

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

Org ID: 9218

Accreditation Quality Report





Version: 9 Date: 7/16/2019

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

Org ID: 9218



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

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	4/14/2018	4/13/2018	5/21/2019
Laboratory	Accredited	6/9/2017	7/11/2019	7/11/2019

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

Pathology and Clinical Laboratory

Hospital

Footnote Key

Symbol Key

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Not displayed

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This organization achieved the best

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

This organization's performance is

similar to the target range/value.
This organization's performance is below the target range/value.
This Measure is not applicable for this

- 1. 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.
- 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.
- 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	Certification Decision	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	Review Date
Acute Stroke Ready Hospital	Certification	12/15/2018	12/14/2018	12/14/2018
Primary Stroke Center	Certification	12/14/2018	12/13/2018	12/13/2018

		Compared to other Joint Commission Accredited Organizations			
		Nationwide	Statewide		
Hospital	2018National Patient Safety Goals	Ø	№ *		
	National Quality Improvement Goals:				
Reporting Period:	Emergency Department	№ ²	ND ²		
Jan 2018 - Dec 2018	Hospital-Based Inpatient Psychiatric Services	№ 0 ²	ND ²		
	Immunization	№ 2	№ 2		
	Perinatal Care	(40) 2	№ 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

Locations of Care 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

Available Services

Joint Commission Advanced Certification Programs:

• Acute Stroke Ready Hospital

Services:

- 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

CHRISTUS Santa Rosa Emergency Center-Bandera

8703 Bandera Blvd. San Antonio, TX 78250

Services:

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Anesthesia (Outpatient)
- General Laboratory Tests
- Perform Invasive Procedure (Outpatient)

Services:

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Anesthesia (Outpatient)
- Perform Invasive Procedure (Outpatient)

Healthcare System-Alamo Heights DBA: CHRISTUS Santa Rosa Hospital-Alamo Heights 403 Treeline Park, Building 1 San Antonio, TX 78209

CHRISTUS Santa Rosa

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

- Medical /Surgical Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Ultrasound (Imaging/Diagnostic Services)

4

5

CHRISTUS Santa Rosa Health Care Corporation

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

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Locations of Care

* Primary Location

Locations of Care

CHRISTUS Santa Rosa Hospital - Medical Center 1

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:

- 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
- Gl 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
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Toxicology
- 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

* Primary Location

Locations of Care CHRISTUS Santa Rosa Hospital-Westover Hills DBA: CHRISTUS Santa

Rosa Hospital- Westover 11212 State Highway 151

San Antonio, TX 78251

Available Services

Joint Commission Advanced Certification Programs:

Primary Stroke Center

Services:

- 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)

- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)
- Normal Newborn Nursery (Inpatient)
- **Nuclear Medicine** (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Pediatric General Surgery (Inpatient - Child/Youth)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- 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:

- CHRISTUS Santa Rosa NB Radiology
- Christus Santa Rosa Outpatient Imaging
- Christus Santa Rosa Outpatient Wound Care and Hyperbaric Cen

Services:

· General Laboratory Tests

CHRISTUS Santa Rosa Imaging Center- Alamo Heights

423 Treeline Park Ste 100 San Antonio, TX 78209

Services:

· Outpatient Clinics (Outpatient)

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Locations of Care

Locations of Care	Available Services
CHRISTUS Santa Rosa	
Orthopaedics & Sports	Services:
Medicine	Outpatient Clinics (Outpatient)
DBA: CHRISTUS	Perform Invasive Procedure (Outpatient)
Orthopaedics & Sports	• Ferioriti invasive Frocedure (Odtpatient)
Medicine - San Antonio	
2833 Babcock Road Suite	
435 Tower 2	
San Antonio, TX 78229	
CHRISTUS Santa Rosa	
Orthopaedics & Sports	Services:
Medicine-Alamo Hei	Perform Invasive Procedure (Outpatient)
156 West Sunset Suite	Single Specialty Practitioner (Outpatient)
200	• Single openially indulation (Sulpation)
San Antonio, TX 78209	
CHRISTUS Santa Rosa	
Texas Neurosurgical	Services:
Spine Clinic	Outpatient Clinics (Outpatient)
DBA: CHRISTUS Santa	, , ,
Rosa Texas Neurosurgical	
Spine Clinic	
2829 Babcock, Tower 1,	
Ste106	
San Antonio, TX 78229	
CHRISTUS Santa Rosa	
Westover Hills - Cardiac	Services:
Opt Rehab Srv	General Laboratory Tests
11212 State Hwy 151,	Outpatient Clinics (Outpatient)
Medical Plaza 2, Suite	
316	
San Antonio, TX 78251 CHRISTUS Santa Rosa	
Westover	Services:
Hills-Outpatient Rehab	2
DBA: Westover	Outpatient Clinics (Outpatient)
Hills-Outpatient Rehab	
11212 State Highway 151,	
MOB 2, Suite 305	
San Antonio, TX 78251	
CHRISTUS Santa Rosa	
Wound Care &	Services:
Hyperaric Center -	General Laboratory Tests
CSR-MC	Outpatient Clinics (Outpatient)
DBA: CHRISTUS Santa	• Odipatient Onnies (Odipatient)
Rosa Wound Care &	
Hyperaric Center -	
CSR-MC	
2833 Babcock Road,	
Tower 2; Ste 105	
San Antonio, TX 78229	
CHRISTUS Santa Rosa	
Wound Care &	Services:
Hyperbaric	General Laboratory Tests
CenterCSR-WH	Outpatient Clinics (Outpatient)
11212 State Hwy 151,	· · · · · · · · · · · · · · · · · · ·
Med Plaza 2 Ste300 San Antonio, TX 78251	

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Locations of Care

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services
CHRISTUS Santa Rosa Wound Care & Hyperbaric CSRH-NB 598 N. Union New Braunfels, TX 78130	Services: • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient)
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:



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2018 National Patient Safety Goals

Symbol Key

The organization has met the National Patient Safety Goal.

The organization has not met the National Patient Safety Goal.

The Goal is not applicable for this organization.

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

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø Ø
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	8 8 8 8 8 8
	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 2018 - December 2018

		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				n
		١	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.	144.00 minutes 728 eligible Patients	56.00	137.00	54.17	124.49
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.	304.00 minutes 729 eligible Patients	207.00	321.00	196.72	286.68

- 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 similar to the target range/value.
- This organization's performance is below the target range/value.
- Not displayed

Footnote Key

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- The measure meets the Privacy Disclosure Threshold rule.
- The organization scored above 90% but was below most other organizations.
- The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
- 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- There were no eligible patients that met the denominator criteria.

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

DBA: CHRISTUS Santa Rosa Hospital - Medical Center,

2827 Babcock Road, San Antonio, TX





Measure Area

Services

Hospital-Based

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

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

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

№ 2



Symbol Key

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		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 - 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.	₩ D 3	100%	94%	100%	97%

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





National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Commission **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.

		Col	mpared to o			on
			Accredit Nationwide	ed Organiz		ida
Measure	Explanation	Hospital		Average	Top 10%	ewide
Measure	Explanation	Results	Scored	Average Rate:	Scored	Rate:
		Results	at Least:	Nate.	at Least:	Nate.
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years)	This measure reports the number of children age (1-12 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	3 	100%	95%	100%	98%

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Compared to other Joint

DBA: CHRISTUS Santa Rosa Hospital - Medical Center,

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Measure Area

Services

Hospital-Based

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

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

Org ID: 9218

№ 2

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		Co	mpared to d	other Joint ed Organiz		n
			Nationwide			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 - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	ND 3	100%	95%	100%	97%

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

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

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National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Compared to other Joint Commission

Org ID: 9218

		Accredited O	rganizations
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
Services			

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide				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 - 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.	₩ 0 3	100%	94%	100%	97%

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Measure Area

Services

Hospital-Based

Inpatient Psychiatric





National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Compared to other Joint **Accredited Organizations** Nationwide Statewide This category of evidenced based measures assesses the

№ 2

Symbol Key

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

		Compared to other Joint Commission Accredited Organizations				n
		1	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.	₩ D 3	100%	94%	100%	95%

Explanation

overall quality of care given to psychiatric patients.

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,

2827 Babcock Road, San Antonio, TX









National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Compared to other Joint

		Accredited C	rganizations
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
	Cor	mpared to other Joi	

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification 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.	3	100%	63%	100%	74%
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	3	100%	42%	100%	43%

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

		Compared to other Joint Commission Accredited Organizations				
		N	lationwide	Ĭ	State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also	₩ D 3	100%	51%	100%	52%

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being treated with Clozapine.

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		Compared to other Joint Commission Accredited Organizations				on
		N	lationwide			wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication is also being treated with Clozapine.	3	100%	65%	100%	77%

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		Cor	mpared to o	otner Joint ed Organiz		on
		N	Nationwide	ou Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification 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 or the addition of an antipsychotic medication or the addition of an antipsychotic medication is also being treated with Clozapine.	₩ 0 3 ————	100%	56%	100%	58%
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	0.46	N/A	0.21

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National Quality Improvement Goals

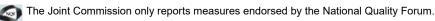
Reporting Period: January 2018 - December 2018

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.

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		Col	mpared to d Accredit	ed Organiz		וונ
			Nationwide	ou organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	3 	N/A	0.34	N/A	0.26
Hours of Physical Restraint Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	3	N/A	0.25	N/A	0.31



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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

		Compared to other Joint Commission Accredited Organizations				on
		Nationwide Statewi			ewide	
Measure	Explanation	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.	0.00 (0 Total Hours in Restraint)	N/A	0.53	N/A	0.21
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	0.18	N/A	0.04
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	0.13

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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

Services						
		Соі	mpared to d Accredit	other Joint ed Organiz		on
		١	Nationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	ND 3	N/A	0.61	N/A	0.42
Hours of Seclusion Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	ND 3	N/A	0.23	N/A	0.19
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	0.12
Hours of Seclusion Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	0.00 (0 Total Hours in Seclusion)	N/A	0.04	N/A	0.02

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		Commission		
		Accredited C	rganizations	
leasure Area	Explanation	Nationwide	Statewide	
mmunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	№ 2	№ 2	

		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.	92% of 567 eligible Patients	100%	94%	100%	95%

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Reporting Period: January 2018 - December 2018

Compared to other Joint Accredited Organizations

Org ID: 9218

		/ tool calted	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				on
Measure	Explanation	Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:		ewide 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.	94% of 17 eligible Patients	100%	98%	100%	98%
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.	2% of 269 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.	56% of 1624 eligible Patients	73%	52%	64%	44%



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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

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