

# Accreditation Quality Report





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.



27200 Calaroga Avenue, Hayward, CA



### **Summary of Quality Information**

#### Symbol Key

- This organization achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is  $\odot$
- similar to the target range/value.
- This organization's performance is below the target range/value.
- Not displayed

#### Footnote Key

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 3. The number of patients is not enough for comparison purposes.
- 4. 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. 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."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🥝 Hospital	Accredited	2/23/2019	2/22/2019	1/30/2020
olimitation Laboratory	Accredited	11/10/2018	11/9/2018	11/9/2018

#### Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS) Pathology and Clinical Laboratory

Hospital

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures® 2013 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations		
		Nationwide Statewide		
Hospital	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	( <b>1</b> ) <sup>2</sup>	<b>№0</b> <sup>2</sup>	
Jan 2019 - Dec 2019	Perinatal Care	<b>(10)</b> <sup>2</sup>	<b>(()</b> <sup>2</sup>	

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

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## **Locations of Care**

#### \* Primary Location

Locations of Care	Available Ser	vices
Hayward Sisters Hospital * DBA: St. Rose Hospital 27200 Calaroga Avenue Hayward, CA 94545	<ul> <li>(Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Coronary Care Unit (Inpatient)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology</li> </ul>	Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Orthopedic Surgery (Surgical Services) Plastic Surgery (Surgical Services) Post Anesthesia Care Unit (PACU) (Inpatient) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Teleradiology (Imaging/Diagnostic Services) Thoracic Surgery (Surgical Services) Toxicology Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services)



### **National Quality Improvement Goals**

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

		Compared to other Joint Commission		
		Accredited Organizatio		
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.	@ <sup>2</sup>	@ <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				
		Ν	Vationwide		State	wide
Measure Explanation		Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Scored	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.	92.00 minutes 490 eligible Patients	55.00	133.00	75.73	180.51

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This information can also be viewed at www.hospitalcompare.hhs.gov

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- 5. The organization scored above 90% but was below most other organizations.
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### **National Quality Improvement Goals**

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

		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.	<b>⊘</b> <sup>2</sup>	<b>○</b> <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				
		١	lationwide		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.	€€0 <sup>4</sup>	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.	16% of 73 eligible Patients	12%	25%	12%	22%
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.	0% of 4 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.	49% of 310 eligible Patients	73%	51%	81%	62%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	0.00 minutes 292 eligible Patients				

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	Perinatal Care		egory of evidenced based measures as mothers and newborns.	ssesses the	<b>(10)</b>	2	<b>™</b> <sup>2</sup>	
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overall result. The number of patients is not enough for comparison purposes.	Measure		Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
<ul> <li>The measure meets the Privacy Disclosure Threshold rule.</li> <li>The organization scored above 90% but was below most other organizations.</li> <li>The Measure results are not statistically valid.</li> </ul>	Unexpected Complicat Term Newborns per 10 livebirths - Overall Rate	000	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.	Generation States 292 eligible Patients				
<ul> <li>The Measure results are based on a sample of patients.</li> <li>The number of months with Measure data is below the reporting requirement.</li> </ul>	Unexpected Complicat Term Newborns per 10 livebirths - Severe Rate	000	The severe rate equals the number of patients with severe complications.	342.00 minutes 292 eligible Patients				



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