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

Org ID: 9722

Accreditation Quality Report





Version: 6 Date: 5/9/2019



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	1/31/2019	3/14/2019

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	5/7/2019	5/7/2019	

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 Commission Accredited Organizations		
		Nationwide Statewide		
Hospital	2016National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	№ 2	ND ²	
Oct 2017 - Sep 2018	Immunization	№ 2	№ 2	
_	Perinatal Care	N/D 2	№ ²	

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.
- 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.
- The Measure results are based on a sample of patients.
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- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
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Locations of Care

*	Primary	Location

19875 SW 65th Avenue

Tualatin, OR 97062

Locations of Care Available Services Legacy Meridian Park Hospital **Services:** DBA: Medical Plaza 2 · Administration of High Risk Medications (Outpatient) 19260 SW 65th Avenue Anesthesia (Outpatient) Tualatin, OR 97062 Outpatient Clinics (Outpatient) Legacy Meridian Park **Joint Commission Advanced Certification Programs:** Hospital * Primary Stroke Center DBA: Legacy Meridian Park Medical Center 19300 Southwest 65th **Services:** Avenue • Cardiac Catheterization Lab Neuro/Spine Unit (Inpatient) Tualatin, OR 97062 (Surgical Services) Neurosurgery (Surgical Cardiovascular Unit Services) (Inpatient) Non-Sterile Medication CT Scanner Compounding (Inpatient) (Imaging/Diagnostic Normal Newborn Nursery Services) (Inpatient) Ear/Nose/Throat Surgery **Nuclear Medicine** (Surgical Services) (Imaging/Diagnostic Services) EEG/EKG/EMG Lab Orthopedic Surgery (Surgical Services) (Imaging/Diagnostic Orthopedic/Spine Unit Services) Gastroenterology (Surgical (Inpatient) Plastic Surgery (Surgical Services) GI or Endoscopy Lab Services) (Imaging/Diagnostic Positron Emission Tomography Services) (PET) (Imaging/Diagnostic Gynecological Surgery Services) Post Anesthesia Care Unit (Surgical Services) Gynecology (Inpatient) (PACU) (Inpatient) Sleep Laboratory (Sleep Hazardous Medication Laboratory) Compounding (Inpatient) Hematology/Oncology Unit Sterile Medication (Inpatient) Compounding (Inpatient) Inpatient Unit (Inpatient) Surgical ICU (Intensive Care Interventional Radiology (Imaging/Diagnostic Surgical Unit (Inpatient) Services) Thoracic Surgery (Surgical Labor & Delivery (Inpatient) Services) Magnetic Resonance Ultrasound Imaging (Imaging/Diagnostic (Imaging/Diagnostic Services) Services) **Urology (Surgical Services)** Vascular Surgery (Surgical Medical /Surgical Unit (Inpatient) Services) Medical ICU (Intensive Care Neuro/Spine ICU (Intensive Care Unit) Legacy Meridian Park Hospital **Services:** DBA: Legacy Clinic • Administration of High Risk Medications (Outpatient) Tualatin • Perform Invasive Procedure (Outpatient)

Single Specialty Practitioner (Outpatient)

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Locations of Care

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: • Outpatient Clinics (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	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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Compared to other Joint







National Quality Improvement Goals

Reporting Period: October 2017 - September 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 Nationwide Statewide				
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.	99.00 minutes 717 eligible Patients	56.00	136.00	71.94	99.84
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.	226.00 minutes 722 eligible Patients	207.00	320.00	224.01	281.35

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- * This information can also be viewed at www.hospitalcompare.hhs.gov
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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

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

		Compared to other Joint Commission Accredited Organizations 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.	91% of 514 eligible Patients	100%	94%	99%	92%

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

		Commission		
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	№ 2	№ 2	

		Соі	mpared to c	other Joint ed Organiz		on
			Nationwide	eu Organiz		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.	ND 3	100%	98%	100%	99%
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 20 eligible Patients	0%	2%	0%	3%
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.	94% of 189 eligible Patlents	73%	51%	92%	80%

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