Quality Report

The Joint Commission®
## Summary of Quality Information

### Accreditation Programs

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

### Core Certification Programs

<table>
<thead>
<tr>
<th>Certification Program</th>
<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>Joint Replacement - Hip</td>
<td>Certification</td>
<td>11/13/2018</td>
<td>11/12/2018</td>
<td>11/12/2018</td>
</tr>
<tr>
<td>Joint Replacement - Knee</td>
<td>Certification</td>
<td>11/13/2018</td>
<td>11/12/2018</td>
<td>11/12/2018</td>
</tr>
</tbody>
</table>
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.

National Quality Improvement Goals:

Montefiore New Rochelle Hospital

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

Measure Area
Perinatal Care Compared to Other Joint Commission Accredited Organizations

<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>Elective Delivery</td>
<td>☑</td>
<td>2% of 42 Eligible Patients</td>
<td>Top 10% Scored at Least</td>
<td>0%</td>
<td>2%</td>
</tr>
</tbody>
</table>
### Quarterly Measure Results

<table>
<thead>
<tr>
<th></th>
<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>42</td>
<td>0%</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Oct - Dec 2018</strong></td>
<td>42</td>
<td>0%</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Jan - Mar 2019</strong></td>
<td>42</td>
<td>0%</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Apr - Jun 2019</strong></td>
<td>42</td>
<td>13%</td>
<td>2%</td>
</tr>
</tbody>
</table>

#### Exclusive Breast Milk Feeding

- **Hospital Results**: 12% of 397 Eligible Patients
- **Nationwide Average**: Top 10% Scored at Least 73%
- **Statewide Average**: Top 10% Scored at Least 52%
- **Average Rate**: 62% 37%
## Quarterly Measure Results

<table>
<thead>
<tr>
<th>Period</th>
<th>Number of Eligible Patients</th>
<th>Rate</th>
<th>Nationwide Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul - Sep 2018</td>
<td>397</td>
<td>13%</td>
<td>52%</td>
</tr>
<tr>
<td>Oct - Dec 2018</td>
<td>397</td>
<td>15%</td>
<td>51%</td>
</tr>
<tr>
<td>Jan - Mar 2019</td>
<td>397</td>
<td>10%</td>
<td>51%</td>
</tr>
<tr>
<td>Apr - Jun 2019</td>
<td>397</td>
<td>11%</td>
<td>52%</td>
</tr>
</tbody>
</table>

### Antenatal Steroids

- **Hospital Results**: 100% of 5 Eligible Patients
- **Nationwide**: Top 10% Scored at Least
- **Average Rate**: 100%
- **Statewide**: Top 10% Scored at Least
- **Average Rate**: 98%
- **Average Rate Overall**: 100% 98%
<table>
<thead>
<tr>
<th>Measure Area</th>
<th>Nationwide</th>
<th>Statewide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Department Compared to Other Joint Commission Accredited Organizations</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

<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 Patients</td>
<td>135.00</td>
<td>192.77</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Quarterly Measure Results

<table>
<thead>
<tr>
<th></th>
<th>Number of Eligible Patients</th>
<th>Weighted Median Minutes</th>
<th>Nationwide Weighted Median Minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Jul - Sep 2018</strong></td>
<td>785</td>
<td>158.00</td>
<td>127.74</td>
</tr>
<tr>
<td><strong>Oct - Dec 2018</strong></td>
<td>785</td>
<td>156.00</td>
<td>134.78</td>
</tr>
<tr>
<td><strong>Jan - Mar 2019</strong></td>
<td>785</td>
<td>162.00</td>
<td>148.74</td>
</tr>
<tr>
<td><strong>Apr - Jun 2019</strong></td>
<td>785</td>
<td>108.00</td>
<td>129.03</td>
</tr>
</tbody>
</table>