

# Accreditation Quality Report





Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the prevention of medical errors such as surgery on the wrong side of the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

DBA: Paradise Valley Hospital, 2400 East Fourth Street, National City, CA



# **Summary of Quality Information**

#### Symbol Key 1

This organization achieved the best ossible results. 0 This organization's performance is above the target range/value. This organization's performance is  $\oslash$ similar to the target range/value. This organization's performance is e below the target range/value. This Measure is not applicable for this (14) rganization. Not displayed ND

#### **Footnote Key**

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
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- evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- **11.** There were no eligible patients that met the denominator criteria.

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

Accreditatio	on Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Human Ser	Health Care and rvices	Accredited	3/27/2019	7/19/2022	7/19/2022
🎯 Hospital		Accredited	12/4/2021	7/22/2022	9/29/2022
olimits Laboratory	7	Accredited	8/14/2021	8/13/2021	8/13/2021

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

Hospital

<b>Advanced Certification</b>	<b>Certification Decision</b>	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	<b>Review Date</b>
🥝 Primary Stroke Center	Certification	9/22/2021	9/21/2021	9/21/2021

### **Special Quality Awards**

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

2012 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations			
		Nationwide	Statewide		
Behavioral Health Care and Human Services	2016National Patient Safety Goals	$\bigotimes$	<sup>*</sup>		
Hospital	2021National Patient Safety Goals	Ø	*		

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

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# **Summary of Quality Information**

			Compared to other Joint Commission Accredited Organizations		
			Nationwide	Statewide	
		National Quality Improvement Goals:			
s	Reporting Period: Apr 2020 - Mar 2021	Perinatal Care		@ <sup>2</sup>	
	Laboratory	2021National Patient Safety Goals	${igodot}$	*	

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# **Locations of Care**

#### \* Primary Location

* Primary Location Locations of Care	Available Services
Prime Healthcare Paradise Valley LLC. * DBA: Paradise Valley Hospital 2400 E. Fourth Street	Joint Commission Advanced Certification Programs: <ul> <li>Primary Stroke Center</li> </ul> Services:
National City, CA 91950-2099	<ul> <li>Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> </ul>
Prime Healthcare Paradise Valley LLC. DBA: Paradise Valley Hospital Bayview Behavioral Health Campus 330 Moss Street Chula Vista, CA 91911	<ul> <li>Services:</li> <li>Behavioral Health (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization - Adult)</li> <li>General Laboratory Tests</li> </ul>
Prime Healthcare Paradise Valley LLC. 655 Euclid Ave, Ste 300 National City, CA 91950	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)

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# **2016 National Patient Safety Goals**

### **Behavioral Health Care and Human Services**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two Identifiers	Ø
Improve the safety of using medications.	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	Ø

### Symbol Key 3

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.

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# **2021 National Patient Safety Goals**

### Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	$\bigcirc$
	Reconciling Medication Information	$\bigcirc$
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	$\bigotimes$
	Marking the Procedure Site	$\bigcirc$
	Performing a Time-Out	$\bigcirc$

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Symbol Key 2

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### Prime Healthcare Paradise Valley LLC.

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# **National Quality Improvement Goals**

This organization achieved the best possible results This organization's performance is above the target range/value.	Reporting P	eriod: April 2020 - March 2021		
This organization's performance is similar to the target range/value. This organization's performance is			Comn	to other Joint nission Organizations
below the target range/value.				
Not displayed	Measure Area	Explanation	Nationwide	Statewide
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>2</b>	<b>⊘</b> <sup>2</sup>

Compared to other Joint Com Accredited Organization						າຣ	
			lationwide			ewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:	
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	<b>(</b>	16%	25%	16%	23%	
Elective Delivery	This measure reports the overall number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to less than 39 weeks gestation. An elective delivery is the delivery of a newborn(s) when the mother was not in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section.	0% of 60 eligible Patients	0%	2%	0%	2%	
Exclusive Breast Milk Feeding	This measure reports the overall number of newborns who are exclusively breast milk fed during the newborns entire hospitalization. Exclusive breast milk feeding is when a newborn receives only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines.	34% of 80 eligible Patients	71%	50%	80%	62%	
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	749% of 267 eligible Patients	212%	1780%	0%	1421%	
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	1498% of 267 eligible Patients	1508%	3084%	1258%	2777%	



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Null value or data not displayed.

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Org ID: 9975



# **National Quality Improvement Goals**

Reporting Peri	iod: Ap	ril 2020 - March 2021					
					pared to o Commiss edited Org		
Measure Area		Explanation		Nationwi	de	Statewide	Э
Perinatal Care		egory of evidenced based measures as mothers and newborns.	ssesses the	<b>(</b>	2	<b>™</b> <sup>2</sup>	
			Cor		other Joint ed Organiz	Commissic ations	n
			N	lationwide		State	wide
Measure		Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Aver Ra
Unexpected Complication Term Newborns per 100 livebirths - Severe Rate		The severe rate equals the number of patients with severe complications.	749% of 267 eligible	501%	1303%	505%	135



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# **2021 National Patient Safety Goals**

### Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø

### Symbol Key 3

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 The Goal is not applicable for this organization.