

# 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.

1912 Alabama Highway 157, Cullman, AL



# **Summary of Quality Information**

#### Symbol Key 1

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below 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.
- 9. 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."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🥝 Home Care	Accredited	11/13/2021	11/12/2021	11/12/2021
🮯 Hospital	Accredited	11/13/2021	11/12/2021	2/25/2022
olimitation States Contraction Contraction States Contraction Contraction States Contractic Contract	Accredited	9/26/2020	8/5/2022	8/5/2022

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

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

Cullman Regional Medical Center

1912 Alabama Highway 157, Cullman, AL. 35058

Hospital

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures® 2013 Top Performer on Key Quality Measures® 2013 Gold Plus Get With The Guidelines - Stroke

			Commission Accredited zations
		Nationwide Statew	
Home Care	2021National Patient Safety Goals	$\bigcirc$	<b>*</b>
Hospital 2021National Patient Safety Goals		Ø	<b>*</b>
	National Quality Improvement Goals:		
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	2 °	<b>()</b> <sup>2</sup>
Laboratory	2020National Patient Safety Goals	Ø	<b>()</b> *

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



# **Locations of Care**

* Primar	y Location
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Locations of Care	Available Services
Culiman Regional Medical Center * DBA: Culiman Regional 1912 Alabama Highway 157 Culiman, AL 35058	<ul> <li>Services:</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>Continuous Positive Ainway Pressure</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical 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>Gastroenterology (Surgical Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Home Health, Non-Hospice Services</li> <li>Hospice Care</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Medical I/Surgical Unit (Inpatient)</li> <li>Medical Scrial Services</li> <li>Medical Social Services</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Medical Social Services</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> </ul>
Cullman Regional Medical Center DBA: Cullman Regional Urgent Care 1958 AL Hwy 157 Cullman, AL 35058	Other Clinics/Practices located at this site: <ul> <li>Diagnostic Imaging</li> </ul> <li>Services: <ul> <li>General Laboratory Tests</li> <li>Urgent Care (Outpatient)</li> </ul> </li>

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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 3

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."

1912 Alabama Highway 157, Cullman, AL



# **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	$\bigcirc$
	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	$\bigcirc$
	Marking the Procedure Site	$\bigcirc$
	Performing a Time-Out	$\bigotimes$

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# Cullman Regional Medical Center

1912 Alabama Highway 157, Cullman, AL



# **National Quality Improvement Goals**

Symbol Key 2				
This organization achieved the best possible results This organization's performance is	Reporting Pe	eriod: April 2020 - March 2021		
above the target range/value.				
This organization's performance is similar to the target range/value.				o other Joint
This organization's performance is below the target range/value.				Organizations
D Not displayed	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>™</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				on
		٨	lationwide			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>	16%	25%	18%	30%
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.	3% of 40 eligible Patients	0%	2%	0%	1%
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.	52% of 272 eligible Patients	71%	50%	59%	38%
Jnexpected Complications in Ferm Newborns per 1000 vebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1162% of 258 eligible Patients	212%	1780%	408%	2500%
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.	2325% of 258 eligible Patients	1508%	3084%	1913%	4065%

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

This information can also be viewed at www.hospitalcompare.hhs.gov

Null value or data not displayed.

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# **National Quality Improvement Goals**

Reporting Period: April 2020 - March 2021

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				Compared to other Joint Commission			
				Accr	edited Org	anizations	
Measure Area		Explanation		Nationwi	de	Statewid	е
Perinatal Care		tegory of evidenced based measures a mothers and newborns.	issesses the	sesses the 2 2			
			Compared to other Joint Commission Accredited Organizations Nationwide Statewic				
Measure		Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complica Term Newborns per 1 livebirths - Severe Ra	000	The severe rate equals the number of patients with severe complications.	1162% of 258 eligible Patients	501%	1303%	714%	1566%

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# **2020 National Patient Safety Goals**

# Laboratory

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
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø

#### Symbol Key 3

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