



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



Summary of Quality Information

Symbol Key

- This organization achieved the best possible results.
- This organization's performance is above the target range/value.
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| Accreditation Programs | Accreditation Decision | Effective Date | Last Full Survey Date | Last On-Site Survey Date |
|------------------------|------------------------|----------------|-----------------------|--------------------------|
| Hospital | Accredited | 5/16/2015 | 5/15/2015 | 6/26/2015 |
| Laboratory | Accredited | 5/23/2015 | 6/8/2017 | 6/8/2017 |

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

Pathology and Clinical Laboratory

Hospital

| Advanced Certification Programs | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|---------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Acute Stroke Ready Hospital | Certification | 11/18/2016 | 11/17/2016 | 11/17/2016 |
| Primary Stroke Center | Certification | 12/22/2016 | 11/16/2016 | 11/16/2016 |

| | | Compared to other Joint Commission Accredited Organizations | |
|--|---|---|--------------|
| | | Nationwide | Statewide |
| Reporting Period: Oct 2015 - Sep 2016 | Hospital | 2015 National Patient Safety Goals | |
| | | National Quality Improvement Goals: | |
| | Emergency Department | ² | ² |
| | Hospital-Based Inpatient Psychiatric Services | ² | ² |
| | Immunization | ² | ² |
| | Perinatal Care | ² | ² |
| | Stroke Care | ² | ² |
| Laboratory | Venous Thromboembolism (VTE) | ² | ² |
| | | 2015 National Patient Safety Goals | |



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



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|---|--|
| CHRISTUS Santa Rosa Alon Emergency Center DBA: CHRISTUS Santa Rosa Alon Emergency Center 11503 N.W. Military Hwy, Building 500 Suite 122 San Antonio, TX 78231 | Joint Commission Advanced Certification Programs: <ul style="list-style-type: none"> • Acute Stroke Ready Hospital Services: <ul style="list-style-type: none"> • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • General Laboratory Tests • Perform Invasive Procedure (Outpatient) |
| CHRISTUS Santa Rosa Creekside Emergency Center, New Braunfels DBA: CHRISTUS Santa Rosa Creekside Emergency Center, New Braunfels 244 Creekside Crossing New Braunfels, TX 78130 | Joint Commission Advanced Certification Programs: <ul style="list-style-type: none"> • Acute Stroke Ready Hospital Services: <ul style="list-style-type: none"> • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • General Laboratory Tests • Perform Invasive Procedure (Outpatient) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|---|--|
| <p>CHRISTUS Santa Rosa Hospital - Medical Center *</p> <p>DBA: CHRISTUS Santa Rosa Hospital - Medical Center</p> <p>2827 Babcock Road</p> <p>San Antonio, TX 78229</p> | <p>Joint Commission Advanced Certification Programs:</p> <ul style="list-style-type: none">Primary Stroke Center <p>Services:</p> <ul style="list-style-type: none">Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)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)General Laboratory TestsGI or Endoscopy Lab (Imaging/Diagnostic Services)Gynecological Surgery (Surgical Services)Inpatient Unit (Inpatient)Interventional Radiology (Imaging/Diagnostic Services)Magnetic Resonance Imaging (Imaging/Diagnostic Services)Medical /Surgical Unit (Inpatient)Medical ICU (Intensive Care Unit)Nuclear Medicine (Imaging/Diagnostic Services)Ophthalmology (Surgical Services)Orthopedic Surgery (Surgical Services)Orthopedic/Spine Unit (Inpatient)Outpatient Clinics (Outpatient)Plastic Surgery (Surgical Services)Post Anesthesia Care Unit (PACU) (Inpatient)Surgical ICU (Intensive Care Unit)Surgical Unit (Inpatient)Thoracic Surgery (Surgical Services)ToxicologyTransplant Surgery (Surgical Services)Ultrasound (Imaging/Diagnostic Services)Urology (Surgical Services)Vascular Surgery (Surgical Services) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|---|---|
| CHRISTUS Santa Rosa Hospital - New Braunfels DBA: CHRISTUS Santa Rosa Hospital - New Braunfels 600 North Union Avenue New Braunfels, TX 78130 | Joint Commission Advanced Certification Programs: <ul style="list-style-type: none"> Primary Stroke Center Services: <ul style="list-style-type: none"> 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) General Laboratory Tests Gynecological Surgery (Surgical Services) Gynecology (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) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Orthopedic Surgery (Surgical Services) Outpatient Clinics (Outpatient) Positron Emission Tomography (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient) Sleep Laboratory (Sleep Laboratory) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Thoracic Surgery (Surgical Services) Toxicology Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services) |
| CHRISTUS Santa Rosa Hospital New Braunfels OutPt. Chemotherapy 600 North Union Avenue New Braunfels, TX 78130 | Services: <ul style="list-style-type: none"> Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) |



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|--|--|
| CHRISTUS Santa Rosa Hospital- Westover Hills DBA: CHRISTUS Santa Rosa Hospital- Westover Hills 11212 State Highway 151 San Antonio, TX 78251 | Joint Commission Advanced Certification Programs: <ul style="list-style-type: none"> Primary Stroke Center Services: <ul style="list-style-type: none"> Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) General Laboratory Tests GI or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Inpatient, Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Orthopedic Surgery (Surgical Services) Pediatric General Surgery (Inpatient - Child/Youth) Plastic Surgery (Surgical Services) Post Anesthesia Care Unit (PACU) (Inpatient) Sleep Laboratory (Sleep Laboratory) Teleradiology (Imaging/Diagnostic Services) Thoracic Surgery (Surgical Services) Toxicology Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services) |
| Christus Santa Rosa Hospital-New Braunfels POCT 600 North Union Street New Braunfels, TX 78130 | Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Christus Santa Rosa Outpatient Imaging Christus Santa Rosa Outpatient Wound Care and Hyperbaric Cen Services: <ul style="list-style-type: none"> General Laboratory Tests |
| CHRISTUS Santa Rosa Imaging Center- Alamo Heights 423 Treeline Park Ste 100 San Antonio, TX 78209 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |



CHRISTUS Santa Rosa Health Care Corporation

DBA: CHRISTUS Santa Rosa Hospital – Medical Center,
2827 Babcock Road, San Antonio, TX

Org ID: 9218



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|---|---|
| CHRISTUS Santa Rosa Westover Hills - Cardiac Opt Rehab Srv 11212 State Hwy 151, Medical Plaza 2, Suite 316 San Antonio, TX 78251 | Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| CHRISTUS Santa Rosa Wound Care & Hyperbaric Center - CSR-MC DBA: CHRISTUS Santa Rosa Wound Care & Hyperbaric Center - CSR-MC 2833 Babcock Road, Tower 2; Ste 105 San Antonio, TX 78229 | Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| CHRISTUS Santa Rosa Wound Care & Hyperbaric Center 315 N. San Saba, Ste. 107 San Antonio, TX 78207 | Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| CHRISTUS Santa Rosa Wound Care & Hyperbaric Center--CSR-WH 11212 State Hwy 151, Med Plaza 2 Ste300 San Antonio, TX 78251 | Services: <ul style="list-style-type: none"> General Laboratory Tests Outpatient Clinics (Outpatient) |
| CHRISTUS Santa Rosa Wound Care & Hyperbaric CSRH-NB 598 N. Union New Braunfels, TX 78130 | Services: <ul style="list-style-type: none"> Anesthesia (Outpatient) General Laboratory Tests Outpatient Clinics (Outpatient) |
| Christus Santa Rosa-Cardiothoracic Center in New Braunfels DBA: Cardiothoracic Center 730 N. Houston Avenue New Braunfels, TX 78130 | Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient) |
| CHRISTUS Santa Rosa-Rehabilitation Services DBA: CHRISTUS Santa Rosa-Rehabilitation Services 750 Landa, Suite A New Braunfels, TX 78130 | Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) |



Locations of Care




* Primary Location

| Locations of Care | Available Services |
|--|---|
| CHRISTUS Transplant Institute (CTI) 2829 Babcock Road Tower 1 Ste 300 San Antonio, TX 78229 | Other Clinics/Practices located at this site: <ul style="list-style-type: none">• CHRISTUS Transplant Institute (CTI)-Edinburg• CHRISTUS Transplant Institute (CTI)-EL Paso• CHRISTUS Transplant Institute (CTI)-Laredo Services: <ul style="list-style-type: none">• Outpatient Clinics (Outpatient) |



2015 National Patient Safety Goals

Symbol Key

-  The organization has met the National Patient Safety Goal.
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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

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Compared to other Joint
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

| Measure | Explanation | Hospital Results | Compared to other Joint Commission Accredited Organizations | | | |
|--|---|--|---|----------|-------------------------|----------|
| | | | Nationwide | Weighted | Statewide | Weighted |
| | | | Top 10% Scored at Most: | Median: | Top 10% Scored 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. | 2 139.00 minutes 768 eligible Patients | 53.00 | 124.00 | 54.02 | 115.90 |
| 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. | 2 339.00 minutes 770 eligible Patients | 202.00 | 311.00 | 202.28 | 287.52 |



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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. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| 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: |
| 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. | 8 99% of 248 eligible Patients | 100% | 94% | 100% | 97% |



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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. | ² | ² |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|---|---|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | 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. | ⁸ 100% of 43 eligible Patients | 100% | 94% | 100% | 97% |



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Commission

Accredited Organizations

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|---|---|--------------|--------------|
| Hospital-Based Inpatient Psychiatric Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | ² | ² |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|--|---|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | 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. | ⁸ 99% of 205 eligible Patients | 100% | 92% | 100% | 96% |



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|---|---|------------|-----------|
| Hospital-Based Inpatient Psychiatric Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|--|--|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| 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 person's capacity to meet life's everyday demands. | 8 25% of 20 eligible Patients ³ | 100% | 62% | 100% | 66% |
| 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 medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine. | 8 40% of 5 eligible Patients ³ | 100% | 63% | 100% | 69% |



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|---|---|--------------|--------------|
| Hospital-Based Inpatient Psychiatric Services | This category of evidenced based measures assesses the overall quality of care given to psychiatric patients. | ² | ² |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|---|---|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| 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 medications to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine. | ⁸ 20% of 15 eligible Patients ³ | 100% | 56% | 100% | 55% |
| 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. | ⁸ 0.00 (0 Total Hours in Restraint) | N/A | 0.49 | N/A | 0.21 |



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National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

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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. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|---|--|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average 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. | 8 0.00 (0 Total Hours in Restraint) | N/A | 0.53 | N/A | 0.22 |
| 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. | 8 0.00 (0 Total Hours in Restraint) | N/A | 0.38 | N/A | 0.03 |
| 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. | 8 0.00 (0 Total Hours in Seclusion) | N/A | 0.36 | N/A | 0.07 |



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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. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | Compared to other Joint Commission Accredited Organizations | | | | |
|---|--|--|--------------------------------|------------------|--------------------------------|------------------|
| | | Hospital Results | Top 10% Scored at Least: | Average Rate: | Top 10% Scored at Least: | Average Rate: |
| 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. | 8 0.00 (0 Total Hours in Seclusion) | N/A | 0.41 | N/A | 0.06 |
| 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. | 8 0.00 (0 Total Hours in Seclusion) | N/A | 0.08 | N/A | 0.03 |



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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. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | | | | | |
|------------------------|---|--|--|------------------|---|------------------|
| | | Hospital Results | Nationwide Top 10% Scored at Least: | Average Rate: | Statewide 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. | 97% of 547 eligible Patients | 100% | 94% | 100% | 96% |



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Compared to other Joint Commission
Accredited Organizations

| 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

| Measure | Explanation | Hospital Results | Compared to other Joint Commission Accredited Organizations | | | |
|-------------------------------|---|---|---|---------|--------------------------|---------|
| | | | Nationwide | Average | Statewide | Average |
| | | | Top 10% Scored at Least: | Rate: | Top 10% Scored at Least: | 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. | 3 95% of 21 eligible Patients ³ | 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. 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. | 2% of 285 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. | 70% of 1526 eligible Patients | 75% | 53% | 66% | 46% |



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Compared to other Joint
Commission

Accredited Organizations

| Measure Area | Explanation | Nationwide | Statewide |
|--------------|--|------------|-----------|
| Stroke Care | This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| Measure | Explanation | | | | | |
|----------------------|--|---|--------------------------|---------------|--------------------------|---------------|
| | | Nationwide | | Statewide | | |
| | | Hospital Results | 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. | 3 77% of 13 eligible Patients ³ | 100% | 90% | 100% | 88% |



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Compared to other Joint
Commission
Accredited Organizations

| Measure Area | Explanation | Nationwide | Statewide |
|------------------------------|---|------------|-----------|
| Venous Thromboembolism (VTE) | This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots. | 2 | 2 |

Compared to other Joint Commission
Accredited Organizations

| 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: |
| VTE Discharge Instructions | Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions. | 94% of 48 eligible Patients | 100% | 93% | 100% | 93% |



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2015 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.

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Laboratory

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