Accreditation Quality Report

The Joint Commission

Version: 6
Date: 7/29/2017

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

Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🟡 Hospital	Accredited	8/1/2014	7/28/2017	7/28/2017

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

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
🟡 Primary Stroke Center	Certification	2/10/2016	2/9/2016	2/9/2016

Other Accredited Programs/Services

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

Special Quality Awards

- 2014 Top Performer on Key Quality Measures®
- 2013 Top Performer on Key Quality Measures®
- 2012 Top Performer on Key Quality Measures®
- 2015 Silver Plus Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Hospital	**2014 National Patient Safety Goals**	✓	N/A *
	National Quality Improvement Goals:		
Reporting Period: Oct 2015 - Sep 2016	Immunization	N/D [2]	N/D [2]
	Perinatal Care	N/D [2]	N/D [2]
	Stroke Care	N/D [2]	N/D [2]

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

Locations of Care

* Primary Location

Locations of Care	Available Services
Round Rock Medical Center * 2400 Round Rock Avenue Round Rock, TX 78681	**Joint Commission Advanced Certification Programs:** ● Primary Stroke Center **Services:** ● Brachytherapy (Imaging/Diagnostic Services) ● Cardiac Catheterization Lab (Surgical Services) ● Cardiac Surgery (Surgical Services) ● Cardiothoracic Surgery (Surgical Services) ● CT Scanner (Imaging/Diagnostic Services) ● Ear/Nose/Throat Surgery (Surgical Services) ● EEG/EKG/EMG Lab (Imaging/Diagnostic Services) ● Gastroenterology (Surgical Services) ● GI or Endoscopy Lab (Imaging/Diagnostic Services) ● Gynecological Surgery (Surgical Services) ● Gynecology (Inpatient) ● Hematology/Oncology Unit (Inpatient) ● Inpatient Unit (Inpatient) ● Interventional Radiology (Imaging/Diagnostic Services) ● Labor & Delivery (Inpatient) ● Magnetic Resonance Imaging (Imaging/Diagnostic Services) ● Medical /Surgical Unit (Inpatient) ● Medical ICU (Intensive Care Unit) ● Neurosurgery (Surgical Services) ● Normal Newborn Nursery (Inpatient) ● Nuclear Medicine (Imaging/Diagnostic Services) ● Ophthalmology (Surgical Services) ● Orthopedic Surgery (Surgical Services) ● Orthopedic/Spine Unit (Inpatient) ● Plastic Surgery (Surgical Services) ● Positron Emission Tomography (PET) (Imaging/Diagnostic Services) ● Post Anesthesia Care Unit (PACU) (Inpatient) ● Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization) ● Teleradiology (Imaging/Diagnostic Services) ● Thoracic Surgery (Surgical Services) ● Ultrasound (Imaging/Diagnostic Services) ● Urology (Surgical Services) ● Vascular Surgery (Surgical Services)
Round Rock Professional Building 2300 Round Rock Avenue Round Rock, TX 78681	**Services:** ● Outpatient Clinics (Outpatient)
St. David's Cardiovascular Imaging Center - Marble Falls DBA: Cardiovascular Imaging Center (CVIC) - Marble Falls 102 Max Starke Dam Road, Marble Falls Marble Falls, TX 78654	**Services:** ● Outpatient Clinics (Outpatient)

Locations of Care

* Primary Location

Locations of Care	Available Services
St. David's Emergency Center - Cedar Park 14016 N. US 183 Hwy SVRD SB, Austin, TX Austin, TX 78717	**Services:** • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)
St. David's Round Rock Medical Center DBA: Forest Creek Sleep Lab 4112 Links Lane Round Rock, TX 78664	**Services:** • Outpatient Clinics (Outpatient)

2014 National Patient Safety Goals

Hospital

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

National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

Symbol Key

Symbol	Meaning
⭐	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.
N/D	Not displayed

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.

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

Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	N/D 2	N/D 2

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
			Nationwide		Statewide	
		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.	⊕ — 99% of 501 eligible Patients	100%	94%	100%	96%

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

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

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St. David's Round Rock Medical Center

DBA: St. David's Round Rock Medical Center,
2400 Round Rock Ave., Round Rock, TX

Org ID: 9144

National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	N/D 2	N/D 2

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			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 5 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 49 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.	➖ 47% of 342 eligible Patients	75%	53%	66%	46%

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Quality Check®

National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Stroke Care	This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients.	N/D 2	N/D 2

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Thrombolytic Therapy	Acute ischemic stroke patients who receive a medicine that breaks up blood clots (thrombolytic therapy) within 180 minutes of stroke symptom onset. This measure reports how quickly ischemic stroke patients were given a medication that breaks up blood clots (thrombolytic therapy). Breaking up blood clots increases blood flow to the brain. If blood flow is returned to the brain quickly during a stroke, the risk of brain damage and loss of physical function is decreased. The medicine that breaks up clots in the arteries and allows the return of normal blood flow is called thrombolytic therapy or "t-PA". It is important that this medicine be given quickly after an ischemic stroke is diagnosed.	⭐ 100% of 11 eligible Patients	100%	90%	100%	88%

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