Org ID: 9931

# Accreditation Quality Report





Version: 1 Date: 2/13/2018



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

1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **Summary of Quality Information**

<b>Accreditation Programs</b>	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	1/28/2017	1/27/2017	9/7/2017

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

Hospital

Advanced Certification Programs	<b>Certification Decision</b>	Effective Date	Last Full Review Date	w Last On-Site Review Date
Primary Stroke Center	Certification	11/11/2016	11/10/2016	11/10/2016
Certified Programs	Certification Decision	<b>Effective</b>	Last Full Review	w Last On-Site
		Date	Date	<b>Review Date</b>
Asthma, Pediatrics	Certification	3/19/2016	3/18/2016	3/18/2016

#### **Other Accredited Programs/Services**

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

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2017National Patient Safety Goals	Ø	(NA) *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	<b>№</b> 2	<b>№</b> 2	
Jul 2016 - Jun 2017	Hospital-Based Inpatient Psychiatric Services	<b>№</b> <sup>2</sup>	<b>№</b> 0 <sup>2</sup>	
	Immunization	<b>№</b> <sup>2</sup>	<b>№</b> <sup>2</sup>	
	Perinatal Care	<b>№</b> <sup>2</sup>	<b>№</b> <sup>2</sup>	

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

1200 North State Street. IPT C2K100, Los Angeles, CA

Ora ID: 993







### **Locations of Care**

#### \* Primary Location

Locations of Care

County of Los Angeles Auditor Controller \* DBA: LAC+USC Medical Center 1200 North State Street, IPT C2K100 Los Angeles, CA 90033

#### **Available Services**

#### **Joint Commission Advanced Certification Programs:**

• Primary Stroke Center

#### **Joint Commission Certified Programs:**

Asthma, Pediatrics

#### **Services:**

- Behavioral Health (Non 24 Hour Care -
  - Adult/Child/Youth)
- Brachytherapy (Imaging/Diagnostic Services)
- Burn Unit (Inpatient)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Community Integration (Non 24 Hour Care)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- Eating Disorders (Outpatient)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Family Support (Non 24 Hour Care)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Inpatient, Outpatient, Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Mammography

- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Cardiology (Inpatient - Child/Youth)
   (Outpatient - Child/Youth)
- Pediatric Cardiothoracic Surgery (Inpatient -Child/Youth)
- Pediatric Dentistry)
   (Outpatient Child/Youth)
- Pediatric Dermatology)
   (Inpatient Child/Youth)
   (Outpatient Child/Youth)
- Pediatric Emergency Medicine (Outpatient - Child/Youth)
- Pediatric Endocrinology (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Gastroenterology) (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric General Surgery) (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Nephrology)
   (Inpatient Child/Youth)
   (Outpatient Child/Youth)
- Pediatric Neurosurgery (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Ophthalmology (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Oral/Maxofacial Surgery (Inpatient -Child/Youth) (Outpatient - Child/Youth)
- Pediatric Otolaryngology) (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Plastic Surgery) (Inpatient - Child/Youth) (Outpatient - Child/Youth)
- Pediatric Unit (Inpatient)

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Ora ID: 9931







## **Locations of Care**

Locations of Care	Available	Services
	Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit) Neuro/Spine ICU (Intensive Care Unit) Neuro/Spine Unit (Inpatient) Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Ophthalmology (Surgical Services)	<ul> <li>Pediatric Urology)         (Inpatient - Child/Youth)         (Outpatient - Child/Youth)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Positron Emission Tomograph (PET) (Imaging/Diagnostic Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Radiation Oncology (Imaging/Diagnostic Services</li> <li>Sleep Laboratory (Sleep Laboratory)</li> <li>Sleep Studies (Outpatient)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Surgical Unit (Inpatient)</li> <li>Teleradiology (Imaging/Diagnostic Services</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul>
bunty of Los Angeles uditor Controller BA: LAC+USC Medical enter - Hawkins 720 E. 120th St. os Angeles, CA 90059	Services:  Behavioral Health (24-hour Ac Adult/Child/Youth)  Community Integration (Non 2-	

1200 North State Street. IPT C2K100, Los Angeles, CA

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## **2017 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
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 Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	<u> </u>
	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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Footnote Key The Measure or Measure Set was not

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National Quality Forum Endorsement.

There were no eligible patients that met

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This organization achieved the best

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similar to the target range/value. This organization's performance is below the target range/value.

### Los Angeles County+University of Southern CA Medical Center

1200 North State Street. IPT C2K100, Los Angeles, CA



Measure Area

Emergency Department





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

	Compared to other Joint Commission		
	Accredited Organizations		
Explanation	Nationwide	Statewide	
This category of evidence based measures assesses the time patients remain in the hospital Emergency	<b>№</b> 2	<b>№</b> 2	

		Compared to other Joint Commission				on
			Accredit	ed Organiz	ations	
		1	Nationwide		State	ewide
Measure	Explanation	Hospital	Top 10%	Weighte	Top 10%	Weighte
		Results	Scored	d	Scored	d
			at Most:	Median:	at Most:	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.	157.00 minutes 814 eligible Patients	55.00	131.00	75.61	177.85
Median Time from FD Arrival	The amount of time (in minutes) from	<b>O</b> 2				

time patients remain in the hospital Emergency Department prior to inpatient admission.

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

Report User Guide."

the denominator criteria.

		Соі	mpared to d Accredit	other Joint ed Organiz		n
		N	Nationwide			ewide
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.	ND 2 157.00 minutes 814 eligible Patients	55.00	131.00	75.61	177.85
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	539.00 minutes 815 eligible Patients	204.00	317.00	251.63	380.79

1200 North State Street. IPT C2K100, Los Angeles, CA



Measure Area

Hospital-Based

Services

Inpatient Psychiatric





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint					
Commission					
Accredited C	rganizations				
Nationwide	Statewide				

This category of evidenced based measures assesses the **№** 2

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		Cor	npared to c	ther Joint ed Organiz		n
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Overall Rate	This measure reports the overall number of patients screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	99% of 322 eligible Patients	100%	95%	100%	95%

Explanation

overall quality of care given to psychiatric patients.

- 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.

1200 North State Street. IPT C2K100, Los Angeles, CA



Measure Area

Services

Hospital-Based

Inpatient Psychiatric





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint **Accredited Organizations** 

Nationwide Statewide

**№** 2

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		Col	mpared to o	other Joint ed Organiz		n
			Nationwide	ou o.ga	State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years)	This measure reports the number of children age (1-12 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	100% of 17 eligible Patients	100%	97%	100%	99%

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

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.

1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931





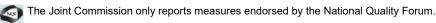


## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint Commission Accredited Organizations

		Cor	npared to o	other Joint ed Organiz		on
		١	lationwide			wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	100% of 120 eligible Patients	100%	96%	100%	99%



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## Symbol Key This organization achie

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1200 North State Street. IPT C2K100, Los Angeles, CA



Measure Area

Services

Hospital-Based

Inpatient Psychiatric





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint **Accredited Organizations** 

Nationwide Statewide **№** 2

This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.



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Symbol Key

possible results

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		Соі	mpared to o	other Joint ed Organiz		n
		١	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adult (18-64 years)	This measure reports the number of adults age (18-64 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	99% of 169 eligible Patients	100%	95%	100%	94%

Explanation

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This information can also be viewed at www.hospitalcompare.hhs.gov Null value or data not displayed.

1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint Commission Accredited Organizations

				other Joint ed Organiz	ations	
			Nationwide		State	
Measure	Explanation	Hospital Results	Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Older Adult (>= 65 years)	This measure reports the number of older adult (>= 65 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	100% of 16 eligible Patients	100%	95%	100%	95%

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1200 North State Street. IPT C2K100, Los Angeles, CA







## **National Quality Improvement Goals**

#### Reporting Period: July 2016 - June 2017

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Cor	npared to o	other Joint ed Organiz		on
		N	Nationwide	eu Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Overall Rate	This is a proportion measure. A proportion measure is a measure which shows the number of occurrences over the entire group within which the occurrence should take place. The numerator is expressed as a subset of the denominator. This measure reports the overall number of patients discharged on two or more antipsychotic medications. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a persons capacity to meet lifes everyday demands.	56% of 9 eligible Patients	100%	61%	99%	47%
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	<b>№</b> 03 ————	100%	53%	3	3

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1200 North State Street. IPT C2K100, Los Angeles, CA



Services





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint Commission

		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>№</b> <sup>2</sup>	<b>№</b> 2

	Compared to other Joint Commission Accredited Organizations					
		1	Nationwide			ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozopine	3	100%	54%	100%	57%

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## Footnote Key

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1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

#### Reporting Period: July 2016 - June 2017

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

Compared to other Joint Commission

Accredited Organizations

Nationwide

Statewide

This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.

		Cor	npared to d Accredit	other Joint ed Organiz		n
		١	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	43% of 7 eligible Patients	100%	62%	100%	47%

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Footnote Key

Symbol Key

possible results

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1200 North State Street. IPT C2K100, Los Angeles, CA







## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint

		Accredited C	Organizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>2</b>	(ND) 2

	Compared to other Joint Commission Accredited Organizations					n
Measure	Explanation	Nospital	Nationwide	Average	State Top 10%	
Wedsure	Explanation	Results	Scored	Rate:	Scored	Rate:
	71.		at Least:		at Least:	
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Older Adults Age 65 and Older	This measure reports the number of patients age 65 and older discharged on two or more antipsychotic medications for which there was an appropriate justification.  Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.		100%	56%	100%	45%
Hours of Physical Restraint Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	11.80 (6114 Total Hours in Restraint)	N/A	0.52	N/A	1.21

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1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint



Measure Area

Services

Hospital-Based

Inpatient Psychiatric





## **National Quality Improvement Goals**

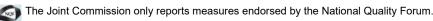
#### Reporting Period: July 2016 - June 2017

Commission
Accredited Organizations

Explanation
Nationwide
Statewide

This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.

		Cor	npared to o			on
		N	Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	3.00 (19 Total Hours in Restraint) <sup>3</sup>	N/A	0.31	N/A	0.11
Hours of Physical Restraint Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	6.91 (412 Total Hours in Restraint)	N/A	0.26	N/A	0.25



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1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 993







## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint Commission Accredited Organizations

		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Hospital-Based Inpatient Psychiatric Services	This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	<b>©</b> 2	(ID) 2

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statew			wide	
Measure Explanation		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Hours of Physical Restraint Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	13.24 (5625 Total Hours in Restraint)	N/A	0.62	N/A	1.40
Hours of Physical Restraint Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in physical restraints for every 1,000 hours of patient care. Physical restraint is any manual method or physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body or head freely when it is used as a restriction to manage a patient's behavior or restrict the patient's freedom of movement and is not a standard treatment for the patient's medical or psychiatric condition.	2.15 (59 Total Hours in Restraint) <sup>3</sup>	N/A	0.15	N/A	0.05
Hours of Seclusion Use per 1000 Patient Hours - Overall Rate	This measure reports the total hours patients were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	5.15 (2669 Total Hours in Seclusion)	N/A	0.39	N/A	0.60

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1200 North State Street. IPT C2K100, Los Angeles, CA



Measure Area

Hospital-Based Inpatient Psychiatric

Services





## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint

	Accredited Organizations		
Explanation	Nationwide	Statewide	
This category of evidenced based measures assesses the overall quality of care given to psychiatric patients.	© <sup>2</sup>	© <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewig			ewide	
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
		a a	at Least:		at Least:	
Hours of Seclusion Use Children Age 1 - 12	This measure reports the number of hours patients age 1 through 12 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	0.00 (0 Total Hours in Seclusion)	N/A	0.54	N/A	0.19
Hours of Seclusion Use Adolescents Age 13 - 17	This measure reports the number of hours patients age 13 through 17 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	0.93 (55 Total Hours in Seclusion)	N/A	0.22	N/A	0.14
Hours of Seclusion Use Adults Age 18 - 64	This measure reports the number of hours patients age 18 through 64 years were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	6.01 (2553 Total Hours in Seclusion)	N/A	0.45	N/A	0.69
Hours of Seclusion Use Older Adults Age 65 and Older	This measure reports the number of hours patients age 65 and older were kept in seclusion for every 1,000 hours of patient care. Seclusion is the involuntary confinement of a patient alone in a room or an area where the patient is physically prevented from leaving.	2.21 (61 Total Hours in Seclusion) <sup>3</sup>	N/A	0.05	N/A	0.06

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## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint				
Comm	ission			
Accredited Organizations				
Nationwide	Statewide			

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

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide			wide	
Measure	Explanation	Hospital	Top 10%	Average	Top 10%	Average
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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.	83% of 575 eligible Patients	100%	94%	100%	94%

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## **National Quality Improvement Goals**

Reporting Period: July 2016 - June 2017

Compared to other Joint **Accredited Organizations** 

Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> 2	<b>©</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				on	
		Nationwide			Statewide		
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% of 15 eligible Patients	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.	0% of 24 eligible Patlents	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.	63% of 117 eligible Patients	74%	52%	80%	63%	



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