DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

# Accreditation Quality Report





Version: 2 Date: 2/11/2019 DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, 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 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

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	y Last On-Site Survey Date
Ambulatory Care	Accredited	7/30/2018	6/5/2018	6/5/2018
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  Primary Stroke Center	Certification Decision  Certification	<b>Effective Date</b> 11/11/2016	Last Full Review Date 12/18/2018	v Last On-Site Review Date 12/18/2018
Certified Programs	<b>Certification Decision</b>	Effective Date	Last Full Review Date	v Last On-Site Review Date
Asthma, Pediatrics	Certification	3/6/2018	3/5/2018	3/5/2018

#### **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	
Ambulatory Care	2018National Patient Safety Goals	Ø	<b>©</b> *	
Hospital	2017National Patient Safety Goals	Ø	*	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	ND 2	<b>1</b> 2	
Jul 2017 - Jun 2018	Hospital-Based Inpatient Psychiatric Services	ND 2	(N) 2	
	Immunization	ND 2	2 <sup>2</sup>	
	Perinatal Care	ND 2	<b>№</b> 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.
- 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.

  10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting
- National Quality Forum Endorsement.

  There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







### **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:**

- Allergen Extract (Inpatient)
- 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)Hazardous Medication
- Compounding (Inpatient)Hematology/Oncology Unit
- Hematology/Oncology Uni (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Inpatient, Outpatient, Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)

- Ophthalmology (Surgical Services)
- 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)

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **Locations of Care**

Locations of Care	Available	Services
	<ul> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Mammography</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Neuro/Spine ICU (Intensive Care Unit)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Neurosurgery (Surgical Services)</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Nuclear Pharmacy (Inpatient)</li> </ul>	<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>Sterile Medication Compounding (Inpatient)</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>Urlogy (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul>
ounty of Los Angeles uditor Controller BA: LAC+USC Medical enter - Hawkins 720 E. 120th St.	Services:	

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **2018 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."

## **Ambulatory Care**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø
	Preventing Surgical Site Infections	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **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	8 8
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

DBA: Los Angeles County+University of Southern CA Medical Center,

1200 North State Street. IPT C2K100, Los Angeles, CA Org ID: 9931







## **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 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.	<b>№</b> <sup>2</sup>	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide		State	wide
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  145.00 minutes 712 eligible Patients	56.00	135.00	79.89	181.87
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.	508.00 minutes 712 eligible Patients	206.00	320.00	258.08	377.23

- 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 achieved the best possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- 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."

Compared to other Joint

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: July 2017 - June 2018

		Col	mpared to o	other Joint ed Organiz		on
		1	Nationwide			ewide
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 351 eligible Patients	100%	95%	100%	93%

- 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.

#### Footnote Key

Symbol Key

ossible results

ot displayed

Ø

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. This organization's performance is

below the target range/value.

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 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 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

Compared to other Joint Commission Accredited Organizations

		Accredited Organizations		
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>ND</b> 2	<b>№</b> 2	

		Col	mpared to o	other Joint ed Organiz		n
		1	Nationwide			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 20 eligible Patients	100%	96%	100%	96%

- 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 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.
- Not displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- 7. The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 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 2017 - June 2018

Commission
Accredited Organizations

Explanation
Nationwide
Statewide

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

		Col	mpared to o	other Joint ed Organiz		n
		1	Nationwide			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.	99% of 142 eligible Patients	100%	95%	100%	96%

- 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 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.
- Not displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- 7. The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center,

Org ID: 9931 1200 North State Street. IPT C2K100, Los Angeles, CA







## **National Quality Improvement Goals**

### This organization achieved the best

Reporting Period: July 2017 - June 2018

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

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide			ewide
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	100% of 160 eligible Patients	100%	95%	100%	92%

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

the patient recover.

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

## Symbol Kev

- possible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is below the target range/value.
- ot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center,

1200 North State Street. IPT C2K100, Los Angeles, CA Org ID: 9931







## **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

		Соі	npared to c Accredit	other Joint ed Organiz		on
		١	lationwide			wide
Measure	Explanation	Hospital Results	Top 10% Scored	Average Rate:	Top 10% Scored	Average Rate:
		results	at Least:	rtato.	at Least:	rtato.
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 29 eligible Patients	100%	93%	100%	94%

- 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 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.
- Not displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 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 valid.
- 7. The Measure results are based on a sample of patients.
- 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.
- 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." Compared to other Joint

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: July 2017 - June 2018

		Commission		
		Accredited Organizations		
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	<b>№</b> 2	

		Соі	npared to c			on
			Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored at Least:	Rate:	Scored at Least:	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.	₩ <b>D</b> 3	100%	63%	100%	56%
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 when the patient is also being treated with Clozapine.	₩ <b>D</b> 3	100%	40%	100%	57%

- 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 achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: July 2017 - June 2018

		Commission		
		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> <sup>2</sup>	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				
			lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	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 to one antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	₩ <u>0</u> 3	100%	50%	100%	58%

- 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.

#### Footnote Key

Symbol Key

possible results

ot displayed

Ø

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

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 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 valid.
- 7. The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

#### Reporting Period: July 2017 - June 2018

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.

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide			wide
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 or the addition of an antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozanine	3	100%	64%	100%	56%

- 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.

## Not displayed

Footnote Key

Symbol Kev

possible results

Ø

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. This organization's performance is

below the target range/value.

- 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.

  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
- valid.
- 7. The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

#### This organization achieved the best Reporting Period: July 2017 - June 2018 possible results

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation

Hospital-Based This category of evidenced based measures assesses the Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

**№** 2



Fo	otn	ote	Key

ot displayed

Symbol Kev

Ø

The Measure or Measure Set was not reported.

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.

- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- 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."

		Col	mpared to c	other Joint ed Organiz		n
			Nationwide	Ĭ	State	
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 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 or the addition of an antipsychotic medication or the addition of an antipsychotic medication when the patient is also being treated with Clozapine.	₩ <b>0</b> 3 ————	100%	58%	100%	54%
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.	13.79 (5955 Total Hours in Restraint)	N/A	0.46	N/A	0.82



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.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: July 2017 - June 2018

**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 c	other Joint ed Organiz		on
		N	lationwide			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.	4.48 (27 Total Hours in Restraint) <sup>3</sup>	N/A	0.34	N/A	0.15
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.	6.29 (381 Total Hours in Restraint)	N/A	0.24	N/A	0.21

- 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.

## ot displayed

Footnote Key

below the target range/value.

Symbol Kev

ossible results

Ø

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. This organization's performance is

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

### Reporting Period: July 2017 - June 2018

**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

Services						
		Col	mpared to d	other Joint	Commissio	on
			Accredit	ed Organiz		
			Nationwide			ewide
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.	16.66 (5527 Total Hours in Restraint)	N/A	0.53	N/A	0.95
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.	0.62 (21 Total Hours in Restraint)	N/A	0.17	N/A	0.10
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.	9.46 (4087 Total Hours in Seclusion)	N/A	0.35	N/A	0.43

- 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 Kev

- This organization achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- ot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931

Compared to other Joint







## **National Quality Improvement Goals**

#### This organization achieved the best Reporting Period: July 2017 - June 2018

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the (ND)<sup>2</sup>

**№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission				n
		Accredited Organizations				
			Nationwide			wide
Measure	Explanation	Hospital			Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			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	0.61	N/A	0.23
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.	1.00 (61 Total Hours in Seclusion)	N/A	0.21	N/A	0.13
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.	12.05 (3996 Total Hours in Seclusion)	N/A	0.40	N/A	0.49
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.	0.90 (30 Total Hours in Seclusion)	N/A	0.04	N/A	0.08

- 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.

#### Footnote Key

Symbol Key

ossible results

lot displayed

Ø

The Measure or Measure Set was not reported.

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.

- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center,

1200 North State Street. IPT C2K100, Los Angeles, CA Org ID: 9931







## **National Quality Improvement Goals**

## Reporting Period: July 2017 - June 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.	<b>№</b> <sup>2</sup>	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				
		Nationwide		Statewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		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.	86% of 487 eligible Patients	100%	94%	99%	93%

- 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 achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- lot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 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 valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.

DBA: Los Angeles County+University of Southern CA Medical Center, 1200 North State Street. IPT C2K100, Los Angeles, CA

Org ID: 9931







## **National Quality Improvement Goals**

Reporting Period: July 2017 - June 2018

Compared to	o other Joint		
Commission			
Accredited Organizations			
ationwide	Statewide		

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> 2	

				41 1-3t-	0	
		Compared to other Joint Commission Accredited Organizations				on
		Nationwide State		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.	100% of 20 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 12 eligible Patlents	0%	2%	0%	1%
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.	66% of 149 eligible Patients	73%	51%	79%	63%

- 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 achie

- 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.
- 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.
- The organization scored above 90% but was below most other organizations.
- The Measure results are not statistically valid.
- The Measure results are based on a sample of patients.
- 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.
- There were no eligible patients that met the denominator criteria.