

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

1202 S Tyler St, Covington, LA Org ID: 8710







Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Home Care	Accredited	9/17/2016	9/16/2016	9/16/2016
Hospital	Accredited	9/17/2016	9/16/2016	9/16/2016
Laboratory	Accredited	8/26/2017	8/25/2017	6/8/2018

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

Pathology and Clinical Laboratory

Hospital

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Site		
Programs		Date	Date	Review Date	
Primary Stroke Center	Certification	7/11/2017	7/10/2017	7/10/2017	

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

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Home Care	2016National Patient Safety Goals	Ø	N/A *	
Hospital	2016National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	(ND) 2	№ 2	
Jan 2017 - Dec 2017	Immunization	ND ²	ND ²	
	Perinatal Care	№ 2	№ 2	

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

Symbol Key

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- This organization's performance is above the target range/value.
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- Not displayed

Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 3. The number of patients is not enough for comparison purposes.
- The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
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- sample of patients.

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 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting
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National Quality Forum Endorsement.

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

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Laboratory





Summary of Quality Information

2018National Patient Safety Goals

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Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide

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Locations of Care

Mandeville, LA 70471

St. Tammany Parish Hospital Outpatient

Rehabilitation YMCA 71256 Francis Road

Covington, LA 70433

St. Tammany Parish Hospital Outpatient

Therapy Services

1414 S. Tyler Street Covington, LA 70433

Locations of Care	Available Services
Bone & Joint Clinic 71211 Highway 21, Suite A Covington, LA 70433	Other Clinics/Practices located at this site: • N/A Services: • Single Specialty Practitioner (Outpatient)
Covington Cardiovascular Care 1006 S. Harrison Street Covington, LA 70433	Other Clinics/Practices located at this site: • N/A Services: • Single Specialty Practitioner (Outpatient)
Northlake Surgical Associates, LTD 606 West 11th Avenue Covington, LA 70433	Services: • Single Specialty Practitioner (Outpatient)
Outpatient Pavilion of St. Tammany Parish Hospital 16300 Highway 1085 Covington, LA 70433	Services: General Laboratory Tests Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
St. Tammany Parish Hospital Community Wellness Center 1505 N. Florida Street Covington, LA 70433	Services:
St. Tammany Parish Hospital Covington Surgery Center 1203 S. Tyler, Suite 300 Covington, LA 70433	Services:
St. Tammany Parish Hospital Offsite Campus Emergency Departm DBA: Mandeville Emergency Department 2929 Highway 190	Services: • Administration of High Risk Medications (Outpatient) • General Laboratory Tests

Other Clinics/Practices located at this site:

• Single Specialty Practitioner (Outpatient)

• Outpatient Clinics (Outpatient)

N/A

Services:

Services:

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Locations of Care

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Locations of Care	Available Services		
St. Tammany Parish Hospital Palliative Care Clinic 1010 Polk Street, Suite 1 Covington, LA 70433 St. Tammany Parish Hospital Sleep Disorders Center 80 Gardenia Drive	Services: • Single Specialty Practitioner (Outpatient) Services: • Outpatient Clinics (Outpatient)		
St. Tammany Parish Hospital, Service District Number 1 * 1202 South Tyler Street Covington, LA 70433	Primary Stroke Center Services:		

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Services:

• General Laboratory Tests • Outpatient Clinics (Outpatient)

• Outpatient Clinics (Outpatient)

• Perform Invasive Procedure (Outpatient)

Locations of Care

Mandeville, LA 70471

Women's Pavilion of St. **Tammany Parish**

Hospital

301 N. Hwy. 190

Covington, LA 70433

* Primary Location	
Locations of Care	Available Services
St.Tammany Hospital Home Health/Hospice 725 West 11th St Covington, LA 70433	Services: General Laboratory Tests Home Health Aides Home Health, Non-Hospice Services Hospice Care Medical Social Services General Laboratory Tests Physical Therapy Skilled Nursing Services Speech Language Pathology
St.Tammany Parish Hospital Mandeville Diagnostic Center 201 St. Ann Drive, Suite A Mandeville, LA 70471	Services: General Laboratory Tests Outpatient Clinics (Outpatient)
STPN Covington 80 Gardenia Drive Covington, LA 70433	Services: • Outpatient Clinics (Outpatient)
STPN Folsom 82525 Highway 25 Folsom, LA 70437	Services:
STPN Madisonville 1520 Hwy 22 West Madisonville, LA 70447	Services:
STPN Mandeville 201 St. Ann Drive, Suite B	Services:



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2016 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



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2016 National Patient Safety Goals

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	<u> </u>
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

		Commission	
		Accredited Organizations	
Measure Area	Explanation	Nationwide	Statewide
Emergency Department	This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	№ ²	№ 2

		Compared to other Joint Commission Accredited Organizations				
Manager	Funlametian		lationwide	VA/a i a la fa	State	
Measure	Explanation	Hospital Results	Top 10% Scored	Weighte d	Top 10% Scored	Weighte d
			at Most:	Median:	at Most:	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.	163.00 minutes 817 eligible Patients	55.00	132.00	51.24	120.12
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.	325.00 minutes 817 eligible Patients	204.00	317.00	205.38	295.83

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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

Compared to other Joint Commission
Accredited Organizations

Measure Area Explanation Nationwide Statewide

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:	Top 10% Scored at Least:	Average Rate:
Influenza Immunization	This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated.	98% of 647 eligible Patients	100%	94%	99%	91%

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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

Compared to other Joint

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

				41	O	
		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide Statewi		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 6 eligible Patients	100%	98%	100%	97%
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.	0% of 41 eligible Patlents	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.	60% of 318 eligible Patients	73%	52%	54%	40%



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2018 National Patient Safety Goals

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Laboratory

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