

## Accreditation Quality Report





Version: 9 Date: 12/1/2017 1455 St. Francis Ave., Shakopee, MN



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.

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

1455 St. Francis Ave., Shakopee, MN

Org ID: 8194







## **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	12/13/2014	9/29/2017	11/10/2017

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

#### Other Accredited Programs/Services

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

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures® 2013 Top Performer on Key Quality Measures® 2012 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2014National Patient Safety Goals	Ø	<b>™</b> *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	<b>№</b> 0 <sup>2</sup>	<b>№</b> ²	
Apr 2016 - Mar 2017	Immunization	<b>№</b> 2	<b>(40)</b> 2	
	Perinatal Care	<b>№</b> <sup>2</sup>	<b>№</b> 2	

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

#### **Symbol Key**

- This organization achieved the best possible results.
- This organization's performance is above the target range/value.
- This organization's performance is similar to the target range/value.
- This organization's performance is below 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.
- 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.
- 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.

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

1455 St. Francis Ave., Shakopee, MN







## **Locations of Care**

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services
Southbridge Urgent Care 8170 Old Carriage Ct. Shakopee, MN 55379	Services:  • Urgent Care (Outpatient)
St. Francis Capable Kids Pediatric Therapy Center 1661 Park Ridge Drive Chaska, MN 55318	Other Clinics/Practices located at this site:  • St. Francis Rehabilitation and Sports Medicine  Services:  • Outpatient Clinics (Outpatient)
St. Francis Capable Kids Pediatric Therapy Center 6350 West 143rd Street Savage, MN 55378	Other Clinics/Practices located at this site:  • St. Francis Health Services in Savage (Diagnostic Services)  • St. Francis Rehabilitation & Sports Medicine  Services:  • Outpatient Clinics (Outpatient)
St. Francis Express Care 6150 Adams St. South Shakopee, MN 55379	Services:  • Urgent Care (Outpatient)
St. Francis Health Services in Chaska (Diagnostic Services) 111 Hundertmark Road Chaska, MN 55318	Services:  • Outpatient Clinics (Outpatient)
St. Francis Health Services in Jordan DBA: Primary Care Clinic 265 Creek Lane South Jordan, MN 55352	Services:  • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)

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## **Locations of Care**

*	<b>Primary</b>	Location

# Locations of Care St. Francis Regional Medical Center \* 1455 St. Francis Ave.

Shakopee, MN 55379

#### Available Services

#### Other Clinics/Practices located at this site:

- St. Francis Rehabilitation and Sports Medicine
- St. Francis X-ray Suite

#### **Services:**

- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)

- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sleep Laboratory (Sleep Laboratory)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

#### St. Francis Sleep Diagnostics Center 500 South Marshall Road, Suite 220 Shakopee, MN 55379

#### Services:

Outpatient Clinics (Outpatient)

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## **2014 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."

## Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	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
Use Alarms Safely	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	<u> </u>
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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## **National Quality Improvement Goals**

#### Reporting Period: April 2016 - March 2017

		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.	<b>№</b> <sup>2</sup>	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d 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.	122.00 minutes 682 eligible Patients	55.00	129.00	50.58	105.00
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.	220.00 minutes 684 eligible Patients	205.00	316.00	192.18	242.75

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- \* 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 2016 - March 2017

Compared to other Joint

		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	<b>№</b> 2	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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 530 eligible Patients	100%	94%	99%	96%

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## **National Quality Improvement Goals**

#### Reporting Period: April 2016 - March 2017

Compared to other Joint

		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> 2	<b>№</b> 2	

		Coi	mpared to d Accredit	other Joint ed Organiz		on
		١	Nationwide			wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	3	100%	98%	100%	98%
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.	9% of 34 eligible Patients	0%	2%	0%	4%
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.	74% of 345 eligible Patients	74%	53%	78%	64%

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