

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

Org ID: 9218

# Accreditation Quality Report





Version: 7 Date: 11/3/2017

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

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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

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This organization achieved the best

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similar to the target range/value.
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This Measure is not applicable for this

### CHRISTUS Santa Rosa Health Care Corporation

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# **Summary of Quality Information**

<b>Accreditation Programs</b>	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	5/16/2015	5/15/2015	6/26/2015
Laboratory	Accredited	6/9/2017	6/8/2017	6/8/2017

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

Pathology and Clinical Laboratory

Hospital

# Footnote Key

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- 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.

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

Advanced Certification Programs	<b>Certification Decision</b>	Effective Date	Last Full Revie	ew 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	
Hospital	2015National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	ND <sup>2</sup>	ND <sup>2</sup>	
Jan 2016 - Dec 2016	Hospital-Based Inpatient Psychiatric Services	ND 2	<b>№</b> 2	
	Immunization	ND 2	2	
	Perinatal Care	<b>№</b> <sup>2</sup>	(ND) <sup>2</sup>	
	Stroke Care	<b>№</b> <sup>2</sup>	ND <sup>2</sup>	
	Venous Thromboembolism (VTE)	<b>№</b> <sup>2</sup>	<b>№</b> 2	
Laboratory	2017National Patient Safety Goals	Ø	N/A *	

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

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# **Locations of Care**

#### \* Primary Location **Available Services Locations of Care CHRISTUS Santa Rosa Joint Commission Advanced Certification Programs: Alon Emergency Center** · Acute Stroke Ready Hospital DBA: CHRISTUS Santa Rosa Alon Emergency **Services:** 11503 N.W. Military Hwy, Administration of Blood Product (Outpatient) Building 500 Suite 122 Administration of High Risk Medications (Outpatient) San Antonio, TX 78231 • Anesthesia (Outpatient) **General Laboratory Tests** • Perform Invasive Procedure (Outpatient) **CHRISTUS Santa Rosa Joint Commission Advanced Certification Programs: Creekside Emergency** Acute Stroke Ready Hospital Center, New Braunfels **DBA: CHRISTUS Santa** Rosa Creekside **Services: Emergency Center, New** · Administration of Blood Product (Outpatient) Braunfels Administration of High Risk Medications (Outpatient) 244 Creekside Crossing Anesthesia (Outpatient) New Braunfels, TX 78130 • General Laboratory Tests Perform Invasive Procedure (Outpatient) **CHRISTUS Santa Rosa Emergency Services:** Center-Bandera • Administration of Blood Product (Outpatient) 8703 Bandera Blvd. • Administration of High Risk Medications (Outpatient) San Antonio, TX 78250 Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient) **CHRISTUS Santa Rosa** Healthcare **Services: System-Alamo Heights** CT Scanner • Medical /Surgical Unit DBA: CHRISTUS Santa (Imaging/Diagnostic (Inpatient) Rosa Hospital-Alamo Services) Neurosurgery (Surgical Heights Ear/Nose/Throat Surgery Services) 403 Treeline Park, (Surgical Services) Ophthalmology (Surgical **Building 1** EEG/EKG/EMG Lab Services) San Antonio, TX 78209 (Imaging/Diagnostic Orthopedic Surgery (Surgical Services) Services) Gastroenterology (Surgical Plastic Surgery (Surgical Services) Services) GI or Endoscopy Lab Post Anesthesia Care Unit (PACU) (Inpatient) (Imaging/Diagnostic Services) Ultrasound Gynecological Surgery (Imaging/Diagnostic Services)

(Surgical Services) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic

Services)

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# **Locations** of Care

#### \* Primary Location

#### Locations of Care

CHRISTUS Santa Rosa Hospital - Medical Center \* DBA: CHRISTUS Santa

Rosa Hospital - Medical Center 2827 Babcock Road San Antonio, TX 78229

#### Available Services

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

• Primary Stroke Center

#### **Services:**

- 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 Tests
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)

- Neurosurgery (Surgical Services)
- 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)
- Toxicology
- Transplant Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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# Locations of Care

#### \* Primary Location

### Locations of Care

#### CHRISTUS Santa Rosa Hospital - New Braunfels DBA: CHRISTUS Santa

Rosa Hospital - New Braunfels 600 North Union Avenue New Braunfels, TX 78130

#### Available Services

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

• Primary Stroke Center

#### **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)
- 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)
- Plastic Surgery (Surgical Services)
- 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. Chemothery 600 North Union Avenue New Braunfels, TX 78130

#### **Services:**

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Outpatient Clinics (Outpatient)

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# **Locations of Care**

**CHRISTUS Santa Rosa Imaging Center- Alamo** 

423 Treeline Park Ste 100 San Antonio, TX 78209

**Services:** 

· Outpatient Clinics (Outpatient)

#### \* Primary Location Available Services **Locations of Care CHRISTUS Santa Rosa Joint Commission Advanced Certification Programs: Hospital-Westover Hills** • Primary Stroke Center DBA: CHRISTUS Santa Rosa Hospital- Westover **Services:** 11212 State Highway 151 Cardiac Catheterization Lab Medical /Surgical Unit San Antonio, TX 78251 (Surgical Services) (Inpatient) Cardiac Surgery (Surgical Neurosurgery (Surgical Services) Services) Cardiothoracic Surgery Normal Newborn Nursery (Surgical Services) (Inpatient) **Nuclear Medicine** Cardiovascular Unit (Inpatient) (Imaging/Diagnostic Services) CT Scanner Orthopedic Surgery (Surgical (Imaging/Diagnostic Services) Pediatric General Surgery Services) Ear/Nose/Throat Surgery (Inpatient - Child/Youth) (Surgical Services) Plastic Surgery (Surgical EEG/EKG/EMG Lab Services) Post Anesthesia Care Unit (Imaging/Diagnostic Services) (PACU) (Inpatient) Gastroenterology (Surgical Sleep Laboratory (Sleep Laboratory) Services) General Laboratory Tests Surgical Unit (Inpatient) GI or Endoscopy Lab Teleradiology (Imaging/Diagnostic Services) (Imaging/Diagnostic Thoracic Surgery (Surgical Services) Gynecological Surgery Services) (Surgical Services) Toxicology Gynecology (Inpatient) Ultrasound Inpatient Unit (Inpatient) (Imaging/Diagnostic Services) Interventional Radiology Urology (Surgical Services) (Inpatient, Vascular Surgery (Surgical Imaging/Diagnostic Services) Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) **Christus Santa Rosa** Other Clinics/Practices located at this site: **Hospital-New Braunfels** Christus Santa Rosa Outpatient Imaging POCT Christus Santa Rosa Outpatient Wound Care and Hyperbaric Cen 600 North Union Street New Braunfels, TX 78130 **Services:** General Laboratory Tests

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# **Locations of Care**

Locations of Care	Available Services
CHRISTUS Santa Rosa Orthopaedics & Sports Medicine DBA: CHRISTUS Orthopaedics & Sports Medicine - San Antonio 2829 Babcock Road Suite 106 Tower 1 San Antonio, TX 78229	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
CHRISTUS Santa Rosa Westover Hills - Cardiac Opt Rehab Srv 11212 State Hwy 151, Medical Plaza 2, Suite 316 San Antonio, TX 78251	Services:     • General Laboratory Tests     • Outpatient Clinics (Outpatient)
CHRISTUS Santa Rosa Wound Care & Hyperaric Center - CSR-MC DBA: CHRISTUS Santa Rosa Wound Care & Hyperaric Center - CSR-MC 2833 Babcock Road, Tower 2; Ste 105 San Antonio, TX 78229	Services:
CHRISTUS Santa Rosa Wound Care & Hyperbaric Center 315 N. San Saba, Ste. 107 San Antonio, TX 78207	Services:     • General Laboratory Tests     • Outpatient Clinics (Outpatient)
CHRISTUS Santa Rosa Wound Care & Hyperbaric CenterCSR-WH 11212 State Hwy 151, Med Plaza 2 Ste300 San Antonio, TX 78251	Services:
CHRISTUS Santa Rosa Wound Care & Hyperbaric CSRH-NB 598 N. Union New Braunfels, TX 78130	Services:  • Anesthesia (Outpatient)  • General Laboratory Tests  • Outpatient Clinics (Outpatient)
CHRISTUS Santa Rosa-Alamo Heights Outpatient Surgery DBA: CHRISTUS Santa Rosa Hospital-Alamo Heights Outpatient Surg 423 Treeline Park San Antonio, TX 78209	Services:      Administration of Blood Product (Outpatient)     Administration of High Risk Medications (Outpatient)     Ambulatory Surgery Center (Outpatient)     Anesthesia (Outpatient)     Perform Invasive Procedure (Outpatient)

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# **Locations of Care**

Locations of Care	Available Services
Christus Santa Rosa-Cardiothoracic Center in New Braunfels DBA: Cardiothoracic Center 730 N. Houston Avenue New Braunfels, TX 78130	Services:  • Single Specialty Practitioner (Outpatient)
CHRISTUS Santa Rosa-Rehabilitation Services DBA: CHRISTUS Santa Rosa-Rehabilitation Services 750 Landa, Suite A New Braunfels, TX 78130	Services:  • Outpatient Clinics (Outpatient)
CHRISTUS Transplant Institute ( CTI) 2829 Babcock Road Tower 1 Ste 300 San Antonio, TX 78229	Other Clinics/Practices located at this site:  CHRISTUS Transplant Institute (CTI)-Edinburg  CHRISTUS Transplant Institute (CTI)-EL Paso  CHRISTUS Transplant Institute (CTI)-Laredo
	Services:  • Outpatient Clinics (Outpatient)

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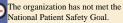




# **2015 National Patient Safety Goals**

#### Symbol Key

The organization has 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
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	0000
	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 2016 - December 2016

		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.	<b>№</b> <sup>2</sup>	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				
		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.	154.00 minutes 770 eligible Patients	54.00	126.00	52.92	116.58
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.	357.00 minutes 772 eligible Patients	203.00	313.00	202.52	288.87

- 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.
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#### Footnote Key

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- The Measure results are based on a sample of patients.
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# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

Compared to other Joint Commission

Accredited Organizations

Nationwide

Statewide

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

		Cor	npared to d Accredit	other Joint ed Organiz		n
		١	lationwide		State	wide
Measure	Explanation	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 - 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.	99% of 331 eligible Patients	100%	94%	100%	97%

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# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Col	npared to o	other Joint ed Organiz		on
				ed Organiz		
Magaura Evaluation			lationwide	_		ewide
Measure	Explanation	Hospital	•	Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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	100% of 49 eligible Patients	100%	94%	100%	97%

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### Reporting Period: January 2016 - December 2016

Compared to other Joint Commission Accredited Organizations

Org ID: 9218

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.

		Соі	mpared to o	other Joint ed Organiz		n
		١	Nationwide		State	wide
Measure	Explanation	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.	99% of 282 eligible Patients	100%	92%	100%	96%

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# **National Quality Improvement Goals**

### Reporting Period: January 2016 - December 2016

**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

		Соі	mpared to d			on
		N	Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored at Least:	Rate:	Scored at Least:	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 persons capacity to meet lifes everyday demands.	29% of 24 eligible Patients <sup>3</sup>	100%	61%	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 medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	40% of 5 eligible Patients <sup>3</sup>	100%	62%	100%	70%

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# **National Quality Improvement Goals**

### Symbol Key

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ŀ	Reporting	Period: .	January	2016 -	Decembe	er 2016

Compared to other Joint

Org ID: 9218

**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

	Cor	npared to c Accredit	other Joint ed Organiz		on	
Managema	Fundamentian		Nationwide	A		wide
Measure	Explanation	Hospital Results	Scored	Average Rate:	Top 10% 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 or the addition when the patient is also being treated with Clozapine.	26% of 19 eligible Patients <sup>3</sup>	100%	56%	100%	53%
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.	0.00 (0 Total Hours in Restraint)	N/A	0.50	N/A	0.20



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.

DBA: CHRISTUS Santa Rosa Hospital - Medical Center,

Org ID: 9218 2827 Babcock Road, San Antonio, TX







# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

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

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		Cor	npared to c	other Joint ed Organiz		on
		<u> </u>	Accredite lationwide	ed Organiz		ewide
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	
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.	0.00 (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.	0.00 (0 Total Hours in Restraint)	N/A	0.39	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.	0.00 (0 Total Hours in Seclusion)	N/A	0.36	N/A	0.07

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DBA: CHRISTUS Santa Rosa Hospital – Medical Center,

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# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	wide
Measure	Explanation	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.	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.	0.00 (0 Total Hours in Seclusion)	N/A	0.07	N/A	0.03

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2827 Babcock Road, San Antonio, TX Org ID: 9218







# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission		
		Accredited Organizations		
leasure Area	Explanation	Nationwide	Statewide	
mmunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	<b>№</b> 2	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	Top 10%	Average	Top 10%	Average
		Results	Scored at Least:	Rate:	Scored at Least:	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.	96% of 548 eligible Patients	100%	94%	100%	96%

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# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

**Accredited Organizations** 

Compared to other Joint

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> 2

		Соі	npared to d Accredit	other Joint ed Organiz		on
		Nationwide States			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.	95% of 21 eligible Patients <sup>3</sup>	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.	1% of 292 eligible Pattlents	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.	67% of 1540 eligible Patients	75%	53%	67%	47%

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# **National Quality Improvement Goals**

# Reporting Period: January 2016 - December 2016

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.	<b>№</b> 2	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				
		١	lationwide		State	ewide
Measure	Explanation	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.	83% of 18 eligible Patients <sup>3</sup>	100%	90%	100%	89%

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**Symbol Key** 

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# CHRISTUS Santa Rosa Health Care Corporation

DBA: CHRISTUS Santa Rosa Hospital - Medical Center,

2827 Babcock Road, San Antonio, TX Org ID: 9218







# **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		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.	<b>∞</b> <sup>2</sup>	<b>№</b> <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	0	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.	92% of 39 eligible Patients	100%	93%	100%	93%

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# **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."

# 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

Org ID: 9218