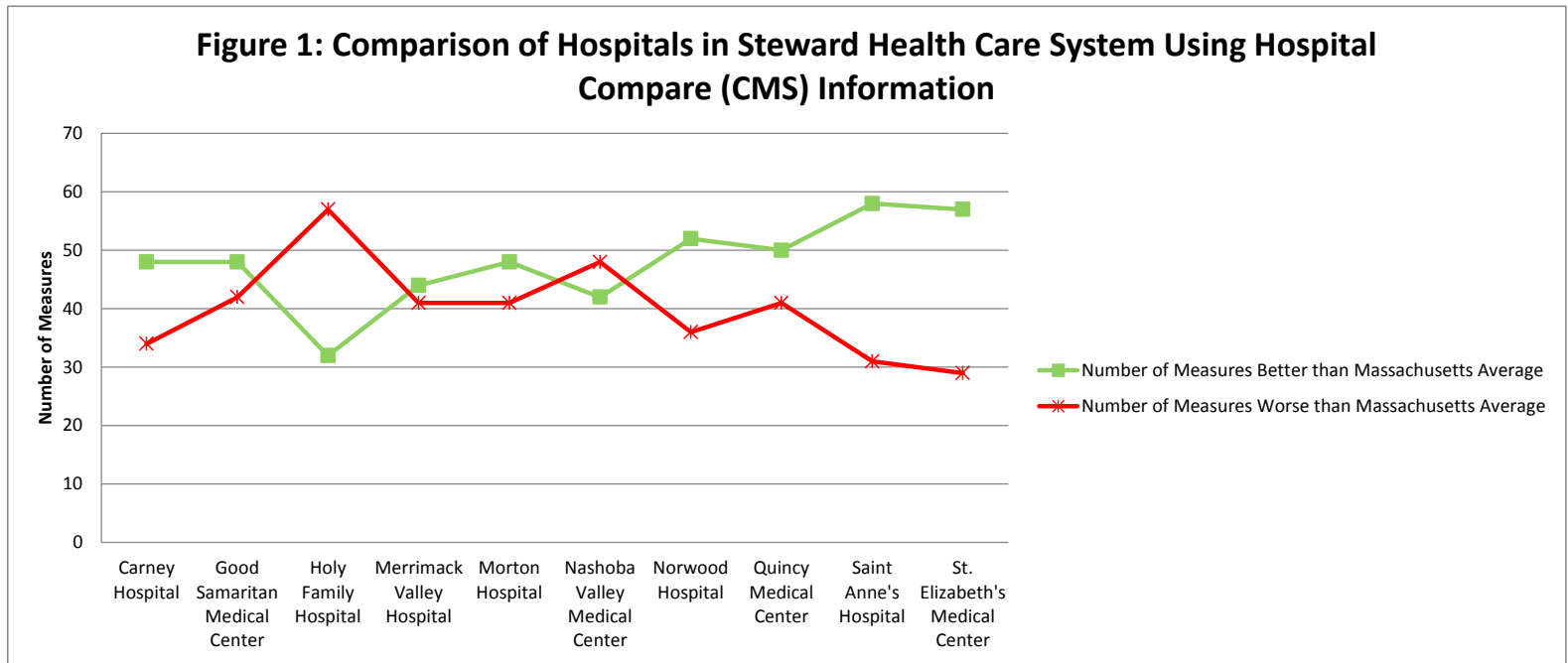


Comparison of Hospitals in Steward Health Care System Using Hospital Compare (CMS) Information

Summary of Findings	Carney Hospital	Good Samaritan Medical Center	Holy Family Hospital	Merrimack Valley Hospital	Morton Hospital	Nashoba Valley Medical Center	Norwood Hospital	Quincy Medical Center	Saint Anne's Hospital	St. Elizabeth's Medical Center	Total
Number of Measures Better than State Average											
Timely & Effective Care	33	38	20	33	36	29	35	43	32	41	340
Readmissions, Complications & Death	8	7	6	6	7	6	7	5	8	7	67
Patient Survey Results	7	1	5	3	2	5	8	0	14	8	53
Use of Medical Imaging	0	2	1	2	3	2	2	2	4	1	19
Total	48	48	32	44	48	42	52	50	58	57	479
Number of Measures Worse than State Average											
Timely & Effective Care	22	20	35	23	20	32	21	15	25	17	230
Readmissions, Complications & Death	1	2	2	2	1	2	2	3	1	3	19
Patient Survey Results	6	16	15	13	18	12	11	19	3	5	118
Use of Medical Imaging	5	4	5	3	2	2	2	4	2	4	33
Total	34	42	57	41	41	48	36	41	31	29	400

Notes

1.The measures were compared to the national average when the Massachusetts state average was unavailable.



Notes

1. The measures were compared to the national average when the Massachusetts state average was unavailable.

Steward Hospitals, Study of "Hospital Compare" Data

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Steward Hospitals, Study of "Hospital Compare" Data

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Steward Hospitals, Study of "Hospital Compare" Data

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Steward Hospitals, Study of "Hospital Compare" Data

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Steward Hospitals, Study of "Hospital Compare" Data

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Steward Hospitals, Study of "Hospital Compare" Data

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	Quincy Medical Center	1
	Saint Anne's Hospital	1
	St. Elizabeth's Medical Center	1

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average											
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4									
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012														
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	56 Minutes			59 Minutes			0 Minutes											
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	9 Minutes			8 Minutes			0 Minutes											
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%											
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	97%			97%			12%											
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available		33%	41%	35%	60%	40%	31%									
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available		95%	75%	75%	94%	67%	61%									
Effective Heart Attack Care	4/1/2011-3/31/2012																	
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	91%			100%			90%			83%			88%			80%		
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%			33%			92%			74%			92%			75%		
Heart Attack Patients Given Aspirin at Arrival.	100%			98%			97%			97%			94%			91%		

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	100%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		100%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		100%	98%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	Too few cases			98%			98%		
Effective Heart Failure Care									
	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	86%	77%	37%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	100%	94%	84%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	100%	80%	87%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		84%	49%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		94%	84%		95%	77%		93%	75%
Effective Pneumonia Care									
	4/1/2011-3/31/2012								

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	99%	92%	78%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	97%	90%	81%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		95%	48%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		88%	25%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		86%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	67%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	97%	92%	80%	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	98%	84%	76%	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	97%	88%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012			97%			82%		
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	88%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	98%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	98%			97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	94%			100%			100%		

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery		92%			93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	97%	89%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	258 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	97 Minutes			117 Minutes			98 Minutes		

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	137 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	36 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	Too few cases			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care									
Patients assessed and given influenza vaccination	1/1/2012-3/31/2012 88%			88%			86%		
Patients assessed and given pneumonia vaccination	88%			90%			88%		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Not Available			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	0 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	98%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available			33%			60%		
	Not Available			41%			40%		
	Not Available			35%			31%		
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	96%			95%			94%		
	88%			75%			67%		
	Not Available			75%			61%		
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	74%			90%			88%		
	100%			83%			80%		
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	94%			92%			92%		
	50%			74%			75%		
Heart Attack Patients Given Aspirin at Arrival.	97%			97%			94%		
	99%			97%			91%		

- Notes
- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	99%	99%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		98%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		98%	99%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	93%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	84%	57%	81%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	99%	96%	100%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	96%	82%	94%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		97%	93%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		96%	85%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

- Notes
- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	97%	93%	84%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	96%	96%	90%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		87%	91%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		94%	86%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		90%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	99%		100%	100%		99%	98%

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	95%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	98%	97%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	96%	96%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	99%	98%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	90%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	97%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	99%			97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	71%			100%			100%		

- Notes
- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	99%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery		92%			93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	100%	98%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	379 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	151 Minutes			117 Minutes			98 Minutes		

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	232 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	90 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	88 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	3%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	95%			88%			86%		
Patients assessed and given pneumonia vaccination	93%			90%			88%		

Notes

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Not Available			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	6 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	88%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available		33%	41%	35%	60%	40%	31%
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	85%	Not Available	Not Available	95%	75%	75%	94%	67%	61%
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).		86%	100%		90%	83%		88%	80%
Heart Attack Patients Given Smoking Cessation Advice/Counseling.		Not Available	100%		92%	74%		92%	75%
Heart Attack Patients Given Aspirin at Arrival.		95%	100%		97%	97%		94%	91%

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	99%	95%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		100%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		90%	100%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	97%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	97%	56%	51%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	100%	92%	91%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	94%	75%	75%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		85%	76%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		97%	85%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	98%	95%	66%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	99%	88%	44%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		83%	78%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		76%	22%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		68%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	89%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	99%	91%	62%	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	98%	84%	63%	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	97%	78%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012			97%			82%		
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	95%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	99%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	99%	94%		97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	97%			100%			100%		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery					93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	98%	81%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	364 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	173 Minutes			117 Minutes			98 Minutes		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	163 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	55 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	103 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	2%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Not Available			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	85%			88%			86%		
Patients assessed and given pneumonia vaccination	90%			90%			88%		

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Too few cases			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	14 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	96%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available	Not Available	33%	41%	35%	60%	40%	31%
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available	Not Available	95%	75%	75%	94%	67%	61%
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	100%	33%		90%	83%		88%	80%	
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%	83%		92%	74%		92%	75%	
Heart Attack Patients Given Aspirin at Arrival.	100%	98%		97%	97%		94%	91%	

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	97%	95%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		97%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		98%	92%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	96%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	95%	89%	66%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	100%	98%	96%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	94%	91%	71%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		93%	100%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		96%	74%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	97%	95%	82%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	97%	93%	68%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		100%	72%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		91%	32%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		94%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	85%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	96%	90%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	97%	86%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	97%	90%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012			97%			82%		
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	91%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	98%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	97%			97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	91%			100%			100%		

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	99%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery		97%			93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	99%	91%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	353 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	82 Minutes			117 Minutes			98 Minutes		

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	192 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	59 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	Too few cases			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Not Available			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	96%			88%			86%		
Patients assessed and given pneumonia vaccination	94%			90%			88%		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	80 Minutes			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	15 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	100%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available	Not Available	33%	41%	35%	60%	40%	31%
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available	Not Available	95%	75%	75%	94%	67%	61%
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	100%			91%			90% 83% 88% 80%		
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%			86%			92% 74% 92% 75%		
Heart Attack Patients Given Aspirin at Arrival.	100%			97%			97% 97% 94% 91%		

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	100%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		100%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		100%	100%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	87%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	95%	90%	51%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	98%	99%	97%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	93%	100%	39%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		100%	76%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		91%	84%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	99%	91%	85%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	97%	87%	84%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		100%	72%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		94%	38%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		76%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	91%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	100%	90%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	98%	85%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	95%	77%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	100%			97%			82%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	97%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	99%	89%		97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	93%			100%			100%		

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery					93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	97%	78%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	288 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	96 Minutes			117 Minutes			98 Minutes		

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	156 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	36 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	88 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	Not Available			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care									
Patients assessed and given influenza vaccination	1/1/2012-3/31/2012 88%			88%			86%		
Patients assessed and given pneumonia vaccination	96%			90%			88%		

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Too few cases			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	10 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	96%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	0%	Not Available	33%	41%	35%	60%	40%	31%
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available	Not Available	95%	75%	75%	94%	67%	61%
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).		100%	0%		90%	83%		88%	80%
Heart Attack Patients Given Smoking Cessation Advice/Counseling.		100%	Not Available		92%	74%		92%	75%
Heart Attack Patients Given Aspirin at Arrival.		100%	81%		97%	97%		94%	91%

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	Too few cases	100%	91%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		100%	83%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		100%	83%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	Too few cases			98%			98%		
Effective Heart Failure Care									
	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	71%	78%	20%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	98%	96%	87%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	Too few cases	100%	60%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		86%	0%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		98%	84%		95%	77%		93%	75%
Effective Pneumonia Care									
	4/1/2011-3/31/2012								

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	96%	94%	77%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	98%	91%	56%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		92%	48%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		81%	27%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		68%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		99%	100%		100%	100%		99%	98%

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	88%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	94%	84%	86%	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	97%	97%	73%	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	99%	58%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012			97%			82%		
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	92%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	93%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	98%			97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	90%			100%			100%		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery		96%			93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	99%	60%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	226 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	77 Minutes			117 Minutes			98 Minutes		

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	130 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	17 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	26 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	98%			88%			86%		
Patients assessed and given pneumonia vaccination	94%			90%			88%		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Too few cases			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	0 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	98%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available			33%			60%		
	Not Available			41%			40%		
	0%			35%			31%		
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	92%			95%			94%		
	48%			75%			67%		
	76%			75%			61%		
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	96%			90%			88%		
	77%			83%			80%		
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%			92%			92%		
	76%			74%			75%		
Heart Attack Patients Given Aspirin at Arrival.	98%			97%			94%		
	97%			97%			91%		

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	98%	96%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		97%	97%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		98%	96%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	97%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	77%	79%	60%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	99%	96%	95%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	93%	79%	75%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		100%	68%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		96%	76%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	99%	92%	82%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	97%	92%	53%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		99%	60%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		91%	49%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		88%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	93%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	96%	92%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	97%	88%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	98%	96%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	90%			97%			82%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	97%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	100%			97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	95%			100%			100%		

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery		93%			93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	99%	98%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	319 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	136 Minutes			117 Minutes			98 Minutes		

- Notes
- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	153 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	36 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	65 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	92%			88%			86%		
Patients assessed and given pneumonia vaccination	92%			90%			88%		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012					
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	46 Minutes			59 Minutes			0 Minutes		
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	6 Minutes			8 Minutes			0 Minutes		
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%		
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	100%			97%			12%		
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available	Not Available	33%	41%	35%	60%	40%	31%
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available	Not Available	95%	75%	75%	94%	67%	61%
Effective Heart Attack Care	4/1/2011-3/31/2012								
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	100%	100%		90%	83%		88%	80%	
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%	77%		92%	74%		92%	75%	
Heart Attack Patients Given Aspirin at Arrival.	99%	96%		97%	97%		94%	91%	

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	96%	99%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		98%	99%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		99%	92%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	95%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	99%	65%	46%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	99%	96%	95%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	98%	94%	100%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		92%	69%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		99%	82%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

- Notes
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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	98%	91%	77%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	94%	98%	92%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		89%	77%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		85%	46%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		82%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	97%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	100%	96%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	95%	86%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	99%	96%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	97%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	96%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	98%	98%		97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	88%			100%			100%		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery					93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	99%	98%			90%			80%	
Effective Children's Asthma Care									
Children who received reliever medication while hospitalized for asthma.	4/1/2011-3/31/2012			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	1/1/2012-3/31/2012			313 Minutes			311 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	140 Minutes			117 Minutes			98 Minutes		

Notes

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	142 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	7 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	53 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Too few cases			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	97%			88%			86%		
Patients assessed and given pneumonia vaccination	97%			90%			88%		

Notes

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average			
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012						
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Too few cases			59 Minutes			0 Minutes			
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	3 Minutes			8 Minutes			0 Minutes			
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%			
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	94%			97%			12%			
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available	100%	33%	41%	35%	60%	40%	31%	
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).	Not Available	Not Available	Not Available	95%	75%	75%	94%	67%	61%	
Effective Heart Attack Care	4/1/2011-3/31/2012									
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	71%			100%			90%	83%	88%	80%
Heart Attack Patients Given Smoking Cessation Advice/Counseling.	100%			75%			92%	74%	92%	75%
Heart Attack Patients Given Aspirin at Arrival.	96%			98%			97%	97%	94%	91%

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	94%	95%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		95%	91%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		98%	92%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	96%			98%			98%		
Effective Heart Failure Care	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	96%	60%	99%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	100%	96%	89%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	100%	62%	67%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		100%	61%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		98%	89%		95%	77%		93%	75%
Effective Pneumonia Care	4/1/2011-3/31/2012								

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	96%	89%	77%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	95%	91%	71%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		91%	57%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		86%	45%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		86%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	98%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	100%	98%	Not Available	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	98%	98%	Not Available	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	99%	79%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	98%			98%			96%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their surgery.	100%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	100%	95%		97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	Not Available								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	99%			100%			100%		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery					93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	100%	85%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	317 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	107 Minutes			117 Minutes			98 Minutes		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	166 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	62 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	83 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	3%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Not Available			60%			38%		
Preventive Care	1/1/2012-3/31/2012								
Patients assessed and given influenza vaccination	95%			88%			86%		
Patients assessed and given pneumonia vaccination	94%			90%			88%		

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average			
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	
Timely Heart Attack Care	4/1/2011-3/31/2012			4/1/2011-3/31/2012						
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital. (A lower number of minutes is better).	Not Available			59 Minutes			0 Minutes			
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG. (A lower number of minutes is better).	Too few cases			8 Minutes			0 Minutes			
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival. (Higher numbers are better).	Not Available			74%			71%			
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival. (Higher numbers are better).	Too few cases			97%			12%			
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes of Arrival.	Not Available	Not Available	Not Available	33%	41%	35%	60%	40%	31%	
Heart Attack Patients Given PCI Within 90 Minutes of Arrival (In 2005, the measure was assessed for 120 minutes).		75%		95%	75%	75%	94%	67%	61%	
Effective Heart Attack Care	4/1/2011-3/31/2012									
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).							90%	83%	88%	80%
Heart Attack Patients Given Smoking Cessation Advice/Counseling.							92%	74%	92%	75%
Heart Attack Patients Given Aspirin at Arrival.							97%	97%	94%	91%

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Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Heart Attack Patients Given Aspirin at Discharge.	100%	100%	100%	100%	97%	96%	99%	91%	87%
Heart Attack Patients Given Beta Blockers at Discharge.		98%	100%		97%	96%		92%	86%
Heart Attack Patients Given Beta Blockers at Arrival		96%	100%		96%	96%			84%
Heart Attack Patients Given a Prescription for a Statin at Discharge.	100%			98%			98%		
Effective Heart Failure Care									
	4/1/2011-3/31/2012								
Heart Failure Patients Given Discharge Instructions.	100%	70%	36%	94%	75%	51%	93%	69%	48%
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function.	100%	97%	98%	99%	95%	89%	99%	87%	79%
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD).	99%	74%	88%	96%	88%	81%	96%	87%	79%
Heart Failure Patients Given Smoking Cessation Advice/Counseling.		94%	97%		90%	66%		89%	68%
Timely Pneumonia Care									
Pneumonia Patients Given Initial Antibiotic(s) Within 6 Hours After Arrival (In 2005, this measure was assessed within 4 hours).		98%	84%		95%	77%		93%	75%
Effective Pneumonia Care									
	4/1/2011-3/31/2012								

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 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the Administration of The First Hospital Dose of Antibiotics.	100%	91%	73%	97%	89%	81%	97%	90%	82%
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s).	99%	85%	76%	96%	89%	75%	95%	87%	76%
Pneumonia Patients Given Smoking Cessation Advice/Counseling.		80%	89%		89%	64%		85%	66%
Pneumonia Patients Assessed and Given Pneumococcal Vaccination.		73%	34%		84%	41%		78%	51%
Pneumonia Patients Assessed and Given Influenza Vaccination.		72%			78%			75%	
Pneumonia Patients Given Oxygenation Assessment		100%	100%		100%	100%		99%	98%

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Timely Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery. (Higher numbers are better).	98%			96%			80%		
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection.	100%	96%	93%	99%	91%	80%	98%	84%	70%
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery).	97%	87%	74%	98%	88%	71%	97%	82%	66%
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery.	98%	87%		98%	88%		97%	77%	
Effective Surgical Care	4/1/2011-3/31/2012								
Outpatients having surgery who got the right kind of antibiotic. (Higher numbers are better).	96%			97%			82%		
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their	100%			99%			98%		
Surgery patients who were given the right kind of antibiotic to help prevent infection.	99%	98%		97%			96%		
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery.	98%								
Surgery patients whose urinary catheters were removed on the first or second day after surgery.	99%			100%			100%		

- Notes
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 - 2.Empty cells represent items that are not measured for a time period.
 - 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal by the end of surgery.	100%			98%			98%		
Surgery patients who received the appropriate preventative antibiotic(s) for their surgery					93%	80%		91%	70%
Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	98%	92%			90%			80%	
Effective Children's Asthma Care									
	4/1/2011-3/31/2012								
Children who received reliever medication while hospitalized for asthma.	Not Available			Not Available			100%		
Children who received systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) while hospitalized for asthma.	Not Available			Not Available			100%		
Children and their caregivers who received a home management plan of care document while hospitalized for asthma.	Not Available			Not Available			85%		
Timely Emergency Department Care									
	1/1/2012-3/31/2012								
Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient	295 Minutes			311 Minutes			277 Minutes		
Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	135 Minutes			117 Minutes			98 Minutes		

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Timely and Effective Care Using Hospital Compare (CMS) Information

Timely & Effective Care	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Average time patients spent in the emergency department before being sent home	156 Minutes			152 Minutes			59 Minutes		
Average time patients spent in the emergency department before they were seen by a healthcare professional	34 Minutes			40 Minutes			59 Minutes		
Average time patients who came to the emergency department with broken bones had to wait before receiving pain medication	47 Minutes			61 Minutes			58 Minutes		
Percentage of patients who left the emergency department before being seen	1%			Not Available			Not Available		
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	Not Available			60%			38%		
Preventive Care									
Patients assessed and given influenza vaccination	1/1/2012-3/31/2012 88%			88%			86%		
Patients assessed and given pneumonia vaccination	96%			90%			88%		

Notes

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- 3.The number of measures increased over the 3 time periods

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Better than National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011						Not Available		
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Number of cases too small						113.43 per 1,000 patient discharges		
Breathing failure after surgery	No different than U.S. National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.000 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.172 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.172 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.172 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Not Available								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011						Not Available		
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Better than National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	No different than U.S. National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	No different than U.S. National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
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- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.084 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.675 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.169 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.169 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.506 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Same as National Benchmark								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011								
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.122 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.000 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.122 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.000 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.122 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011						Not Available		
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Number of Cases Too Small						113.43 per 1,000 patient discharges		
Breathing failure after surgery	No different than U.S. National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.240 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.958 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.000 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.000 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.000 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Not Available								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011						Not Available		
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.000 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.125 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.626 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.000 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Number of Cases Too Small			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011						Not Available		
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Number of Cases Too Small						113.43 per 1,000 patient discharges		
Breathing failure after surgery	No different than U.S. National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.521 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.000 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.521 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.521 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Not Available								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Better than U.S National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011								
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

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- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.189 per 1,000 discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.000 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.378 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.189 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011								
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008	2005	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.206 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.823 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.206 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.000 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.411 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Not Available								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Same as National Rate			Not Available			24.7%		
Death rate for heart failure patients	Same as National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Worse than National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011								
Collapsed lung due to medical treatment	Same as National Rate						0.35 per 1,000 patient discharges		
Serious blood clots after surgery	Same as National Rate						4.71 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Same as National Rate						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.000 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.000 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.000 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.000 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.000 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Not Available								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
30-Day Outcomes Readmission and Deaths	7/1/2008-6/30/2011								
Rate of readmission for heart attack patients	Same as National Rate			Not Available			19.7%		
Death rate for heart attack patients	Same as National Rate	Same as National Rate		Not Available			15.5%	16%	
Rate of readmission for heart failure patients	Worse than National Rate			Not Available			24.7%		
Death rate for heart failure patients	Better than National Rate	Same as National Rate		Not Available			11.6%	11%	
Rate of readmission for pneumonia patients	Same as National Rate			Not Available			18.5%		
Death rate for pneumonia patients	Same as National Rate	Same as National Rate		Not Available			12.0%	11%	
Serious Complications and Deaths	7/1/2009-6/30/2011								
Collapsed lung due to medical treatment	Same as National Rate						Not Available		
Serious blood clots after surgery	Same as National Rate						0.35 per 1,000 patient discharges		
A wound that splits open after surgery on the abdomen or pelvis	Same as National Rate						4.71 per 1,000 patient discharges		
	Same as National Rate						0.95 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Accidental cuts and tears from medical treatment	Same as National Rate						2.05 per 1,000 patient discharges		
Pressure sores (bedsores)	Not Available						Not Available		
Infections from a large venous catheter	Not Available						Not Available		
Broken hip from a fall after surgery	Not Available						Not Available		
Bloodstream infection after surgery	Not Available						Not Available		
Deaths for Certain Conditions									
Deaths after admission for a broken hip	Not Available						Not Available		
Deaths after admission for a heart attack	Not Available						Not Available		
Deaths after admission for congestive heart failure	Not Available						Not Available		
Deaths after admission for a stroke	Not Available						Not Available		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Deaths after admission for a gastrointestinal (GI) bleed	Not Available						Not Available		
Deaths after admission for pneumonia	Not Available						Not Available		
Other Complications and Deaths	7/1/2009-6/30/2011								
Deaths among patients with serious treatable complications after surgery	Same as National Rate						113.43 per 1,000 patient discharges		
Breathing failure after surgery	Same as National Rate						Not Available		
Death after surgery to repair a weakness in the abdominal aorta	Not Available						Not Available		
Hospital Acquired Conditions	7/1/2009-6/30/2011								
Objects accidentally left in the body after surgery	0.102 per 1,000 patient discharges						0.028 per 1,000 patient discharges		
Air bubble in the bloodstream	0.000 per 1,000 patient discharges						0.003 per 1,000 patient discharges		
Mismatched blood types	0.000 per 1,000 patient discharges						0.001 per 1,000 patient discharges		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Readmissions, Complications and Death Using Hospital Compare (CMS) Information

Readmissions, Complications & Death	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Severe pressure sores (bed sores)	0.000 per 1,000 patient discharges						0.136 per 1,000 patient discharges		
Falls and injuries	0.306 per 1,000 patient discharges						0.527 per 1,000 patient discharges		
Blood infection from a catheter in a large vein	0.204 per 1,000 patient discharges						0.372 per 1,000 patient discharges		
Infection from a urinary catheter	0.510 per 1,000 patient discharges						0.358 per 1,000 patient discharges		
Signs of uncontrolled blood sugar	0.000 per 1,000 patient discharges						0.058 per 1,000 patient discharges		
Healthcare Associated Infections	4/1/2011-3/31/2012								
Central line associated blood stream infections (CLABSI)	Same as National Benchmark								
Catheter Associated Urinary Tract Infections (CAUTI)	Same as National Benchmark								
Surgical Site Infections from colon surgery (SSI: Colon)	Not Available								
Surgical Site Infections from abdominal hysterectomy (SSI: Hysterectomy)	Not Available								

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	79%	79%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	83%	79%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	65%	65%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	71%	68%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	67%	65%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	71%	67%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	55%	57%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	85%	84%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	62%	64%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	63%	66%		73%	71%		70%	68%	

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Good Samaritan Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	75%	75%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	77%	79%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	56%	58%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	67%	71%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	57%	59%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	67%	66%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	47%	48%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	84%	81%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	61%	60%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	63%	67%		73%	71%		70%	68%	

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	80%	74%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	81%	80%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	64%	59%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	69%	67%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	62%	64%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	69%	66%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	51%	50%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	86%	82%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	65%	59%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	72%	65%		73%	71%		70%	68%	

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data 4/1/2011-3/31/2012	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients who reported that their nurses "Always" communicated well.	77%	72%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	77%	80%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	63%	59%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	73%	69%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	59%	58%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	70%	63%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	51%	49%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	84%	85%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	62%	58%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	64%	67%		73%	71%		70%	68%	

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Morton Hospital			Massachusetts Average			National Average		
	Current Data 4/1/2011-3/31/2012	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients who reported that their nurses "Always" communicated well.	74%	73%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	77%	78%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	61%	56%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	70%	66%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	61%	55%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	69%	72%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	48%	44%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	85%	85%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	51%	52%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	51%	54%		73%	71%		70%	68%	

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data 4/1/2011-3/31/2012	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Patients who reported that their nurses "Always" communicated well.	76%	72%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	78%	81%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	58%	54%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	72%	67%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	63%	57%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	78%	70%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	55%	57%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	85%	84%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	59%	62%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	62%	65%		73%	71%		70%	68%	

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	80%	77%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	78%	81%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	65%	62%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	70%	74%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	60%	62%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	76%	73%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	42%	42%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	85%	81%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	63%	59%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	64%	63%		73%	71%		70%	68%	

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	76%	73%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	76%	78%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	59%	57%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	69%	67%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	61%	59%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	66%	70%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	47%	44%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	80%	83%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	54%	57%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	59%	63%		73%	71%		70%	68%	

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	81%	78%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	79%	80%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	66%	63%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	71%	72%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	63%	63%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	73%	72%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	53%	54%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	90%	88%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	65%	68%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	68%	72%		73%	71%		70%	68%	

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Patient Survey Results Using Hospital Compare (CMS) Information

Patient Survey Results	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	4/1/2011-3/31/2012								
Patients who reported that their nurses "Always" communicated well.	79%	75%		79%	76%		78%	74%	
Patients who reported that their doctors "Always" communicated well.	80%	81%		80%	79%		81%	80%	
Patients who reported that they "Always" received help as soon as they wanted.	64%	63%		65%	61%		66%	63%	
Patients who reported that their pain was "Always" well controlled.	75%	69%		71%	69%		70%	68%	
Patients who reported that staff "Always" explained about medicines before giving it to them.	66%	62%		63%	60%		63%	59%	
Patients who reported that their room and bathroom were "Always" clean.	69%	68%		73%	70%		73%	70%	
Patients who reported that the area around their room was "Always" quiet at night.	49%	49%		52%	49%		60%	56%	
Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home.	87%	86%		87%	84%		84%	80%	
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).	69%	69%		69%	65%		69%	64%	
Patients who reported YES, they would definitely recommend the hospital.	73%	72%		73%	71%		70%	68%	

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Carney Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	52.8%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	24.9%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.017			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.109			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	6.5%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	Not Available			2.3%			2.7%		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Good Samaritan Medical Center			Massachusetts Average			1 National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	44.8%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	10.3%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.000			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.078			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	4.6%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	4.6%			2.3%			2.7%		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Holy Family Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	1/1/2010-12/31/2010								
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	34.70%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	10.70%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.027			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.144			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	3.90%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	2.30%			2.3%			2.7%		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Merrimack Valley Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	1/1/2010-12/31/2010								
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	32.7%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	9.8%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.038			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.086			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	6.6%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	Not Available			2.3%			2.7%		

Notes

1. The time period covered by the current data is dependent on the measure. Each time period has been identified.
2. Empty cells represent items that are not measured for a time period.
3. The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Morton Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	30.40%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	9.30%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.008			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.055			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	7.10%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	1.60%			2.3%			2.7%		

Notes

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- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Nashoba Valley Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	1/1/2010-12/31/2010			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	18.3%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.000			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.087			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	4.0%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	Not Available			2.3%			2.7%		

Notes

1. The time period covered by the current data is dependent on the measure. Each time period has been identified.
2. Empty cells represent items that are not measured for a time period.
3. The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Norwood Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	1/1/2010-12/31/2010			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	12.8%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.007			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.054			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	Not Available			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	2.6%			2.3%			2.7%		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Quincy Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	1/1/2010-12/31/2010								
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	47.50%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	8.40%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.01			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.036			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	7.40%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	2.40%			2.3%			2.7%		

Notes

1. The time period covered by the current data is dependent on the measure. Each time period has been identified.
2. Empty cells represent items that are not measured for a time period.
3. The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	Saint Anne's Hospital			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
	1/1/2010-12/31/2010								
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	34.1%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	12.3%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.000			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.056			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	5.3%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	2.4%			2.3%			2.7%		

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medical Imaging Using Hospital Compare (CMS) Information

Use of Medical Imaging	St. Elizabeth's Medical Center			Massachusetts Average			National Average		
	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4	Current Data	2008 - Q4	2005 - Q4
Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility is doing too many unnecessary MRIs for low back pain.)	1/1/2010-12/31/2010 29.30%			34.2%			36.3%		
Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow-up. A number much higher than 14% may mean there's too much unnecessary follow-up).	10.90%			9.2%			8.5%		
Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.045			0.008			0.044		
Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)	0.158			0.076			0.149		
Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery.	5.60%			5.5%			5.6%		
Outpatients with brain CT scans who got a sinus CT scan at the same time.	Not Available			2.3%			2.7%		

Notes

1. The time period covered by the current data is dependent on the measure. Each time period has been identified.
2. Empty cells represent items that are not measured for a time period.
3. The number of measures increased over the 3 time periods.

Comparison of Hospitals in Steward Health Care System in Terms of Use of Medicare Spending Per Patient Using Hospital Compare (CMS) Information

Current Data: 5/1/2011-12/31/2011	Carney Hospital	Good Samaritan Medical Center	Holy Family Hospital	Merrimack Valley Hospital	Morton Hospital	Nashoba Valley Medical Center	Norwood Hospital	Quincy Medical Center	Saint Anne's Hospital	St. Elizabeth's Medical Center
Spending per Hospital Patient with Medicare (displayed in ratio)	1.04	1.07	1.07	1.1	1.11	1.11	1.02	1.15	1.02	1.01

Notes

- 1.The time period covered by the current data is dependent on the measure. Each time period has been identified.
- 2.Empty cells represent items that are not measured for a time period.
- 3.The number of measures increased over the 3 time periods.