

Hospital Equity Measures Report

General Information

Report Type:	Hospital Equity Measures Report
Year:	2024
Hospital Name:	JOYCE EISENBERG KEEFER MEDICAL CENTER
Facility Type:	Acute Psychiatric Hospital
Hospital HCAI ID:	106196404
Report Period:	1/1/2024 - 12/31/2024
Status:	Complete
Due Date:	09/30/2025
Last Updated:	02/06/2026
Hospital Location with Clean Water and Air:	N
Hospital Web Address for Equity Report:	https://www.lajhealth.org/

Overview

Assembly Bill No. 1204 requires the Department of Health Care Access and Information (HCAI) to develop and administer a Hospital Equity Measures Reporting Program to collect and post summaries of key hospital performance and patient outcome data regarding sociodemographic information, including but not limited to age, sex, race/ethnicity, payor type, language, disability status, and sexual orientation and gender identity.

Hospitals (general acute, children's, and acute psychiatric) and hospital systems are required to annually submit their reports to HCAI. These reports contain summaries of each measure, the top 10 disparities, and the equity plans to address the identified disparities. HCAI is required to maintain a link on the HCAI website that provides access to the content of hospital equity measures reports and equity plans to the public. All submitted hospitals are required to post their reports on their websites, as well.

Laws and Regulations

For more information on Assembly Bill No. 1204, please visit the following link by copying and pasting the URL into your web browser:

https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202120220AB1204

Hospital Equity Measures

Joint Commission Accreditation

Acute psychiatric hospitals are required to report three structural measures based on the Commission Accreditation's Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards. For more information on these measures, please visit the following link by copying and pasting the URL into your web browser:

<https://www.jointcommission.org/standards/r3-report/r3-report-issue-36-new-requirements-to-reduce-health-care-disparities/>

The first two structural measures are scored as "yes" or "no"; the third structural measure comprises the percentages of patients by five categories of preferred languages spoken, in addition to one other/unknown language category.

Designate an individual to lead hospital health equity activities (Y = Yes, N = No).

Y

Provide documentation of policy prohibiting discrimination (Y = Yes, N = No).

Y

Number of patients that were asked their preferred language, five defined categories and one other/unknown languages category.

283

Table 1. Summary of preferred languages reported by patients.

Languages	Number of patients who report preferring language	Total number of patients	Percentage of total patients who report preferring language (%)
English Language	256	283	90.5
Spanish Language	suppressed	283	suppressed
Asian Pacific Islander Languages	suppressed	283	suppressed
Middle Eastern Languages	suppressed	283	suppressed
American Sign Language	suppressed	283	suppressed
Other Languages	suppressed	283	suppressed

Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure

There are five domains that make up the CMS Hospital Commitment to HCHE measures. Each domain is scored as "yes" or "no." In order to score "yes," a acute psychiatric hospital is required to confirm all the domain's attestations. Lack of one or more of the attestations results in a score of "no." For more information on the CMS Hospital Commitment to HCHE measures, please visit the following link by copying and pasting the URL into your web browser:
<https://data.cms.gov/provider-data/topics/hospitals/health-equity>

Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure Domain 1: Strategic Planning (Yes/No)

- Our hospital strategic plan identifies priority populations who currently experience health disparities.
- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.
- Our hospital strategic plan outlines specific resources that have been dedicated to achieving our equity goals.
- Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.

Y

CMS HCHE Measure Domain 2: Data Collection (Yes/No)

- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.

- Our hospital has training for staff in culturally sensitive collection of demographics and/or social determinant of health information.

- Our hospital inputs demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified electronic health record (EHR) technology.

Y

CMS HCHE Measure Domain 3: Data Analysis (Yes/No)

- Our hospital stratifies key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information in hospital performance dashboards.

Y

CMS HCHE Measure Domain 4: Quality Improvement (Yes/No)

- Our hospital participates in local, regional or national quality improvement activities focused on reducing health disparities.

Y

CMS HCHE Measure Domain 5: Leadership Engagement (Yes/No)

- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.

- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews key performance indicators stratified by demographic and/or social factors.

Y

Centers for Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH)

Acute psychiatric hospitals are required to report on rates of screenings and intervention rates among patients 18 years or older for five health related social needs (HRSN), which are food insecurity, housing instability, transportation problems, utility difficulties, and interpersonal safety. These rates are reported separately as being screened as positive for any of the five HRSNs, positive for each individual HRSN, and the intervention rate for each positively screened HRSN. For more information on the CMS SDOH, please visit the following link by copying and pasting the URL into your web browser:

<https://www.cms.gov/priorities/innovation/key-concepts/social-drivers-health-and-health-related-social-needs>

Number of patients admitted to an inpatient hospital stay who are 18 years or older on the date of admission and are screened for all of the five HRSN

98

Total number of patients who are admitted to a hospital inpatient stay and who are 18 years or older on the date of admission

100

Rate of patients admitted for an inpatient hospital stay who are 18 years or older on the date of admission, were screened for all five HRSNs; Rates of patients who screened positive for one or more of the HRSNs

98

Table 2. Positive screening rates and intervention rates for the five Health Related Social Needs of the Centers of Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH).

Social Driver of Health	Number of positive screenings	Rate of positive screenings (%)	Number of positive screenings who received intervention	Rate of positive screenings who received intervention (%)
Food Insecurity	suppressed	suppressed	suppressed	suppressed
Housing Instability	suppressed	suppressed	suppressed	suppressed
Transportation Problems	suppressed	suppressed	suppressed	suppressed
Utility Difficulties	suppressed	suppressed	suppressed	suppressed
Interpersonal Safety	31	31.6	31	31.6

Core Quality Measures for Acute Psychiatric Hospitals

There are two quality measures from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey. For more information on the HCAHPS survey, please visit the following link by copying and pasting the URL into your web browser:
<https://hcahpsonline.org/en/survey-instruments/>

Patient Recommends Hospital

The first HCAHPS quality measure is the percentage of patients who would recommend the hospital to friends and family. For this measure, acute psychiatric hospitals provide the percentage of patient respondents who responded "probably yes" or "definitely yes" to whether they would recommend the hospital, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for the percentages. The percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 19.

Number of respondents who replied "probably yes" or "definitely yes" to HCAHPS Question 19, "Would you recommend this hospital to your friends and family?"

suppressed

Total number of respondents to HCAHPS Question 19

suppressed

Percentage of total respondents who responded "probably yes" or "definitely yes" to HCAHPS Question 19

suppressed

Total number of people surveyed on HCAHPS Question 19

suppressed

Response rate, or the percentage of people who responded to HCAHPS Question 19

suppressed

Table 3. Patient recommends hospital by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed	suppressed	suppressed

Age	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Age < 18	suppressed	suppressed	suppressed	suppressed	suppressed
Age 18 to 34	suppressed	suppressed	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed	suppressed	suppressed

Sex assigned at birth	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	suppressed	suppressed	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed	suppressed	suppressed

Payer Type	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Medicare	suppressed	suppressed	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed	suppressed	suppressed

Preferred Language	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
English Language	suppressed	suppressed	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed	suppressed	suppressed

Disability Status	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Does not have a disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed	suppressed	suppressed

Sexual Orientation	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

Gender Identity	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	suppressed	suppressed	suppressed	suppressed	suppressed
Female-to-male (FTM)/ transgender male/trans man	suppressed	suppressed	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Male-to-female (MTF)/ transgender female/trans woman	suppressed	suppressed	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

Patient Received Information in Writing

The second HCAHPS quality measure is the percentage of patients who reported receiving information in writing on symptoms and health problems to look out for after leaving the hospital. Acute psychiatric hospitals are required to provide the percentage of patient respondents who responded "yes" to being provided written information, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for these percentages. These percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 17.

Number of respondents who replied "yes" to HCAHPS Question 17, "During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?"

suppressed

Total number of respondents to HCAHPS Question 17

suppressed

Percentage of respondents who responded "yes" to HCAHPS Question 17

suppressed

Total number of people surveyed on HCAHPS Question 17

suppressed

Response rate, or the percentage of people who responded to HCAHPS Question 17

suppressed

Table 4. Patient reports receiving information in writing about symptoms or health problems by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed	suppressed	suppressed

Age	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Age < 18	suppressed	suppressed	suppressed	suppressed	suppressed
Age 18 to 34	suppressed	suppressed	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed	suppressed	suppressed

Sex assigned at birth	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	suppressed	suppressed	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed	suppressed	suppressed

Payer Type	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Medicare	suppressed	suppressed	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed	suppressed	suppressed

Preferred Language	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
English Language	suppressed	suppressed	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed	suppressed	suppressed

Disability Status	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Does not have a disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed	suppressed	suppressed

Sexual Orientation	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

Gender Identity	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	suppressed	suppressed	suppressed	suppressed	suppressed
Female-to-male (FTM)/ transgender male/ trans man	suppressed	suppressed	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed	suppressed	suppressed
Male-to-female (MTF)/ transgender female/ trans woman	suppressed	suppressed	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed	suppressed	suppressed

Agency for Healthcare Research and Quality (AHRQ) Indicators

Acute psychiatric hospitals are required to report on two indicators from the Agency for Healthcare Research and Quality (AHRQ). For general information about AHRQ indicators, please visit the following link by copying and pasting the URL into your web browser:

<https://qualityindicators.ahrq.gov/>

Pneumonia Mortality Rate

The Pneumonia Mortality Rate is defined as the rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission for patients ages 18 years and older. Acute psychiatric hospitals report the Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding AHRQ Inpatient Quality Indicator is 20. For more information about this indicator, please visit the following link by copying and pasting the URL into your web browser:

https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI_20_Pneumonia_Mortality_Rate.pdf

Number of in-hospital deaths with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission
suppressed

Total number of hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission
suppressed

Rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission
suppressed

Table 5. Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Age < 18	suppressed	suppressed	suppressed
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of in-hospital deaths that meet the inclusion/exclusion criteria	Number of hospital discharges that meet the inclusion/exclusion criteria	Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/ transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/ transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate

Acute psychiatric hospitals are required to report several HCAI All-Cause Unplanned 30-Day Hospital Readmission Rates, which are broadly defined as the percentage of hospital-level, unplanned, all-cause readmissions after admission for eligible conditions within 30 days of hospital discharge for patients aged 18 years and older. These rates are first stratified based on any eligible condition, mental health disorders, substance use disorders, co-occurring disorders, and no behavioral health diagnosis. Then, each condition-stratified hospital readmission rate is further stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status,

sexual orientation, and gender identity. For more information on the HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, please visit the following link by copying and pasting the URL into your web browser:
https://hcai.ca.gov/wp-content/uploads/2024/10/HCAI-All-Cause-Readmission-Rate-Exclusions_ADA.pdf

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF)

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date of an eligible index admission and were 18 years or older at time of admission
suppressed

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission
suppressed

Rate of hospital-level, unplanned, all-cause readmissions after admission for any eligible condition within 30 days of hospital discharge for patients aged 18 and older
suppressed

Table 6. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for any eligible condition by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Mental Health Disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for mental health disorders and were 18 years or older at time of admission

suppressed

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

suppressed

Rate of hospital-level, unplanned, all-cause readmissions after admission for mental health disorders within 30 days of hospital discharge for patients aged 18 or older

suppressed

Table 7. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for mental health disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Substance Use Disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for substance use disorders and were 18 years or older at time of admission

suppressed

Total number of patients who were admitted to an IPF and were 18 years or older at time of

admission
suppressed

Rate of hospital-level, unplanned, all-cause readmissions after admission for substance use disorders within 30 days of hospital discharge for patients aged 18 or older
suppressed

Table 8. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for substance use disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Co-occurring disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for co-occurring disorders and were 18 years or older at time of admission

suppressed

Total number of patients who were admitted to an IPF and were 18 years or older at time of

admission

suppressed

Rate of hospital-level, unplanned, all-cause readmissions after admission for co-occurring disorders within 30 days of hospital discharge for patients aged 18 and older

suppressed

Table 9. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for co-occurring disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed
Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed
Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed
Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - No Behavioral Health Diagnosis

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date with no behavioral diagnosis and were 18 years or older at time of admission

suppressed

Total number of patients who were admitted to an IPF and were 18 years or older at time of

admission
suppressed

Rate of hospital-level, unplanned, all-cause readmissions after admission with no behavioral diagnosis within 30 days of hospital discharge for patients aged 18 and older
suppressed

Table 10. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate with No Behavioral Diagnosis by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed
Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed
Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed
Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program Screening for Metabolic Disorders

Acute psychiatric hospitals are required to report the rate of structured screenings for metabolic disorders among patients with a prescription for one or more routinely scheduled antipsychotic medications. The structured screenings must contain (1) body mass index (BMI), (2) blood pressure, (3) blood glucose or HbA1c, and (4) a lipid panel, and be completed at least once in the 12 months prior to the patient's date of discharge. The rate of patient screenings for metabolic disorders are

stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the structured screenings for metabolic disorders, please see page 92 of the report by visiting the following link by copying and pasting the URL into your web browser:
https://www.qualityreportingcenter.com/globalassets/2021/05/iqr/ipfqr_programmanualv7.0_final508.pdf

Number of patients with a prescription for one or more routinely scheduled antipsychotic medications who received a metabolic screening in the 12 months prior to discharge, either prior to or during the index IPF stay

94

Number of discharges from an IPF during the measurement period with a prescription for one or more routinely scheduled antipsychotic medications

100

Rate of patients discharged from an IPF with a prescription for one or more routinely scheduled antipsychotic medications for which a structured metabolic screening was completed in the 12 months prior to discharge, either prior to or during the index IPF stay

94

Table 11. Rate of patients who received structured metabolic screenings with a prescription for a routinely scheduled antipsychotic medication by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
American Indian or Alaska Native	suppressed	100	suppressed
Asian	suppressed	100	suppressed
Black or African American	15	100	15
Hispanic or Latino	12	100	12
Middle Eastern or North African	suppressed	100	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	100	suppressed
Native Hawaiian or Pacific Islander	suppressed	100	suppressed
White	64	100	64

Age	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Age < 18	suppressed	100	suppressed
Age 18 to 34	suppressed	100	suppressed
Age 35 to 49	suppressed	100	suppressed
Age 50 to 64	suppressed	100	suppressed
Age 65 Years and Older	91	100	91

Sex assigned at birth	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Female	74	100	74
Male	26	100	26
Unknown	suppressed	100	suppressed

Payer Type	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Medicare	13	100	13
Medicaid	suppressed	100	suppressed
Private	suppressed	100	suppressed
Self-Pay	suppressed	100	suppressed
Other	87	100	87

Preferred Language	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
English Language	89	100	89
Spanish Language	suppressed	100	suppressed
Asian Pacific Islander Languages	suppressed	100	suppressed
Middle Eastern Languages	suppressed	100	suppressed
American Sign Language	suppressed	100	suppressed
Other/Unknown Languages	suppressed	100	suppressed

Disability Status	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Does not have a disability	42	100	42
Has a mobility disability	14	100	14
Has a cognition disability	41	100	41
Has a hearing disability	suppressed	100	suppressed
Has a vision disability	suppressed	100	suppressed
Has a self-care disability	16	100	16
Has an independent living disability	suppressed	100	suppressed

Sexual Orientation	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Lesbian, gay or homosexual	suppressed	100	suppressed
Straight or heterosexual	86	100	86
Bisexual	suppressed	100	suppressed
Something else	suppressed	100	suppressed
Don't know	suppressed	100	suppressed
Not disclosed	suppressed	100	suppressed

Gender Identity	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Female	74	100	74
Female-to-male (FTM)/transgender male/trans man	suppressed	100	suppressed
Male	26	100	26
Male-to-female (MTF)/transgender female/trans woman	suppressed	100	suppressed
Non-conforming gender	suppressed	100	suppressed
Additional gender category or other	suppressed	100	suppressed
Not disclosed	suppressed	100	suppressed

The Joint Commission SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge

Acute psychiatric hospitals are required to report the rate of structured screenings for metabolic disorders among patients with a prescription for one or more routinely scheduled antipsychotic medications. The structured screenings must contain (1) body mass index (BMI), (2) blood pressure, (3) blood glucose or HbA1c, and (4) a lipid panel, and be completed at least once in the 12 months prior to the patient's date of discharge. The rate of patient screenings for metabolic disorders are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the rate calculation and inclusion/exclusion criteria, please visit the following link by copying and pasting the URL into your web browser:

<https://manual.jointcommission.org/releases/TJC2024B/MIF0221.html>

Number of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment
suppressed

Total number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder
suppressed

Rate of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment
suppressed

Table 12. Rate of eligible patients who received or refused prescription or referral for treatment by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/ transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/ transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

The Joint Commission SUB-3a: Alcohol and Other Drug Use Disorder Treatment at Discharge

Acute psychiatric hospitals are required to report the rate of patients 18 years of age or older with an alcohol or drug use disorder who received a prescription for FDA-approved medications for alcohol or drug use disorder or a referral for addictions treatment. This rate is stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the rate calculation and inclusion/exclusion criteria, please visit the following link by copying and pasting the URL into your web browser:

<https://manual.jointcommission.org/releases/TJC2024B/MIF0221.html>

Number of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment
suppressed

Number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder
suppressed

Rate of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment
suppressed

Table 13. Rate of patients who received or refused prescription or referral for treatment by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	suppressed	suppressed
Black or African American	suppressed	suppressed	suppressed
Hispanic or Latino	suppressed	suppressed	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	suppressed	suppressed

Age	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Age 18 to 34	suppressed	suppressed	suppressed
Age 35 to 49	suppressed	suppressed	suppressed
Age 50 to 64	suppressed	suppressed	suppressed
Age 65 Years and Older	suppressed	suppressed	suppressed

Sex assigned at birth	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Female	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Unknown	suppressed	suppressed	suppressed

Payer Type	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Medicare	suppressed	suppressed	suppressed
Medicaid	suppressed	suppressed	suppressed
Private	suppressed	suppressed	suppressed
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

Preferred Language	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
English Language	suppressed	suppressed	suppressed
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

Disability Status	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Does not have a disability	suppressed	suppressed	suppressed
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

Sexual Orientation	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Lesbian, gay or homosexual	suppressed	suppressed	suppressed
Straight or heterosexual	suppressed	suppressed	suppressed
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Gender Identity	Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria	Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria	Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)
Female	suppressed	suppressed	suppressed
Female-to-male (FTM)/ transgender male/trans man	suppressed	suppressed	suppressed
Male	suppressed	suppressed	suppressed
Male-to-female (MTF)/ transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	suppressed	suppressed

Health Equity Plan

All acute psychiatric hospitals report a health equity plan that identifies the top 10 disparities and a written plan to address them.

Top 10 Disparities

Disparities for each hospital equity measure are identified by comparing the rate ratios by stratification groups. Rate ratios are calculated differently for measures with preferred low rates and those with preferred high rates. Rate ratios are calculated after applying the California Health and Human Services Agency's "Data De-Identification Guidelines (DDG)," dated September 23, 2016.

Table 14. Top 10 disparities and their rate ratio values.

Rank	Measures	Stratifications	Stratification Group	Stratification Rate	Reference Group	Reference Rate	Rate Ratio
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Plan to address disparities identified in the data

Due to HCAI data suppression guidelines, our data did not yield a list of the top 10 disparities. Despite this limitation, our organization is committed to advancing health equity and addressing barriers to care within our community. Current efforts of the Health Equity Committee are focused on improving language access, as language has been identified as a key factor in potentially

impacting patient experience and care quality.

Population Impact: Spanish is the second most commonly spoken language among our patient population. Ensuring language access directly benefits this patient population and strengthens communication between care providers and patients with limited-English-proficiency.

Measurable Objectives:

Ensure that patient-facing forms are available in both English and Spanish.

Provide education to staff regarding the definition and identification of patient's preferred language.

Achieve consistent documentation of patients preferred language in the medical record.

Ensure certified interpreter services are offered and documented for patient encounters where the preferred language is not English.

These actions reflect our ongoing commitment to reducing communication barriers, improving patient safety, and fostering equitable access to high-quality care.

Performance in the priority area

Acute psychiatric hospitals are required to provide hospital equity plans that address the top 10 disparities by identifying population impact and providing measurable objectives and specific timeframes. For each disparity, hospital equity plans will address performance across priority areas: person-centered care, patient safety, addressing patient social drivers of health, effective treatment, care coordination, and access to care.

Person-centered care

Our organization is dedicated to delivering care that respects and responds to the individual needs, values, and preferences of each patient. We recognize that person-centered care is essential to both quality outcomes and patient experience, and we have taken action to strengthen our performance in this priority area.□

□ Patient Engagement: Care teams actively involve patients and their families in treatment planning, goal setting, and decision-making, ensuring that care aligns with what matters most to the patient.□

□ Language and Communication: We prioritize effective communication by providing patient-facing forms in English and Spanish, documenting each patient's preferred language, and ensuring access to certified interpreter services, both audio and visual.□

□ Cultural Responsiveness: Staff are trained to recognize and respect cultural differences, incorporating patients' backgrounds, beliefs, and values into care planning.□

□ Care Transitions: We place a strong emphasis on safe and seamless care transitions, providing clear instructions, medication education, and follow-up support to promote recovery and reduce readmissions.

□

□

Feedback and Improvement: Patient satisfaction surveys and direct feedback are used to identify opportunities for improvement, and leadership regularly reviews this input to guide quality initiatives.□

□

Through these efforts, our organization continues to enhance person-centered care by creating a supportive, respectful, and inclusive environment that empowers patients and improves outcomes

Patient safety

Our organization places the highest priority on patient safety, recognizing it as the foundation of quality care. We have developed practices and workflows that minimize risk, promote clear communication, and ensure that patients receive care in the safest possible environment.□

Safe Communication: Language access is central to our safety efforts. By ensuring patient-facing forms are available in English and Spanish, documenting preferred language, and consistently utilizing interpreter services, we reduce the risk of miscommunication that can lead to errors in care.□

Care Transitions: Patient safety is emphasized during transitions of care through medication reconciliation, clear discharge instructions, and education provided in the patient's preferred language to prevent adverse events and readmissions.□

Workforce Training: Staff are trained in patient-centered and culturally responsive care, which supports both safety and quality by aligning treatment with the patient's needs and background.□

Continuous Improvement: Patient feedback and incident reporting are used to identify trends, guide quality initiatives, and implement corrective actions when needed. Leadership regularly reviews these data to ensure accountability and improvement.□

Through these efforts, our organization demonstrates a strong commitment to patient safety by fostering clear communication, reducing preventable risks, and supporting safe, high-quality care for all patients.

Addressing patient social drivers of health

Our organization recognizes that social determinants of health (SDOH)'such as language, access to resources, housing stability, food security, and social support—have a significant impact on patient outcomes. We are committed to identifying and addressing these factors to promote equity and improve overall well-being.□

Language Access: As language is a critical determinant of health within our community, we ensure patient-facing forms are available in English and Spanish, document patients' preferred language, and provide interpreter services to support safe and effective communication.□

Screening and Assessment: Care teams incorporate discussions of social needs into the assessment process, identifying barriers such as transportation, financial hardship, or lack of support systems that may affect recovery and treatment adherence.□

Resource Connection: Patients identified with unmet social needs are referred to appropriate community resources and support services. This includes coordination with social workers to connect patients with housing, food assistance, and outpatient behavioral health services.□

Person-Centered Approach: By integrating SDOH into care planning, we ensure that treatment goals are realistic and achievable within the context of each patient's circumstances.□

Continuous Improvement: Feedback from patients and families, as well as data on care outcomes, informs ongoing improvement efforts in addressing SDOH and reducing barriers to care.□

Through these practices, our organization demonstrates strong performance in addressing patient social determinants of health, reducing inequities, and supporting whole-person care.

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

Our organization is committed to providing safe, evidence-based, and individualized treatment that promotes recovery and improves patient outcomes. Effective treatment is supported through standardized clinical practices, interdisciplinary collaboration, and a strong focus on patient engagement.□

Evidence-Based Practices: Care teams utilize treatment approaches that are consistent with current clinical guidelines and best practices in geriatric psychiatry to ensure high-quality care.□

Interdisciplinary Collaboration: Physicians- psychiatrist and internists, nurses, social workers, registered dietitians, rehabilitation therapists and pharmacists work together in daily care planning to ensure treatment is coordinated, individualized, comprehensive, and responsive to patient needs. In addition, a comprehensive interdisciplinary team reviews the care of each patient on a weekly basis. □

Medication Safety: Processes such as medication reconciliation and pharmacist review support safe prescribing, reduce medication errors, and improve treatment effectiveness. In addition, a pharmacist participates in weekly care reviews of each patient. □

Patient Engagement in Treatment: Patients and families are encouraged to participate in care planning, ensuring that treatment goals reflect the patient's values, preferences, and circumstances.□

Language and Communication: Interpreter services and translated materials support accurate communication of treatment plans, improving adherence and reducing the risk of misunderstanding.□

Continuous Monitoring: Patient progress is evaluated regularly, with adjustments made to treatment plans as needed to achieve optimal outcomes.□

Through these efforts, our organization demonstrates strong performance in the priority area of effective treatment by delivering safe, evidence-based, and person-centered care that leads to meaningful improvements in patients' health and quality of life.

Care coordination

Our organization places a strong emphasis on care coordination to ensure that patients receive seamless, safe, and effective services across the continuum of care. By fostering communication between providers, engaging families, and linking patients to community resources, we reduce fragmentation and improve health outcomes.□

Interdisciplinary Collaboration: Daily coordination among physicians- psychiatrists and internists, nurses, social workers, rehabilitation therapists, registered dietitians and pharmacists ensures that treatment plans are integrated, individualized, and reflect the full scope of patient needs.□

Care Transitions: Discharge planning begins early in the hospitalization and includes medication reconciliation, patient and family education, and coordination with outpatient providers to support continuity of care.□

Community Linkages: Patients with identified social or behavioral health needs are connected to appropriate community-based services, including housing, food assistance, and outpatient treatment programs.□

Language and Communication Support: Preferred language documentation, interpreter services, and bilingual patient materials help ensure patients and families fully understand care plans and discharge instructions.□

Patient and Family Engagement: Families are involved in discussions about goals of care, treatment decisions, and discharge planning to support adherence and smooth transitions.□

Continuous Review: Leadership monitors care coordination processes through feedback, readmission

data, and incident reporting to identify opportunities for ongoing improvement.□

□

Through these practices, our organization demonstrates strong performance in care coordination by promoting continuity, reducing barriers, and supporting patient safety and recovery both during hospitalization and after discharge.

Access to care

Our organization is committed to ensuring timely and equitable access to care for all patients in our community. We recognize that access is influenced by multiple factors, including language, availability of services, and care coordination, and we have implemented practices to reduce barriers and support patient needs.□

Language Access: Patient-facing forms are available in English and Spanish, interpreter services are consistently offered, and patients' preferred language is documented to ensure effective communication and equitable access.□

Timely Care: Admission and discharge workflows are designed to minimize delays, ensuring that patients receive care as quickly as possible when referred or admitted.□

Equity-Focused Approach: Recognizing Spanish as the second most common language in our community, we prioritize culturally and linguistically responsive services to better meet the needs of our diverse patient population.□

Community Partnerships: Care teams coordinate with outpatient providers and community agencies to help patients access follow-up care, behavioral health services, housing resources, and other supports after discharge.□

Patient Engagement: Families and caregivers are included in planning to ensure patients have the necessary support to access appointments, medications, and ongoing treatment.□

Continuous Improvement: Access challenges are reviewed regularly, and leadership uses patient feedback and operational data to guide improvement efforts.□

Through these efforts, our organization demonstrates strong performance in access to care by reducing barriers, supporting equity, and ensuring patients receive the services they need when they need them

Methodology Guidelines

Did the hospital follow the methodology in the Measures Submission Guide? (Y/N)

Y