



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



Quality Report



Memorial Hospital of Sweetwater County



DBA: Acute Care Hospital
HCO ID: 9352
1200 College Drive
Rock Springs, WY, 82901
(307) 362-3711
sweetwatermemorial.com

Summary of Quality Information

Accreditation Programs

[View Accreditation History](#)

| | | | | | |
|---|----------------------------|---|-------------------------------------|--|---|
|  | Hospital | Accreditation Decision Accredited | Effective Date 5/8/2021 | Last Full Survey Date 5/7/2021 | Last On-Site Survey Date 5/7/2021 |
|  | Laboratory | Accreditation Decision Accredited | Effective Date 11/16/2019 | Last Full Survey Date 11/15/2019 | Last On-Site Survey Date 11/15/2019 |

Sites

Clinics of Memorial Hospital of Sweetwater County

DBA: Medical Office Building
3000 College Drive
Rock Springs, WY, 82901

Available Services

- General Laboratory Tests
- Outpatient Clinics (Outpatient)

Memorial Hospital Clinics

DBA: Outpatient Ambulatory Clinic
1180 College Drive
Rock Springs, WY, 82901

Available Services

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Dialysis (Outpatient)
- General Laboratory Tests
- Hazardous Medication Compounding (Outpatient)
- Outpatient Clinics (Outpatient)
- Perform Invasive Procedure (Outpatient)

Other Clinics/Practices Located at This Site:

- Rock Springs Family Practice
- Sweetwater Plastic Surgery
- University of Utah Clinic

Memorial Hospital of Sweetwater County

DBA: Acute Care Hospital

1200 College Drive







Rock Springs, WY, 82901

Available Services

- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Nuclear Pharmacy (Inpatient)
- Orthopedic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Toxicology
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)

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
-  This measure is not applicable for this organization
-  Not displayed

Measures Footnote Key

1. The measure or measure set was not reported.
2. The measure set does not have an overall result.
3. The number 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.

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.

| | | | |
|--|--|--|---|
| Laboratory | 2019 National Patient Safety Goals | Nationwide Comparison: ✓ | Statewide Comparison: N/A |
| Hospital | 2021 National Patient Safety Goals | Nationwide Comparison: ✓ | Statewide Comparison: N/A |
| Reporting Period: January 2019 - December 2019 National Quality Improvement Goals: | | | |
| | Emergency Department | National Comparison: N/D ² | Statewide Comparison: N/D ² |
| | Perinatal Care | National Comparison: N/D ² | Statewide Comparison: N/D ² |

[New Changes to Quarterly Measure](#)

[Download Quarterly Measure Results](#)

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

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

National Quality Improvement Goals:

Memorial Hospital of Sweetwater County

HCO ID: 9352
 1200 College Drive
 Rock Springs , WY, 82901

| Measure Area | Nationwide | Statewide |
|--|------------|-----------|
| Perinatal Care Compared to Other Joint Commission Accredited Organizations | 2 | 2 |
| Read More | | |

| Measure | Hospital Results | Nationwide Top 10% Scored at Least | Average Rate | Statewide Top 10% Scored at Least | Average Rate | |
|---------------------------------------|----------------------------|------------------------------------|-------------------------|-----------------------------------|--------------|---------------------------|
| Elective Delivery | 0% of 44 Eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 0% | 2% | Average Rate _____3_____3 |
| Read More | | | | | | |
| See Quarterly Results | | | | | | |

Quarterly Measure Results

| | |
|-----------------------------|----|
| Number of Eligible Patients | 44 |
| Rate | 0% |
| Nationwide Average | 2% |
| Jan - Mar 2019 | |
| 44 | |
| 0% | |
| 2% | |
| Apr - Jun 2019 | |
| 44 | |
| 0% | |
| 2% | |
| Jul - Sep 2019 | |
| 44 | |
| 0% | |
| 2% | |
| Oct - Dec 2019 | |
| 44 | |
| 0% | |
| 2% | |

| Measure | Hospital Results | Nationwide Top 10% Scored at Least | Average Rate | Statewide Top 10% Scored at Least | Average Rate | | |
|--|------------------------------|------------------------------------|-------------------------|-----------------------------------|--------------|--------------|----------|
| Cesarean Birth Read More See Quarterly Results | ⊕ 0% of Eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 12% | 25% | Average Rate | ___3___3 |

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

___1

___1

25%

Apr - Jun 2019

___1

___1

25%

Jul - Sep 2019

___1

___1

25%

Oct - Dec 2019

___1

___1

25%

| Measure | Hospital Results | Nationwide Top 10% Scored at Least | Average Rate | Statewide Top 10% Scored at Least | Average Rate | | |
|---|-----------------------------------|------------------------------------|-------------------------|-----------------------------------|--------------|--------------|----------|
| Exclusive Breast Milk Feeding Read More See Quarterly Results | ⊖ 41% of 145 Eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 73% | 51% | Average Rate | ___3___3 |

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

145

38%

51%

Apr - Jun 2019

145

56%

52%

Jul - Sep 2019

145

38%


51%

Oct - Dec 2019

145

33%

50%

| Measure | Hospital Results | Nationwide Top 10% Scored at Least | Average Rate | Statewide Top 10% Scored at Least | Average Rate | | |
|--|---|------------------------------------|-------------------------|-----------------------------------|--------------|--------------|---------------|
| Antenatal Steroids Read More (No Quarterly Result are available) |  3 ---- | Nationwide Statewide | Top 10% Scored at Least | 100% | 98% | Average Rate | ____ 3 ____ 3 |

Quarterly Measure Results

Number of Eligible Patients
Rate

Nationwide Average

Jan - Mar 2019

____ 1

____ 1

98%

Apr - Jun 2019

____ 1

____ 1

99%

Jul - Sep 2019

____ 1

____ 1

99%

Oct - Dec 2019

____ 1

____ 1

98%

| Measure | Hospital Results | Nationwide | Average | Statewide | Average | | |
|--|--|-------------------------|-------------------------|-------------------------|---------|--------------|---------------|
| | | Top 10% Scored at Least | Rate | Top 10% Scored at Least | Rate | | |
| Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate | N/D 10 28% of 390 Eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 17% | 32% | Average Rate | ____ 3 ____ 3 |
| Read More See Quarterly Results | | | | | | | |

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

390

36%

32%

Apr - Jun 2019

390

12%

31%

Jul - Sep 2019

390

41%

32%

Oct - Dec 2019

390

20%

32%

| Measure | Hospital Results | Nationwide | Average | Statewide | Average | | |
|---|--|-------------------------|-------------------------|-------------------------|---------|--------------|--------------|
| | | Top 10% Scored at Least | Rate | Top 10% Scored at Least | Rate | | |
| Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate | N/D 10 13% of 390 Eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 6% | 13% | Average Rate | _____3_____3 |
| Read More See Quarterly Results | | | | | | | |

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

390

9%

14%

Apr - Jun 2019

390

0%

13%

Jul - Sep 2019

390

31%

14%

Oct - Dec 2019

390

10%

13%

| Measure | Hospital Results | Nationwide | Average | Statewide | Average | | |
|---|---|-------------------------|-------------------------|-------------------------|---------|--------------|--------------|
| | | Top 10% Scored at Least | Rate | Top 10% Scored at Least | Rate | | |
| Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate | ND 10 15% of 390 Eligible Patients | Nationwide | Top 10% Scored at Least | 3% | 18% | Average Rate | _____3_____3 |
| Read More See Quarterly Results | | Statewide | Top 10% Scored at Least | | | | |

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

390

27%

18%

Apr - Jun 2019

390

12%

18%

Jul - Sep 2019

390

10%

19%

Oct - Dec 2019

390

10%

19%

Measure Area

Nationwide Statewide

Emergency Department Compared to Other Joint Commission
[Read More](#) Accredited Organizations

ND 2

ND 2

| Measure | Hospital Results | Nationwide | Weighted Median | Statewide | | | |
|--------------------------------------|---|------------------------|-------------------------|------------------------|-----------------|--------------|------------|
| | | Top 10% Scored at Most | | Top 10% Scored at Most | Weighted Median | Average Rate | |
| Admit Decision Time to ED | ND 2 | | | | | | |
| Departure Time for Admitted Patients | 119.00 minutes 315 eligible Patients | Nationwide Statewide | Top 10% Scored at Least | 55.00 | 133.00 | Average Rate | 38.1774.63 |
| | | | | | | | |

[Read More](#)

[See Quarterly Results](#)

Quarterly Measure Results

Number of Eligible Patients
Weighted Median Minutes
Nationwide Weighted Median Minutes

Jan - Mar 2019

315
145.00
149.03

Apr - Jun 2019

315
107.00
129.15

Jul - Sep 2019

315
112.00
123.92

Oct - Dec 2019

315
104.00
129.12