

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.

DBA: Missouri Baptist Medical Center, 3015 North Ballas Road, Saint Louis, MO



Summary of Quality Information

le results.					
	Accreditation Prog	grams Accreditation Decision	Effective	Last Full Su	rvey Last On-Site
rganization's performance is the target range/value.		-	Date	Date	Survey Date
rganization's performance is r to the target range/value.	🞯 Hospital	Accredited	4/24/2021	4/23/2021	4/23/2021
rganization's performance is					

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

Advanced Certification	Certification Decision	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	Review Date
🮯 Primary Stroke Center	Certification	10/25/2019	10/24/2019	10/24/2019

Other Accredited Programs/Services

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

Special Quality Awards

2013 Top Performer on Key Quality Measures®

2013 ACS National Surgical Quality Improvement Program

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2021National Patient Safety Goals	\bigotimes	*	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	(10) ²	(m) ²	
Jan 2019 - Dec 2019	Perinatal Care	(1) ²	2 ²	

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

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Sym	hol	- K ev
Sym	001	ILC.

0	This organization achieved the best possible results.
Ð	This organization's performance is above the target range/value.
Ø	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
0	organization.

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.
- 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.





Locations of Care

* Primary Location

Locations of Care	Available Services
BJC Outpatient Center - Ellisville 15837 Fountain Plaza Drive Chesterfield, MO 63017	Services: Outpatient Clinics (Outpatient)
Breast Healthcare Center Rock Hill Mammography 9450 Manchester Road Suite 206 Saint Louis, MO 63119	Services: Outpatient Clinics (Outpatient)
MBMC St. Louis Gynecology and Oncology 11652 Studt Road Saint Louis, MO 63141	Services: • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient)
Missouri Baptist Healthcare-Sunset Hills 3844 S. Lindbergh Blvd. Saint Louis, MO 63127	Other Clinics/Practices located at this site: • Cancer and Infusion Center, suite 130 • Lab draw, suite 110 • Nutrition Counseling, suite 115 • Radiology, suite 100 • Radiology, suite 140
	Services: • Administration of High Risk Medications (Outpatient) • Hazardous Medication Compounding (Outpatient) • Outpatient Clinics (Outpatient)

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Locations of Care

* Primary Location

Available	e Services
Joint Commission Advanced Primary Stroke Center Other Clinics/Practices locat Mammography Van Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiotovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) GI or Endoscopy Lab (Imaging/Diagnostic	Certification Programs: ed at this site: Neuro/Spine Unit (Inpatient) Neurosurgery (Surgical Services) Non-Sterile Medication Compounding (Inpatient) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Nuclear Pharmacy (Inpatient) Ophthalmology (Surgical Services) Orthopedic Surgery (Surgical Services) Orthopedic/Spine Unit (Inpatient) Outpatient Clinics (Outpatient Pediatric Unit (Inpatient) Plastic Surgery (Surgical Services) Positron Emission Tomograph (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient) Radiation Oncology
 (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) 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 	 Orthopedic/Spine Unit (Inpatient) Outpatient Clinics (Outpatient Pediatric Unit (Inpatient) Plastic Surgery (Surgical Services) Positron Emission Tomograph (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient)
 Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hematology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic 	 Stabilization) Sterile Medication Compounding (Inpatient) Surgical Unit (Inpatient) Thoracic Surgery (Surgical Services) Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services)
	Joint Commission Advanced Primary Stroke Center Other Clinics/Practices locat Mammography Van Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiotovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) G or Endoscopy Lab (Inpatient) Hematology/Oncology Unit (Inpatient) Hematology/Oncology Unit (Inpatient) Hematology/Oncology Unit (Inpatient) Hematology/Oncology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient)

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Locations of Care

Locations of Care	Available Services
Missouri Baptist Medical Center Medical Office Building B/C 3009 N. Ballas Rd. Saint Louis, MO 63131	Other Clinics/Practices located at this site: • Lab / Radiology / Nutrition Services, suite 112 • Maternal Fetal Services, suite 353 • MS Infusion Center, suite 115 Services: • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient)
Missouri Baptist Medical Center Medical Office Building D 3023 North Ballas Rd. Saint Louis, MO 63121	Other Clinics/Practices located at this site: • Breast Health Care Center, suite 630 • Cardiac Testing, suite 210 • Cardiac Testing, suite 220 • Cardiac Testing, suite 220 • Center for Women's and Fetal Health, suite 450 • Digestive Disease Center, suite 550 • Labor and Delivery, suite 300 Services: • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)

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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 Reconciling Medication Information	(V) (V)
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 Marking the Procedure Site Performing a Time-Out	<u>ତ</u> ତ

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.

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission	
		Accredited C	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.	@ ²	@ ²

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	Top 10%	Weighte		Weighte
		Results	Scored at Most:	d Median:	Scored at Most:	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.	ND 2 136.00 minutes 559 eligible Patients	55.00	133.00	62.74	107.91

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

--- Null value or data not displayed.

Symbol Key

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

		Compared to other Joint Commission	
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Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	№ ²	™ ²

		Compared to other Joint Commission Accredited Organizations				on
		٨	lationwide	Ŭ		ewide
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.	100% of 10 eligible Patients	100%	98%	100%	97%
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.	()	12%	25%	11%	22%
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 75 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.	53% of 388 eligible Patients	73%	51%	68%	51%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	2079.00 minutes 2982 eligible Patients				

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National Quality Improvement Goals

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Measure Area			Nationwi	de	Statewide	e	
Perinatal Care		egory of evidenced based measures as mothers and newborns.	ssesses the	@	2	⊘ ²	
				ompared to other Joint Commission Accredited Organizations			
	N		lationwide		State	_	
Measure		Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Ave Ra
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	10					
	conditions, these are babies that are expected to do well and routinely go home with the mother.	3286.00 minutes 2982 eligible Patients					
Unexpected Compli Term Newborns per	1000	The severe rate equals the number of patients with severe complications.	10				
livebirths - Severe F	late		1207.00 minutes 2982 eligible				

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