



Organizations that have achieved
The Gold Seal of Approval® from
The Joint Commission®



Quality Report



WSNCHS North, Inc



DBA: St. Joseph Hospital
HCO ID: 5716
4295 Hempstead Turnpike
Bethpage, NY, 11714
(516) 579-6000
<https://stjosephhospital.chsli.org/>

Summary of Quality Information

Accreditation Programs

[View Accreditation History](#)

	Hospital	Accreditation Decision Accredited	Effective Date 9/14/2017	Last Full Survey Date 9/13/2017	Last On-Site Survey Date 9/13/2017
	Laboratory	Accreditation Decision Accredited	Effective Date 2/8/2019	Last Full Survey Date 2/7/2019	Last On-Site Survey Date 2/7/2019

Advanced Certification Programs

[View Certification History](#)



[Primary Stroke Center](#)

Certification Decision

[Certification](#)

Effective Date

6/16/2018

Last Full Survey Date

6/15/2018

Last On-Site Survey Date

6/15/2018

Sites

WSNCHS North, Inc

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Available Services

- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Toxicology
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

Certification Programs




- Primary Stroke Center

Complementary Agreements

Hospital - Accredited by [UHMS Clinical Hyperbaric Facility - Level 2](#)

National Patient Safety Goals and National Quality Improvement Goals

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
- ⊖/N/A This measure is not applicable for this organization
- ⊖/N/D Not displayed

Measures Footnote Key

- The measure or measure set was not reported.
- The measure set does not have an overall result.
- The number 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.
- 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.

The Joint Commission only reports measures endorsed by the [National Quality Forum](#).

* This information can also be viewed at [Hospital Compare](#).

** Indicates per 1000 hours of patient care.

*** The measure was not in effect for this quarter.

---- Null value or data not displayed.

Hospital	2017 National Patient Safety Goals	Nationwide Comparison: ⊖	Statewide Comparison: ⊖/N/A
Laboratory	2019 National Patient Safety Goals	Nationwide Comparison: ⊖	Statewide Comparison: ⊖/N/A
	Reporting Period: October 2018 - September 2019 National Quality Improvement Goals:		
	Emergency Department	National Comparison: ⊖/N/D ²	Statewide Comparison: ⊖/N/D ²

[New Changes to Quarterly Measure](#)

[Download Quarterly Measure Results](#)



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* State results are not calculated for the National Patient Safety Goals.

National Quality Improvement Goals:

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Measure Area	Nationwide	Statewide
Emergency Department Compared to Other Joint Commission Accredited Organizations		
Read More		

Measure	Hospital Results	Nationwide Top 10% Scored at Most	Weighted Median	Statewide Top 10% Scored at Most	Weighted Median	Average Rate	
Admit Decision Time to ED Departure Time for Admitted Patients	 117.00 minutes 1252 eligible Patients	Nationwide Statewide	Top 10% Scored at Least	55.00	134.00	74.18	192.69
Read More							
See Quarterly Results							

Quarterly Measure Results

Number of Eligible Patients
 Weighted Median Minutes
 Nationwide Weighted Median Minutes

Oct - Dec 2018

1252
 101.00
 134.85

Jan - Mar 2019

1252
 141.00
 148.85

Apr - Jun 2019

1252
 115.00
 129.03

Jul - Sep 2019

1252
 113.00
 123.40