

# 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: Hemet Global Medical Center, 1117 East Devonshire Avenue, Hemet, CA



# **Summary of Quality Information**

Symbol Key	C.	m	hal	Kov
	3		DOL	Ney

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

#### **Footnote Key**

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

Accreditation Programs	Accreditation Decision	Effective	Last Full Survey	Last On-Site
		Date	Date	Survey Date
🮯 Hospital	Accredited	5/1/2021	4/30/2021	7/1/2021
🧼 Laboratory	Accredited	2/8/2020	2/7/2020	2/7/2020
oNursing Care Center	Accredited	4/30/2021	4/29/2021	4/29/2021

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

Hospital

	Compared to other Joint Commission Accredit Organizations			
		Nationwide	Statewide	
Hospital	2021National Patient Safety Goals	$\bigotimes$	<b>*</b>	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	<b>NO</b> <sup>2</sup>	2 <sup>2</sup>	
Jan 2020 - Dec 2020	Immunization	<b>1</b>	2 <sup>2</sup>	
	Perinatal Care	<b>ND</b> <sup>2</sup>	2 <sup>2</sup>	
Laboratory	2020National Patient Safety Goals	Ø	<b>*</b>	
Nursing Care Center	2021National Patient Safety Goals	$\bigotimes$	©*	

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

1117 East Devonshire Avenue, Hemet, CA



# **Locations of Care**

Locations of Care	Available Services
Hemet Valley Healthcare Center 371 N. Weston Avenue Hemet, CA 92543	Other Clinics/Practices located at this site: <ul> <li>Hemet Valley Healthcare Center</li> <li>Hemet Valley Recovery Center</li> </ul> <li>Services: <ul> <li>General Laboratory Tests</li> <li>Inpatient Unit (Inpatient)</li> <li>Medical Detoxification (Inpatient)</li> <li>Rehabilitation Services</li> <li>Skilled Nursing Care</li> </ul> </li>
Hemet Valley Medical Center Clinical Lab * DBA: Hemet Global Medical Center 1117 East Devonshire Hemet, CA 92543	<ul> <li>Services:</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Coronary Care Unit (Inpatient)</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>Gastroenterology (Surgical Services)</li> <li>Garrad Laboratory Tests</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Non-Sterle Medication Compounding (Inpatient)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Macdical Formatice (Inpatient)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Normal Newborn Nursery</li> <li>Normal Newborn Nursery</li> <li>Normal Newborn Nursery</li> <li>(Inpatient)</li> <li>Nuclear Medicine</li> <li>(Imaging/Diagnostic Services)</li> <li>Services)</li> <li>Services)&lt;</li></ul>

Quality Check®

## KPC Global Medical Centers, Inc.

DBA: Hemet Global Medical Center, 1117 East Devonshire Avenue, Hemet, CA



# **Locations of Care**

#### \* Primary Location

Locations of Care	
Medical Arts	
Building-Radiation	S
Oncology Services	
301 San Jacinto Street	
Hemet, CA 92543	
	Medical Arts Building-Radiation Oncology Services 301 San Jacinto Street

#### ervices:

• Outpatient Clinics (Outpatient)

Available Services

DBA: Hemet Global Medical Center, 1117 East Devonshire Avenue, Hemet, CA



# **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	$\bigcirc$
	Marking the Procedure Site	$\bigcirc$
	Performing a Time-Out	$\bigotimes$

### 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.

DBA: Hemet Global Medical Center, 1117 East Devonshire Avenue, Hemet, CA

Org ID: 9864



# **National Quality Improvement Goals**

#### Reporting Period: January 2020 - December 2020

			o other Joint hission
		Accredited C	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.	@ <sup>2</sup>	@ <sup>2</sup>

				other Joint ed Organiz	ations	
		N	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.	2 385.00 minutes 563 eligible Patients	54.00	151.00	71.94	173.83
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.	COD 2 619.00 minutes 563 eligible Patients	221.00	370.00	278.23	395.81

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

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# **National Quality Improvement Goals**

#### Reporting Period: January 2020 - December 2020

			o other Joint hission
		Accredited C	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> <sup>2</sup>

		Cor	mpared to c Accredite	other Joint ed Organiz	ations	
		Ν	lationwide		State	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.	96% of 488 eligible Patients	99%	91%	99%	94%

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# **National Quality Improvement Goals**

#### Reporting Period: January 2020 - December 2020

		Compared to Comm	o other Joint hission
		Accredited C	rganizations
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> <sup>2</sup>	@ <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				
			lationwide		State	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 49 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.	28% of 121 eligible Patients	71%	51%	80%	63%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	343% of 291 eligible Patients	200%	1800%	0%	1500%
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.	4467% of 291 eligible Patients	1500%	3100%	1300%	2800%



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# **National Quality Improvement Goals**

#### Reporting Period: January 2020 - December 2020

			Compared to other Joint Commission Accredited Organizations			
Measure Area	Explanation		Nationwide		Statewide	
	This category of evidenced based measure care of mothers and newborns.	s assesses the	ne 💽 2		<b>2</b>	
			Compared to other Joint Commission Accredited Organizations Nationwide Statewide			
Measure	Explanation	Hospital Results		Average Rate:	Top 10% Scored at Least:	Averaç Rate
Unexpected Complication Term Newborns per 1000 livebirths - Severe Rate	s in The severe rate equals the number of patients with severe complication	S. 4123% of 291 eligible Patients	500%	1300%	500%	14009



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# **2020 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.
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# **2021 National Patient Safety Goals**

# **Nursing Care Center**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the safety of using medications.	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	$\bigcirc$
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
Prevent health care-associated pressure ulcers (decubitus ulcers).	Assessing Resident Risk for Pressure Ulcers	Ø

#### Symbol Key

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