

Hospital Performance Report



New Jersey 2009 A Consumer Report



Jon S. Corzine
Governor



Heather Howard
Commissioner

A Message . . .



From the Commissioner

Dear Consumers:

New Jersey is a national leader in public reporting on health care quality and the Department of Health and Senior Services remains committed to continuing to improve patient safety and providing the highest quality care for all of the residents of New Jersey.

The sixth annual report on hospital quality, the **New Jersey 2009 Hospital Performance Report** includes two additional measures for surgical care infection prevention in addition to performance measures for heart attack, pneumonia, and congestive heart failure. The report also includes 12 new measures for patient safety, as required by Senate Bill No. 2471. The new measures show how well hospitals are doing preventing specific medical errors.

The purpose of the report is to increase public awareness of quality issues and to promote quality care in New Jersey hospitals by publicly reporting individual hospital performances. The consumer information provided in this report—including tips on safer surgery and how to choose a hospital or doctor—is intended to help patients and their families become more active participants in their own health care decisions. The report is also intended to encourage healthy competition among hospitals and motivate their leaders to improve the quality of care for the patients they serve.

I would like to thank the members of the Quality Improvement Advisory Committee (QIAC), who have been an invaluable asset to the Department in developing this report and other Department quality initiatives. QIAC members consist of leaders from the New Jersey hospital industry, insurers, payers, universities as well as physicians, nurses and consumers.

I encourage you to visit our newly redesigned web site at www.nj.gov/health/hpr. It contains more information than the report, is interactive, and more user-friendly. Please feel free to send us your feedback on the report or the web site at hospital.quality@doh.state.nj.us.

A handwritten signature in blue ink that reads "Heather Howard".

Heather Howard
Commissioner
Department of Health and Senior Services



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Section I

Using This Report

- ✦ **Hospital Quality and Using This Report**
- ✦ **Importance of These Measures**

Hospital Quality & Using This Report

The New Jersey Hospital Performance Report was created to provide hospital quality information to patients, their families, and health care professionals. The information is designed to help you choose a hospital and make other decisions about your health.

The report shows how each hospital treats eligible patients with heart attack, pneumonia, heart failure and patients having surgery. Patients must receive the correct care in order to fully recover. These measures, which are based on recognized national standards for diagnosis and treatment, are called **recommended care** or **process of care** measures.

The data for the recommended care in this report is for the year 2008.

For the first time, the report also includes how well each hospital is providing safe patient care by looking at the number of medical errors per hospital that could have been avoided. These are called **patient safety indicators (PSIs)**. The PSIs were developed nationally after extensive research and analysis. The data for PSIs in this report is for the year 2007.

Please refer to the Technical Report at www.nj.gov/health/hpr for more detail and for calculations.

What do the hospital scores mean?

RECOMMENDED CARE (PROCESS OF CARE) MEASURES

The score for each **recommended care** measure reflects the percentage of eligible patients who received the recommended treatment. For example, a score of 85% means that the hospital provided the recommended care for 85 out of 100 patients eligible for the recommended care. **The goal for each hospital is 100% so that all eligible patients receive the best care.** Patients who should not receive the treatments due to their specific conditions are excluded from the measures. Please note that small differences in hospital scores do not indicate real differences in hospital quality.

The report includes four Overall Scores for how each hospital treats patients diagnosed with heart attack, pneumonia, heart failure and patients having surgery. An Overall Score is a summary of all the scores for the individual measures for a specific condition. The Overall Scores are shown on pages 8 and 9. Scores for individual measures are provided on the pages following the Overall Scores.

All recommended care tables include the Top 10% and Top 50% performers for each measure. These scores help determine which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top of the table, it is among the top 10% or 50% performers in NJ on the specific measure.

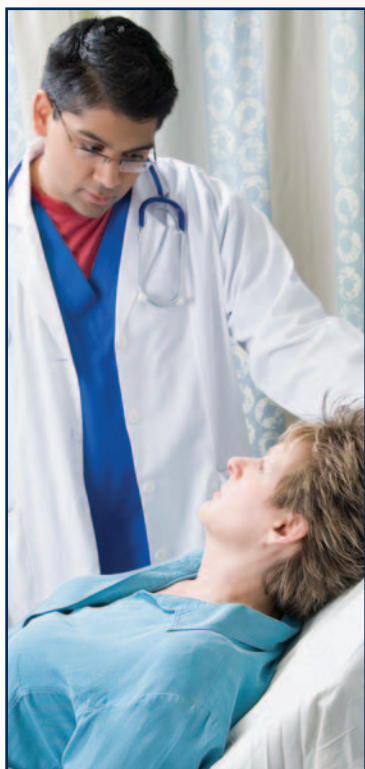
PATIENT SAFETY INDICATORS (PSIs)

For the **PSIs**, the score for each measure is not a percentage. The scores reflect how well a hospital is doing in preventing medical errors from occurring in each hospital. **Lower scores are better; lower scores mean that there were fewer medical errors for that particular medical condition at that hospital.**

See pages 26 –29 for the PSI data and pages 30–34 for basic facts on PSIs.

Which hospitals are included?

All New Jersey general acute care hospitals are included, along with one specialty hospital that treats heart disease. Because of the different years in data, PSIs include one additional hospital that was open in 2007 but closed in 2008.



How is the information collected?

For **recommended care (process of care) measures**, the information is collected by hospitals from patient medical records. This review shows whether a patient received the correct care. The Centers for Medicare and Medicaid Services (CMS) reviews the consistency of each hospital's data. All New Jersey hospitals' data passed this review. To learn more about the data collection methods and the CMS audit process, see the technical report at www.nj.gov/health/hpr.

For **PSIs**, the numbers are based on inpatient discharges collected from all NJ acute care hospitals using a standardized form called the **National Uniform Bill (UB)**. This form is used nationally by all hospitals and insurance companies.

If doctors make decisions on where a patient should get care, why should I look at hospital performance?

Many consumers want a doctor's recommendation on hospitals. Frequently, people collect as much information as possible to make informed decisions. This report will provide some of that information.

Many people choose hospitals according to their doctor's affiliation. A doctor must have privileges at a hospital to admit patients. Your doctor may admit patients to several hospitals.

If you are enrolled in a managed care plan, use this report to help review your hospital network. Managed care insurers usually offer several choices of hospitals in an area.

Aren't all doctors and hospitals the same?

No. Hospitals differ in their specialties and expertise. Some are better equipped than others to handle different conditions and levels of care. Not all hospitals have state approval to perform certain services. Hospitals employ doctors with different specialties, expertise and abilities. These differences will influence the quality of care that you receive.

Why should I care about quality?

Hospitals differ in how well they provide appropriate care to patients. The quality of the care provided by your doctor and hospital may influence your health.

Can I use this information to draw conclusions about New Jersey hospitals?

This report is not intended to be used alone. It is designed to provide important information to help you make informed decisions. Use this report along with other information in making decisions about hospitals.

What should I do with the information I learned from this report?

Ask your doctor questions. Be informed. Use this report to gather more information and make informed decisions about which hospital is most appropriate for your health care needs.



Importance of These Measures

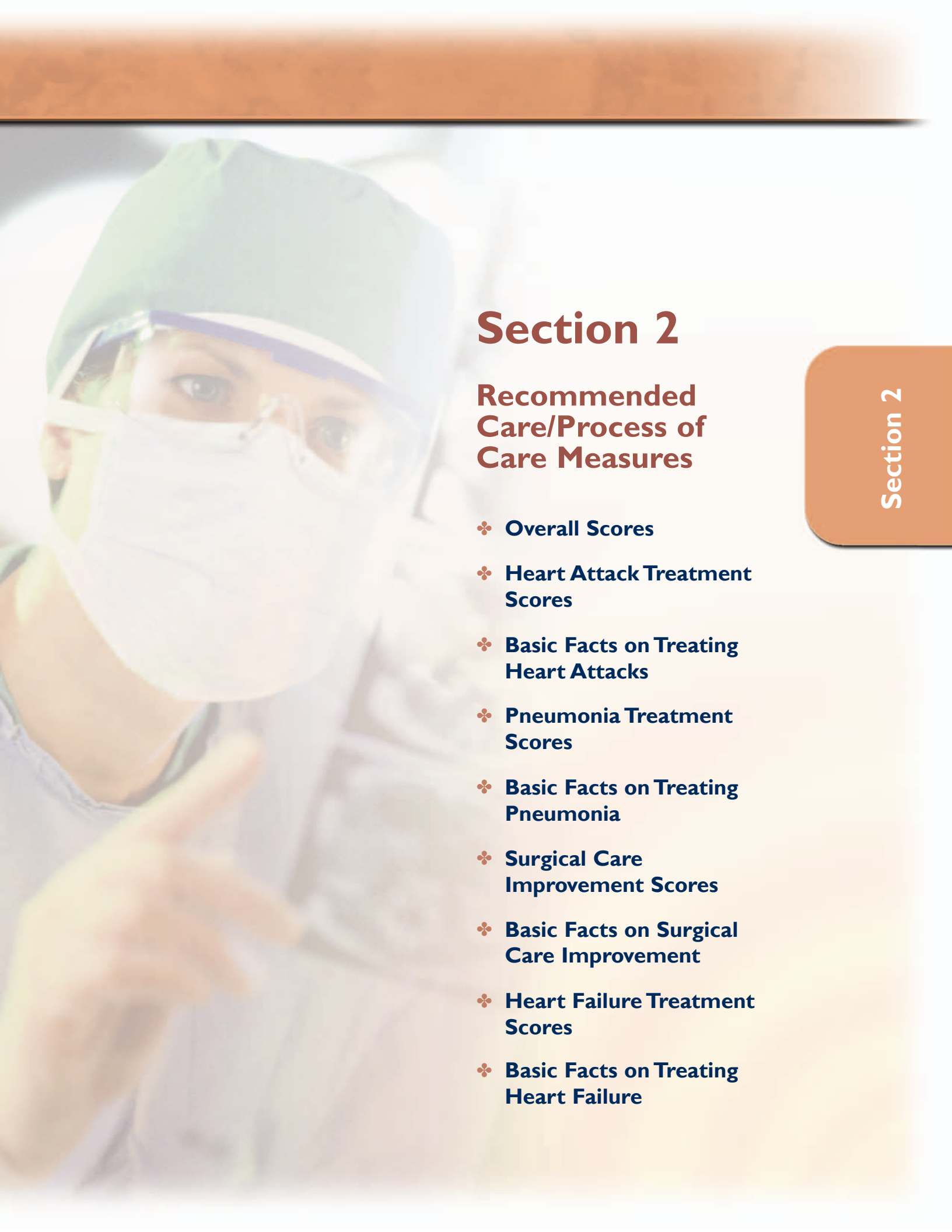
Why focus on Recommended Care for Heart Attack, Pneumonia, Surgical Care and Heart Failure?

Conditions	National Importance	Treatments Covered in This Report
Heart Attack or Acute Myocardial Infarction (AMI) See pages 10-13	Leads to nearly 500,000 deaths with 1.2 million people newly diagnosed each year. About 9.8 million people live with this condition.	• Aspirin at Arrival • Aspirin at Discharge • Beta Blocker at Arrival • Beta Blocker at Discharge • ACE Inhibitor/ARB at Discharge • Smoking Cessation Advice • PCI Within 90 Minutes
Pneumonia See pages 14-17	Accounts for 1.2 million admissions to hospitals, the second most common hospital-acquired infection, and a major cause of death each year.	• Oxygenation Assessment • Pneumonia Vaccination • Influenza Vaccination • Antibiotic Timing • Antibiotic Selection • Blood Culture before Initial Antibiotic • Smoking Cessation Advice
Surgical Care See pages 18-21	Infections: Account for 14% to 16% of all hospital acquired infections. Blood Clots: Occur in 25% of all major surgical procedures and result in over 50,000 annual deaths.	• Preventive Antibiotic Started • Preventive Antibiotic Stopped • Appropriate Antibiotic Received • Controlled Blood Sugar for Heart Patients • Safe Hair Removal • Treatment Preventing Blood Clots (VTE) Ordered • Treatment Preventing Blood Clots (VTE) Received
Heart Failure See page 22-24	Results in over 1 million hospital admissions and approximately 300,000 deaths per year; the most common reason for admission for patients 65 and older. About 5.7 million people live with this condition.	• Left Ventricular Systolic (LVS) Assessment • ACE Inhibitor/ARB at Discharge • Discharge Instructions • Smoking Cessation Advice

Why Focus on Patient Safety Indicators (PSIs)?

PSIs screen for complications or medical errors that patients experience in hospitals which are potentially preventable. It is widely believed that hospitals can reduce patient injuries by implementing certain actions to prevent the medical error from taking place. Strong evidence has identified the following as medical errors that can be prevented. Definitions of PSIs are located on pages 32 – 33:

- ❖ Foreign Body Left in During Procedure
- ❖ Iatrogenic Pneumothorax
- ❖ Postoperative Hip Fracture
- ❖ Postoperative Hemorrhage or Hematoma
- ❖ Postoperative PE (Pulmonary Embolism) or Deep Vein Thrombosis (DVT)
- ❖ Postoperative Sepsis
- ❖ Postoperative Wound Dehiscence
- ❖ Accidental Puncture or Laceration (APL)
- ❖ Transfusion Reaction
- ❖ Birth Trauma – Injury to Neonate
- ❖ Obstetric Trauma – Vaginal Delivery With Instrument
- ❖ Obstetric Trauma – Vaginal Delivery Without Instrument



Section 2

Recommended Care/Process of Care Measures

Section 2

- ❖ **Overall Scores**
- ❖ **Heart Attack Treatment Scores**
- ❖ **Basic Facts on Treating Heart Attacks**
- ❖ **Pneumonia Treatment Scores**
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- ❖ **Basic Facts on Treating Heart Failure**

Overall Scores

Heart Attack, Pneumonia, Surgical Care Improvement and Heart Failure

Region/County	Hospital Name	Heart Attack %	Pneumonia %	Surgical Care Improvement %	Heart Failure %
Top 10% of hospitals scored at or higher than ^ :		100	99	98	100
Top 50% of hospitals scored at or higher than ^ :		97	96	95	96
NORTHWEST					
Sussex	Newton Memorial Hospital	98	96	96	99
	St. Clare's Hospital-Sussex	100	98	100	99
Warren	Hackettstown Regional Medical Center	100	100	100	100
	Warren Hospital	92	95	97	96
NORTHEAST					
Bergen	Bergen Regional Medical Center	98	95	91	100
	Englewood Hospital and Medical Center	98	96	95	94
	Hackensack University Medical Center	99	99	97	98
	Holy Name Hospital	100	99	98	100
	Valley Hospital	97	96	96	90
Essex	Clara Maass Medical Center	100	100	96	100
	East Orange General Hospital	94	95	93	96
	Mountainside Hospital	94	94	87	95
	Newark Beth Israel Medical Center	99	98	98	100
	Saint Barnabas Medical Center	100	97	98	100
Hudson	St. Michael's Medical Center	96	88	94	94
	UMDNJ-University Hospital	98	89	94	99
	Bayonne Medical Center	95	88	82	80
	Christ Hospital	81	92	88	92
	Hoboken University Medical Center	92	92	93	95
Morris	Jersey City Medical Center	97	95	97	97
	Meadowlands Hospital Medical Center	96	93	82	97
	Palisades Medical Center of New York	100	98	98	100
	Chilton Memorial Hospital	97	92	91	93
	Morristown Memorial Hospital	99	95	97	93
Passaic	St. Clare's Hospital-Denville	99	99	98	95
	St. Clare's Hospital-Dover	100	99	96	97
	St. Joseph's Hospital and Medical Center	97	93	90	98
	St. Joseph's Wayne Hospital	96	96	97	96
	St. Mary's Hospital (Passaic)	94	90	81	82
Union	Overlook Hospital	93	96	97	94
	RWJ University Hospital at Rahway	97	96	95	88
	Trinitas Hospital	92	93	92	87
CENTRAL					
Hunterdon	Hunterdon Medical Center	98	98	95	95
Mercer	Capital Health System at Fuld	99	92	90	92
	Capital Health System at Mercer	96	94	94	91
	RWJ University Hospital at Hamilton	92	95	92	93

This information summarizes hospital performance on treating heart attacks, pneumonia, heart failure and surgical patients in 2008. The Overall Score is a composite of

measures for the specific condition and is the percent of time that a hospital gave patients the correct treatment. Hospitals are presented alphabetically by region and county.

Region/County	Hospital Name	Heart Attack %	Pneumonia %	Surgical Care Improvement %	Heart Failure %
Top 10% of hospitals scored at or higher than ^:		100	99	98	100
Top 50% of hospitals scored at or higher than ^:		97	96	95	96
CENTRAL (continued)					
Mercer	St. Francis Medical Center	98	97	92	95
	University Medical Center at Princeton	97	96	93	91
Middlesex	JFK Medical Center	95	93	92	85
	Raritan Bay Medical Center-Old Bridge	89	97	93	94
	Raritan Bay Medical Center-Perth Amboy	93	96	93	93
	Robert Wood Johnson University Hospital	98	83	95	91
	St. Peter's University Hospital	94	86	96	83
Monmouth	Bayshore Community Hospital	99	98	98	99
	CentraState Medical Center	96	93	90	89
	Jersey Shore University Medical Center	99	96	97	97
	Monmouth Medical Center	98	96	96	100
	Riverview Medical Center	99	96	98	96
Ocean	Community Medical Center	99	99	98	99
	Kimball Medical Center	97	98	96	96
	Ocean Medical Center	96	96	97	97
	Southern Ocean County Hospital	98	92	86	95
Somerset	Somerset Medical Center	98	95	95	98
SOUTH					
Atlantic	AtlantiCare Regional Medical Center-City	100	99	97	100
	AtlantiCare Regional Medical Center-Mainland	98	99	98	100
	Shore Memorial Hospital	97	96	97	94
Burlington	Deborah Heart and Lung Center	100	94	98	100
	Lourdes Medical Center of Burlington County	95	94	93	96
	Virtua-Memorial Hospital Burlington County	97	96	95	94
	Virtua-West Jersey Hospital Marlton	96	97	96	92
Camden	Cooper Hospital/University Medical Center	97	90	94	97
	Kennedy Mem. Hospitals UMC-Cherry Hill	99	93	98	95
	Kennedy Mem. Hospitals UMC-Stratford	95	95	94	89
	Our Lady of Lourdes Medical Center	99	97	98	98
	Virtua-West Jersey Hospital Berlin	100	98	90	98
	Virtua-West Jersey Hospital Voorhees	98	96	95	98
Cape May	Cape Regional Medical Center	99	95	96	97
Cumberland	South Jersey Healthcare Regional Medical Center	93	95	90	97
Gloucester	Kennedy Mem. Hospitals UMC-Wash. Twp.	98	95	98	89
	Underwood-Memorial Hospital	96	95	95	92
Salem	Memorial Hospital of Salem County	98	94	94	100
	South Jersey Hospital-Elmer	97	92	95	98

Source: New Jersey Hospital Quality Data, 2008.

^ These scores show which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top, it is among the top 10% or 50% performers in NJ on the specific measure.

Heart Attack Treatment Scores

Recommended Care

Hospital Name	Overall Score %	Aspirin Arrival %	Aspirin Discharge %	Beta Blocker Arrival %	Beta Blocker Discharge %	ACE/ARB Discharge %	Smoking Cessation Advice %	PCI within 90 Minutes %
Top 10% of hospitals scored at or higher than ^ :	100	100	100	100	100	100	100	98
Top 50% of hospitals scored at or higher than ^ :	97	98	98	98	99	98	100	80
Virtua-West Jersey Hospital Berlin	100	100	100	100	100	100*	100*	NL
St. Clare's Hospital-Dover	100	100	100*	100*	100*	100*	100*	NL
AtlantiCare Regional Medical Center-City	100	100*	100*	100	100*	100*	100*	NL
St. Clare's Hospital-Sussex	100	100*	100*	100*	100*	100*	NA	NL
Clara Maass Medical Center	100	100	100	100	100	100*	100	100*
Hackettstown Regional Medical Center	100	100	100	100	100	100*	100*	NL
Holy Name Hospital	100	100	100	100	100	100	100*	100*
Deborah Heart and Lung Center	100	100*	100	100*	100	99	100	100*
Saint Barnabas Medical Center	100	100	100	100	100	100	100	94
Palisades Medical Center of New York	100	99	100	100	100	100*	100*	NL
Newark Beth Israel Medical Center	99	99	100	98	100	99	100	100
St. Clare's Hospital-Denville	99	99	100	100	100	100*	100*	95
Hackensack University Medical Center	99	100	100	100	100	100	100	87
Cape Regional Medical Center	99	98	100*	100	100	100*	100*	NL
Community Medical Center	99	100	100	100	100	100	100	87
Jersey Shore University Medical Center	99	100	100	99	100	96	100	81
Capital Health System at Fuld	99	100	100*	97	100*	100*	100*	NL
Riverview Medical Center	99	100	100	100	100	100*	100*	81
Bayshore Community Hospital	99	98	100	99	100	100*	100*	NL
Kennedy Mem. Hospitals UMC-Cherry Hill	99	98	100	100	98	100*	100*	NL
Morristown Memorial Hospital	99	99	100	96	99	98	100	90
Our Lady of Lourdes Medical Center	99	100	99	97	99	100	100	79*
Bergen Regional Medical Center	98	100*	100*	100*	95*	100*	100*	NL
AtlantiCare Regional Medical Center-Mainland	98	100	100	100	100	98	100	73
UMDNJ-University Hospital	98	100	100	100	99	96	100	80
Kennedy Mem. Hospitals UMC-Wash. Twp.	98	98	97	100	100	88*	100*	NL
Robert Wood Johnson University Hospital	98	99	99	97	99	96	99	90
Hunterdon Medical Center	98	99	100	98	99	100*	100*	91
Newton Memorial Hospital	98	96	100	97	100	100*	100*	NL
Monmouth Medical Center	98	100	99	98	99	100*	96	81*
Virtua-West Jersey Hospital Voorhees	98	98	99	97	99	100*	100*	NL
St. Francis Medical Center	98	100	98	98	98	96	100	77*
Memorial Hospital of Salem County	98	100	95*	100	91*	100*	100*	NL
Somerset Medical Center	98	99	100	97	100	100	100	74
Englewood Hospital and Medical Center	98	98	100	97	100	94	100	82
Southern Ocean County Hospital	98	98	97	98	98	94*	100*	NL
Shore Memorial Hospital	97	100	98	92	100	88*	100*	NL
Virtua-Memorial Hospital Burlington County	97	98	95	97	100	93	93*	NL

This information summarizes hospital performance on treating heart attacks in 2008. The Overall Score is a composite of the seven heart attack measures. Each score

is the percent of time that a hospital gave patients the correct treatment. Hospitals are presented from the highest (best) to lowest Overall Score.

Hospital Name	Overall Score %	Aspirin Arrival %	Aspirin Discharge %	Beta Blocker Arrival %	Beta Blocker Discharge %	ACEI/ARB Discharge %	Smoking Cessation Advice %	PCI within 90 Minutes %
Top 10% of hospitals scored at or higher than ^:	100	100	100	100	100	100	100	98
Top 50% of hospitals scored at or higher than ^:	97	98	98	98	99	98	100	80
Valley Hospital	97	97	98	96	98	96	100	89
RWJ University Hospital at Rahway	97	98	97	95	100	93*	100*	NL
Chilton Memorial Hospital	97	97	94	99	100	97	100	88
Jersey City Medical Center	97	99	97	98	98	91	97	89
South Jersey Hospital-Elmer	97	100	88*	100	94*	100*	100*	NL
Kimball Medical Center	97	97	100	95	100	93*	100*	NL
University Medical Center at Princeton	97	99	99	99	99	93*	90*	36*
St. Joseph's Hospital and Medical Center	97	99	96	98	98	93	100	73
Cooper Hospital/University Medical Center	97	98	98	95	99	95	100	27
Ocean Medical Center	96	97	99	93	98	94*	96	96
Meadowlands Hospital Medical Center	96	100*	93*	91*	100*	100*	100*	NL
St. Michael's Medical Center	96	96	98	95	98	95	100	23*
Underwood-Memorial Hospital	96	97	94	96	98	90*	100*	NL
CentraState Medical Center	96	98	95	91	100	100*	100*	NL
St. Joseph's Wayne Hospital	96	96	100	93	97	100*	100*	NL
Virtua-West Jersey Hospital Marlton	96	98	98	92	100	100*	100*	80
Capital Health System at Mercer	96	92	97	100	100	90*	100*	80*
Kennedy Mem. Hospitals UMC-Stratford	95	98	92*	100	88	67*	100*	NL
Bayonne Medical Center	95	96	92	97	96	95*	86*	78*
JFK Medical Center	95	97	97	97	97	80*	97	65
Lourdes Medical Center of Burlington County	95	92	96	96	100	83*	86*	NL
Mountainside Hospital	94	99	96	98	98	90*	100*	50
St. Mary's Hospital (Passaic)	94	98	98	96	96	93*	100*	58
St. Peter's University Hospital	94	99	97	95	97	100*	94*	43*
East Orange General Hospital	94	98	85	99	88	75*	100*	NL
Raritan Bay Medical Center-Perth Amboy	93	96	97	92	96	95	98	45
South Jersey Healthcare Regional Medical Center	93	94	88	93	96	88*	100*	NL
Overlook Hospital	93	98	93	93	98	100	87*	55
RWJ University Hospital at Hamilton	92	95	98	88	96	94*	100	58
Trinitas Hospital	92	98	91	95	91	92*	100	62
Warren Hospital	92	92	91*	86	100*	100*	100*	NL
Hoboken University Medical Center	92	94	85	96	85	83*	100*	NL
Raritan Bay Medical Center-Old Bridge	89	87	92	88	88	88*	100*	NL
Christ Hospital	81	96	54	94	66	68	100*	77

Source: New Jersey Hospital Quality Data, 2008.

NA (Not Applicable) indicates that the hospital reported no cases for this measure.

NL (Not Licensed) indicates that the hospital is not licensed to perform PCI procedure.

^ These scores show which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top, it is among the top 10% or 50% performers in NJ on the specific measure.

* Hospital score for this measure is based on a small number of patients (less than 25).

Basic Facts on Treating Heart Attacks

Recommended Care

These scores show how well hospitals are providing care for eligible heart attack patients. A heart attack, or acute myocardial infarction (AMI), can occur if the arteries supplying blood to the heart become blocked, and the blood supply is slowed or stopped. The heart can't get the oxygen and nutrients it needs. The affected heart tissue may die. Symptoms of a heart attack can include chest pain (crushing, squeezing or burning pain in the center of the chest

which may radiate to the arm or jaw), shortness of breath, dizziness, faintness, chills, sweating or nausea. Skin may feel cold or clammy, and patients may appear gray and look ill. Sometimes there are no symptoms. Patients with contraindications to any of the recommended treatments are excluded from the scores for that treatment. Higher percentages indicate better performance. The goal is to achieve 100%.

Aspirin at Arrival

- ❖ **THIS SCORE TELLS YOU** the percent of heart attack patients who received aspirin within 24 hours before or after hospital arrival.
- ❖ **THIS INFORMATION IS IMPORTANT** because taking aspirin as soon as symptoms of a heart attack begin may reduce the severity of the attack. Aspirin can help prevent or dissolve existing blood clots. Continued use of aspirin may help reduce the risk of another heart attack.

Aspirin at Discharge

- ❖ **THIS SCORE TELLS YOU** the percent of heart attack patients prescribed aspirin at discharge from the hospital.
- ❖ **THIS INFORMATION IS IMPORTANT** because aspirin can help prevent or dissolve existing blood clots. Continued use of aspirin may help reduce the risk of another heart attack.

Beta Blocker at Arrival

- ❖ **THIS SCORE TELLS YOU** the percent of heart attack patients given a beta blocker within 24 hours of hospital arrival.
- ❖ **THIS INFORMATION IS IMPORTANT** because beta blockers are medicines that lower blood pressure, treat chest pain (angina) and heart failure, and help prevent heart attacks. Beta blockers relieve the stress on the heart by slowing the heart rate and reducing the force with which the heart contracts to pump blood. They also help keep blood vessels throughout the entire body from constricting.



Beta Blocker at Discharge

❖ **THIS SCORE TELLS YOU** the percent of heart attack patients prescribed a beta blocker at discharge from the hospital.

❖ **THIS INFORMATION IS IMPORTANT** because beta blockers are medicines that lower blood pressure, treat chest pain (angina) and heart failure, and help prevent heart attacks. Beta blockers relieve the stress on the heart by slowing the heart rate and reducing the force with which the heart contracts to pump blood. They also help keep blood vessels throughout the body from constricting.

ACE Inhibitor or ARB at Discharge

❖ **THIS SCORE TELLS YOU** the percent of heart attack patients with left ventricular systolic dysfunction (LVSD) who were prescribed an angiotensin-converting enzyme (ACE) inhibitor or an angiotensin receptor blocker (ARB) at discharge from the hospital.

❖ **THIS INFORMATION IS IMPORTANT** because ACE inhibitors and ARBs are medicines that can help reduce the risk of death after a heart attack. Continued use may help prevent heart failure. ACE inhibitors and ARBs modify the effects of hormones (angiotensin II) that regulate blood pressure and influence the healing process of the heart. They are prescribed to lower blood pressure and thus lessen the workload of the heart.

Smoking Cessation Advice

❖ **THIS SCORE TELLS YOU** the percent of heart attack patients with a history of smoking cigarettes who received advice before discharge from the hospital on how to quit smoking.

❖ **THIS INFORMATION IS IMPORTANT** because smoking is linked to heart attacks. Quitting may help prevent another one.

PCI Within 90 Minutes

❖ **THIS SCORE TELLS YOU** the percent of heart attack patients who underwent angioplasty, or a Percutaneous Coronary Intervention (PCI), within 90 minutes after arrival at a hospital.

❖ **THIS INFORMATION IS IMPORTANT** because PCI is a procedure to open the blocked blood vessels, re-establishing the blood supply to the heart muscle. It involves inserting a catheter (a flexible tube) often through the leg. Increasingly, cardiologists choose to do a PCI instead of prescribing clot-dissolving medication. However, PCI is not available at every general hospital in New Jersey.

To find out if a New Jersey hospital is licensed to perform PCI, ask your doctor.



Pneumonia Treatment Scores

Recommended Care

Hospital Name	Overall Score %	Oxygenation Assessment %	Pneumonia Vaccination %	Influenza Vaccination %	Antibiotic Timing %	Antibiotic Selection %	Blood Cultures %	Smoking Cessation Advice %
Top 10% of hospitals scored at or higher than ^ :	99	100	100	100	99	98	99	100
Top 50% of hospitals scored at or higher than ^ :	96	100	95	92	96	92	96	100
Hackettstown Regional Medical Center	100	100	100	100	100	100	98	100
Clara Maass Medical Center	100	100	100	100	100	99	98	100
St. Clare's Hospital-Denville	99	100	100	99	100	96	100	100
Community Medical Center	99	100	100	99	99	96	99	100
AtlantiCare Regional Medical Center-City	99	100	100	100	98	97	99	100
Holy Name Hospital	99	100	100	100	95	98	99	100
Hackensack University Medical Center	99	100	99	95	99	99	100	99
AtlantiCare Regional Medical Center-Mainland	99	100	100	100	96	96	98	100
St. Clare's Hospital-Dover	99	100	99	97	100	94	99	100
Virtua-West Jersey Hospital Berlin	98	100	100	99	98	93	99	100
Kimball Medical Center	98	100	98	93	100	98	97	100
Palisades Medical Center of New York	98	100	100	100	98	97	93	100*
St. Clare's Hospital-Sussex	98	100	100	100*	100	91	98	100*
Bayshore Community Hospital	98	100	99	94	99	93	98	100
Hunterdon Medical Center	98	100	96	99	99	94	96	100
Newark Beth Israel Medical Center	98	100	96	95	97	95	98	100
Our Lady of Lourdes Medical Center	97	100	95	97	98	98	94	100
St. Francis Medical Center	97	100	97	97	93	90	100	100
Saint Barnabas Medical Center	97	100	97	97	99	95	91	100
Virtua-West Jersey Hospital Marlton	97	100	98	97	98	86	99	98
Raritan Bay Medical Center-Old Bridge	97	100	99	94	97	93	97	90
Monmouth Medical Center	96	100	94	94	99	92	96	100
Riverview Medical Center	96	100	95	89	96	99	99	100
Valley Hospital	96	99	96	93	99	90	96	97
Overlook Hospital	96	100	98	94	97	94	96	78
Shore Memorial Hospital	96	100	96	94	93	92	97	100
Newton Memorial Hospital	96	100	94	90	98	92	97	100
Ocean Medical Center	96	100	97	92	94	99	90	100
RWJ University Hospital at Rahway	96	100	96	94	94	90	97	98
Raritan Bay Medical Center-Perth Amboy	96	99	99	89	95	97	95	95
St. Joseph's Wayne Hospital	96	100	96	90	97	90	96	100
University Medical Center at Princeton	96	100	93	90	96	94	99	100*
Virtua-Memorial Hospital Burlington County	96	100	95	94	99	90	96	89
Virtua-West Jersey Hospital Voorhees	96	100	96	98	95	85	96	98
Englewood Hospital and Medical Center	96	100	93	94	96	90	97	100
Jersey Shore University Medical Center	96	100	96	92	92	98	94	99
Warren Hospital	95	100	90	94	98	90	97	100
Cape Regional Medical Center	95	100	93	85	98	93	97	97

This information summarizes hospital performance on treating pneumonia in 2008. The Overall Score is a composite of the seven pneumonia measures. Each score is

the percent of time that a hospital gave patients the correct treatment. Hospitals are presented from the highest (best) to lowest Overall Score.

Hospital Name	Overall Score %	Oxygenation Assessment %	Pneumonia Vaccination %	Influenza Vaccination§ %	Antibiotic Timing %	Antibiotic Selection %	Blood Cultures %	Smoking Cessation Advice %
Top 10% of hospitals scored at or higher than ^:	99	100	100	100	99	98	99	100
Top 50% of hospitals scored at or higher than ^:	96	100	95	92	96	92	96	100
Kennedy Mem. Hospitals UMC-Wash. Twp.	95	100	94	88	94	95	96	99
South Jersey Healthcare Regional Medical Center	95	100	91	95	92	92	98	98
Kennedy Mem. Hospitals UMC-Stratford	95	100	92	89	98	90	96	99
Bergen Regional Medical Center	95	100	97	95	91	94	92	100
Jersey City Medical Center	95	100	96	93	92	94	92	100
East Orange General Hospital	95	98	92	86	97	83	98	98
RWJ University Hospital at Hamilton	95	100	92	91	93	91	96	99
Morristown Memorial Hospital	95	100	90	87	94	95	97	100
Somerset Medical Center	95	100	91	88	96	92	97	100
Underwood-Memorial Hospital	95	100	91	94	92	92	96	94
Capital Health System at Mercer	94	100	88	90	91	94	96	100
Deborah Heart and Lung Center	94	100*	89*	90*	100*	83*	NA	100*
Memorial Hospital of Salem County	94	100	87	88	96	91	95	100
Lourdes Medical Center of Burlington County	94	100	95	86	96	86	94	97
Mountainside Hospital	94	100	91	82	98	97	92	97
Trinitas Hospital	93	100	93	86	92	89	94	96
CentraState Medical Center	93	100	84	80	97	95	98	100
Meadowlands Hospital Medical Center	93	100	89	91	96	89	87	100*
St. Joseph's Hospital and Medical Center	93	100	93	87	92	78	97	100
JFK Medical Center	93	100	91	88	88	91	94	94
Kennedy Mem. Hospitals UMC-Cherry Hill	93	100	97	89	92	85	88	97
Capital Health System at Fuld	92	100	92	89	88	82	94	98
Hoboken University Medical Center	92	100	88	81	95	89	91	100
South Jersey Hospital-Elmer	92	100	86	81	90	84	100	100
Chilton Memorial Hospital	92	99	86	83	93	86	96	100
Southern Ocean County Hospital	92	100	86	78	94	95	91	100
Christ Hospital	92	99	77	86	94	88	98	100
Cooper Hospital/University Medical Center	90	98	83	84	91	81	88	100
St. Mary's Hospital (Passaic)	90	97	85	82	91	90	89	89
UMDNJ-University Hospital	89	100	87	89	79	94	84	94
St. Michael's Medical Center	88	96	80	80	82	92	93	100
Bayonne Medical Center	88	99	78	72	99	83	98	63
St. Peter's University Hospital	86	99	82	85	87	82	87	63
Robert Wood Johnson University Hospital	83	100	64	49	98	89	92	100

Source: New Jersey Hospital Quality Data, 2008.

^ These scores show which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top, it is among the top 10% or 50% performers in NJ on the specific measure.

* Hospital score for this measure is based on a small number of patients (less than 25).

§ Influenza Vaccination includes information for January, February, October, November, and December 2008 discharges only.

Basic Facts on Treating Pneumonia

Recommended Care

These scores show how well hospitals are treating eligible pneumonia patients. Pneumonia is an inflammation of the lungs caused by an infection. Many different organisms can cause pneumonia, including bacteria, viruses and fungi. Pneumonia can range from very mild to very severe, even fatal, depending on the type of

organism causing it as well as the age and current health of the individual. Symptoms can include fever, fatigue, difficulty breathing, chills, “wet” cough and chest pain. Patients with contraindications to any of the recommended treatments are excluded from the scores for that treatment. Higher percentages indicate better performance. The goal is to achieve 100%.

Oxygenation Assessment

- ❖ **THIS SCORE TELLS YOU** what percent of pneumonia patients had their oxygen level checked within 24 hours of hospital arrival.
- ❖ **THIS INFORMATION IS IMPORTANT** because measuring the amount of oxygen in your blood determines if you need oxygen therapy. Pneumonia can lower the oxygen in your blood because the air spaces in your lungs fill with fluid, and the oxygen you breathe does not enter your bloodstream. The assessment may include an ABG (arterial blood gas) or pulse oximetry (electrodes attached to a part of your body).

Pneumonia Vaccination

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients 65 years of age and older who were assessed for and, if needed, given the pneumonia vaccine before discharge from the hospital.
- ❖ **THIS INFORMATION IS IMPORTANT** because a pneumonia vaccination may help prevent future bacterial pneumonia and also lower the risk of complications.

Influenza Vaccination

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients 50 years of age and older who were assessed for and given, if needed, the influenza vaccine before discharge from the hospital during the flu season.

❖ THIS INFORMATION IS IMPORTANT

because flu shots are highly effective in preventing influenza-related pneumonia, a serious and sometimes deadly lung infection that is highly contagious. Patients 50 years old and older are particularly vulnerable, and getting the flu shot during flu season helps protect them from another lung infection and prevent the spread of influenza.

Antibiotic Timing

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients who received an antibiotic within 6 hours of hospital arrival.

❖ THIS INFORMATION IS IMPORTANT

because early antibiotic treatment can cure bacterial pneumonia quickly and reduce the possibility of complications. However, there is controversy about the desirability of hospitals achieving a 100% score on this measure. Pneumonia can be difficult to diagnose quickly, and there is some concern that this measure provides hospitals an inappropriate incentive to use antibiotics for all potential pneumonia patients before making a firm diagnosis. Overuse of antibiotics reduces quality of health care since it can result in bacterial resistance to these antibiotics.



Antibiotic Selection

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients who received the most appropriate initial antibiotic.
- ❖ **THIS INFORMATION IS IMPORTANT** because different antibiotics treat specific bacterial infections. The initial antibiotic selection should be the best treatment choice for that type of pneumonia.

Blood Culture Before Initial Antibiotic

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients in the hospital who had their blood taken and cultured in the Emergency Department before receiving their first antibiotic.
- ❖ **THIS INFORMATION IS IMPORTANT** because a blood culture indicates which antibiotic will work best to treat that particular type of bacterial pneumonia.

Smoking Cessation Advice

- ❖ **THIS SCORE TELLS YOU** the percent of pneumonia patients with a history of smoking cigarettes who received advice before discharge from the hospital on how to quit smoking.
- ❖ **THIS INFORMATION IS IMPORTANT** because smoking may increase the severity of your pneumonia and make it more difficult to recover. Quitting may help improve your condition.



Surgical Care Improvement Scores

Recommended Care

Hospital Name	Overall Score %	Preventive Antibiotic Started %	Preventive Antibiotic Stopped %	Appropriate Antibiotic Received %	VTE Prophylaxis Ordered %	VTE Prophylaxis Receive %	Controlled Blood Sugar %	Safe Hair Removal %
Top 10% of hospitals scored at or higher than ^:	98	99	97	99	98	98	100	100
Top 50% of hospitals scored at or higher than ^:	95	96	94	98	93	90	96	99
St. Clare's Hospital-Sussex	100	100*	100*	100*	100*	100*	NA	100*
Hackettstown Regional Medical Center	100	99	99	100	100	100	NA	100
Community Medical Center	98	98	96	98	98	98	40*	100
Palisades Medical Center of New York	98	98	90	96	100	100	NA	100
Newark Beth Israel Medical Center	98	99	95	99	97	96	96	100
Our Lady of Lourdes Medical Center	98	99	96	99	99	98	94	99
Deborah Heart and Lung Center	98	99	99	100	88	88	92	100
Kennedy Mem. Hospitals UMC-Cherry Hill	98	96	95	98	100	100	100*	100
Kennedy Mem. Hospitals UMC-Wash. Twp.	98	96	97	99	98	97	100*	99
Holy Name Hospital	98	98	97	99	97	94	100*	100
Saint Barnabas Medical Center	98	98	96	98	98	97	96	100
Bayshore Community Hospital	98	99	92	98	100	96	100*	100
Riverview Medical Center	98	99	96	98	97	95	100*	99
AtlantiCare Regional Medical Center-Mainland	98	98	96	99	97	94	94	100
St. Clare's Hospital-Denville	98	98	96	97	98	96	33*	100
AtlantiCare Regional Medical Center-City	97	98	96	99	95	93	NA	100
Ocean Medical Center	97	97	98	98	93	92	100*	100
Hackensack University Medical Center	97	100	94	99	93	91	93	100
Shore Memorial Hospital	97	97	97	95	95	93	100*	100
Overlook Hospital	97	99	93	98	98	92	NA	100
St. Joseph's Wayne Hospital	97	97	97	98	91	90	NA	100
Morristown Memorial Hospital	97	90	97	98	98	98	95	100
Jersey Shore University Medical Center	97	98	92	98	96	94	96	99
Jersey City Medical Center	97	97	97	98	94	91	92	100
Warren Hospital	97	98	92	99	97	91	NA	100
Clara Maass Medical Center	96	99	97	97	92	88	100*	100
Virtua-West Jersey Hospital Marlton	96	95	96	100	93	91	50*	100
St. Peter's University Hospital	96	99	94	99	95	89	NA	100
Valley Hospital	96	97	95	98	94	87	96	100
St. Clare's Hospital-Dover	96	98	93	96	96	92	NA	100
Newton Memorial Hospital	96	99	91	96	94	93	NA	100
Monmouth Medical Center	96	93	94	99	98	95	NA	98
Kimball Medical Center	96	99	95	95	89	87	100*	100
Cape Regional Medical Center	96	93	98	99	90	89	100*	97
Somerset Medical Center	95	99	93	99	88	85	100*	100
Underwood-Memorial Hospital	95	90	92	96	96	96	0*	100
Virtua-Memorial Hospital Burlington County	95	96	95	98	89	87	100*	99
Robert Wood Johnson University Hospital	95	91	92	97	98	97	91	100

This information summarizes hospital performance on surgical care in 2008. The Overall Score is a composite of all surgical care scores except VTE Prophylaxis Ordered. Each

score is the percent of time that a hospital gave patients the correct treatment. Hospitals are presented from the highest (best) to lowest Overall Score.

Hospital Name	Overall Score %	Preventive Antibiotic Started %	Preventive Antibiotic Stopped %	Appropriate Antibiotic Received %	VTE Prophylaxis Ordered %	VTE Prophylaxis Receive %	Controlled Blood Sugar %	Safe Hair Removal %
Top 10% of hospitals scored at or higher than ^:	98	99	97	99	98	98	100	100
Top 50% of hospitals scored at or higher than ^:	95	96	94	98	93	90	96	99
Hunterdon Medical Center	95	99	95	100	86	82	NA	99
South Jersey Hospital-Elmer	95	96	96	97	91	90	NA	96
Virtua-West Jersey Hospital Voorhees	95	93	94	95	92	90	75*	99
RWJ University Hospital at Rahway	95	97	99	99	87	82	50*	99
Englewood Hospital and Medical Center	95	96	97	98	88	84	91	95
Cooper Hospital/University Medical Center	94	93	95	98	100	99	87	92
Memorial Hospital of Salem County	94	89	87	95	98	97	NA	99
Kennedy Mem. Hospitals UMC-Stratford	94	88	98	97	97	95	NA	94
St. Michael's Medical Center	94	94	84	98	92	86	96	100
UMDNJ-University Hospital	94	90	89	99	95	91	96	98
Capital Health System at Mercer	94	97	91	93	88	86	100*	99
Lourdes Medical Center of Burlington County	93	90	91	95	89	89	100*	100
Raritan Bay Medical Center-Old Bridge	93	86	96	98	85	85	33*	99
East Orange General Hospital	93	96	93	96	84	84	50*	98
Hoboken University Medical Center	93	95	89	97	87	85	0*	98
Raritan Bay Medical Center-Perth Amboy	93	92	92	94	87	86	100*	97
University Medical Center at Princeton	93	97	85	92	94	89	NA	98
Trinitas Hospital	92	96	88	95	85	81	100*	100
RWJ University Hospital at Hamilton	92	92	89	93	94	89	NA	96
JFK Medical Center	92	95	88	98	89	87	NA	93
St. Francis Medical Center	92	97	90	96	89	89	65	99
Chilton Memorial Hospital	91	92	86	92	87	81	NA	98
Bergen Regional Medical Center	91	100*	69*	100*	74*	77*	NA	100
South Jersey Healthcare Regional Medical Center	90	92	85	93	82	81	NA	98
St. Joseph's Hospital and Medical Center	90	93	94	97	93	92	95	80
Capital Health System at Fuld	90	90	82	94	85	80	100*	98
CentraState Medical Center	90	94	89	94	77	77	0*	94
Virtua-West Jersey Hospital Berlin	90	73*	85*	100*	75	74	100*	99
Christ Hospital	88	93	76	95	74	70	0*	99
Mountainside Hospital	87	92	90	90	81	79	75*	88
Southern Ocean County Hospital	86	90	92	98	90	86	100*	73
Meadowlands Hospital Medical Center	82	88	49	91	71	71	NA	100
Bayonne Medical Center	82	93	62	80	70	67	100*	96
St. Mary's Hospital (Passaic)	81	95	75	91	72	58	78	84

Source: New Jersey Hospital Quality Data, 2008.

^ These scores show which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top, it is among the top 10% or 50% performers in NJ on the specific measure.

NA(Not Applicable) indicates that the hospital reported no cases for this measure.

* Hospital score for this measure is based on a small number of patients (less than 25).

Basic Facts on Surgical Care Improvement

Recommended Care

These scores show how well hospitals are providing their surgery patients with care to prevent infections and blood clots. Hospitals can reduce the risk of wound infection after surgery by administering the proper medicines at the correct time on the same day of surgery. Signs of possible infection after surgery can include: a surgical wound that is red, hot and swollen; a fever of over 100 degrees following hospital discharge; a smelly or yellow/green fluid oozing out of the wound; or increased pain while taking pain medication.

The measures listed below represent the best practices for the prevention of infections and blood clots after selected surgeries (e.g., colon surgery, hip and knee arthroplasty, abdominal and vaginal hysterectomy, cardiac surgery and vascular surgery).

Patients with contraindications to any of the recommended treatments are excluded from the scores for that treatment. Higher percentages indicate better performance. The goal is to achieve 100%.

Preventive Antibiotic Started 1 Hour Before Surgery

❖ **THIS SCORE TELLS YOU** the percent of eligible patients who received prophylactic or preventive antibiotics within one hour prior to surgical incision.

❖ **THIS INFORMATION IS IMPORTANT** because surgery patients given antibiotics, medicines that prevent and treat infections, within the hour before their operation are less likely to get wound infections. Getting an antibiotic over an hour earlier or after surgery begins is not as effective.

Preventive Antibiotic Stopped Within 24 Hours

❖ **THIS SCORE TELLS YOU** the percent of eligible surgical patients whose prophylactic or preventive antibiotics were stopped within 24 hours after surgery ended (or 48 hours after Coronary Artery Bypass Graft or other cardiac surgery). Antibiotics are medicines that prevent and treat infections.

❖ **THIS INFORMATION IS IMPORTANT** because taking antibiotics for more

than 24 hours after routine surgery is usually not necessary and can increase the risk of side effects, such as stomach aches, serious types of diarrhea, and resistance to the antibiotic (the use of too much antibiotic can prevent them from being effective). There are, however, exceptions. If the surgical site has been contaminated, there may be a need for additional antibiotics after 24 hours. Talk to your doctor to determine how long you should take antibiotics after surgery.

Appropriate Antibiotic Received

❖ **THIS SCORE TELLS YOU** the percent of surgery patients who received the appropriate preventive antibiotic(s) for their surgery in order to prevent a surgical wound infection.

❖ **THIS INFORMATION IS IMPORTANT** because certain antibiotics are recommended to help prevent wound infection for particular types of surgery. Hospitals can reduce the risk of wound infection after surgery by making sure the patient gets the right medication at the right time on the day of their surgery.



Treatment Preventing Blood Clots (VTEs) Ordered

❖ **THIS SCORE TELLS YOU** the percent of patients with certain types of surgeries whose doctors **ordered** treatments to prevent blood clots, called venous thromboembolism (VTE) prophylaxis, anytime from hospital arrival to 48 hours after surgery has ended.

❖ **THIS INFORMATION IS IMPORTANT** because venous thrombosis is a condition in which a blood clot (thrombus) forms in the vein, limiting blood flow, causing swelling, redness and pain. If the clot breaks off (embolus), it can lodge itself in the lungs, causing a pulmonary embolism, which can lead to death. Doctors can order preventive treatments called prophylaxis to reduce the risk. These treatments may include blood thinning medications, elastic support stockings, or mechanical air stockings that promote blood circulation.

Treatment Preventing Blood Clots (VTEs) Received

❖ **THIS SCORE TELLS YOU** the percent of patients who **received** the appropriate treatment to prevent blood clots called venous thromboembolism (VTE) at the right time.

❖ **THIS INFORMATION IS IMPORTANT** because venous thrombosis is a condition in which blood clots (thrombus) form in the vein, usually in the leg, thigh or pelvis, and may limit blood flow, causing swelling, redness and pain. If the clot breaks off, it can lodge itself in the lungs, causing a pulmonary embolism, which can lead to death. Doctors can order

preventive treatments to reduce the risk. These treatments may include blood thinning medications, elastic support stockings, or mechanical air stockings that promote blood circulation.

Controlled Blood Sugar for Heart Patients

❖ **THIS SCORE TELLS YOU** the percent of all heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.

❖ **THIS INFORMATION IS IMPORTANT** because all heart surgery patients get their blood sugar checked after surgery. Any patient who has high blood sugar after heart surgery has a greater chance of getting an infection.

Safe Hair Removal

❖ **THIS SCORE TELLS YOU** the percent of surgery patients who had hair removed from the surgical area before surgery, using a safer method than a razor, such as electric clippers or hair removal cream.

❖ **THIS INFORMATION IS IMPORTANT** because medical research has shown that shaving with a razor can increase the risk of infection. It is therefore safer to use electric clippers or hair removal cream.



Heart Failure Treatment Scores

Recommended Care

Hospital Name	Overall Score %	LVS Assessment %	ACE/ARB Discharge %	Discharge Instructions %	Smoking Cessation Advice %
Top 10% of hospitals scored at or higher than ^ :	100	100	100	100	100
Top 50% of hospitals scored at or higher than ^ :	96	99	95	92	100
Newark Beth Israel Medical Center	100	100	100	100	100
Bergen Regional Medical Center	100	100	100*	100*	100*
Clara Maass Medical Center	100	100	100	100	100
Palisades Medical Center of New York	100	100	100	100	100*
AtlantiCare Regional Medical Center-City	100	100	100	100	100
Holy Name Hospital	100	100	100	100	100*
Deborah Heart and Lung Center	100	100	99	100	100
Monmouth Medical Center	100	100	98	100	100
Hackettstown Regional Medical Center	100	100	100	99	100*
Memorial Hospital of Salem County	100	99	100	100	100
Saint Barnabas Medical Center	100	100	97	100	100
AtlantiCare Regional Medical Center-Mainland	100	100	100	99	100
Community Medical Center	99	100	100	99	100
Newton Memorial Hospital	99	99	97	100	100*
UMDNJ-University Hospital	99	99	98	99	100
St. Clare's Hospital-Sussex	99	100	100*	97	100*
Bayshore Community Hospital	99	99	100	97	100
South Jersey Hospital-Elmer	98	100	92	98	100*
Virtua-West Jersey Hospital Voorhees	98	100	100	95	100*
St. Joseph's Hospital and Medical Center	98	98	98	98	100
Virtua-West Jersey Hospital Berlin	98	99	96	98	100
Somerset Medical Center	98	99	100	95	100*
Our Lady of Lourdes Medical Center	98	99	100	95	100
Hackensack University Medical Center	98	100	98	94	100
Cooper Hospital/University Medical Center	97	100	94	96	99
Jersey City Medical Center	97	99	96	96	100
Ocean Medical Center	97	99	93	96	100
Meadowlands Hospital Medical Center	97	98	95	97	100*
South Jersey Healthcare Regional Medical Center	97	98	91	97	100
Cape Regional Medical Center	97	100	97	92	100
St. Clare's Hospital-Dover	97	99	100	92	100*
Jersey Shore University Medical Center	97	99	97	92	100
Riverview Medical Center	96	100	100	89	100
Kimball Medical Center	96	98	93	93	100
East Orange General Hospital	96	97	96	92	99
Warren Hospital	96	100	91	90	100
Lourdes Medical Center of Burlington County	96	98	88	95	98
St. Joseph's Wayne Hospital	96	98	96	91	100

This information summarizes hospital performance on treating heart failure in 2008. The Overall Score is a composite of the four heart failure measures. Each score is

the percent of time that a hospital gave patients the correct treatment. Hospitals are presented from the highest (best) to lowest Overall Score.

Hospital Name	Overall Score %	LVS Assessment %	ACEI/ARB Discharge %	Discharge Instructions %	Smoking Cessation Advice %
Top 10% of hospitals scored at or higher than ^:	100	100	100	100	100
Top 50% of hospitals scored at or higher than ^:	96	99	95	92	100
St. Clare's Hospital-Denville	95	98	98	90	100
St. Francis Medical Center	95	99	94	91	100
Kennedy Mem. Hospitals UMC-Cherry Hill	95	98	90	94	92
Hoboken University Medical Center	95	97	93	93	100*
Mountainside Hospital	95	98	90	92	100*
Hunterdon Medical Center	95	99	83	95	100*
Southern Ocean County Hospital	95	98	86	92	100*
Englewood Hospital and Medical Center	94	96	94	92	100
Virtua-Memorial Hospital Burlington County	94	99	88	89	100
Raritan Bay Medical Center-Old Bridge	94	98	92	89	100*
Overlook Hospital	94	99	91	90	83*
Shore Memorial Hospital	94	99	93	86	100
St. Michael's Medical Center	94	98	89	89	100
Raritan Bay Medical Center-Perth Amboy	93	95	93	90	100
Chilton Memorial Hospital	93	100	88	85	100
RWJ University Hospital at Hamilton	93	94	82	94	98
Morristown Memorial Hospital	93	95	89	90	100
Christ Hospital	92	98	86	86	100
Underwood-Memorial Hospital	92	98	92	85	98
Virtua-West Jersey Hospital Marlton	92	99	96	79	100*
Capital Health System at Fuld	92	96	92	83	99
University Medical Center at Princeton	91	98	98	77	100*
Robert Wood Johnson University Hospital	91	98	96	80	96
Capital Health System at Mercer	91	93	84	90	100
Valley Hospital	90	97	90	77	100
Kennedy Mem. Hospitals UMC-Wash. Twp.	89	99	80	77	97
Kennedy Mem. Hospitals UMC-Stratford	89	97	82	80	96
CentraState Medical Center	89	99	90	72	100
RWJ University Hospital at Rahway	88	98	98	65	100
Trinitas Hospital	87	99	90	68	97
JFK Medical Center	85	98	93	59	100
St. Peter's University Hospital	83	98	97	60	73
St. Mary's Hospital (Passaic)	82	96	88	60	94
Bayonne Medical Center	80	83	90	74	70

Source: New Jersey Hospital Quality Data, 2008.

^ These scores show which hospitals are among the top 10% or 50% of NJ hospitals for the specific measure. If your hospital has a score that is equal to or greater than the score displayed at the top, it is among the top 10% or 50% performers in NJ on the specific measure.

* Hospital score for this measure is based on a small number of patients (less than 25).

Basic Facts on Treating Heart Failure

Recommended Care

These scores show how well hospitals are providing care for eligible heart failure patients. Heart failure is a weakening of the heart's muscle that reduces its pumping power. Your body doesn't get the oxygen and nutrients it needs. Your heart tries to pump more blood, but over time the heart muscle walls weaken.

Symptoms of heart failure can include shortness of breath from fluid in the lungs, dizziness, fatigue, weakness, cold and clammy skin, or rapid and

irregular heartbeat. Heart failure can result from coronary artery disease, heart attack, cardiomyopathy (heart muscle damage from infection, alcohol or drugs), or an overworked heart (caused by high blood pressure, kidney disease, diabetes, or a defect from birth).

Patients with contraindications to any of the recommended treatments are excluded from the scores for that treatment. Higher percentages indicate better performance. The goal is to achieve 100%.

Left Ventricular Systolic (LVS) Function Assessment

❖ **THIS SCORE TELLS YOU** the percent of heart failure patients who had their LVS function evaluated before hospital arrival, during hospitalization, or had a test planned following discharge.

❖ **THIS INFORMATION IS IMPORTANT** because an assessment of your heart's left side, the main pumping chamber, is needed to determine how well your heart is pumping. Results help determine appropriate treatment.

ACE Inhibitor or ARB at Discharge

❖ **THIS SCORE TELLS YOU** the percent of heart failure patients with left ventricular systolic dysfunction (LVSD) prescribed an angiotensin converting enzyme (ACE) inhibitor or an angiotensin receptor blocker (ARB) at discharge from the hospital.

❖ **THIS INFORMATION IS IMPORTANT** because ACE inhibitors and ARBs are medicines that modify the effects of hormones that regulate blood pressure and influence the healing process of the heart. Since these two drugs work differently, your doctor will decide which drug is most appropriate for you.

Discharge Instructions

❖ **THIS SCORE TELLS YOU** the percent of patients who received written instructions or educational material at hospital discharge addressing: activity level, diet, discharge medications, follow-up appointment, weight monitoring, and instructions if symptoms worsen.

❖ **THIS INFORMATION IS IMPORTANT** because heart failure is a chronic condition which must be managed closely to prevent repeat hospitalizations and further damage to the heart and other organs.

Smoking Cessation Advice

❖ **THIS SCORE TELLS YOU** the percent of heart failure patients with a history of smoking cigarettes who received advice on how to quit smoking before hospital discharge.

❖ **THIS INFORMATION IS IMPORTANT** because smoking increases your risk for developing blood clots and further heart disease, which can lead to heart attacks, heart failure or stroke. Smoking causes blood vessels to thicken making it harder for blood to flow to the heart.





Section 3:

Patient Safety Indicators (PSIs)

- ❖ **Patient Safety Indicator Rates**
- ❖ **Basic Facts on Patient Safety Indicators**

Patient Safety Indicator Rates

Number of adverse events that develop during hospitalization (per 1,000 hospital discharges)

Hospital Name	Foreign body left during procedure	Iatrogenic pneumo thorax	Post-operative hip fracture	Post-operative hemorrhage or hematoma	Post-operative pulmonary embolism (PE) or deep vein thrombosis (DVT)	Post-operative sepsis
National average rate (2004)	0.1	0.6	0.3	2.7	10.4	11.4
Statewide Number of Adverse Events+	63	418	29	410	2,585	282
Statewide average rate (2007) +	0.1	0.6	0.2	0.8	9.6	13.8
Atlanticare Regional Medical Center-City	0.0	0.6	0.0	0.5	5.2	0.0
Atlanticare Regional Medical Center-Mainland	0.0	1.0	1.9 ▲	0.6	13.4 ▲	5.2
Bayonne Medical Center	0.0	0.0 ▼	0.0	0.3	7.4	25.3
Bayshore Community Hospital	0.0	0.1	0.0	0.3	2.3 ▼	17.5
Bergen Regional Medical Center	0.0	0.0	0.0	0.0	22.6	0.0
Cape Regional Medical Center	0.0	0.1	0.0	1.2	1.7 ▼	0.0
Capital Health System at Fuld	0.2	0.0	0.0	0.7	10.7	0.0
Capital Health System at Mercer	0.0	0.7	0.9	0.3	11.3	14.9
CentraState Medical Center	0.1	0.5	0.0	1.3	5.0 ▼	14.0
Chilton Memorial Hospital	0.0	0.8	0.0	2.0	9.0	0.0
Christ Hospital	0.2	1.0	0.0	1.8	8.3	13.4
Clara Maass Medical Center	0.1	0.4	0.0	0.8	9.0	20.2
Community Medical Center	0.1	0.0 ▼	0.0	1.7	6.4 ▼	8.5
Cooper Hospital/University Medical Center	0.3	0.7	0.0	1.2	14.7 ▲	11.6
Deborah Heart and Lung Center	0.3	5.8 ▲	0.4	0.6	6.7	14.3
East Orange General Hospital	0.0	0.0	0.0	0.0	1.0 ▼	28.1
Englewood Hospital and Medical Center	0.1	0.6	0.3	0.4	10.1	22.0
Hackensack University Medical Center	0.1	1.0 ▲	0.5	1.6 ▲	17.1 ▲	20.9 ▲
Hackettstown Community Hospital	0.4	0.3	0.0	0.3	10.2	0.0
Hoboken University Medical Center	0.1	0.0	1.4	1.3	3.5 ▼	35.3
Holy Name Hospital	0.1	0.2	0.0	0.9	12.2	0.0
Hunterdon Medical Center	0.0	0.3	0.0	0.0	3.0 ▼	0.0
Jersey City Medical Center	0.0	0.2	0.0	0.3	9.0	0.0
Jersey Shore University Medical Center	0.0	1.1 ▲	0.5	0.7	9.5	4.1 ▼
JFK Community Medical Center-Edison	0.3	0.1 ▼	0.0	0.9	22.5 ▲	22.9
Kennedy Memorial Hospitals UMC-Cherry Hill	0.2	0.7	0.0	0.0	5.6	0.0
Kennedy Memorial Hospitals UMC-Stratford	0.2	1.0	0.0	0.3	12.1	0.0
Kennedy Memorial Hospitals UMC-Wash. Twp.	0.0	0.6	0.8	0.2	7.9	0.0
Kimball Medical Center	0.1	0.0 ▼	0.0	0.2	3.4 ▼	0.0
Lourdes Medical Center of Burlington Cty.	0.1	0.8	0.0	0.5	4.5 ▼	14.4
Meadowlands Hospital Medical Center	0.0	0.3	0.0	0.3	2.2 ▼	.
Memorial Hospital of Salem County	0.2	0.2	0.0	0.4	3.9	0.0
Monmouth Medical Center	0.0	0.3	0.6	0.8	5.6 ▼	8.7
Morristown Memorial Hospital	0.0	1.4 ▲	0.0	0.8	12.3 ▲	11.9
Mountainside Hospital	0.0	0.1	0.6	1.0	5.9 ▼	17.5
Newark Beth Israel Medical Center	0.0	1.5 ▲	0.0	0.5	14.2 ▲	15.8
Newton Memorial Hospital	0.1	0.4 ▼	0.0	0.5	3.6 ▼	0.0
Ocean Medical Center	0.0	0.1 ▼	0.0	1.1	9.5	23.8
Our Lady of Lourdes Medical Center	0.0	2.2 ▲	0.0	1.4	7.4	7.6 ▼

Section 3 Patient Safety Indicators (PSIs)

Hospital Name	Foreign body left during procedure	Iatrogenic pneumothorax	Post-operative hip fracture	Post-operative hemorrhage or hematoma	Post-operative pulmonary embolism (PE) or deep vein thrombosis (DVT)	Post-operative sepsis
National average rate (2004)	0.1	0.6	0.3	2.7	10.4	11.4
Statewide Number of Adverse Events+	63	418	29	410	2,585	282
Statewide average rate (2007)+	0.1	0.6	0.2	0.8	9.6	13.8
Overlook Hospital	0.1	0.2	0.0	0.4	14.3 ▲	9.0
Palisades Medical Center - NY PHS	0.0	0.0	0.0	0.3	6.1	42.0 ▲
Raritan Bay Medical Center-Old Bridge	0.0	0.0	0.0	0.8	7.2	44.1
Raritan Bay Medical Center-Perth Amboy	0.1	0.1	0.0	0.7	7.2	14.9
Riverview Medical Center	0.0	0.2	0.5	0.1	6.7	11.0
RWJ University Hospital	0.0	1.7 ▲	0.7	0.7	14.7 ▲	21.3 ▲
RWJ University Hospital at Hamilton	0.0	0.4	0.0	0.2	5.9 ▼	21.8
RWJ University Hospital at Rahway	0.0	0.3	0.0	0.6	6.8	49.4 ▲
Shore Memorial Hospital	0.0	0.1	0.7	0.9	7.6	7.1
Somerset Medical Center	0.1	0.2	0.3	0.9	8.4	9.2
South Jersey Healthcare Regional MC	0.0	0.4	0.0	1.0	5.5 ▼	14.2
South Jersey Hospital-Elmer	0.0	1.2	0.0	0.4	7.6	0.0
Southern Ocean County Hospital	0.1	0.8	0.0	0.4	7.6	19.8
Saint Barnabas Medical Center	0.2	1.3 ▲	0.0	1.5	14.0 ▲	3.9 ▼
St. Clare's Hospital-Denville	0.0	0.5	0.0	0.3	6.3	7.2
St. Clare's Hospital-Dover	0.2	0.0	0.0	0.0	4.4	36.2
St. Clare's Hospital-Sussex	0.0	1.3	0.0	0.0	0.0	.
St. Francis Medical Center-Trenton	0.0	0.0	0.0	1.5	7.8	12.7
St. Joseph's Hospital and Medical Center	0.1	0.5	1.0 ▲	1.2	4.1 ▼	39.4 ▲
St. Joseph's Wayne Hospital	0.5	0.0	0.0	2.2	11.7	0.0
St. Mary's Hospital (Passaic)	0.0	0.7	0.9	0.4	8.3	14.9
St. Michael's Medical Center	0.1	0.9	0.5	0.6	9.8	27.9 ▲
St. Peter's University Hospital	0.1	0.2	1.0 ▲	1.6	18.5 ▲	7.3
Trinitas Hospital	0.0	0.3	0.0	0.1	2.2 ▼	50.9 ▲
UMDNJ-University Hospital	0.1	1.2 ▲	0.0	1.6	9.5	29.0 ▲
Underwood-Memorial Hospital	0.1	0.6	0.0	0.7	3.7 ▼	0.0
University Medical Center at Princeton	0.1	0.6	0.0	0.6	4.8 ▼	5.0
Valley Hospital	0.0	0.8	0.0	0.7	13.9 ▲	17.2
Virtua-Memorial Hospital Burlington Cty.	0.1	0.2 ▼	0.0	0.6	6.6 ▼	6.4
Virtua-West Jersey Hospital Berlin	0.0	0.0	0.0	1.2	7.8	.
Virtua-West Jersey Hospital Marlton	0.0	0.2	0.0	0.3	5.0 ▼	14.2
Virtua-West Jersey Hospital Voorhees	0.1	0.2	0.0	0.9	8.9	25.0
Warren Hospital	0.0	0.2	0.0	0.6	6.1	21.1
William B. Kessler Memorial Hospital	0.4	0.4	0.0	3.2	2.8	.

Source: New Jersey 2007 UB Data.

▲ = Rates based on denominators less than 30 should be taken with caution.

+ = Statewide numbers include all hospitals/institutions that reported data to the 2007 UB database.

^ = Transfusion reaction is a very rare event. There was only 1 case in the NJ 2007 UB Data, reported by Kennedy Memorial Hospital, UMC in Washington Township.

▼ = Statistically significantly below statewide rate, ▲ = Statistically significantly above statewide rate.

Numbers for 'Foreign body left during procedure' and 'Transfusion reaction' are observed rates only. Module does not risk-adjust these indicators.

Missing (.) = Hospital did not perform the procedure during the year; or it performed less than 3 procedures (risk-adjusted rates are not computed when the denominator is less than 3).

Patient Safety Indicator Rates

Number of adverse events that develop during hospitalization (per 1,000 hospital discharges)

Hospital Name	Post-operative wound dehiscence	Accidental puncture or laceration	Transfusion reaction ^	Birth Trauma	Obstetric trauma-vaginal delivery with instrument	Obstetric trauma-vaginal delivery without instrument
National average rate (2004)	2.1	3.6	0.0	2.6	186.2	42.5
Statewide Number of Adverse Events+	130	1,665	1	244	907	2,647
Statewide average rate (2007) +	2.6	2.1	0.0	1.5	173.6	40.1
Atlanticare Regional Medical Center-City	0.0	1.4	0.0	.	.	.
Atlanticare Regional Medical Center-Mainland	1.5	3.8	0.0	0.9	106.8	27.9▼
Bayonne Medical Center	0.0	0.2▼	0.0	.	.	.
Bayshore Community Hospital	2.7	1.0	0.0	.	.	.
Bergen Regional Medical Center	0.0	0.0	0.0	.	.	.
Cape Regional Medical Center	1.8	1.3	0.0	2.5	14.3▼	32.3
Capital Health System at Fuld	0.0	2.4	0.0	.	.	.
Capital Health System at Mercer	3.7	2.8	0.0	1.7	226.1	31.9
CentraState Medical Center	1.2	4.1▲	0.0	0.7	319.7	54.8▲
Chilton Memorial Hospital	3.3	4.8▲	0.0	1.4	194.2	50.7
Christ Hospital	2.1	1.4	0.0	0.0	141.6	4.6▼
Clara Maass Medical Center	14.1▲	1.3	0.0	0.0	167.2	50.0
Community Medical Center	3.1	1.3	0.0	2.0	265.0▲	43.5
Cooper Hospital/University Medical Center	4.2	4.2▲	0.0	1.8	76.2▼	34.9
Deborah Heart and Lung Center	0.0	12.0▲	0.0	.	.	.
East Orange General Hospital	0.0	0.0	0.0	.	.	.
Englewood Hospital and Medical Center	0.0	1.0▼	0.0	0.3	165.9	30.1
Hackensack University Medical Center	1.2	1.8	0.0	2.0	92.7▼	34.6
Hackettstown Community Hospital	0.0	1.3	0.0	3.2	130.2	28.3
Hoboken University Medical Center	0.0	0.5▼	0.0	1.0	75.5	62.1▲
Holy Name Hospital	1.1	3.1	0.0	1.2	131.6	62.5▲
Hunterdon Medical Center	4.4	1.4	0.0	0.6	217.5	39.2
Jersey City Medical Center	0.0	1.5	0.0	0.0	223.0	43.3
Jersey Shore University Medical Center	3.6	4.2▲	0.0	2.5	136.4	38.5
JFK Community Medical Center-Edison	0.0	1.7	0.0	3.8▲	127.4	44.6
Kennedy Memorial Hospitals UMC-Cherry Hill	0.0	1.0	0.0	.	.	.
Kennedy Memorial Hospitals UMC-Stratford	3.4	3.0	0.0	.	.	.
Kennedy Memorial Hospitals UMC-Wash. Twp.	2.0	2.1	0.1	1.3	180.6	39.5
Kimball Medical Center	4.3	0.8	0.0	2.3	200.6	18.6▼
Lourdes Medical Center of Burlington Cty.	8.7▲	4.5▲	0.0	1.4	177.0	40.2
Meadowlands Hospital Medical Center	4.2	0.9	0.0	2.7	.	5.1▼
Memorial Hospital of Salem County	3.2	0.9	0.0	0.0	0.0	30.9
Monmouth Medical Center	1.1	1.7	0.0	2.0	145.3	32.6
Morristown Memorial Hospital	2.1	1.9	0.0	0.9	209.0	44.6
Mountainside Hospital	1.6	0.9▼	0.0	1.7	146.8	52.3
Newark Beth Israel Medical Center	2.5	2.2	0.0	0.8	118.7	45.1
Newton Memorial Hospital	6.2	1.4	0.0	1.0	194.4	79.7▲
Ocean Medical Center	1.2	0.6▼	0.0	0.7	153.2	82.2▲
Our Lady of Lourdes Medical Center	2.8	1.8	0.0	0.5	119.1	21.1▼

Section 3 Patient Safety Indicators (PSIs)

Hospital Name	Post-operative wound dehiscence	Accidental puncture or laceration	Transfusion reaction ^	Birth Trauma	Obstetric trauma-vaginal delivery with instrument	Obstetric trauma-vaginal delivery without instrument
National average rate (2004)	2.1	3.6	0.0	2.6	186.2	42.5
Statewide Number of Adverse Events+	130	1,665	1	244	907	2,647
Statewide average rate (2007)+	2.6	2.1	0.0	1.5	173.6	40.1
Overlook Hospital	2.4	2.5	0.0	1.1	188.3	36.3
Palisades Medical Center - NY PHS	0.0	0.3 ▼	0.0	2.3	231.8	14.0 ▼
Raritan Bay Medical Center-Old Bridge	0.0	0.9	0.0	.	.	.
Raritan Bay Medical Center-Perth Amboy	2.9	0.9	0.0	0.6	221.4	64.8 ▲
Riverview Medical Center	5.7	1.7	0.0	0.8	387.5 ▲	49.1
RWJ University Hospital	3.7	2.1	0.0	0.5	160.0	35.9
RWJ University Hospital at Hamilton	2.0	2.2	0.0	0.0	78.2 ▼	19.8 ▼
RWJ University Hospital at Rahway	0.0	0.9	0.0	.	.	.
Shore Memorial Hospital	2.1	2.3	0.0	2.3	116.3	31.2
Somerset Medical Center	2.4	1.7	0.0	2.8	297.2 ▲	67.6 ▲
South Jersey Healthcare Regional MC	4.3	1.6	0.0	1.8	82.3	23.7 ▼
South Jersey Hospital-Elmer	4.8	2.4	0.0	0.0	180.7	17.2
Southern Ocean County Hospital	2.5	1.2	0.0	0.0	235.9	85.0 ▲
St. Barnabas Medical Center	2.4	3.1 ▲	0.0	0.5	216.1 ▲	60.2 ▲
St. Clare's Hospital-Denville	2.5	3.2	0.0	4.6 ▲	321.7 ▲	63.1 ▲
St. Clare's Hospital-Dover	0.0	2.9	0.0	.	.	.
St. Clare's Hospital-Sussex	0.0	2.2	0.0	.	.	.
St. Francis Medical Center-Trenton	0.0	4.7 ▲	0.0	.	.	.
St. Joseph's Hospital and Medical Center	1.2	2.5	0.0	0.8	130.1	36.3
St. Joseph's Wayne Hospital	8.4 ▲	0.8	0.0	.	.	.
St. Mary's Hospital (Passaic)	0.0	1.1	0.0	0.5	234.0	44.2
St. Michael's Medical Center	0.0	1.2	0.0	.	.	.
St. Peter's University Hospital	1.3	1.9	0.0	0.6	151.8	48.2 ▲
Trinitas Hospital	1.5	0.3 ▼	0.0	1.4	130.1	38.3
UMDNJ-University Hospital	4.3	4.9 ▲	0.0	6.1 ▲	113.6	33.8
Underwood-Memorial Hospital	1.4	0.8 ▼	0.0	1.1	237.1	47.4
University Medical Center at Princeton	1.7	2.6	0.0	3.1	157.3	31.3
Valley Hospital	1.6	2.6	0.0	2.9	148.0	48.8
Virtua-Memorial Hospital Burlington Cty.	0.0	1.8	0.0	0.9	112.4	29.7
Virtua-West Jersey Hospital Berlin	5.9	0.0	0.0	.	.	.
Virtua-West Jersey Hospital Marlton	5.5	3.8 ▲	0.0	.	.	.
Virtua-West Jersey Hospital Voorhees	2.9	2.2	0.0	1.8	299.2 ▲	35.2
Warren Hospital	0.0	2.4	0.0	0.0	0.0	42.3
William B. Kessler Memorial Hospital	7.2	0.0	0.0	.	.	.

Source: New Jersey 2007 UB Data.

■ = Rates based on denominators less than 30 should be taken with caution.

+ = Statewide numbers include all hospitals/institutions that reported data to the 2007 UB database.

^ = Transfusion reaction is a very rare event. There was only 1 case in the NJ 2007 UB Data, reported by Kennedy Memorial Hospital, UMC in Washington Township.

▼ = Statistically significantly below statewide rate, ▲ = Statistically significantly above statewide rate.

Numbers for 'Foreign body left during procedure' and 'Transfusion reaction' are observed rates only. Module does not risk-adjust these indicators.

Missing (.) = Hospital did not perform the procedure during the year; or it performed less than 3 procedures (risk-adjusted rates are not computed when the denominator is less than 3).

Basic Facts on Patient Safety Indicators

New Jersey has been a leader in publicly reporting on health care performance, and continues to develop high-quality data that can guide improvements in the state's health care system.

In 2009, Governor Jon S. Corzine signed legislation (S2471) requiring that hospital-specific data on patient-safety performance and serious medical errors be included in the annual New Jersey Hospital Performance Report.

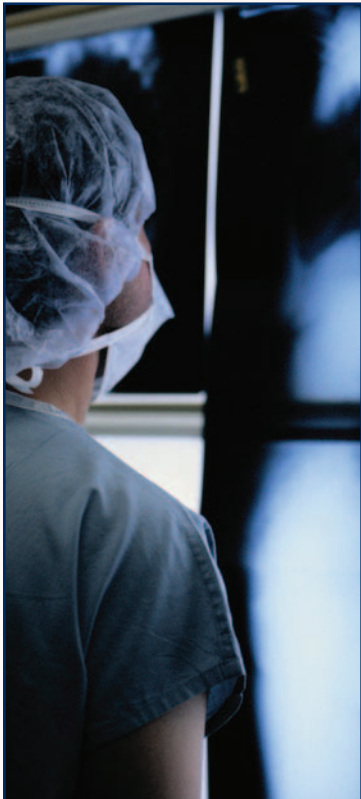
This report uses Patient Safety Indicators (PSIs) developed by the federal Agency for Healthcare Research and Quality (AHRQ)¹ or listed by the federal Centers for Medicare and Medicaid Services as “never

events”—such as surgery on the wrong side, wrong body part or wrong patient.

Other examples of indicators in this report are: excessive bleeding or large blood clot following surgery, serious blood stream infection following surgery, a foreign body accidentally left in a patient after a medical procedure, and a patient receiving an accidental cut or injury during a medical procedure.

The AHRQ developed PSIs to help health care systems nationwide identify potential adverse events at their facilities.² When an adverse event is identified, health system leaders can put corrective systems in place to prevent the error from recurring.

How to Interpret PSIs



❖ Even in the best hospital, some patients will experience complications either after an operation or as a result of other care. The rates in this report are calculated by comparing the number of complications (adverse events) expected in a particular hospital (based on the number of operations they do or patients they see, usually after adjusting for how old and how sick their patients are) and how many patients actually experienced the adverse events (complications).

❖ PSIs are not intended as definitive quality measures because quality of performance may be influenced by several other factors. However, the PSI measures indicate differences in hospital performance, which can be clinically important. They measure differences in the hospitals' ability to

reduce severe and potentially preventable complications and adverse events. Performance on a single PSI often cannot reliably indicate actual quality differences. AHRQ recommends examining all the indicators together in order to produce a more complete picture of overall quality of care.

❖ Each PSI result in the tables on pages 26–29 shows the extent to which patients experienced a particular problem during their hospital stay. The PSI is reported as the number of complications or adverse events divided by the number of patient admissions for the relevant procedure or condition. The resulting rate is expressed as the number of complications/adverse events per 1,000 eligible hospital discharges.

1 This report includes 12 of the AHRQ patient safety indicators mandated by the bill. Future reports will include the remaining two mandated indicators originally identified by CMS as data become available.

2 AHRQ, Quality Indicators - Patient Safety Indicators: Technical Specifications, March 2003, Version 3.2, March 10, 2008. http://www.qualityindicators.ahrq.gov/downloads/psi/psi_technical_specs_v32.pdf

PSI Data Limitations

Rather than creating an entirely new data reporting system, the Department used data from the readily available Uniform Bill (UB) reporting system to develop this report. New Jersey hospitals already collect and report UB data on each admitted patient. These data have limitations because they are collected primarily for billing purposes. They lack extensive details on a patient's clinical status that could help with better assessment. For example:

- ❖ UB data do not contain detailed clinical information needed to monitor adverse drug events – an important quality concern in hospitals – and cannot capture all aspects of patient complications.
- ❖ It is important to use caution when making comparisons across hospitals. Patients may have other illnesses and conditions (comorbidities) upon admission in addition to the health problem for which they were admitted. It is difficult, using UB data, to distinguish these comorbidities from new health problems acquired during hospitalization.

PSI Estimates

These PSI estimates were developed by applying AHRQ PSI module (Version 3.2) to the 2007 New Jersey hospital discharge data. The summary tables on pages 26–29 show the rates of adverse events in each hospital. The section on pages 32–33 provides brief definitions

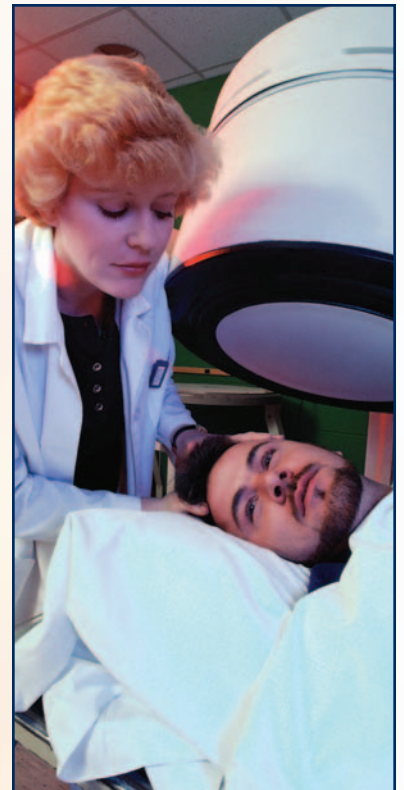
of the 12 PSIs for which reporting is required by law. A technical report containing additional details, such as total hospital discharges, observed and expected adverse event rates, and the risk-adjusted rates with their respective 95% confidence intervals (when applicable), is available on our website at www.nj.gov/health/healthcarequality³.

A hospital's rate is statistically significantly above the statewide rate if its 95% confidence interval falls completely above the statewide rate. By comparison, a hospital's rate is statistically significantly below the statewide rate if its 95% confidence interval falls completely below the statewide rate.

Some rates that appear large are not marked as statistically significantly higher than the statewide rate while others that appear small are not marked as statistically lower than the statewide rate. The reason may be that rates calculated from small numbers of events tend to have wider confidence intervals that make the statewide rate fall within the interval, giving the appearance of good performance by that hospital compared to a hospital whose rates are based on large numbers of events.

For example, the risk-adjusted rates for Postoperative Sepsis for East Orange General Hospital and Hackensack University Medical Center are 28.1 and 20.9 per 1,000 surgical discharges, respectively.

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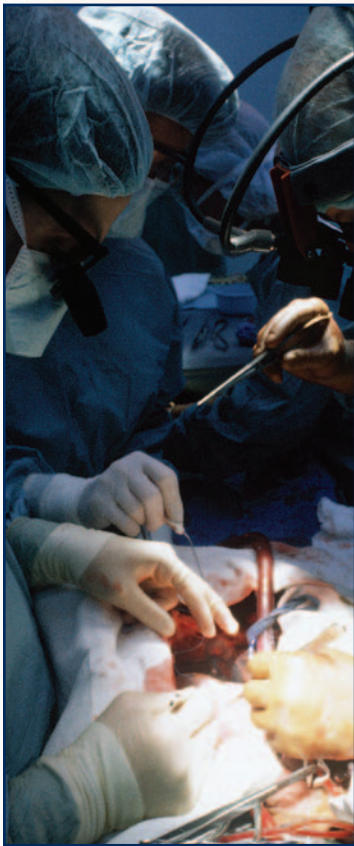


³ Health Care Quality Assessment; *Patient Safety Indicators in New Jersey 2007, Technical Report, A Supplement to Hospital Performance Report*, Office of the Commissioner, New Jersey Department of Health and Senior Services, Fall 2009.

Basic Facts on Patient Safety Indicators

Hackensack's rate of 20.9, which is derived from 21 adverse events among 1,044 surgical discharges, has a 95% confidence interval of 14.5 – 27.2 and is considered statistically significantly higher than the statewide rate of 13.8 per 1,000. By comparison, East Orange's rate of 28.1, which is derived based on one adverse event among 31 surgical discharges, has a 95% confidence interval of 0.0 – 61.9 and is not statistically significantly different from the statewide rate of 13.8 per 1,000.

The technical report provides more details including the ICD-9-CM discharge codes used to define each PSI, ICD-9-CM discharge codes excluded from the analysis and the confidence interval for each indicator.



Definitions of Patient Safety Indicators (PSIs)

- ❖ **FOREIGN BODY LEFT IN DURING PROCEDURE:** This indicator refers to objects accidentally left in a patient during a surgical or other procedure. The rate is measured as the number of cases of a foreign object accidentally left in the body during the procedure per 1,000 discharged patients who had that procedure. No risk-adjustment is made for this measure because the expected rate of occurrence is zero.
- ❖ **IATROGENIC PNEUMOTHORAX:** This indicator flags patients who have air leaking out of their lungs because the lung was accidentally punctured as a result of a medical procedure or operation. It is measured as the number of iatrogenic pneumothorax cases per 1,000 discharges and the indicator is risk-adjusted by age, sex, Diagnosis Related Group (DRG), and comorbidity categories.
- ❖ **POSTOPERATIVE HIP FRACTURE:** This indicator captures in-hospital hip fracture cases (patients who broke a hip bone from a fall following any kind of operation) and excludes fractures that were present on admission. It is measured as the number of cases of in-hospital hip fractures per 1,000 surgical discharges (operating room procedure) and is risk-adjusted for age, sex, DRG, and comorbidity categories.
- ❖ **POSTOPERATIVE HEMORRHAGE OR HEMATOMA:** This indicator tracks the extent to which patients experience too much bleeding or a hematoma (large blood clot) following a surgical procedure. The measure is reported as the number of patients discharged with postoperative hemorrhage or postoperative hematoma or drainage of hematoma per 1,000 surgical discharges and it is risk-adjusted for age, sex, DRG, and comorbidity categories.
- ❖ **POSTOPERATIVE PULMONARY EMBOLISM (PE) OR DEEP VEIN THROMBOSIS (DVT):** This indicator flags pulmonary embolism (a blood clot in the lungs) or deep vein thrombosis (blood clot in a large vein) cases following a surgical procedure (excluding obstetric patients). The measure is reported as the number of DVT or PE cases per 1,000 surgical (operating room procedure) discharges, excluding obstetric patients and is risk-adjusted for age, sex, DRG, and comorbidity categories.

❖ **POSTOPERATIVE SEPSIS:** This indicator flags how often hospitalized patients get a serious bloodstream infection (nosocomial postoperative sepsis) following an operation. The measure is reported as the number of postoperative sepsis cases per 1,000 elective surgery patients, excluding those patients with a principal diagnosis of infection, or those whose immunity is compromised or had cancer, or are obstetric admissions. The measure is risk-adjusted for age, sex, DRG, and comorbidity categories.

❖ **POSTOPERATIVE WOUND DEHISCENCE:** This indicator measures how often a surgical wound in the stomach or pelvic area is split open after an operation. The rate is defined as the number of re-closures of postoperative disruptions (wound dehiscence) of the abdominal wall per 1,000 cases of abdominopelvic surgeries, excluding obstetric admissions. The measure is risk-adjusted for age, sex, DRG, and comorbidity categories.

❖ **ACCIDENTAL PUNCTURE OR LACERATION:** The indicator measures how often a patient is accidentally cut or injured, such as a tear in an organ of the body while receiving medical care. The measure is reported as the number of accidental cuts or lacerations during a procedure per 1,000 discharges, excluding obstetric admissions. The measure is risk-adjusted for age, sex, DRG, and comorbidity categories.

❖ **TRANSFUSION REACTION:** This indicator flags major reactions to blood transfusions and is reported as the number of blood transfusion reactions

per 1,000 discharges. The indicator is not risk-adjusted because the expected rate of occurrence is zero.

❖ **BIRTH TRAUMA - INJURY TO NEONATE:** This indicator flags birth trauma cases among live births in a hospital. It is measured as the number of birth traumas or injuries to neonates per 1,000 live births, excluding some preterm infants and infants with osteogenic imperfecta and is risk-adjusted for the sex of the newborn.

❖ **OBSTETRIC TRAUMA - VAGINAL DELIVERY WITH INSTRUMENT:** This indicator flags potentially preventable trauma cases during vaginal delivery that required the use of forceps or other instrument assistance. The measure is defined as the number of obstetric trauma cases (3rd or 4th degree lacerations, other obstetric lacerations) per 1,000 instrument-assisted vaginal deliveries. The measure is risk-adjusted for age and comorbidity categories.

❖ **OBSTETRIC TRAUMA - VAGINAL DELIVERY WITHOUT INSTRUMENT:** This indicator flags potentially preventable trauma cases that occur during a vaginal delivery that did not require instrument assistance. The measure refers to obstetric trauma cases (4th degree lacerations, other obstetric lacerations) per 1,000 vaginal deliveries without instrument. The measure is risk-adjusted for age and comorbidity categories.



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Basic Facts on Patient Safety Indicators

It is best to assess a hospital by reviewing its results across all 12 PSIs to get a more complete understanding of its performance.

The data show that hospitals vary substantially in their rates of adverse events. Some hospitals have significantly higher rates of adverse events compared to the statewide average while others have significantly lower rates than the state as a whole.

The PSI tables show the 12 PSI measures described above for each of the 73 licensed hospitals in New Jersey in 2007. By reviewing the information in the table, readers can identify hospitals that have better than average, average, or worse than average performance compared to the statewide performance (see top row of table for statewide average).

For example, there were 2,585 cases of patients reported with post-operative

pulmonary embolism (PE) or deep vein thrombosis (DVT) in 2007. The statewide rate for this indicator, which is used as the benchmark for hospital performance assessment, is 9.6 per 1,000 medical and surgical discharges.

When a hospital has a DVT indicator that is statistically significantly above the statewide value of 9.6 per 1,000, the hospital's result is marked by a red arrow. This means the hospital's performance is worse than average.

When a hospital has a PSI that is statistically significantly below 9.6 per 1,000, its result is marked by green arrow. This means the hospital's performance is better than average.

When a hospital's result is not marked with any symbol (red or green arrow), it means that the hospital's indicator is not statistically significantly different from the statewide average.





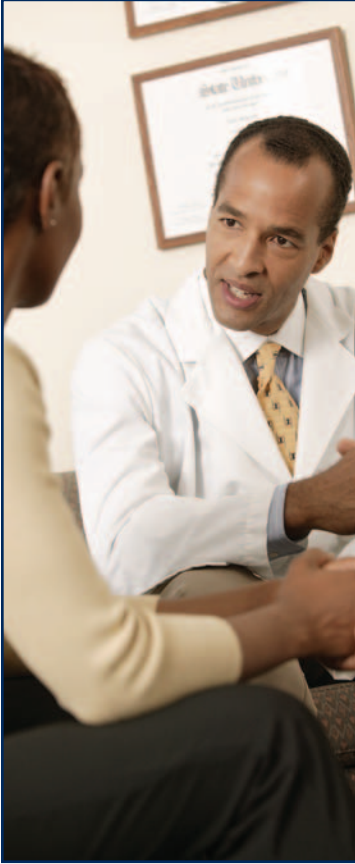
Section 4

Consumer Information

- ✦ **Taking an Active Role in Your Health Care**
- ✦ **Patient Safety Tips for Surgery**
- ✦ **Finding a Doctor or Information on Your Doctor**
- ✦ **Health Information and Referral**
- ✦ **Hospital Patients...Know Your Rights**
- ✦ **Hospital Quality Oversight**
- ✦ **Filing a Complaint**
- ✦ **Quality Improvement Advisory Committee**

Taking an Active Role in Your Healthcare

Take responsibility for your health care by making decisions carefully and learning about your medical condition and treatment options.



Manage Your Medications Safely

ASK the pharmacist whether the medicine is what your doctor prescribed.

ASK both your doctor and your pharmacist to tell you about your medication in understandable terms.

- ❖ What is the purpose of the medicine?
- ❖ How am I supposed to take the medicine and for how long?
- ❖ What side effects are likely? What do I do if they occur?
- ❖ Is this medicine safe to take with my other medicines or dietary supplements?
- ❖ What food, drink or activities should I avoid while taking this medicine?

READ the labels and inserts of the medication to learn about side effects and warnings. If you have any questions about the instructions, ask.

USE the same pharmacy or pharmacy chain for all medications, if possible.

BRING a list of all the medications you are taking if you are entering the hospital.

INCLUDE non-prescription medicines, herbal remedies and dietary supplements, such as vitamins.

SHOW the list of medicines to your doctor, surgeon, hospital pharmacist and hospital staff.

- ❖ If there isn't time to make a list, bring the medications and keep them in their containers.
- ❖ Make sure all your doctors know everything you are taking.

BRING all your medications and supplements with you to your doctor at least once a year, even if you are not being admitted to the hospital.

INFORM your doctors, pharmacist and hospital personnel about any existing drug allergies.

- ❖ While in the hospital, if a health care professional administers or replaces your IV solution, ask about the purpose and dosage.

Get the Results of all Tests and Procedures

CALL your doctor and ask for your results, whether they are taken in the hospital or in your doctor's office. Don't assume that the results are fine if you do not receive a follow-up call.

ASK questions about the results and what they mean.

Know Your Treatment Options

UNDERSTAND what your doctor is telling you about your medical condition.

LEARN as much as you can. Your doctor and/or library can help you find reliable information.

ASK your doctor to explain all of your alternative treatments and non-surgical options, including the potential risks of each one.

CONSIDER getting a second opinion and weigh the possible outcomes of each treatment option.

CHOOSE a hospital that has treated many patients with your condition or the surgery you need. Patients have better results when they are treated in hospitals that have had a lot of experience treating their condition.

When in the Hospital

CONSIDER asking all health care workers that have direct contact with you whether they have washed their hands. Hand washing prevents the spread of infections.

ASK your doctor whether he/she will be visiting you in the hospital or whether there will be a **hospitalist** instead. Many hospitals are hiring **hospitalists** to provide around the clock inpatient care and substitute for your personal physician.

FIND OUT which hospital staff will develop your care plan.

- ❖ Who will be leading this function?
- ❖ How often will they meet to discuss your needs?
- ❖ How often will information be communicated to you and your family?

UNDERSTAND the treatment plan you will use at home.

- ❖ Learn about your medications.
- ❖ Find out when you can resume regular activities.
- ❖ What kind of follow-up care will you require?
- ❖ Will the hospital assist you in finding someone to help with your care at home?
- ❖ What training will the hospital provide to continue your treatment at home?
- ❖ Ask for copies of results of medical and lab tests taken while in the hospital.

Take Charge

TAKE care of your health with regular appointments for routine check-ups and preventive care.

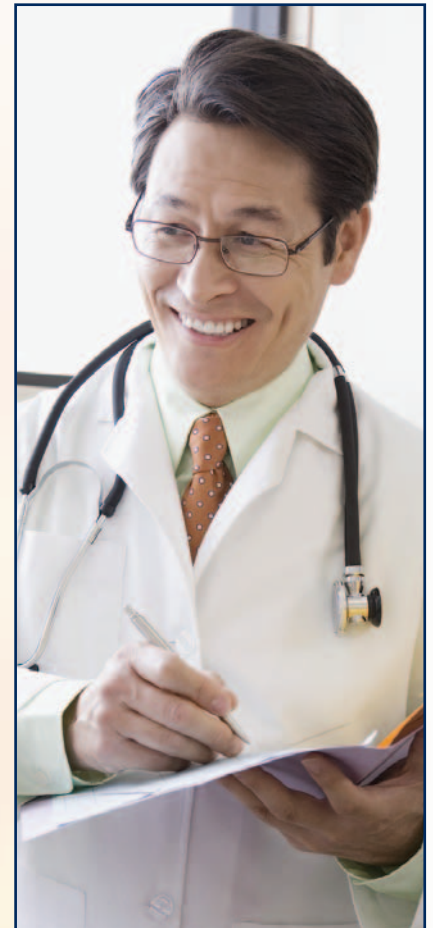
TALK to your doctor about when you need preventive health screenings.

CREATE a healthy lifestyle by eating right, exercising and getting the proper amount of sleep.

BE PREPARED in case of emergencies. Prepare a Living Will, a legal document that describes how you want to be treated in case you are incapacitated or near death.

LEARN your rights and responsibilities when in the hospital.

See Patient Rights Section on page 42.



Patient Safety Tips for Surgery

To make your surgery safer, consider asking your doctor(s), nurse(s) and clinical staff some of the following questions before surgery:

- ❖ **What are my options for the best place to have this type of surgery: in the office, same-day surgery center or hospital?**

Consider cost, your health plan coverage, and above all, safety factors.

- ❖ **What exactly do you expect will be done during surgery?**

Be sure that you, your doctor and your surgeon agree on exactly what will be done during surgery, and you are aware of what to expect.

- ❖ **Are the surgeon, anesthesiologist and nurses aware of any allergies or previous bad reactions to anesthesia that you may have had?**

Don't assume they know what you are allergic to, especially if you have not told them. If you have already told them, remind them.

- ❖ **Can I continue to take medications and vitamins that I am routinely taking?**

Inform all your doctors and nursing staff about all the prescription medications, vitamins, herbal supplements, and over-the-counter medications you are currently taking. Certain combinations of medicines can lead to problems. Patients taking heart medication need to be careful that the combinations will not lead to a heart attack.

- ❖ **Should I wash with an antibiotic soap the day before surgery?**

If you are supposed to wash with an antibiotic soap, ask the doctor to show you how. Doing so may help prevent infections.

- ❖ **Will I need an antibiotic before surgery? If so, for how long?**

Antibiotics should be taken within 1 hour before surgery and stopped within 24 hours in most cases, lowering your risk of infection after surgery.

- ❖ **If hair has to be removed from my body before surgery, will you be using clippers rather than a razor?**

Razors can cause infections if they leave small cuts on the skin.

- ❖ **What will you do to prevent the risk of blood clots?**

Because you do not move while under anesthesia, blood clots can form, possibly leading to a heart attack and a stroke. The more complicated the surgery, the higher the risk. A doctor may give you medication or a compression device/stocking to reduce your chances of forming a blood clot or recommend another treatment. Ask your doctor what treatment is right for you.



How to find a Doctor or Information on a Doctor

For any reason, you may need to find a new doctor or one that specializes in a certain field. Searching for a doctor can be confusing. Below are some suggestions to help guide you in finding a doctor and choosing the right one for you.

What to look for in a Doctor

- ❖ If you have a specific condition, look for a doctor that has experience in treating your condition. Call the doctor's office staff and ask them questions.

- ❖ You may want a doctor who has privileges (is permitted to practice) at a particular hospital. Narrow your search by looking at just those doctors with admitting privileges to this hospital.

- ❖ Get information about the doctor's training and hospital affiliations. Find out if the doctor is board certified in his/her specialty area. "Certified" means that the doctor has completed a training program in a specific specialty. While board certification is a good measure of a doctor's knowledge, you can receive quality care from doctors who are not board certified.

Use the web sites listed in this section or call the doctor's office staff to get the answers. You can also call the American Board of Medical Specialties at (866) 275-2267 to find out if the doctor is board certified.

- ❖ Find out if there are any disciplinary actions against the doctor by contacting the NJ Healthcare Profile through their web site at www.NJdoctorlist.com.

- ❖ Ask about the doctor's office hours, back-up coverage to handle emergencies and how quickly you can make an appointment by calling the doctor's office staff.

Check out the Agency for Health Care Quality and Research (AHRQ's) web site, <http://www.ahrq.gov/consumer/qnt/qntdr.htm>, for more detail.

Choose a Doctor Carefully

- ❖ Ask your insurer for a list of physicians in its network. Some insurers will not reimburse you for visits to doctors outside their network, and others may partially reimburse you.
- ❖ Ask friends, family, co-workers and neighbors for recommendations.
- ❖ Call the doctor referral service at a hospital of your choice and ask them for a list of physicians within the specialized area you are seeking. Keep in mind that they will only provide a list of doctors on their staff and will not make any recommendations.

Use the following web sites to find a doctor or to find out information about a doctor:

- ❖ **New Jersey Healthcare Profile:** www.NJdoctorlist.com helps you find doctors in a specific NJ area or field of medicine. Review a doctor's credentials, background, disciplinary actions and malpractice payments.
- ❖ **DoctorFinder** <http://webapps.ama-assn.org/doctorfinder/home.jsp>, an American Medicine Association (AMA) web site, provides office addresses, phone number, and board certifications on more than 814,000 doctors in the US. Search by name, specialty, hospital, or county.
- ❖ **Physician and Other Health Care Professional Directory** <http://www.medicare.gov/Help/ParticipatingPhysician.asp> (click on Search Tools and Find A Doctor or Other Healthcare Professionals) gives you the specialties, office locations, maps, directions, and phone numbers of doctors who provide services to Medicare patients. Doctors' profiles may also include their education, gender, residency, foreign languages spoken, and hospital affiliation.

Health Information and Referral

These resources provide a good starting point in finding out how to get the best health care.



Health Care Conditions

- ❖ **Asthma Information and Resources (DHSS)**
NJ asthma programs and resources. www.nj.gov/health/fhs/asthma
- ❖ **Asthma Programs (PACNJ)**
Statewide asthma programs and services. (908) 687-9340 ext. 320 or www.pacnj.org
- ❖ **Resources on Allergy, Asthma, and Immunology (AAAAI)**
Asthma and allergy related information. (414) 272-6071 or www.aaaai.org
- ❖ **Cancer Control and Prevention (DHSS)**
Various types of cancer and locations of resources by NJ county. www.nj.gov/health/ccp
- ❖ **Cancer Initiatives (DHSS)**
Cancer resources, research, data, treatment and prevention from state and federal resources. www.nj.gov/health/cancer
- ❖ **Cancer Resources (ACS)**
Comprehensive information on cancer. (800) ACS-2345 or www.cancer.org
- ❖ **Resources for Cancer Patients in New Jersey (NJCCR)**
Information, resources, and support group locations. www.nj.gov/health/ccr/patientresources.htm
- ❖ **Cardiac Surgery in New Jersey (DHSS)**
Coronary artery bypass graft surgery (CABG) death rates for NJ hospitals and physicians. www.nj.gov/health/healthcarequality/documents/cardconsumer06.pdf
- ❖ **Heart Health (AHA)**
A wide range of cardiovascular and stroke topics. (800) 242-8721 or www.americanheart.org
- ❖ **Healthy Lungs (ALA)**
Strategies for fighting lung disease and its prevention, including asthma, smoking, environmental health, and research. (800) LungUSA or www.lungusa.org
- ❖ **Diabetes Information (ADA)**
Information on diabetes. (800) 342-2383 or www.diabetes.org/about-diabetes.jsp
- ❖ **Diabetes Prevention and Control (DHSS)**
Diabetes resources, information, NJ data, and treatment. (609) 984-6137 or www.nj.gov/health/fhs/diabinde.shtml
- ❖ **Diabetes and Me (CDC)**
From the basics to research, statistics, and educational publications. (800) CDC-INFO; TTY (888) 232-6348 or www.cdc.gov/diabetes/consumer/index.htm
- ❖ **Diagnosis/Treatment of Diseases (ACS, ADA, AHA, AACR)**
Current research on diagnosis and treatment of specific diseases. www.PatientInform.com
- ❖ **Health Conditions (CDC)**
Disease prevention and control, environmental health, and health promotion. www.cdc.gov
- ❖ **Health Data Fact Sheets (DHSS)**
Selected NJ health topics, organized alphabetically by topic. www.nj.gov/health/chs/monthlyobs.shtml
- ❖ **Health Issues (NLM, NIH)**
Various conditions, health news, clinical trials, medicines, encyclopedias and medical dictionary from NLM and NIH. www.medlineplus.gov

Seniors

- ❖ **Medicare and You/MyMedicare.gov (CMS)**
Coverage options for health and drug plans; information on benefits, enrollment, eligibility and preventive health. (800) MEDICARE or www.medicare.gov/spotlights.asp#medicare2009
- ❖ **Medicare Preventive Services to Keep You Healthy (CMS)**
Preventive information and services available to Medicare recipients. (800) MEDICARE or www.medicare.gov/health/overview.asp
- ❖ **Medicines and You: A Guide for Older Adults (FDA)**
Importance of knowing your medicines to avoid problems. www.fda.gov/cder/consumerinfo/medANDYouEng.htm

- ❖ **NIHSeniorHealth.gov (NIA, NLM, NIH)**
Authoritative and up-to-date health information. www.NIHSeniorHealth.gov
- ❖ **NJEASE (DHSS)** One simple telephone call to find important NJ programs and benefits for seniors. (877) 222-3737 or www.nj.gov/health/senior/sanjease
- ❖ **Staying Healthy at 50+**
Guide to healthy living. (800) 358-9295 or www.ahrq.gov/ppip/50plus/50plus.pdf
- ❖ **Talking With Your Doctor: A Guide for Older People (NIA)**
How to discuss health concerns and medicines with physicians. (800) 222-2225; TTY (800) 222-4225 or www.niapublications.org/pubs/talking/index.asp

Preventive Care and General Health Information

- ❖ **Everyday Choices for a Healthier Life Style (ACS, ADA, AHA)**
Disease prevention and early detection. www.everydaychoices.org
- ❖ **Healthfinder.gov**
Health information from the federal government and other resources. www.healthfinder.gov
- ❖ **Hospital and Consumer Information (Joint Commission)**
Find accredited hospitals, disease specific hospitals for treatment and learn how to find reliable health information on the internet. www.JointCommission.org/GeneralPublic
- ❖ **NJ HMO Performance Report (DOBI)**
Performance comparisons of NJ's managed care plans and consumer ratings. www.nj.gov/dobi/lhactuar.htm#HMORports
- ❖ **NJ Prescription Drug Retail Price Registry (LPSCA)**
Compare drug retail prices charged by pharmacies. (800)-242-5846. www.njdrugprices.nj.gov
- ❖ **Preventive Care Booklets (AHRQ)**
Guides to healthy habits, screening tests, and immunizations. (800) 358-9295
 - **The Pocket Guide to Good Health for Adults.** www.ahrq.gov/ppip/adguide
 - **The Pocket Guide to Good Health for Children.** www.ahrq.gov/ppip/childguide
 - **Men: Stay Healthy at Any Age.** www.ahrq.gov/ppip/healthymen.htm
 - **Women: Stay Healthy at Any Age.** www.ahrq.gov/ppip/healthywom.htm
- ❖ **Your Guide to Choosing Quality Health Care (AHRQ)** Check lists and worksheets to help determine important criteria for choosing a doctor, a hospital, or treatment. www.ahrq.gov/consumer/qntool.htm

KEY

- AAAAI:**
American Academy of Allergy, Asthma and Immunology
- AACR:**
American Association for Cancer Research
- ACS:**
American Cancer Society
- ADA:**
American Diabetes Association
- AHA:**
American Heart Association
- AHRQ:**
Agency for Healthcare Research and Quality
- ALA:**
American Lung Association
- CDC:**
Centers for Disease Control and Prevention
- CMS:**
Centers for Medicare and Medicaid Services
- DHSS:**
NJ Department of Health and Senior Services
- DOBI:**
NJ Department of Banking and Insurance
- FDA:**
Food and Drug Administration
- LPSCA:**
NJ Law and Public Safety, Consumer Affairs
- NIA:**
National Institute on Aging
- NIH:**
National Institutes of Health
- NJCCR:**
NJ Commission on Cancer Research
- NJEASE:**
New Jersey Easy Access, Single Entry
- NLM:**
National Library of Medicine
- PACNJ:**
Pediatric/Asthma Coalition of NJ

Hospital Patients . . . Know Your Rights

As a patient in a New Jersey hospital, you have the right to:



Medical Care

- ❖ Receive an understandable explanation from your physician of your complete medical condition including recommended treatment, expected results, risks and reasonable alternatives. If your physician believes that some of this information would be detrimental to your health or beyond your ability to understand, the explanation must be given to your next of kin or guardian.
- ❖ Give informed written consent prior to the start of specified, non-emergency medical procedures or treatments only after your physician has explained—in terms you can understand—specific details about the recommended procedure or treatment, the risks, time to recover and reasonable medical alternatives.
- ❖ Be informed of the hospital's written policies and procedures regarding life-saving methods and the use or withdrawal of life-support.
- ❖ Refuse medication and treatment to the extent permitted by law and to be informed of the medical consequences of refusal.
- ❖ Be included in experimental research only when you have given informed consent to participate.
- ❖ Choose your own private professional nurse and contract directly for this care during hospitalization. You can request from the hospital a list of local non-profit professional nurses association registries that refer nurses.
- ❖ Receive appropriate assessment and treatment for pain.

Transfers

- ❖ Be transferred to another facility only if the current hospital is unable to provide the level of appropriate medical care or if the transfer is requested by you or your next of kin or guardian.
- ❖ Receive from a physician in advance an explanation of the reasons for transfer including alternatives, verification of acceptance from the receiving facility, and assurance that the move will not worsen your medical condition.

Communication and Information

- ❖ Be treated with courtesy, consideration and respect for your dignity and individuality.
- ❖ Know the names and functions of all physicians and other health care professionals directly caring for you.
- ❖ Expediently receive the services of a translator or interpreter, if needed, to communicate with the hospital staff.
- ❖ Be informed of the names, titles, and duties of other health care professionals and educational institutions that participate in your treatment. You have the right to refuse to allow their participation.
- ❖ Be advised in writing of the hospital's rules regarding the conduct of patients and visitors.
- ❖ Receive a summary of your rights as a patient, including the name(s) and phone number(s) of the hospital staff to whom to direct questions or complaints about possible violations of your rights. If at least 10% of the hospital's service area speaks your native language, you can receive a copy of the summary in your native language.

Medical Records

- ❖ Have prompt access to your medical records. If your physician feels that this access is detrimental to your health, your next of kin or guardian has a right to see your records.
- ❖ Obtain a copy of your medical records at a reasonable fee within 30 days after submitting a written request to the hospital.

Cost of Hospital Care

- ❖ Receive a copy of the hospital charges, an itemized bill, if requested, and an explanation.
- ❖ Appeal any charges and receive an explanation of the appeals process.
- ❖ Obtain the hospital's help in securing public assistance and private health care benefits to which you may be entitled.

Discharge Planning

- ❖ Be informed about any need for follow-up care and receive assistance in obtaining this care required after your discharge from the hospital.
- ❖ Receive sufficient time before discharge to arrange for follow-up care after hospitalization.
- ❖ Be informed by the hospital about the discharge appeal process.

Privacy and Confidentiality

- ❖ Be provided with physical privacy during medical treatment and personal hygiene functions, unless you need assistance.
- ❖ Be assured confidentiality about your patient stay. Your medical and financial

records shall not be released to anyone outside the hospital without your approval, unless you are transferred to another facility that requires the information, or release of the information is required and permitted by law.

- ❖ Have access to individual storage space for your private use and to safeguard your property if unable to assume that responsibility.

Freedom from Abuse and Restraints

- ❖ Be free from physical and mental abuse.
- ❖ Be free from restraints unless authorized by a physician for a limited period of time to protect your safety or the safety of others.

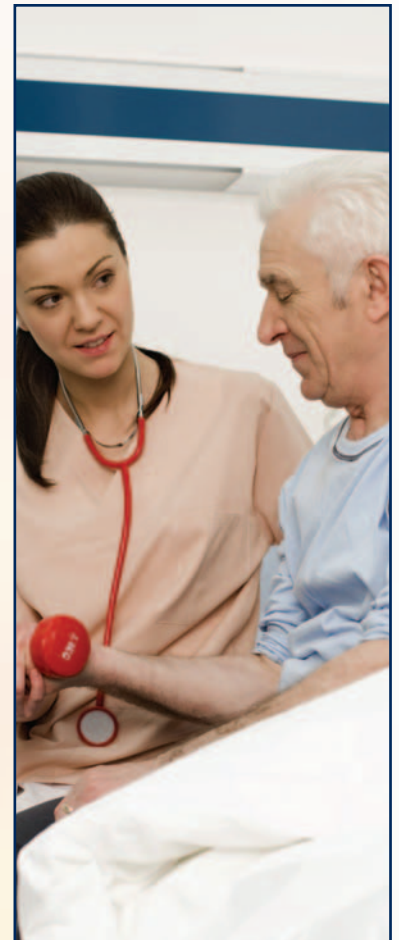
Civil Rights

- ❖ Receive treatment and medical services without discrimination based on race, age, religion, national origin, sex, sexual preferences, handicap, diagnosis, ability to pay or source of payment.
- ❖ Exercise your constitutional, civil and legal rights.

Questions, Complaints and Appeals

- ❖ Ask questions or file grievances about patient rights with a designated hospital staff member and receive a response within a reasonable period.
- ❖ Be provided, by the hospital, with contact information for the New Jersey Department of Health and Senior Services unit that handles questions and complaints.

See Filing a Complaint on page 45 for details.



Health Care Quality Oversight

In addition to this performance report, other steps are taken to promote quality in New Jersey hospitals.

New Jersey Department of Health and Senior Services (DHSS)

The Department's oversight activities are intended to promote the health, safety and welfare of patients/residents in New Jersey health care facilities.

LICENSURE: DHSS issues licenses to hospitals, ambulatory care and other healthcare facilities. You can access the names, addresses, licensure expiration dates and other information on the hospitals licensed by DHSS by visiting www.state.nj.us/health/healthfacilities/search/ac.shtml.

INSPECTIONS: To evaluate compliance with State regulatory standards, the Department conducts facility inspections and also responds to specific complaints. In addition, the Department conducts inspections under contract to the U.S. Department of Health and Human Services to evaluate facility compliance with Medicare conditions of participation.

ENFORCEMENT: If a hospital does not meet State licensure or Medicare standards, the Department may cite the hospital for a deficiency, and the hospital must submit a plan of correction. In the case of licensure standards violations, the Department may also issue a monetary penalty or take other actions.

PATIENT SAFETY: DHSS oversees several initiatives that ensure the safety of inpatients in New Jersey hospitals.

- ❖ The Patient Safety Reporting System is responsible for collecting confidential information on medical errors from hospitals and ensuring that hospitals review these events to prevent reoccurrence.
- ❖ The Patient Safety Indicators (PSIs) are a data set developed by the Agency for Health Care Research and Quality (AHRQ) that measure the extent to which certain avoidable medical errors occur in each hospital. Recent legislation has mandated that DHSS publicly report this information for NJ hospitals. The results of the data can be found on pages 25 of this report. More detail can be found on the web at www.nj.gov/health/hpr.

The Joint Commission

The Joint Commission, formerly JCAHO, is an independent, not-for-profit national organization that evaluates and accredits nearly 15,000 health care organizations. All New Jersey hospitals are accredited by the Joint Commission. For additional information on specific hospitals, visit the Joint Commission web site at www.jointcommission.org, under Quality Check. You can also request a printed copy from the Customer Service Center at (630) 792-5800.



About a New Jersey Hospital and how it:

Treated You:	Write... New Jersey Department of Health and Senior Services, Division of Health Facilities Evaluation and Licensing, PO Box 367, Trenton, NJ 08625-0367 Visit... www.nj.gov/health/healthfacilities/hotlines.shtml Call... Complaint hotline at (800) 792-9770
Handled Your Application for Charity Care:	Write... New Jersey Department of Health and Senior Services, New Jersey Hospital Care Payment Assistance Program, PO Box 360, Trenton, NJ 08625-0360 Call... New Jersey Hospital Care Payment Assistance Program at (866) 588-5696
Billed You and You Are Covered By a New Jersey Health Maintenance Organization:	Write... Department of Banking and Insurance, Consumer Protection Services, Managed Care Complaints and Appeals, PO Box 329, 20 West State Street, 9th floor, Trenton, NJ 08625-0329 Visit... www.state.nj.us/dobi/mcfaqs.htm Call... Office of Managed Care at (888) 393-1062
Billed You and You Are Enrolled in Medicare:	Call... Medicare Program at (800) MEDICARE Visit... Medicare Program at www.medicare.gov
Billed You and You Are Enrolled in Medicaid:	Call... Medicaid hotline at (800) 356-1561

About a New Jersey Physician:

Write New Jersey Board of Medical Examiners, PO Box 183, Trenton, NJ 08625-0183

Visit www.njconsumeraffairs.gov/bme/bmeform.htm

Call New Jersey Board of Medical Examiners at (609) 826-7100 to obtain a complaint form

About a New Jersey Nurse:

Write New Jersey Board of Nursing, PO Box 45010, Newark, NJ 07101

Call New Jersey Board of Nursing at (973) 504-6457

Quality Improvement Advisory Committee (QIAC)

QIAC is an advisory committee for the NJ Department of Health and Senior Services (NJDHSS) that provided advice on the development of the report.

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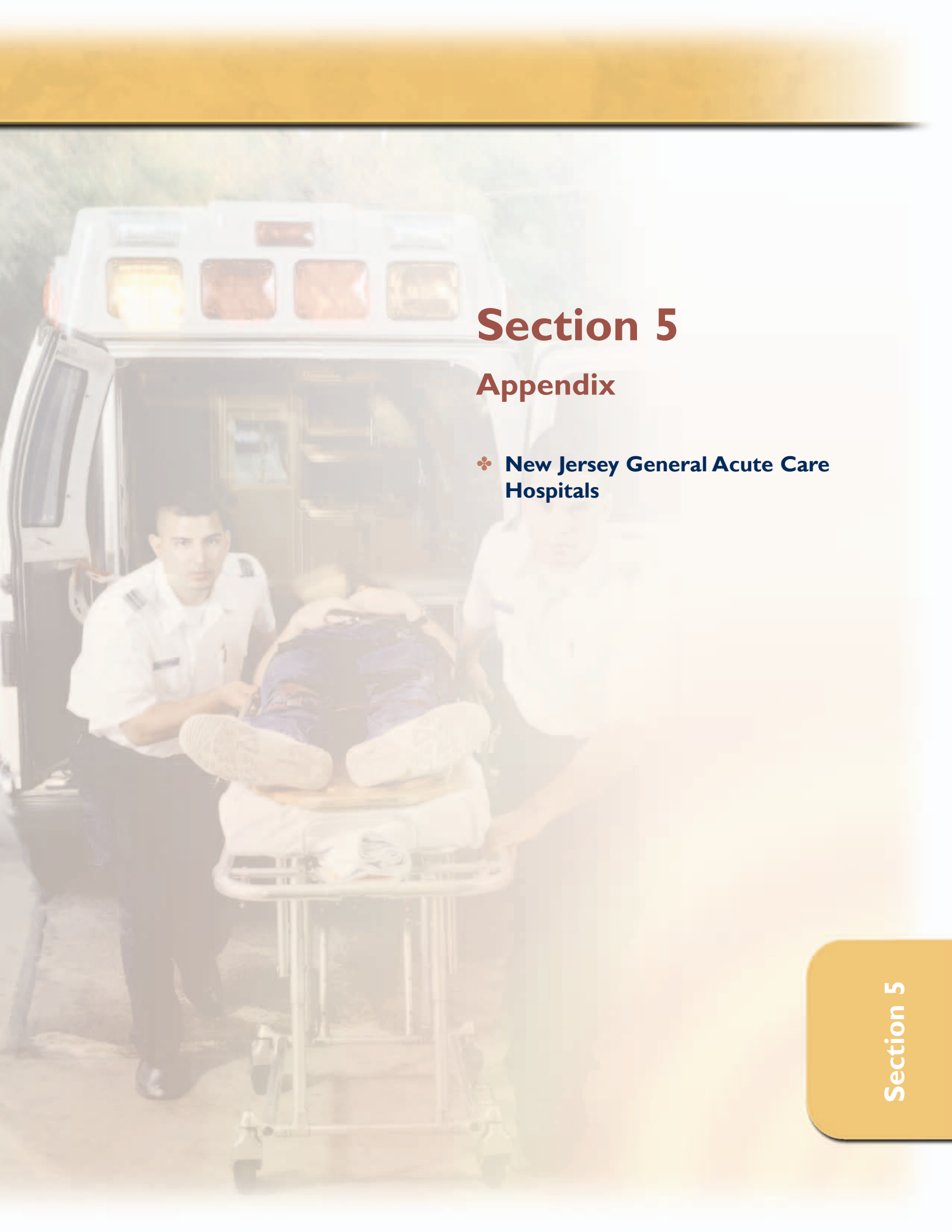
Juana Jackson

Marcia Jaffe

Abate Mammo

Sharon Sedlak

* Resigned as of December 2008

A photograph of an ambulance with its rear door open. Two paramedics in white uniforms are attending to a patient lying on a stretcher. The patient is wearing blue pants and white sneakers. The ambulance has several emergency lights on its roof, some of which are illuminated. The background is slightly blurred, showing some greenery.

Section 5

Appendix

- ✦ **New Jersey General Acute Care Hospitals**

New Jersey General Acute Care Hospitals

AtlantiCare Regional Medical Center—City Division

1925 Pacific Avenue
Atlantic City, NJ 08401
(609) 344-4081
www.atlanticare.org

AtlantiCare Regional Medical Center—Mainland Division

Jimmie Leeds Road
Pomona, NJ 08240
(609) 652-1000
www.atlanticare.org

Bayonne Medical Center

29th Street & Avenue E
Bayonne, NJ 07002
(201) 858-5000
www.bayonnemedicalcenter.org

Bayshore Community Hospital

727 North Beers Street
Holmdel, NJ 07733
(732) 739-5900
www.bchs.com

Bergen Regional Medical Center

230 E. Ridgewood Avenue
Paramus, NJ 07652
(201) 967-4000
www.bergenregional.com

Cape Regional Medical Center

Two Stone Harbor Boulevard
Cape May Court House, NJ 08210
(609) 463-2000
www.caperregional.com

Capital Health System at Fuld

750 Brunswick Avenue
Trenton, NJ 08638
(609) 394-6000
www.capitalhealth.org

Capital Health System at Mercer

446 Bellevue Avenue
Trenton, NJ 08618
(609) 394-4000
www.capitalhealth.org

CentraState Medical Center

901 West Main Street
Freehold, NJ 07728
(732) 431-2000
www.centrastate.com

Chilton Memorial Hospital

97 West Parkway
Pompton Plains, NJ 07444
(973) 831-5000
www.chiltonmemorial.org

Christ Hospital

176 Palisade Avenue
Jersey City, NJ 07306
(201) 795-8200
www.chrighthospital.org

Clara Maass Medical Center

One Clara Maass Drive
Belleville, NJ 07109
(973) 450-2000
www.sbhcs.com/hospitals/clara_maass

Community Medical Center

99 Route 37 West
Toms River, NJ 08755
(732) 557-8000
www.sbhcs.com/hospitals/community_medical

Cooper Hospital/University Medical Center

One Cooper Plaza
Camden, NJ 08103
(856) 342-2000
www.cooperhealth.org

Deborah Heart and Lung Center

200 Trenton Road
Browns Mills, NJ 08015
(609) 893-6611
www.deborah.org

East Orange General Hospital

300 Central Avenue
East Orange, NJ 07018
(973) 672-8400
www.evh.org

Englewood Hospital and Medical Center

350 Engle Street
Englewood, NJ 07631
(201) 894-3000
www.englewoodhospital.com

Hackensack University Medical Center

30 Prospect Avenue
Hackensack, NJ 07601
(201) 996-2000
www.humed.com

Hackettstown Regional Medical Center

651 Willow Grove Street
Hackettstown, NJ 07840
(908) 852-5100
www.hch.org

Hoboken University Medical Center

308 Willow Avenue
Hoboken, NJ 07030
(201) 418-1000
www.hobokenumc.com

Holy Name Hospital

718 Teaneck Road
Teaneck, NJ 07666
(201) 833-3000
www.holyname.org

Hunterdon Medical Center

2100 Wescott Drive
Flemington, NJ 08822
(908) 788-6100
www.hunterdonhealthcare.org

Jersey City Medical Center

355 Grand Street
Jersey City, NJ 07302
(201) 915-2000
www.libertyhealth.org

Jersey Shore University Medical Center

1945 Route 33
Neptune, NJ 07753
(732) 775-5500
www.meridianhealth.com

JFK Medical Center

65 James Street
Edison, NJ 08818
(732) 321-7000
www.jfkmc.org

Kennedy Memorial Hospitals—UMC Cherry Hill Division

2201 Chapel Avenue West
Cherry Hill, NJ 08002
(856) 488-6500
www.kennedyhealth.org

Kennedy Memorial Hospitals—UMC Stratford Division

18 East Laurel Road
Stratford, NJ 08084
(856) 346-6000
www.kennedyhealth.org

Kennedy Memorial Hospitals—UMC Washington Twp. Division

435 Hurffville-Cross Keys Road
Turnersville, NJ 08012
(856) 582-2500
www.kennedyhealth.org

New Jersey General Acute Care Hospitals

Kimball Medical Center

600 River Avenue
Lakewood, NJ 08701
(732) 363-1900
www.sbhcs.com/hospitals/kimbal_medical

Lourdes Medical Center of Burlington County

218 Sunset Road
Willingboro, NJ 08046
(609) 835-2900
www.lourdesnet.org

Meadowlands Hospital Medical Center

55 Meadowlands Parkway
Secaucus, NJ 07096
(201) 392-3100
www.libertyhealth.org

Memorial Hospital of Salem County

310 Woodstown Road
Salem, NJ 08079
(856) 935-1000
www.mhschealth.com

Monmouth Medical Center

300 Second Avenue
Long Branch, NJ 07740
(732) 222-5200
www.sbhcs.com/hospitals/monmouth_medical

Morristown Memorial Hospital

100 Madison Avenue
Morristown, NJ 07962
(973) 971-5000
www.atlantichealth.org

Mountainside Hospital

1 Bay Avenue
Montclair, NJ 07042
(973) 429-6000
www.mountainsidenow.org

Newark Beth Israel Medical Center

201 Lyons Avenue
Newark, NJ 07112
(973) 926-7000
www.sbhcs.com/hospitals/newark_beth_israel

Newton Memorial Hospital

175 High Street
Newton, NJ 07860
(973) 383-2121
www.nmhnj.org

Ocean Medical Center

425 Jack Martin Boulevard
Brick, NJ 08724
(732) 840-2200
www.meridianhealth.com

Our Lady of Lourdes Medical Center

1600 Haddon Avenue
Camden, NJ 08103
(856) 757-3500
www.lourdesnet.org

Overlook Hospital

99 Beauvoir Avenue
Summit, NJ 07902
(908) 522-2000
www.atlantichealth.org

Palisades Medical Center of New York Presbyterian Healthcare System

7600 River Road
North Bergen, NJ 07047
(201) 854-5000
www.palisadesmedical.org

Raritan Bay Medical Center—Old Bridge Division

One Hospital Plaza
Old Bridge, NJ 08857
(732) 360-1000
www.rbmc.org

**Raritan Bay Medical Center—
Perth Amboy Division**

530 New Brunswick Avenue
Perth Amboy, NJ 08861
(732) 442-3700
www.rbmc.org

Riverview Medical Center

One Riverview Plaza
Red Bank, NJ 07701
(732) 741-2700
www.meridianhealth.com

**Robert Wood Johnson
University Hospital**

One Robert Wood Johnson Place
New Brunswick, NJ 08901
(732) 828-3000
www.rwjuh.edu

**Robert Wood Johnson University
Hospital at Hamilton**

One Hamilton Health Place
Hamilton, NJ 08690
(609) 586-7900
www.rwjhamilton.org

**Robert Wood Johnson University
Hospital at Rahway**

865 Stone Street
Rahway, NJ 07065
(732) 381-4200
www.rwjuhr.com

Shore Memorial Hospital

1 East New York Avenue
Somers Point, NJ 08244
(609) 653-3500
www.shorememorial.org

Somerset Medical Center

110 Rehill Avenue
Somerville, NJ 08876
(908) 685-2200
www.somersetmedicalcenter.com

South Jersey Healthcare Regional Medical Center

1505 West Sherman Avenue
Vineland, NJ 08360
(856) 641-8000
www.sjhealthcare.net

South Jersey Hospital—Elmer

501 West Front Street
Elmer, NJ 08318
(856) 363-1000
www.sjhealthcare.net

Southern Ocean County Hospital

1140 Route 72 West
Manahawkin, NJ 08050
(609) 597-6011
www.soch.com

Saint Barnabas Medical Center

94 Old Short Hills Road
Livingston, NJ 07039
(973) 322-5000
www.sbhcs.com/hospitals/saint_barnabas

St. Clare's Hospital—Denville

25 Pocono Road
Denville, NJ 07834
(973) 625-6000
www.saintclares.org

St. Clare's Hospital—Dover

400 West Blackwell Street
Dover, NJ 07801
(973) 989-3000
www.saintclares.org

St. Clare's Hospital—Sussex

20 Walnut Street
Sussex, NJ 07461
(973) 702-2600
www.saintclares.org

St. Francis Medical Center

601 Hamilton Avenue
Trenton, NJ 08629
(609) 599-5000
www.stfrancismedical.com

New Jersey General Acute Care Hospitals

St. Joseph's Hospital and Medical Center

703 Main Street
Paterson, NJ 07503
(973) 754-2000
www.stjosephshealth.org

St. Joseph's Wayne Hospital

224 Hamburg Turnpike
Wayne, NJ 07470
(973) 942-6900
www.stjosephshealth.org

St. Mary's Hospital (Passaic)

350 Boulevard
Passaic, NJ 07055
(973) 365-4300
www.smh-passaic.com

St. Michael's Medical Center

111 Central Avenue
Newark, NJ 07102
(973) 877-5000
www.smmcnj.org

St. Peter's University Hospital

254 Easton Avenue
New Brunswick, NJ 08901
(732) 745-8600
www.saintpetersuh.com

Trinitas Hospital

225 Williamson Street
Elizabeth, NJ 07207
(908) 994-5000
www.trinitashospital.com

UMDNJ—University Hospital

150 Bergen Street
Newark, NJ 07103
(973) 972-4300
www.theuniversityhospital.com

Underwood—Memorial Hospital

509 N. Broad Street
Woodbury, NJ 08096
(856) 845-0100
www.umhospital.org

University Medical Center at Princeton

253 Witherspoon Street
Princeton, NJ 08540
(609) 497-4000
www.princetonhcs.org

Valley Hospital

223 North Van Dien Avenue
Ridgewood, NJ 07450
(201) 447-8000
www.valleyhealth.com

Virtua—Memorial Hospital of Burlington County

175 Madison Avenue
Mount Holly, NJ 08060
(609) 267-0700
www.virtua.org

Virtua—West Jersey Hospital Berlin

100 Townsend Avenue
Berlin, NJ 08009
(856) 322-3000
www.virtua.org

Virtua—West Jersey Hospital Marlton

90 Brick Road
Marlton, NJ 08053
(856) 355-6000
www.virtua.org

Virtua—West Jersey Hospital Voorhees

101 Carnie Boulevard
Voorhees, NJ 08043
(856) 325-3000
www.virtua.org

Warren Hospital

185 Roseberry Street
Phillipsburg, NJ 08865
(908) 859-6700
www.warrenhospital.org

For questions about this report, please contact:

**Office of the Commissioner
Health Care Quality Assessment (HCQA)
New Jersey Department of Health and Senior Services
P.O. Box 360, Trenton, New Jersey 08625-0360**

You can also reach HCQA by phone at (800) 418-1397.

Find more information on our web site at www.nj.gov/health/hpr. The site allows you to choose hospitals to compare by hospital name, condition or county. In addition to the recommended care measures and Patient Safety Indicators (PSI) included in this report, the web site also includes mortality measures for coronary artery bypass graft (CABG) surgery, heart attack, pneumonia, heart failure, and stroke. The web site also contains an extensive list of resources and patient safety tips on how to prevent medical errors.

Portions of this report rely on material developed by the US Department of Health and Human Services, Centers for Medicare and Medicaid Services, the Agency for Healthcare Research and Quality, and the Joint Commission.

Other reports produced by HCQA and found at the web site:

**Cardiac Surgery in New Jersey
Inpatient Quality Indicators
Bariatric Surgery in New Jersey
Prevention Quality Indicators
Patient Safety Indicators**

New Jersey 2009
Hospital Performance Report

A Consumer Report