

## Accreditation Quality Report





Version: 2 Date: 1/29/2021



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.







## **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	3/30/2018	3/29/2018	5/9/2018

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

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2018National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	ND <sup>2</sup>	<b>№</b> 2	
Jan 2019 - Dec 2019	Perinatal Care	<b>№</b> <sup>2</sup>	<b>№</b> <sup>2</sup>	

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

### 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.
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- This organization's performance is below the target range/value.
- This Measure is not applicable for this organization.
- Not displayed

#### **Footnote Key**

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

  There were no eligible patients that met the denominator criteria.









## **Locations of Care**

Locations of Care	Available Services
Avon Occupational Health 230 Chapel Place Avon, CO 81620	Services:  • Outpatient Clinics (Outpatient)
Beaver Creek Medical Center 1280 Village Road Avon, CO 81620	Other Clinics/Practices located at this site:  • Howard Head Sports Medicine  Services:  • Administration of High Risk Medications (Outpatient)  • Anesthesia (Outpatient)
Eagle Health Care Center 377 Sylvan Lake Rd Eagle, CO 81631	Other Clinics/Practices located at this site:  • Howard Head Sports Medicine  Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine 52 Lundgren Blvd (Gypsum Recreation Center) Gypsum, CO 81637	Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine 100 Basecamp Way, Suite 105 Frisco, CO 80443	Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine 265 Tanglewood Lane Silverthorne, CO 80498	Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine 126 Riverfront Lane, Suite 101 (The Westin) Avon, CO 81620	Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine 505 South Main St Breckenridge, CO 80424	Services:  • Outpatient Clinics (Outpatient)
Howard Head Sports Medicine (Edwards Pavilion) 320 Beard Creek Rd Edwards, CO 81632	Services:  • Outpatient Clinics (Outpatient)
Shaw Breast Center & Cancer Clinic 323 West Main Street, Suite 101 Frisco, CO 80443	Services:



# Vail Clinic,Inc. DBA: Vail Health Hospital, 181 West Meadow Dr, Vail, CO







## **Locations of Care**

Locations of Care	Available Services
Shaw Pavilion 322 Beard Creek Road Edwards, CO 81632	Services:      Administration of Blood Product (Outpatient)     Administration of High Risk Medications (Outpatient)     Hazardous Medication Compounding (Outpatient)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)
Vail Clinic, Inc * DBA: Vail Health Hospital 181 West Meadow Dr. Vail, CO 81657	<ul> <li>Other Clinics/Practices located at this site: <ul> <li>Howard Head Sports Medicine</li> </ul> </li> <li>Services: <ul> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Urology (Surgical Services)</li> </ul> </li> </ul>











## **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	<u> </u>
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	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



Measure Area

Emergency

Department





Reporting Period: January 2019 - December 2019

	Commission				
	Accredited Organizations				
	Nationwide	Statewide			
the	<b>№</b> 2	ND 2			

Compared to other Joint

		Compared to other Joint Commission				on
		Accredited Organizations				
		١	lationwide		State	ewide
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	42.00 minutes 163 eligible Patients	55.00	133.00	47.16	82.78

Explanation

This category of evidence based measures assesses

time patients remain in the hospital Emergency Department prior to inpatient admission.

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

## **National Quality Improvement Goals**

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Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: January 2019 - December 2019

Measure Area Explanation Nationwide Statewide

Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Cor	npared to c	other Joint ed Organiz		n
			lationwide	Ŭ	State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	——————————————————————————————————————	100%	98%	100%	99%
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	18% of 151 eligible Patients	12%	25%	11%	21%
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 46 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.	87% of 355 eligible Patients	73%	51%	87%	70%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	2605.00 minutes 307 eligible				

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Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: January 2019 - December 2019

		Comm	Commission	
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
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		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	3257.00 minutes 307 eligible Patients				
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	651.00 minutes 307 eligible Patients				

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