
Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Intensive Care Unit (ICU) VTE Prophylaxis	Medical and surgical patients who were admitted or transferred to the ICU who received treatment to prevent VTE or a reason why they did not need preventive care was documented. This measure reports the percent of patients who received treatment to prevent blood clots or had documentation regarding preventive care at ICU admission or transfer.	 100% of 39 eligible Patients	100%	97%	100%	98%
VTE Discharge Instructions	Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions.	 78% of 37 eligible Patients	100%	93%	100%	91%
VTE Patients with Anticoagulation Overlap Therapy	Patients with blood clots who received two medications for treatment. This measure reports the percent of patients who received an overlap of medication for a specific timeframe, or who went home on both medications.	 88% of 65 eligible Patients	100%	94%	100%	95%



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		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
VTE Prophylaxis	Medical and surgical patients who were admitted to the hospital who received treatment to prevent blood clots or a reason why they did not need preventive care was documented. This measure reports the percent of patients who received treatment to prevent blood clots or had documentation regarding preventive care at hospital admission.	 95% of 424 eligible Patients	100%	95%	100%	95%



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