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

Org ID: 9722

# Accreditation Quality Report





Version: 1 Date: 2/17/2022



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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.

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### **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Mospital	Accredited	2/1/2019	1/31/2019	3/14/2019

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

Hospital

#### 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	2019National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	<b>№</b> 0 <sup>2</sup>	<b>№</b> <sup>2</sup>	

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

#### Symbol Key 1

- 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.
- 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."

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# **Locations of Care**

Locations of Care	ary Location  Locations of Care  Available Services			
Legacy Meridian Park Hospital DBA: Medical Plaza 2 19260 SW 65th Avenue Tualatin, OR 97062	Services:  • Anesthesia (Outpatient)  • Outpatient Clinics (Outpatient)			
Legacy Meridian Park Hospital * DBA: Legacy Meridian Park Medical Center 19300 Southwest 65th Avenue Tualatin, OR 97062	Services:  Cardiac Catheterization Lab (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) Gastroenterology (Surgical Services) Gil or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hematology/Oncology Unit (Inpatient) Hematology/Oncology Unit (Inpatient) Hematology/Oncology Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Interventional Radiology (Imaging/Diagnostic Services)  Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit) Neuro/Spine Unit (Inpatient) Normal Newborn Nursery (Inpatient) Nuclear Medicaice (Imaging/Diagnostic Services) Orthopedic Surgery (Surgical Services) Positron Emission Tomogra (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient) Sieep Laboratory (Sleep Laboratory) Sterile Medicairon Compounding (Inpatient) Plastic Surgery (Surgical Services) Post Anesthesia Care Unit (PACU) (Inpatient) Surgical ICU (Intensive Care Unit) Surgical ICU (Intensive Care Unit) Vascular Surgery (Surgical Services) Vascular Surgery (Surgical Services) Vascular Surgery (Surgical Services) Vascular Surgery (Surgical Services)			
Legacy Meridian Park Hospital DBA: Legacy Clinic Tualatin 19875 SW 65th Avenue	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (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)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (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:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)			
	Legacy Meridian Park Hospital DBA: Legacy Clinic West Linn 2020 8th Ave., Suite 100 West Linn, OR 97068	Services:  • Outpatient Clinics (Outpatient)			
	Legacy Meridian Park Hospital DBA: Legacy Clinic Canby 1433 SE 1st Ave. Canby, OR 97013	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)			
	Legacy Meridian Park Hospital DBA: Medication Management 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)     Outpatient Clinics (Outpatient)     Perform Invasive Procedure (Outpatient)			

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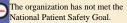




# **2019 National Patient Safety Goals**

#### Symbol Key 3

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
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 Infections that are difficult to treat	Ø
	Preventing Central-Line Associated Blood Stream Infections	ଉଉଉଓ
	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: April 2020 - March 2021

Measure Area Explanation Nationwide Statewide

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

		Compared to other Joint Commission Accredited Organizations				
		N	Nationwide	cu Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	31% of 124 eligible Patients	16%	25%	18%	24%
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.	4% of 24 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.	89% of 196 eligible Pattents	71%	50%	91%	79%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	113% of 884 eligible Patients	212%	1780%	300%	1560%
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.	1923% of 884 eligible Patients	1508%	3084%	1824%	2764%

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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: April 2020 - March 2021

Compared to other Joint Commission

Accredited Organizations

Measure Area Explanation Nationwide Statewide

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

		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:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1809% of 884 eligible Patients	501%	1303%	572%	1204%

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