



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



Quality Report



WSNCHS North, Inc



DBA: St. Joseph Hospital
HCO ID: 5716
4295 Hempstead Turnpike
Bethpage, NY, 11714
(516) 579-6000
<https://stjosephhospital.chsli.org/>

Summary of Quality Information

Accreditation Programs

[View Accreditation History](#)

	Hospital	Accreditation Decision Accredited	Effective Date 9/14/2017	Last Full Survey Date 9/13/2017	Last On-Site Survey Date 9/13/2017
	Laboratory	Accreditation Decision Accredited	Effective Date 2/8/2019	Last Full Survey Date 2/7/2019	Last On-Site Survey Date 2/7/2019

Advanced Certification Programs

[View Certification History](#)



[Primary Stroke Center](#)

Certification Decision

[Certification](#)

Effective Date

6/16/2018

Last Full Survey Date

6/15/2018

Last On-Site Survey Date

6/15/2018

Sites

WSNCHS North, Inc

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Available Services

- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Toxicology
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

Certification Programs




- Primary Stroke Center

Complementary Agreements

Hospital - Accredited by [UHMS Clinical Hyperbaric Facility - Level 2](#)

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
- ⊖/A This measure is not applicable for this organization
- ⊖/D 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.

Hospital	2017 National Patient Safety Goals	Nationwide Comparison:	Statewide Comparison:
Laboratory	2019 National Patient Safety Goals	Nationwide Comparison:	Statewide Comparison:
	Reporting Period: April 2018 - March 2019		
	National Quality Improvement Goals:		
	Emergency Department	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	Nationwide	Statewide
Emergency Department Compared to Other Joint Commission Accredited Organizations	N/D 2	N/D 2
Read More		

Measure	Hospital Results	Nationwide Top 10% Scored at Most	Weighted Median	Statewide Top 10% Scored at Most	Weighted Median	Average Rate	
Admit Decision Time to ED Departure Time for Admitted Patients	N/D 2 113.00 minutes 1250 eligible Patients	Nationwide Statewide	Top 10% Scored at Least	55.00	136.00	84.51	193.30
Read More							
See Quarterly Results							

Quarterly Measure Results

Number of Eligible Patients
 Weighted Median Minutes
 Nationwide Weighted Median Minutes

Apr - Jun 2018

1250
 111.00
 129.75

Jul - Sep 2018

1250
 99.00
 127.66

Oct - Dec 2018

1250
 101.00
 134.68

Jan - Mar 2019

1250
 141.00
 148.75