Quality Report

Organizations that have achieved
The Gold Seal of Approval® from
The Joint Commission®
Levindale Hebrew Geriatric Center and Hospital

HCO ID: 2544
2434 West Belvedere Avenue
Baltimore, MD, 21215
(410) 601-2400
www.lifebridgehealth.org

Summary of Quality Information

Accreditation Programs

<table>
<thead>
<tr>
<th>Site</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>Hospital</td>
<td>Accredited</td>
<td>2/4/2022</td>
<td>2/3/2022</td>
<td>2/3/2022</td>
</tr>
</tbody>
</table>

Sites

Levindale Hebrew Geriatric Center and Hospital, Inc.
2434 West Belvedere Avenue
Baltimore, MD, 21215-5299

Available Services

- Behavioral Health (Day Programs - Adult)
- Behavioral Health (Partial Hospitalization - Adult)
- Dementia Care
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Geriatric Psychiatric Unit
- Inpatient Unit (Inpatient)
- Long Term Acute Care Unit (Inpatient)
- Non-Sterile Medication Compounding (Inpatient)
- Rehabilitation Services
- Skilled Nursing Care
- Traumatic Brain Injury
- Ultrasound (Imaging/Diagnostic Services)
- Ventilator 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
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.

--- Null value or data not displayed.

** Indicates per 1000 hours of patient care.

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

The Joint Commission only reports measures endorsed by the National Quality Forum.
* This information can also be viewed at Hospital Compare.

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.

Hospital 2022 National Patient Safety Goals Nationwide Comparison: Statewide Comparison:

<table>
<thead>
<tr>
<th>Hospital</th>
<th>2022 National Patient Safety Goals</th>
<th>Nationwide Comparison:</th>
<th>Statewide Comparison:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>✔</td>
<td>❌</td>
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