Quality Report
## Montefiore New Rochelle Hospital

**HCO ID:** 5807  
**Address:** 16 Guion Place, New Rochelle, NY, 10802  
**Phone:** (914) 365-3600  
**Website:** [www.montefiore.org](http://www.montefiore.org)

### Summary of Quality Information

#### Accreditation Programs

**View Accreditation History**

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Accreditation Decision</th>
<th>Effective Date</th>
<th>Last Full Survey Date</th>
<th>Last On-Site Survey Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accredited</td>
<td>2/1/2019</td>
<td>1/31/2019</td>
<td>1/31/2019</td>
<td></td>
</tr>
</tbody>
</table>

#### Core Certification Programs

**View Certification History**

**Joint Replacement - Hip**

<table>
<thead>
<tr>
<th>Certification Decision</th>
<th>Effective Date</th>
<th>Last Full Survey Date</th>
<th>Last On-Site Survey Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification</td>
<td>11/13/2018</td>
<td>11/12/2018</td>
<td>11/12/2018</td>
</tr>
</tbody>
</table>

**Joint Replacement - Knee**

<table>
<thead>
<tr>
<th>Certification Decision</th>
<th>Effective Date</th>
<th>Last Full Survey Date</th>
<th>Last On-Site Survey Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification</td>
<td>11/13/2018</td>
<td>11/12/2018</td>
<td>11/12/2018</td>
</tr>
</tbody>
</table>
Sites

**Montefiore New Rochelle Cardiac Rehab**
DBA: Montefiore New Rochelle Cardiac Rehab  
2365 Boston Post Road  
Larchmont, NY, 10538

**Available Services**

- Single Specialty Practitioner (Outpatient )

**Montefiore| New Rochelle Hospital**
DBA: Montefiore| New Rochelle Hospital  
16 Guion Place  
New Rochelle, NY, 10802

**Available Services**

- CT Scanner (Imaging/Diagnostic Services )  
- Ear/Nose/Throat Surgery (Surgical Services )  
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services )  
- Gastroenterology (Surgical Services )  
- Gynecological Surgery (Surgical Services )  
- Gynecology (Inpatient )  
- Inpatient Unit (Inpatient )  
- Interventional Radiology (Imaging/Diagnostic Services )  
- Labor & Delivery (Inpatient )  
- Medical /Surgical Unit (Inpatient )  
- Medical ICU (Intensive Care Unit )  
- Neurosurgery (Surgical Services )  
- Non-Sterile Medication Compounding (Inpatient )  
- Normal Newborn Nursery (Inpatient )  
- Nuclear Medicine (Imaging/Diagnostic Services )  
- Orthopedic Surgery (Surgical Services )  
- Orthopedic/Spine Unit (Inpatient )  
- Outpatient Clinics (Outpatient )  
- Post Anesthesia Care Unit (PACU) (Inpatient )  
- Sleep Laboratory (Sleep Laboratory )  
- Sterile Medication Compounding (Inpatient )  
- Surgical Unit (Inpatient )  
- Teleradiology (Imaging/Diagnostic Services )  
- Thoracic Surgery (Surgical Services )  
- Ultrasound (Imaging/Diagnostic Services )  
- Urology (Surgical Services )  
- Vascular Surgery (Surgical Services )

**Certification Programs**

- Joint Replacement - Hip  
- Joint Replacement - Knee
Special Quality Awards

Due to our commitment to accurate data reporting, The Joint Commission is suspending the practice of updating Special Quality Awards until further notice

- 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- 2014 Silver Plus Get With The Guidelines - Stroke

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.
**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.

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**National Quality Improvement Goals:**

**Montefiore New Rochelle Hospital**

HCO ID: 5807
16 Guion Place
New Rochelle, NY, 10802

<table>
<thead>
<tr>
<th>Measure Area</th>
<th>Nationwide</th>
<th>Statewide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perinatal Care</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Measure</th>
<th>Hospital</th>
<th>Nationwide</th>
<th>Statewide</th>
<th>Average</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elective Delivery</td>
<td>2% of 42 Eligible Patients</td>
<td>Top 10% Scored at Least</td>
<td>0%</td>
<td>2%</td>
<td>0% 1%</td>
</tr>
<tr>
<td>Measure</td>
<td>Hospital Results</td>
<td>Nationwide Top 10% Scored at Least</td>
<td>Average Rate</td>
<td>Statewide Top 10% Scored at Least</td>
<td>Average Rate</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------</td>
<td>-----------------------------------</td>
<td>--------------</td>
<td>-----------------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Exclusive Breast Milk Feeding</td>
<td>12% of 397 Eligible Patients</td>
<td>Nationwide Top 10% Scored at Least</td>
<td>73%</td>
<td>Statewide Top 10% Scored at Least</td>
<td>52%</td>
</tr>
</tbody>
</table>

See Quarterly Results
<table>
<thead>
<tr>
<th>Measure</th>
<th>Hospital Results</th>
<th>Nationwide Top 10% Scored at Least</th>
<th>Average Rate</th>
<th>Statewide Top 10% Scored at Least</th>
<th>Average Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal Steroids</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

100% of 5 Eligible Patients

Nationwide Statewide Top 10% Scored at Least 100% 98% Average Rate 100% 98%
# Quarterly Measure Results

<table>
<thead>
<tr>
<th>Number of Eligible Patients</th>
<th>Rate</th>
<th>Nationwide Average</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Jul - Sep 2018</strong></td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>98%</td>
</tr>
<tr>
<td><strong>Oct - Dec 2018</strong></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>98%</td>
</tr>
<tr>
<td><strong>Jan - Mar 2019</strong></td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>98%</td>
</tr>
<tr>
<td><strong>Apr - Jun 2019</strong></td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>99%</td>
</tr>
</tbody>
</table>

## Measure Area

<table>
<thead>
<tr>
<th>Measure</th>
<th>Hospital Results</th>
<th>Nationwide Top 10% Scored at Most</th>
<th>Weighted Median</th>
<th>Statewide Top 10% Scored at Most</th>
<th>Weighted Median</th>
<th>Average Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admit Decision Time to ED</td>
<td>146.00 minutes</td>
<td>55.00</td>
<td>82.19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Departure Time for Admitted Patients</td>
<td>785 eligible</td>
<td>135.00</td>
<td>192.77</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of Eligible Patients</td>
<td>Weighted Median Minutes</td>
<td>Nationwide Weighted Median Minutes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----------------------------</td>
<td>-------------------------</td>
<td>-----------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Jul - Sep 2018</strong></td>
<td>785</td>
<td>158.00</td>
<td>127.74</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Oct - Dec 2018</strong></td>
<td>785</td>
<td>156.00</td>
<td>134.78</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Jan - Mar 2019</strong></td>
<td>785</td>
<td>162.00</td>
<td>148.74</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Apr - Jun 2019</strong></td>
<td>785</td>
<td>108.00</td>
<td>129.03</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>