Quality Check®

Org ID: 9792

Accreditation Quality Report





Version: 6 Date: 10/29/2022 working to improve that care.

DBA: Cedars-Sinai Medical Center, 8700 Beverly Blvd., Los Angeles, CA



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

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.

Symbol Key

oossible results.

rganization.

Not displayed

overall result.

valid.

sample of patients.

updated data.

Footnote Key

The Measure or Measure Set was not reported.
 The Measure Set does not have an

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

The Measure results are based on a

The number of months with Measure

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Test Measure: a measure being evaluated for reliability of the

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individual data elements or awaiting

11. There were no eligible patients that met the denominator criteria.

National Quality Forum Endorsement.

data is below the reporting requirement.

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.

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This Measure is not applicable for this

Cedars-Sinai Health System

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Summary of Quality Information

| Accreditation Programs | Accreditation Decision | Effective Date | Last Full Survey Date | Last On-Site Survey Date |
|------------------------|-------------------------------|-------------------|--------------------------|-----------------------------|
| | Accredited | 5/1/2021 | 4/30/2021 | 4/30/2021 |

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

Hospital

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

Ventricular Assist Device

| Advanced Certification Programs | Certification Decision | Effective Date | Last Full Review Date | v Last On-Site Review Date |
|--------------------------------------|-------------------------------|-------------------|-----------------------|-------------------------------|
| Advanced Comprehensive Stroke Center | Certification | 12/16/2021 | 12/15/2021 | 12/15/2021 |
| Ventricular Assist Device | Certification | 2/26/2022 | 2/25/2022 | 2/25/2022 |

Other Accredited Programs/Services

- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))
- Laboratory (Accredited by American Society for Histocompatibility and Immunogenetics (ASHI))

Special Quality Awards

2013 Top Performer on Key Quality Measures®

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2014 Magnet Award

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

| | | Compared to other Joint Commission Accredited Organizations Nationwide Statewide | | |
|--|-------------------------------------|---|----------------|--|
| | | | | |
| Hospital | 2021National Patient Safety Goals | Ø | N/A * | |
| | National Quality Improvement Goals: | | | |
| Reporting Period: Apr 2020 - Mar 2021 | Perinatal Care | © ² | © ² | |

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

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Locations of Care

* Primary Location

| Trimary Ecoation | | | |
|--|---|--|--|
| Locations of Care | Available Services | | |
| Breast Health Center 310 San Vicente Blvd West Hollywood, CA 90048 | Services: • Outpatient Clinics (Outpatient) | | |
| Cancer Treatment Center 9090 Wilshire Blvd, 2nd Floor Beverly Hills, CA 90211 | Services: Administration of Blood Product (Outpatient) Outpatient Clinics (Outpatient) | | |
| Cedars-Sinai Comprehensive Transplant Center 8900 Beverly Blvd Los Angeles, CA 90048 | Services: • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient) | | |

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Locations of Care

* Primary Location

Locations of Care

Cedars-Sinai Health System * DBA: Cedars-Sinai Medical Center 8700 Beverly Boulevard Los Angeles, CA 90048

Available Services

Joint Commission Advanced Certification Programs:

- Advanced Comprehensive Stroke Center
- Ventricular Assist Device

Services:

- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- 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)
- Hazardous Medication Compounding (Inpatient)
- Hematology/Oncology Unit (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)
- Neuro/Spine ICU (Intensive Care Unit)

- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Nuclear Pharmacy (Inpatient)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Transplant Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

| * | Primary | Locat | tion |
|---|---------|-------|------|
| | | 4: | |

| Locations of Care | Available Services | | | |
|--|---|--|--|--|
| Cedars-Sinai Medical Center Mark Goodson Building DBA: Mark Goodson Building 444 San Vicente Boulevard Suite 160 Los Angeles, CA 90048 | Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient) | | | |
| Cedars-Sinai Medical Center Spielberg Building 8723 Alden Drive Los Angeles, CA 90048 | Services: | | | |
| Cedars-Sinai Medical Office Tower 8635 West Third Street Los Angeles, CA 90048 | Services: • Outpatient Clinics (Outpatient) | | | |
| Cedars-Sinai Medical Office Tower 8631 West Third Street Los Angeles, CA 90048 | Services: • Outpatient Clinics (Outpatient) | | | |
| Coach For Kids 8723 Alden Drive Los Angeles, CA 90048 | Services: • Outpatient Clinics (Outpatient) | | | |
| The Pavillion 127 S. San Vicente Boulevard Los Angeles, CA 90048 | Services: Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Ambulatory Surgery Center (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient) | | | |

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2021 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 | | |
|--|---|---|--|
| 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 | |
| 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 | |
| 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 | | | | |
|---|---|---|------------|------------|-----------|------------------|
| | | | | ed Organiz | | |
| Measure | Explanation | Hospital | Vationwide | Average | Top 10% | ewide Average |
| Weddale | Ελριαπατοπ | Results | Scored | Rate: | Scored | Rate: |
| | | | at Least: | | at Least: | |
| 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. | ⊕ | 16% | 25% | 16% | 23% |
| 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. | 7% of 290 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. | 55% of 4868 eligible Patients | 71% | 50% | 80% | 62% |
| Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate | The moderate rate equals the number of patients with moderate complications. | 2667% of 4799 eligible Patients | 212% | 1780% | 0% | 1421% |
| 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. | 3938% of 4799 eligible Patients | 1508% | 3084% | 1258% | 2777% |

- 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 achi

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Footnote Key

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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

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

| | | Compared to other Joint Commission Accredited Organizations | | | | |
|---|--|---|--------------------------------|------------------|--------------------------------|------------------|
| | | N | Nationwide | | 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 - Severe Rate | The severe rate equals the number of patients with severe complications. | 1271% of 4799 eligible Patients | 501% | 1303% | 505% | 1356% |

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