



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



Quality Report





Schuyler Hospital, Inc.

HCO ID: 4130
220 Steuben Street
Montour Falls, NY, 14865
(607) 535-7121
www.schuylerhospital.org

Summary of Quality Information

Accreditation Programs

[View Accreditation History](#)



[Critical Access Hospital](#)

Accreditation Decision
[Accredited](#)

Effective Date
4/4/2019

Last Full Survey Date
4/3/2019

Last On-Site Survey Date
4/2/2021



[Laboratory](#)

Accreditation Decision
[Accredited](#)

Effective Date
5/24/2019

Last Full Survey Date
5/23/2019

Last On-Site Survey Date
5/23/2019

Sites

Primary Care Center, Ovid

2138 West Seneca Street
Ovid, NY, 14521

Available Services

- General Laboratory Tests
- Outpatient Clinics (Outpatient)

Schuyler Hospital Montour Falls Extension Clinic

401 West Main Street
Montour Falls, NY, 14865

Available Services

- General Laboratory Tests
- Outpatient Clinics (Outpatient)

Schuyler Hospital Primary Care Center

230 Steuben Street
Montour Falls, NY, 14865

Available Services

- General Laboratory Tests
- Outpatient Clinics (Outpatient)

Schuyler Hospital September Hill Building

250 Steuben Street
Montour Falls, NY, 14865

Available Services

- Outpatient Clinics (Outpatient)

Schuyler Hospital, Inc.







220 Steuben Street
Montour Falls, NY, 14865

Available Services

- Acute Care
- 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)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Mammography (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Sleep Laboratory (Sleep Laboratory)
- Swing Beds
- Toxicology
- Ultrasound (Imaging/Diagnostic 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: 
Critical Access Hospital	2019 National Patient Safety Goals	Nationwide Comparison: 	Statewide Comparison: 
Reporting Period: January 2019 - December 2019			
National Quality Improvement Goals:			
	Emergency Department	National Comparison:  2	Statewide Comparison:  2
	Immunization	National Comparison:  2	Statewide Comparison:  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

Emergency Department Compared to Other Joint Commission Accredited Organizations

Nationwide Statewide

[Read More](#)

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Measure	Hospital Results	Nationwide Top 10% Scored at Most	Weighted Median	Statewide Top 10% Scored at Most	Weighted Median	Average Rate	
Median Time from ED Arrival to ED Departure for Admitted ED Patients	261.00 minutes 309 eligible Patients	Nationwide Statewide	Top 10% Scored at Least	200.00	350.00	246.86	384.50
Read More See Quarterly Results							

Quarterly Measure Results

Number of Eligible Patients
Weighted Median Minutes
Nationwide Weighted Median Minutes

Jan - Mar 2019

309
243.00
353.47

Apr - Jun 2019

309
266.00
344.67

Jul - Sep 2019

309
248.00
338.84

Oct - Dec 2019

309
285.00
360.02

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

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate	
Influenza Immunization	90% of 147 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	99%	92%	Average Rate 98% 91%
Read More See Quarterly Results						

Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

Jan - Mar 2019

147

99%

93%

Apr - Jun 2019

1

1

1

Jul - Sep 2019

1

1

1

Oct - Dec 2019

147

82%

91%