# 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.

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



Symbol Key

ossible results.

rganization. Not displayed

Φ

Ø

This organization achieved the best

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

### **Trinity Hospitals** DBA: Trinity Health, One Burdick Expressway West, Minot, ND







# **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care	Accredited	6/8/2017	6/7/2017	6/7/2017
Home Care	Accredited	6/9/2017	6/8/2017	6/8/2017
	Accredited	6/10/2017	6/9/2017	2/4/2019

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

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

Trinity Hospitals

One Burdick Expressway West, Minot, ND. 58701

Trinity Health Vision Galleria - Home Care

1321 West Dakota Parkway, Williston, ND. 58801

Medical Arts Outpatient Services, Inc.

530 20th Avenue SW, Minot, ND. 58701

Trinity Health Vision Galleria

2815 16th Street SW, Suite 101, Minot, ND. 58701

Medical Arts Outpatient Services, Inc.

400 Burdick Expressway East Suite E117, Minot, ND. 58701

Hospital

<b>Advanced Certification</b>	<b>Certification Decision</b>	<b>Effective</b>	<b>Last Full Review Last On-Site</b>	
Programs		Date	Date	<b>Review Date</b>
Primary Stroke Center	Certification	2/10/2017	2/9/2017	2/9/2017

#### **Other Accredited Programs/Services**

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

#### **Special Quality Awards**

2014 Gold Plus Get With The Guidelines - Stroke

# Footnote Key

- 1. The Measure or Measure Set was not
- 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.
- 8. The number of months with Measure data is below the reporting requirement.
- 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.







# **Summary of Quality Information**

		Compared to other Joint Commission Accredite Organizations	
		Nationwide	Statewide
Behavioral Health Care	2017National Patient Safety Goals	Ø	*
Home Care	2017National Patient Safety Goals	Ø	<b>™</b> *
Hospital	2017National Patient Safety Goals	Ø	N/A *
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	<b>№</b> 0 <sup>2</sup>	ND <sup>2</sup>
Jul 2017 - Jun 2018	Hospital-Based Inpatient Psychiatric Services	<b>№</b> 2	<b>№</b> 2
	Immunization	<b>№</b> 2	ND 2
	Perinatal Care	<b>№</b> <sup>2</sup>	<b>№</b> 2

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





This organization achieved the best oossible results.

Symbol Key

Φ This organization's performance is above the target range/value.

This organization's performance is 0 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

- 1. The Measure or Measure Set was not
- 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.
- 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.





One Burdick Expressway West, Minot, ND





# **Locations of Care**

Locations of Care	Available Services
Health Center East 20 Burdick Expressway West Minot, ND 58701	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Health Center East Ridge 1250 21st Ave SE Minot, ND 58701	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Health Center Medical Arts Building 400 Burdick Expressway East Minot, ND 58701	Services:      Administration of High Risk Medications (Outpatient)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)
Health Center Medical Arts Building (Gl Lab) 400 Burdick Expressway East Minot, ND 58701	Services:      Administration of High Risk Medications (Outpatient)     Anesthesia (Outpatient)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)
Health Center Riverside 1900 8th Avenue Southeast Minot, ND 58701	Services:  Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Family Support (Non 24 Hour Care) Outpatient Clinics (Outpatient)
Health Center Third Street 420 Third Street SE Minot, ND 58701	Services:  • Behavioral Health (Day Programs - Child/Youth) (Partial - Child/Youth) • Family Support (Non 24 Hour Care)
Health Center Town & Country 1015 South Broadway Minot, ND 58701	Services:      Home Health Aides     Home Health, Non-Hospice Services     Hospice Care     Medical Social Services     Occupational Therapy  Outpatient Clinics (Outpatient) Pharmacy, Clinical Consulting Services Physical Therapy Skilled Nursing Services Speech Language Pathology
Health Center Town and Country 831 South Broadway Minot, ND 58701	Services:      Administration of Blood Product (Outpatient)     Administration of High Risk Medications (Outpatient)     Hazardous Medication Compounding (Outpatient)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)





One Burdick Expressway West, Minot, ND





# **Locations of Care**

Locations of Care	Available Services	
<b>Health Center West</b> 101 3rd Avenue S.W. Minot, ND 58701	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)	
Health Center-SouthRidge 1500 24th Ave SW Minot, ND 58701	Services:      Administration of High Risk Medications (Outpatient)     Anesthesia (Outpatient)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)	
Medical Arts Outpatient Services, Inc. DBA: Key Care Medical 530 20th Avenue SW Minot, ND 58701	Services:  Breast Prostheses and Accessories Canes and Crutches Commodes Continuous Positive Airway Pressure Contracture Treatment: Dynamic Splint Custom Orthoses Fabricated Diabetic Footwear and Inserts Diabetic Shoes and Inserts-custom Durable Medical Equipment External Infusion Pumps Heat/Cold Applications Hospital Beds - Electric Limb Prostheses Nebulizers Equipment Off The Shelf Orthoses Orthoses Prefabricated - Custom fitted Ostomy Supplies Parenteral Equipment and/or Supplies Parenteral Nutrients  Patient Lifts and Accessor Penile Pumps Physical Medicine and Rehabilitation Pneumatic Compression Devices Power Operated Vehicles scooters) Prosthetics (Home Medic Equipment) Respiratory Assist Device Respiratory Sasist Device Respiratory Sasist Device Respiratory Sasist Device Respiratory Assist Device Respirat	s (or cal es ds dches shion anua









# **Locations of Care**

Primary Location  Locations of Care	Available Services
	Available Services
Medical Arts Outpatient Services, Inc. DBA: Key Care Medical 400 Burdick Expressway East Suite E117 Minot, ND 58701	Services:      Canes and Crutches     Commodes     Custom Orthoses Fabricated     Durable Medical Equipment     Heat/Cold Applications     Nebulizers Equipment     Off The Shelf Orthoses     Power Operated Vehicles (or scooters)      Respiratory Equipment     Seat Lift Mechanisms     Walkers, Canes and Crutches     Wheelchair Seating / Cushions     Wheelchairs - Manual     Non-Custom     Wheelchairs-Standard Manual     Related Accessories and     Repairs
Trinity Community Clinic - Garrison 131 North Main Garrison, ND 58540	Services:  • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
<b>Trinity Community Clinic - Mohall</b> 504 First Street SE Mohall, ND 58761	Services:  • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Trinity Community Clinic - New Town 604 First Street North New Town, ND 58763	Services:  • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Trinity Community Clinic - Velva 111 West 1st Street Velva, ND 58790	Services:  • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Trinity Dialysis Services - Belcourt 1310 Hospital Road Belcourt, ND 58316	Services:      Administration of High Risk Medications (Outpatient)     Dialysis (Outpatient)     Perform Invasive Procedure (Outpatient)     Single Specialty Practitioner (Outpatient)
Trinity Health Vision Galleria 2815 16th Street SW, Suite 101 Minot, ND 58701	Services:  • Prosthetic Lenses/Conventional Contact Lens • Prosthetic Lenses/Conventional Eyeglasses • Prosthetics (Home Medical Equipment)
Trinity Health Vision Galleria - Home Care 1321 West Dakota Parkway Williston, ND 58801	Services:



DBA: Trinity Health,

One Burdick Expressway West, Minot, ND







### **Locations of Care**

*	Primary	/ Location

#### Locations of Care **Available Services Trinity Health Western** Dakota - Hospital/Clinic **Services:** 1321 West Dakota • Administration of High Risk Medications (Outpatient) Parkway • Anesthesia (Outpatient) Williston, ND 58801 • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) Trinity Hospital - St. Joseph's **Services:** 407 3rd Street Southeast Addiction Care/Adult) • Medical Detoxification Minot, ND 58701 (Detox/Non-detox - Adult) (Inpatient) • Behavioral Health (24-hour Ophthalmology (Surgical Acute Care/Crisis Services) Stabilization -· Orthopedic Surgery (Surgical Adult/Child/Youth) Services) • Chemical Dependency (Day • Peer Support (Non 24 Hour Programs - Adult) (Non 24 Hour Care - Adult) Rehabilitation Unit (Inpatient, (24-hour Acute Care/Crisis 24-hour Acute Care/Crisis Stabilization - Adult) Stabilization) (Partial - Adult) Sleep Laboratory (Sleep (Non-detox - Adult) Laboratory) (Detox/Non-detox - Adult) Ultrasound • Ear/Nose/Throat Surgery (Imaging/Diagnostic Services) (Surgical Services) Family Support (Non 24 Hour Care) Gynecological Surgery (Surgical Services) • Inpatient Unit (Inpatient)

One Burdick Expressway West, Minot, ND

DBA: Trinity Health,







### **Locations of Care**

#### \* Primary Location

Minot, ND 58701

# Locations of Care Trinity Hospitals \* One Burdick Expressway West

### Available Services

#### **Joint Commission Advanced Certification Programs:**

• Primary Stroke Center

#### **Services:**

- Canes and Crutches
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- CT Scanner (Imaging/Diagnostic Services)
- Durable Medical Equipment
- 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)
- Hazardous Medication Compounding
- Hazardous Medication Compounding (Inpatient)
- Hospice Care
- Infusion Pharmacy
- 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)
- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Pediatric Unit (Inpatient)
- Pharmacy, Clinical Consulting Services
- Pharmacy/Dispensary, General Services
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sterile Medication Compounding
- Sterile Medication Compounding (Inpatient)
- Compounding (Inpatient)
   Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)
- Walkers, Canes and Crutches

# Trinity Regional Eyecare - Devils Lake

404 Hwy 2 East Devils Lake, ND 58301

#### **Services:**

- Perform Invasive Procedure (Outpatient)
- Single Specialty Practitioner (Outpatient)

### Trinity Regional Eyecare - Minot Center

2815 16th Street SW, Suite 102 Minot, ND 58701

#### **Services:**

- Outpatient Clinics (Outpatient)
- Perform Invasive Procedure (Outpatient)







# **2017 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."

### **Behavioral Health Care**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two 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
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	Ø







# **2017 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."

### 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

One Burdick Expressway West, Minot, ND

Org ID: 8443







# **2017 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
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
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	୭୭୭୭ ୭୭୭୭
	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

**Symbol Key** 

possible results

lot displayed

reported.

valid.

sample of patients.

updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting

overall result.

Footnote Key The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes. The measure meets the Privacy Disclosure Threshold rule.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement. The measure results are temporarily suppressed pending resubmission of

National Quality Forum Endorsement.

There were no eligible patients that met

Ø

This organization achieved the best

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.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Measure Area

Emergency

Department

Org ID: 8443

Explanation

This category of evidence based measures ass

time patients remain in the hospital Emergency Department prior to inpatient admission.







# **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

	Commission				
	Accredited Organizations				
	Nationwide Statewide				
esses the	ND 2	ND 2			

Compared to other Joint

		Cor	npared to c Accredit	other Joint ed Organiz		n
		l N	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.	78.00 minutes 682 eligible Patients	56.00	135.00	3	3
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	226.00 minutes 693 eligible Patients	206.00	320.00	3	3

- 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.

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

the denominator criteria.

		Cor	npared to c Accredit	other Joint ed Organiz		n
		l N	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.	78.00 minutes 682 eligible Patients	56.00	135.00	3	3
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.	226.00 minutes 693 eligible Patients	206.00	320.00	3	3

One Burdick Expressway West, Minot, ND

Org ID: 8443

Compared to other Joint







# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Col	mpared to d			on
				ed Organiz		
			Nationwide			ewide
Measure	Explanation	Hospital			Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Overall Rate	This measure reports the overall number of patients screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	92% of 499 eligible Patients	100%	95%	3	3

- 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.

**Symbol Key** 

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND









# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Compared to other Joint

Org ID: 8443

	Nationwide	Statewide
е	<b>№</b> 2	<b>№</b> 2

		Accredited C	Organizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>№</b> <sup>2</sup>	<b>™</b> <sup>2</sup>
	Cor	npared to other Joi	nt Commission

		Col	mpared to o	other Joint ed Organiz		n
			Nationwide	ou organiz		wide
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years)	This measure reports the number of children age (1-12 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	93% of 44 eligible Patients	100%	96%	3	3

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.

### **Symbol Key**

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Org ID: 8443







# **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

Compared to other Joint Commission Accredited Organizations

		Col	mpared to o	other Joint ed Organiz		n
			Nationwide	ou organiz		wide
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	90% of 135 eligible Patients	100%	95%	3	3

- 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.

# Symbol Key This organization achie

- 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.
- 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND









# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Compared to other Joint

Org ID: 8443

		Commission		
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>№</b> 2	<b>№</b> 2	

		Col	mpared to o	other Joint ed Organiz		on
			Nationwide			ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adult (18-64 years)	This measure reports the number of adults age (18-64 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	93% of 302 eligible Patients	100%	95%	3	3

- 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.

### **Symbol Key**

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø
- similar to the target range/value.
- This organization's performance is below the target range/value.
- lot 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.
- The organization scored above 90% but was below most other organizations.
- 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. 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Measure Area

Services

Hospital-Based

Inpatient Psychiatric

Org ID: 8443







# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Compared to other Joint
Commission
Accredited Organizations
Nationwide Statewide

**№** 2

**№** 2

	Symbol	Key
۱	This organizat	ion achi

- 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.
- 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.
- 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.
- 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- 1. There were no eligible patients that met the denominator criteria.

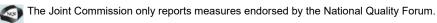
For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

		Col	mpared to o	other Joint ed Organiz		n
			Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Older Adult (>= 65 years)	This measure reports the number of older adult (>= 65 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	100% of 18 eligible Patients	100%	93%	3	3

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.



\* This information can also be viewed at www.hospitalcompare.hhs.gov
 Null value or data not displayed.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Measure Area

Services

Hospital-Based

Inpatient Psychiatric

Org ID: 8443







# **National Quality Improvement Goals**

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Statewide Nati

onwide	
<b>^</b> 2	

	Symbol Key
١	This organization achi
,	nossible results

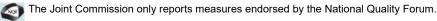
- eved the best
- This organization's performance is Φ above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- ot displayed

### 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- 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."

		Compared to other Joint Commission				
			Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital	Top 10%	Average	Top 10%	Average
Wedsare	Explanation	Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Overall Rate	This is a proportion measure. A proportion measure is a measure which shows the number of occurrences over the entire group within which the occurrence should take place. The numerator is expressed as a subset of the denominator. This measure reports the overall number of patients discharged on two or more antipsychotic medications. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a persons capacity to meet lifes everyday demands.	22% of 36 eligible Patients	100%	63%	3	3
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	₩ <b>D</b> 3	100%	40%	3	3



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

Null value or data not displayed.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND









# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Compared to other Joint

		Commission		
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>№</b> 2	(ID) 2	

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored	Average Rate:	Top 10% Scored	Average Rate:
			at Least:		at Least:	
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	ND 4	100%	50%	3	3

- 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.

### **Symbol Key**

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value. ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND









# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.

		Cor	npared to o Accredit	other Joint ed Organiz		n
		N	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	24% of 33 eligible Patients	100%	64%	3	3

- 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.

# Symbol Key This organization achi

- 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.
- 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.
- 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.
- The number of months with Measure data is below the reporting requirement.
- 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.
- There were no eligible patients that met the denominator criteria.

One Burdick Expressway West, Minot, ND

Org ID: 8443







### **National Quality Improvement Goals**

#### This organization achieved the best Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission Accredited Organizations				on
			Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital		Average		
Mededie	ZAPIGITATION	Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Older Adults Age 65 and Older	This measure reports the number of patients age 65 and older discharged on two or more antipsychotic medications for which there was an appropriate justification.  Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	₩ <b>0</b> 4 ———	100%	58%	3	3
Hours of Physical Restraint Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.42 (49 Total Hours in Restraint)	N/A	0.46	3	3

- 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.

possible results

Symbol Kev

- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Org ID: 8443

Compared to other Joint



Services



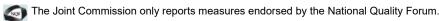


# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients.

		Co	mpared to o	other Joint ed Organiz		on
			Nationwide	ou organiz		ewide
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.00 (0 Total Hours in Restraint)	N/A	0.34	3	3
Hours of Physical Restraint Use Adolescents Age 13 - 1	This measure reports the number of hours patients age 13 through 17 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.57 (14 Total Hours in Restraint) <sup>3</sup>	N/A	0.24	3	3



This information can also be viewed at www.hospitalcompare.hhs.gov Null value or data not displayed.

### Symbol Kev

- This organization achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Measure Area

Services

Hospital-Based

Inpatient Psychiatric

Org ID: 8443







# **National Quality Improvement Goals**

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Na

ationwide	Statewide
(ND) 2	<b>№</b> 2

	2
0	

(N/D)	2
$\mathbf{\circ}$	

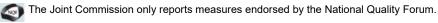
	Symbol	Key	
١	This organiza	tion ach	i

- eved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

Services						
		Cor	npared to d	other Joint	Commissio	n
				ed Organiz		
			lationwide			wide
Measure	Explanation	Hospital	•	Average	Top 10%	•
		Results	Scored at Least:	Rate:	Scored at Least:	Rate:
Hours of Physical Restraint Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.45 (35 Total Hours in Restraint)	N/A	0.53	3	3
Hours of Physical Restraint Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	0.00 (0 Total Hours in Restraint)	N/A	0.17	3	3
Hours of Seclusion Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	6.88 (795 Total Hours in Seclusion)	N/A	0.35	3	3



- This information can also be viewed at www.hospitalcompare.hhs.gov
- Null value or data not displayed.

DBA: Trinity Health,

One Burdick Expressway West, Minot, ND

Org ID: 8443







# **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

Compared to other Joint

		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>№</b> 2	ND 2	

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	lationwide Top 10%	Average	State	ewide Average
		Results	Scored at Least:	Rate:	Scored at Least:	Rate:
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	2.11 (18 Total Hours in Seclusion) <sup>3</sup>	N/A	0.61	3	3
Hours of Seclusion Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	3.02 (75 Total Hours in Seclusion) <sup>3</sup>	N/A	0.21	3	3
Hours of Seclusion Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	9.17 (702 Total Hours in Seclusion)	N/A	0.40	3	3
Hours of Seclusion Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	0.00 (0 Total Hours in Seclusion)	N/A	0.04	3	3

- 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.

This organization's performance is

Symbol Key

- This organization achieved the best ossible results
- above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- lot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.









# **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

Compared to other Joint **Accredited Organizations** Measure Area Statewide Explanation Nationwide **Immunization** This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		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.	93% of 559 eligible Patients	100%	94%	97%	93%

- 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.

### Symbol Key

- This organization achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.

One Burdick Expressway West, Minot, ND

Org ID: 8443







### **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

Compared to	o otner Joint			
Commission				
Accredited Organizations				
Nationwide	Statewide			

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> <sup>2</sup>

		Compared to other Joint Commission				on
		Accredited Organizations Nationwide Statewi			wide	
Measure	Explanation	Hospital Results	Top 10% Scored	Average Rate:	Top 10% Scored	Average Rate:
			at Least:		at Least:	
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 6 eligible Patients	100%	98%	3	3
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.	5% of 43 eligible Pattents	0%	2%	3	3
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.	54% of 326 eligible Patients	73%	51%	3	3

- The Joint Commission only reports measures endorsed by the National Quality Forum.
- vitamins, minerals, or medicines.
- \* This information can also be viewed at www.hospitalcompare.hhs.gov
   Null value or data not displayed.

- Symbol Key
  This organization achi
- 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.
- 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.
- The organization scored above 90% but was below most other organizations.
- 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.
- 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.
- There were no eligible patients that met the denominator criteria.