DBA: Legacy Meridian Park Medical Center, 19300 SW 65th Avenue, Tualatin, OR

Org ID: 9722

Accreditation Quality Report





Version: 13 Date: 10/13/2017



Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the
 prevention of medical errors such as surgery on the wrong side of
 the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

Mark R. Chassin, MD, MPP, MPH President of the Joint Commission

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
	Accredited	3/3/2016	3/2/2016	3/2/2016

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

Hospital

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Site		
Programs		Date	Date	Review Date	
Primary Stroke Center	Certification	2/1/2017	1/31/2017	1/31/2017	
Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date	
Chest Pain	Certification	3/14/2017	3/13/2017	3/13/2017	

Other Accredited Programs/Services

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

Special Quality Awards

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

		Compared to other Joint Organiz	
		Nationwide	Statewide
Hospital	2016National Patient Safety Goals	Ø	*

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.
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- This organization's performance is below the target range/value.
- This Measure is not applicable for this organization.
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Footnote Key

- The Measure or Measure Set was not reported.
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- 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.
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Summary of Quality Information

			Commission Accredited zations
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(N) 2	ND 2
Jan 2016 - Dec 2016	Immunization	(ND) 2	ND ²
	Perinatal Care	2	№ 2
	Stroke Care	2	№ 2
	Venous Thromboembolism (VTE)	2	№ ²

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Locations of Care

Locations of Care	Available Services
Legacy Meridian Park Hospital DBA: Medical Plaza 2 19260 SW 65th Avenue Tualatin, OR 97062	Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Outpatient Clinics (Outpatient)
Legacy Meridian Park Hospital * DBA: Legacy Meridian Park Medical Center 19300 Southwest 65th Avenue Tualatin, OR 97062	Primary Stroke Center Services:
Legacy Meridian Park Hospital DBA: Legacy Clinic Tualatin 19875 SW 65th Avenue Tualatin, OR 97062	Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)

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Locations of Care

* Primary Location Locations of Care	Available Services
Legacy Meridian Park Hospital DBA: Legacy Clinic Woodburn 1002 N. Boones Ferry Road Woodburn, OR 97071	Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)
Legacy Meridian Park Hospital DBA: Medical Plaza 1 19250 SW 65th Avenue Tualatin, OR 97062	Services: • Single Specialty Practitioner (Outpatient)
Legacy Meridian Park Hospital DBA: Legacy Clinic Lake Oswego 412 A Ave., Suite 200 Lake Oswego, OR 97034	Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)
Legacy Meridian Park Hospital DBA: Legacy Clinic West Linn 2020 8th Ave., Suite 100 West Linn, OR 97068	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Legacy Meridian Park Hospital DBA: Legacy Clinic Canby 1433 SE 1st Ave. Canby, OR 97013	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Legacy Meridian Park Hospital DBA: Anti-coagulation Clinic, Wound and Foot Care Clinic 6475 SW Borland Road Tualatin, OR 97062	Other Clinics/Practices located at this site: • Legacy Diabetes & Nutrition Services Services: • Ambulatory Surgery Center (Outpatient)
Legacy Meridian Park Hospital DBA: Legacy Clinic Bridgeport 18010 SW McEwan Rd Lake Oswego, OR 97035	Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)

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2016 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
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	8888
	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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Compared to other Joint







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.	2	№ 2	

		Compared to other Joint Commission Accredited Organizations				n
		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.	89.00 minutes 692 eligible Patients	54.00	126.00	64.57	98.85
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.	237.00 minutes 698 eligible Patients	203.00	313.00	217.95	257.43

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National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

		Commission Accredited Organizations		
Measure Area	Explanation	Nationwide Statewide		
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	№ 2	№ 2	

		Compared to other Joint Commission Accredited Organizations 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.	94% of 521 eligible Patients	100%	94%	99%	87%

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2016 - December 2016

Accredited Organizations Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Col	mpared to o	other loint	Commissio	n e
		Col		ed Organiz		/I I
			Nationwide			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%	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.	5% of 21 eligible Patients ³	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.	86% of 225 eligible Pattlents	75%	53%	91%	83%

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National Quality Improvement Goals

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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.	№ 2	© ²

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide			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.	97% of 39 eligible Patients	100%	90%	100%	88%

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Legacy Meridian Park Hospital

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Compared to other Joint







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.	№ 2	№ 2	

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statew		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.	88% of 8 eligible Patients ³	100%	93%	100%	89%

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		Accredited Organizations				
		Nationwide			Statewide	
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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.	88% of 8 eligible Patients ³	100%	93%	100%	89%