

# Accreditation Quality Report

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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, 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 the key area of 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.

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**

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."

| Accreditation Programs           | Accreditation Decision | Effective Date | Last Full Survey Date | Last On-Site Survey Date |
|----------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Laboratory Accreditation Program | Accredited             | 3/23/2011      | 3/20/2013             | 3/20/2013                |
| Critical Access Hospital         | Accredited             | 3/24/2011      | 3/23/2011             | 5/4/2011                 |

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

Pathology and Clinical Laboratory

Critical Access Hospital

|                                  |                                   | Compared to other Joint Commission Accredited Organizations |           |
|----------------------------------|-----------------------------------|---|-----------|
|                                  |                                   | Nationwide  | Statewide |
| Laboratory Accreditation Program | 2011National Patient Safety Goals |   | *         |
| Critical Access Hospital         | 2011National Patient Safety Goals |   | *         |



## Locations of Care




### \* Primary Location

| Locations of Care  | Available Services  |
|--|---|
| <b>Buena Vista Regional Medical Center *</b><br>1525 West Fifth Street<br>Storm Lake, IA 50588 | <b>Services:</b> <ul style="list-style-type: none"> <li>• Acute Care</li> <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>• Interventional Radiology (Imaging/Diagnostic Services)</li> <li>• Labor &amp; Delivery (Inpatient)</li> <li>• Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>• Mammography (Imaging/Diagnostic Services)</li> <li>• Medical /Surgical Unit (Inpatient)</li> <li>• Normal Newborn Nursery (Inpatient)</li> <li>• Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>• Orthopedic Surgery (Surgical Services)</li> <li>• Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>• Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>• Psychiatric Unit</li> <li>• Surgical Unit (Inpatient)</li> <li>• Swing Beds</li> <li>• Teleradiology (Imaging/Diagnostic Services)</li> <li>• Toxicology</li> <li>• Ultrasound (Imaging/Diagnostic Services)</li> <li>• Urology (Surgical Services)</li> </ul> |






## 2011 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.

### Laboratory Accreditation Program




| Safety Goals   | Organizations Should                                    | Implemented   |
|--|---|---|
| Improve the accuracy of patient identification.              | Use of Two Patient Identifiers                          |  |
| Improve the effectiveness of communication among caregivers. | Timely Reporting of Critical Tests and Critical Results |  |
| Reduce the risk of health care-associated infections         | Meeting Hand Hygiene Guidelines                         |  |

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



















## 2011 National Patient Safety Goals

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### Critical Access 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                 |    |
| 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                        |   |
| Accurately and completely reconcile medications across the continuum of care. | Comparing Current and Newly Ordered Medications            |  |
|   | Communicating Medications to the Next Provider             |  |
|   | Providing a Reconciled Medication List to the Patient      |  |
|   | Settings in Which Medications are Minimally Used           |  |
| Universal Protocol  | Conducting a Pre-Procedure Verification Process            |  |
|   | Marking the Procedure Site                                 |  |
|   | Performing a Time-Out                                      |  |



## Survey of Patients' Hospital Experiences

### Footnote Key

1. Fewer than 100 patients completed the HCAHPS survey. Use these rates with caution, as the number of surveys may be too low to reliably assess hospital performance.
2. This displays less than 12 months of accurate data.
3. Survey results are not available for this period.
4. No patients were eligible for the HCAHPS Survey.

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

| Survey Date Range             | Number of Completed Surveys | Survey Response Rate |
|-------------------------------|-----------------------------|----------------------|
| April 2011 through March 2012 | Not Available               | 0%                   |

| Question  |               |                  | Explanation  |               |                  |  |               |                  |
|---|---------------|------------------|--|---------------|------------------|--|---------------|------------------|
| How often did doctors communicate well with patients? |               |                  | Patients reported how often their doctors communicated well with them during their hospital stay. "Communicated well" means doctors <b>explained things clearly, listened carefully</b> to the patient, and treated the patient with <b>courtesy and respect</b> . |               |                  |  |               |                  |
| Doctors "always" communicated well                    |               |                  | Doctors "usually" communicated well  |               |                  | Doctors "sometimes" or "never" communicated well |               |                  |
| Hospital Rate   | State Average | National Average | Hospital Rate  | State Average | National Average | Hospital Rate                                    | State Average | National Average |
| 0% <sup>3</sup>                                       | 84%           | 81%              | 0% <sup>3</sup>  | 13%           | 15%              | 0% <sup>3</sup>                                  | 3%            | 4%               |

| Question   |               |                  | Explanation  |               |                  |   |               |                  |
|--|---------------|------------------|--|---------------|------------------|---|---------------|------------------|
| How often did nurses communicate well with patients? |               |                  | Patients reported how often their nurses communicated well with them during their hospital stay. "Communicated well" means nurses <b>explained things clearly, listened carefully</b> to the patient, and treated the patient with <b>courtesy and respect</b> . |               |                  |   |               |                  |
| Nurses "always" communicated well                    |               |                  | Nurses "usually" communicated well   |               |                  | Nurses "sometimes" or "never" communicated well |               |                  |
| Hospital Rate  | State Average | National Average | Hospital Rate  | State Average | National Average | Hospital Rate                                   | State Average | National Average |
| 0% <sup>3</sup>                                      | 81%           | 78%              | 0% <sup>3</sup>  | 16%           | 17%              | 0% <sup>3</sup>                                 | 3%            | 5%               |

| Question   |               |                  | Explanation  |               |                  |  |               |                  |
|--|---------------|------------------|--|---------------|------------------|--|---------------|------------------|
| How often did patients receive help quickly from hospital staff? |               |                  | Patients reported how often they were helped quickly when they used the <b>call button</b> or needed help in <b>getting to the bathroom</b> or <b>using a bedpan</b> . |               |                  |  |               |                  |
| Patients "always" received help as soon as they wanted           |               |                  | Patients "usually" received help as soon as they wanted  |               |                  | Patients "sometimes" or "never" received help as soon as they wanted |               |                  |
| Hospital Rate  | State Average | National Average | Hospital Rate  | State Average | National Average | Hospital Rate  | State Average | National Average |
| 0% <sup>3</sup>  | 70%           | 66%              | 0% <sup>3</sup>  | 24%           | 24%              | 0% <sup>3</sup>  | 6%            | 10%              |



## Survey of Patients' Hospital Experiences

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2. This displays less than 12 months of accurate data.
3. Survey results are not available for this period.
4. No patients were eligible for the HCAHPS Survey.

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

| Survey Date Range             | Number of Completed Surveys | Survey Response Rate |
|-------------------------------|-----------------------------|----------------------|
| April 2011 through March 2012 | Not Available               | 0%                   |

| Question                                      |               |                  | Explanation  |               |                  |   |               |                  |
|---|---------------|------------------|--|---------------|------------------|---|---------------|------------------|
| How often was patients' pain well controlled? |               |                  | If patients needed medicine for pain during their hospital stay, the survey asked how often their pain was well controlled. "Well controlled" means their <b>pain was well controlled</b> and that the <b>hospital staff did everything they could to help</b> patients with their pain. |               |                  |   |               |                  |
| Pain was "always" well controlled             |               |                  | Pain was "usually" well controlled   |               |                  | Pain was "sometimes" or "never" well controlled |               |                  |
| Hospital Rate                                 | State Average | National Average | Hospital Rate  | State Average | National Average | Hospital Rate                                   | State Average | National Average |
| 0% <sup>3</sup>                               | 71%           | 70%              | 0% <sup>3</sup>  | 24%           | 23%              | 0% <sup>3</sup>                                 | 5%            | 7%               |

| Question  |               |                  | Explanation   |               |                  |  |               |                  |
|---|---------------|------------------|---|---------------|------------------|--|---------------|------------------|
| How often did staff explain about medicines before giving them to patients? |               |                  | If patients were given medicine that they had not taken before, the survey asked how often staff explained about the medicine. "Explained" means that hospital staff told <b>what the medicine was for</b> and what <b>side effects it might have</b> before they gave it to the patient. |               |                  |  |               |                  |
| Staff "always" explained  |               |                  | Staff "usually" explained   |               |                  | Staff "sometimes" or "never" explained |               |                  |
| Hospital Rate   | State Average | National Average | Hospital Rate   | State Average | National Average | Hospital Rate                          | State Average | National Average |
| 0% <sup>3</sup>   | 65%           | 63%              | 0% <sup>3</sup>   | 20%           | 18%              | 0% <sup>3</sup>                        | 15%           | 19%              |





## Survey of Patients' Hospital Experiences

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|-------------------------------|-----------------------------|----------------------|
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| Question   |               |                  | Explanation  |               |                  |                                       |               |                  |
|--|---------------|------------------|--|---------------|------------------|---------------------------------------|---------------|------------------|
| How often were the patients' rooms and bathrooms kept clean? |               |                  | Patients reported how often their <b>hospital room and bathroom were kept clean.</b> |               |                  |                                       |               |                  |
| Room was "always" clean                                      |               |                  | Room was "usually" clean   |               |                  | Room was "sometimes" or "never" clean |               |                  |
| Hospital Rate  | State Average | National Average | Hospital Rate  | State Average | National Average | Hospital Rate                         | State Average | National Average |
| 0% <sup>3</sup>  | 78%           | 73%              | 0% <sup>3</sup>  | 17%           | 18%              | 0% <sup>3</sup>                       | 5%            | 9%               |

| Question   |               |                  | Explanation   |               |                  |                                       |               |                  |
|--|---------------|------------------|---|---------------|------------------|---------------------------------------|---------------|------------------|
| How often was the area around patients' rooms kept quiet at night? |               |                  | Patients reported how often <b>the area around their room was quiet at night.</b> |               |                  |                                       |               |                  |
| "Always" quiet at night  |               |                  | "Usually" quiet at night  |               |                  | "Sometimes" or "never" quiet at night |               |                  |
| Hospital Rate  | State Average | National Average | Hospital Rate   | State Average | National Average | Hospital Rate                         | State Average | National Average |
| 0% <sup>3</sup>  | 63%           | 60%              | 0% <sup>3</sup>   | 30%           | 29%              | 0% <sup>3</sup>                       | 7%            | 11%              |

| Question  |               |                  | Explanation   |               |                  |
|---|---------------|------------------|---|---------------|------------------|
| Were patients given information about what to do during their recovery at home? |               |                  | The survey asked patients about information they were given when they were ready to leave the hospital. Patients reported whether hospital staff had <b>discussed the help they would need at home</b> . Patients also reported whether they were given <b>written information about symptoms or health problems to watch for during their recovery</b> . |               |                  |
| Yes, staff did give patients this information                                   |               |                  | No, staff did not give patients this information  |               |                  |
| Hospital Rate   | State Average | National Average | Hospital Rate   | State Average | National Average |
| 0% <sup>3</sup>   | 86%           | 84%              | 0% <sup>3</sup>   | 14%           | 16%              |



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|-------------------------------|-----------------------------|----------------------|
| April 2011 through March 2012 | Not Available               | 0%                   |

| Question                                     | Explanation  |                  |   |               |                  |  |               |                  |  |
|--|--|------------------|---|---------------|------------------|--|---------------|------------------|--|
| How do patients rate the hospital overall?   | After answering all other questions on the survey, <b>patients answered a separate question that asked for an overall rating of the hospital.</b> Ratings were on a scale from 0 to 10, where "0" means "worst hospital possible" and "10" means "best hospital possible." |                  |   |               |                  |  |               |                  |  |
| Patients who gave a rating of 9 or 10 (high) |  |                  | Patients who gave a rating of 7 or 8 (medium) |               |                  | Patients who gave a rating of 6 or lower (low) |               |                  |  |
| Hospital Rate                                | State Average  | National Average | Hospital Rate                                 | State Average | National Average | Hospital Rate                                  | State Average | National Average |  |
| 0% <sup>3</sup>                              | 74%  | 69%              | 0% <sup>3</sup>                               | 20%           | 23%              | 0% <sup>3</sup>                                | 6%            | 8%               |  |

| Question   | Explanation   |                  |   |               |                  |  |               |                  |  |
|--|---|------------------|---|---------------|------------------|--|---------------|------------------|--|
| Would patients recommend the hospital to friends and family? | The survey asked patients <b>whether they would recommend the hospital</b> to their friends and family. |                  |   |               |                  |  |               |                  |  |
| YES, patients would definitely recommend the hospital        |   |                  | YES, patients would probably recommend the hospital |               |                  | NO, patients would not recommend the hospital (they probably would not or definitely would not recommend it) |               |                  |  |
| Hospital Rate  | State Average   | National Average | Hospital Rate                                       | State Average | National Average | Hospital Rate  | State Average | National Average |  |
| 0% <sup>3</sup>  | 75%   | 70%              | 0% <sup>3</sup>                                     | 22%           | 25%              | 0% <sup>3</sup>  | 3%            | 5%               |  |