

**Reporting Period for Clinical Process Measures: Third Quarter 2008 through Second Quarter 2009 Discharges**

**150101-PARKVIEW WHITLEY HOSPITAL**

Address: 353 N OAK ST City, State, ZIP: COLUMBIA CITY, IN 46725 Phone Number: (260) 248-9301 County Name: WHITLEY	Type of Facility: Short-term Type of Ownership: Voluntary non-profit - Private Accreditation Status: Yes Emergency Service Provided: Yes	Participation in a Systematic Database for: Cardiac Surgery: Does Not Have a Program
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Hospital Quality Measures		Your Hospital Performance Aggregate Rate for All Four Quarters	10% of All Hospitals Submitting Data Scored Equal to or Higher Than	State Average	National Average
<b>Acute Myocardial Infarction (AMI)</b>					
AMI-1	Aspirin at Arrival	80% of 5 patients(1)	100%	94%	94%
AMI-2	Aspirin Prescribed at Discharge	50% of 2 patients(1)	100%	95%	93%
AMI-3	ACEI or ARB for LVSD	0 patients	100%	94%	92%
AMI-4	Adult Smoking Cessation Advice/Counseling	100% of 1 patients(1)	100%	99%	96%
AMI-5	Beta-Blocker Prescribed at Discharge	50% of 2 patients(1)	100%	94%	94%
AMI-7a	Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival	0 patients	100%	31%	45%
AMI-8a	Primary PCI Received Within 90 Minutes of Hospital Arrival	0 patients	99%	79%	81%
<b>Heart Failure (HF)</b>					
HF-1	Discharge Instructions	81% of 27 patients	99%	80%	78%
HF-2	Evaluation of LVS Function	95% of 44 patients	100%	93%	90%
HF-3	ACEI or ARB for LVSD	80% of 5 patients(1)	100%	90%	90%
HF-4	Adult Smoking Cessation Advice/Counseling	100% of 8 patients(1)	100%	95%	92%
<b>Pneumonia (PN)</b>					
PN-2	Pneumococcal Vaccination	100% of 64 patients	100%	90%	86%
PN-3b	Blood Cultures Performed in the Emergency Department Prior to Initial Antibiotic Received in Hospital	98% of 46 patients	100%	92%	92%
PN-4	Adult Smoking Cessation Advice/Counseling	100% of 28 patients	100%	95%	90%
PN-5c	Initial Antibiotic Received Within 6 Hours of Hospital Arrival	100% of 65 patients	100%	95%	94%
PN-6	Initial Antibiotic Selection for CAP in Immunocompetent Patient	95% of 58 patients	98%	86%	88%
PN-7	Influenza Vaccination	97% of 35 patients	100%	88%	85%

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Hospital Quality Measures		Your Hospital Performance Aggregate Rate for All Four Quarters	10% of All Hospitals Submitting Data Scored Equal to or Higher Than	State Average	National Average
<b>Surgical Care Improvement Project (SCIP)</b>					
SCIP-Inf-1	Prophylactic Antibiotic Received Within 1 Hour Prior to Surgical Incision	90% of 48 patients	99%	90%	91%
SCIP-Inf-2	Prophylactic Antibiotic Selection for Surgical Patients	98% of 48 patients	100%	95%	95%
SCIP-Inf-3	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time	89% of 44 patients	99%	90%	90%
SCIP-Inf-4	Cardiac Surgery Patients With Controlled 6 A.M. Postoperative Blood Glucose	0 patients	99%	91%	89%
SCIP-Inf-6	Surgery Patients with Appropriate Hair Removal	100% of 64 patients	100%	99%	97%
SCIP-Card-2	Surgery Patients on Beta-Blocker Therapy Prior to Admission Who Received a Beta-Blocker During the Perioperative Period	100% of 9 patients(1)	100%	86%	87%
SCIP-VTE-1	Surgery Patients with Recommended Venous Thromboembolism Prophylaxis Ordered	89% of 47 patients	100%	88%	88%
SCIP-VTE-2	Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery	87% of 47 patients	99%	85%	86%

**Footnote Legend**

**0 patients: No patients met the criteria for inclusion in the measure calculation.**

1. The number of cases is too small (n<25) for purposes of reliably predicting hospital performance.
2. Measure reflects the hospital's indication that its submission was based upon a sample of its relevant discharges.
3. Rate reflects fewer than maximum possible quarters of data.
4. Inaccurate information submitted and suppressed for one or more quarters.
5. No data are available for publication from the hospital for this measure.

**PN-7 is reported by Flu Season ONLY**

**Hospital Quality Alliance: Improving Care Through Information**  
*Hospital Performance*

**Reporting Period for Outcome Measures: Third Quarter 2005 through Second Quarter 2008 Discharges**

**150101-PARKVIEW WHITLEY HOSPITAL**

Address: 353 N OAK ST	Type of Facility: Short-term	Participation in a Systematic Database for:
City, State, ZIP: COLUMBIA CITY, IN 46725	Type of Ownership: Voluntary non-profit - Private	Cardiac Surgery: Does Not Have a Program
Phone Number: (260) 248-9301	Accreditation Status: Yes	
County Name: WHITLEY	Emergency Service Provided: Yes	

**30-Day Risk-Standardized Mortality Measures**

	Hospital Quality Measures	Your Hospital Performance	Your Hospital's Number of Eligible Medicare Admissions	Your Hospital's Risk-Standardized Mortality Rate (Lower Limit, Upper Limit of 95% Interval Estimate)	U.S. National Rate	Number of Hospitals...	Better than U.S. National Rate	No Different than U.S. National Rate	Worse than U.S. National Rate	Number of Cases Too Small*
<b>Acute Myocardial Infarction (AMI)</b>										
MORT-30-AMI	Acute Myocardial Infarction (AMI) 30-Day Mortality Rate	No Different than U.S. National Rate	30	17.6%(13.3%,22.6%)	16.6%	in the <b>Nation</b> that Performed ...	131	2814	54	1610
						in the <b>State</b> that Performed ...	3	76	1	37
<b>Heart Failure (HF)</b>										
MORT-30-HF	Heart Failure (HF) 30-Day Mortality Rate	No Different than U.S. National Rate	78	9.9%(7.1%,13.8%)	11.1%	in the <b>Nation</b> that Performed ...	213	3812	163	585
						in the <b>State</b> that Performed ...	5	106	5	2
<b>Pneumonia (PN)</b>										
MORT-30-PN	Pneumonia (PN) 30-Day Mortality Rate	No Different than U.S. National Rate	176	12.3%(9.3%,15.9%)	11.5%	in the <b>Nation</b> that Performed ...	253	3934	284	343
						in the <b>State</b> that Performed ...	9	100	5	4

Reporting Period for Outcome Measures: Third Quarter 2005 through Second Quarter 2008 Discharges

**150101-PARKVIEW WHITLEY HOSPITAL**

**30-Day Risk-Standardized Readmission Measures**

	Hospital Quality Measures	Your Hospital Performance	Your Hospital's Number of Eligible Medicare Discharges	Your Hospital's Risk-Standardized Readmission Rate (Lower Limit, Upper Limit of 95% Interval Estimate)	U.S. National Rate	Number of Hospitals...	Better than U.S. National Rate	No Different than U.S. National Rate	Worse than U.S. National Rate	Number of Cases Too Small*
<b>Acute Myocardial Infarction (AMI)</b>										
READM-30-AMI	Acute Myocardial Infarction (AMI) 30-day Readmission Rate	Number of Cases Too Small*	17	Will Not be Reported	19.9%	in the <b>Nation</b> that Performed ...	36	2488	52	1944
						in the <b>State</b> that Performed ...	6	62	0	49
<b>Heart Failure (HF)</b>										
READM-30-HF	Heart failure (HF) 30-Day Readmission Rate	No Different than U.S. National Rate	86	24.9%(20.4%,30.2%)	24.5%	in the <b>Nation</b> that Performed ...	180	3854	233	520
						in the <b>State</b> that Performed ...	12	103	2	1
<b>Pneumonia (PN)</b>										
READM-30-PN	Pneumonia (PN) 30-Day Readmission Rate	No Different than U.S. National Rate	174	17.4%(14.1%,21.2%)	18.2%	in the <b>Nation</b> that Performed ...	88	4199	198	349
						in the <b>State</b> that Performed ...	11	101	1	5

**Footnote Legend**

\*The Number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing.

5. No data are available for publication from the hospital for this measure.

**Hospital Quality Alliance: Improving Care Through Information**  
*Hospital CAHPS(HCAHPS) Survey*

**Reporting Period for HCAHPS Measures: Third Quarter 2008 through Second Quarter 2009 Discharges**

**150101-PARKVIEW WHITLEY HOSPITAL**

Address: 353 N OAK ST  
 City, State, ZIP: COLUMBIA CITY, IN 46725  
 Phone Number: (260) 248-9301  
 County Name: WHITLEY

Type of Facility: Short-term  
 Type of Ownership: Voluntary non-profit - Private  
 Accreditation Status: Yes  
 Emergency Service Provided: Yes

Participation in a Systematic Database for:  
 Cardiac Surgery: Does Not Have a Program

**HCAHPS Survey Completion and Response Rate**

<b>Number of Completed Surveys</b>	404
<b>Survey Response Rate</b>	49

**HCAHPS Composites and Items**

HCAHPS Composites		Your Hospital's Adjusted Score			State Average			U.S. Average			
		% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	
Composite 1 (Q1 to Q3)	Communication with Nurses	1	15	84	4	19	77	6	19	75	
Composite 2 (Q5 to Q7)	Communication with Doctors	0	10	90	4	15	81	5	15	80	
Composite 3 (Q4 & Q11)	Responsiveness of Hospital Staff	2	23	75	8	26	66	11	26	63	
Composite 4 (Q13 & Q14)	Pain Management	2	22	76	6	24	70	8	24	68	
Composite 5 (Q16 & Q17)	Communication about Medicines	13	19	68	22	19	59	22	19	59	
Hospital Environment Items		% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	
Q8	Cleanliness of Hospital Environment	6	22	72	8	19	73	10	20	70	
Q9	Quietness of Hospital Environment	10	36	54	11	33	56	12	31	57	
Discharge Information Composite		% Yes		% No		% Yes		% No			
Composite 6 (Q19 & Q20)	Discharge Information	87		13		82		18		81	

## Hospital CAHPS(HCAHPS) Survey

Reporting Period for HCAHPS Measures: Third Quarter 2008 through Second Quarter 2009 Discharges

**150101-PARKVIEW WHITLEY HOSPITAL**

HCAHPS Overall Ratings										
		Your Hospital's Adjusted Score			State Average			U.S. Average		
(Q 21)	Overall Rating of this Hospital	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating
Overall Rating of Hospital (0 = Worst Hospital 10 = Best Hospital)		4	20	76	8	22	70	10	25	65
		Your Hospital's Adjusted Score			State Average			U.S. Average		
(Q 22)	Willingness to Recommend this Hospital	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend
Willingness to Recommend this Hospital		3	23	74	4	25	71	6	26	68

**Footnote Legend**

6. Fewer than 100 patients completed the HCAHPS survey. Use these rates with caution, as the number of surveys may be too low to reliably assess hospital performance.
7. Survey results are based on less than 12 months of data.
8. Survey results are not available for this reporting period.
9. No or very few patients were eligible for the HCAHPS survey. The scores shown, if any, reflect a very small number of surveys.
11. There were discrepancies in the data collection process.