

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

Accreditation Program	ns Accreditation Decision	Effective	Last Full S	urvey Last On-Site
		Date	Date	Survey Date
Behavioral Health Care and Human Services	Accredited	7/20/2022	7/19/2022	7/19/2022
📀 Hospital	Accredited	7/23/2022	7/22/2022	9/29/2022
Aboratory	Accredited	8/4/2023	8/3/2023	8/3/2023

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

Hospital

Advanced Certification	Certification Decision	Effective	Last Full Review	w Last On-Site
Programs		Date	Date	Review Date
o Primary Stroke Center	Certification	4/19/2023	4/18/2023	4/18/2023

		Compared to other Joint Commission Accredited Organizations		
		Nationwide Statewide		
Behavioral Health Care and Human Services	2022National Patient Safety Goals	Ø	[*]	
Hospital	2022National Patient Safety Goals	Ø	*	
	National Quality Improvement Goals:			
Reporting Period: Jan 2021 - Dec 2021	Perinatal Care	@ ²	2 ²	
Laboratory	2023National Patient Safety Goals	Ø	*	

Symbol Key

0	This organization achieved the best possible results.
Ð	This organization's performance is better than the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is worse than the target range/value.
•••	This Measure is not applicable for this organization.
•	Not displayed

Footnote Key

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- 9. The measure results are temporarily suppressed pending resubmission of updated data.10. Test Measure: a measure being
- evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- **11.** There were no eligible patients that met the denominator criteria.
- 12. The measure rate is within optimal range.

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Locations of Care

Locations of Care Available Services		
Prime Healthcare Paradise Valley LLC DBA: Paradise Valley Hospital Bayview Behavioral Health Campus 330 Moss Street Chula Vista, CA 91911	 Valley LLC Primary Stroke Center Primary Stroke Center Services: Behavioral Health (Day Programs - Adult) (24 hour Acute Cerc/Cipie Stabilization Adult) 	
Prime Healthcare Paradise Valley LLC * DBA: Prime Healthcare Paradise Valley LLC 2400 E. Fourth Street National City, CA 91950	Acute Care/CrisisUnit)Stabilization - Adult)NeurosurCardiac Catheterization Lab (Surgical Services)Nuclear M (Imaging/Diagnostic Services)Nuclear M (Imaging/Diagnostic Services)CT Scanner (Imaging/Diagnostic Services)Ophthalm Services)Ear/Nose/Throat Surgery (Surgical Services)Othoped Services)EEG/EKG/EMG Lab (Imaging/Diagnostic Services)Outpatier Plastic St Services)Gastroenterology (Surgical Services)Post Ane (PACU) (RehabilitzGeneral Laboratory Tests (Imaging/Diagnostic Services)Rehabilitz StabilizatGl or Endoscopy Lab (Imaging/Diagnostic Services)Ultrasour (Imaging/Diagnostic StabilizatInpatient Unit (Inpatient) Interventional RadiologyUrology (Medicine (Diagnostic Services) hology (Surgical ic Surgery (Surgical ht Clinics (Outpatient urgery (Surgical sthesia Care Unit Inpatient) ation Unit (Inpatient, Acute Care/Crisis ion) hd (Diagnostic Services) Surgical Services) Surgical Services
Prime Healthcare Paradise Valley LLC 655 Euclid Ave, St2 300 National City, CA 91950	Services: General Laboratory Tests Outpatient Clinics (Outpatient) 	

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2022 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

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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2022 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	Ō
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	\bigcirc
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigotimes

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National Quality Improvement Goals

Reporting l	Period: Jan	nuary 2021 - December 2021					
					npared to c Commiss	sion	
Measure Area		Evaluation		Accr Nationwi	edited Org	anizations Statewide	
Perinatal Care		Explanation tegory of evidenced based measures a	ssesses the	Nationwi			-
	care of	mothers and newborns.		Ŭ			
			Co	mpared to o Accredit	other Joint ed Organiz		n
Measure		Explanation	Hospital	Nationwide Top	Average	State Top	wide Avera
Weddure		Explanation	Results	Perform er	Rate:	Perform er	Rat
				Threshol d:		Threshol d:	
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.	32% of 60 eligible Patients	••••••••••••••••••••••••••••••••••••••	26%	u.	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.	6% of 33 eligible Patients	0%	2%	0%	2%
Exclusive Breast Mi	k 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.	18% of 55 eligible Patients	71%	49%	80%	619
Unexpected Compli-		The severe rate equals the number of patients with severe complications.	Ð	5	13	5	1:

This information can also be viewed at https://hospitalcompare.io/

Null value or data not displayed.

Term Newborns per 1000

livebirths - Severe Rate

13

13

Symbol Key This organization achieved the best possible results This organization's performance is Ð better than the target range/value. This organization's performance is \oslash similar to the target range/value. This organization's performance is e worse than the target range/value. ot displayed ND

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

13 per 1000

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2023 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

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.