

Hospital Equity Measures Report

General Information

| | |
|---|---|
| Report Type: | Hospital Equity Measures Report |
| Year: | 2024 |
| Hospital Name: | ALISO RIDGE BEHAVIORAL HEALTH, LLC |
| Facility Type: | Acute Psychiatric Hospital |
| Hospital HCAI ID: | 106304589 |
| Report Period: | 1/1/2024 - 12/31/2024 |
| Status: | Submitted |
| Due Date: | 11/29/2025 |
| Last Updated: | 03/12/2026 |
| Hospital Location with Clean Water and Air: | Y |
| Hospital Web Address for Equity Report: | https://www.ocspecialtyhealth.com/ |

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.

3639

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 | 3581 | 3639 | 98.4 |
| Spanish Language | 47 | 3639 | 1.2 |
| Asian Pacific Islander Languages | 0 | 3639 | 0 |
| Middle Eastern Languages | 0 | 3639 | 0 |
| American Sign Language | 0 | 3639 | 0 |
| Other Languages | 0 | 3639 | 0 |

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 review 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 above 18 years old 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

NA

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

3639

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

NA

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 | | | | |
| Housing Instability | | | | |
| Transportation Problems | | | | |
| Utility Difficulties | | | | |
| Interpersonal Safety | | | | |

Core Quality Measures for General 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?"

NA

Total number of respondents to HCAHPS Question 19

NA

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

NA

Total number of people surveyed on HCAHPS Question 19

NA

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

NA

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 | | | | | |
| Asian | | | | | |
| Black or African American | | | | | |
| Hispanic or Latino | | | | | |
| Middle Eastern or North African | | | | | |
| Multiracial and/or Multiethnic (two or more races) | | | | | |
| Native Hawaiian or Pacific Islander | | | | | |
| White | | | | | |

| 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 | | | | | |
| Age 18 to 34 | | | | | |
| Age 35 to 49 | | | | | |
| Age 50 to 64 | | | | | |
| Age 65 Years and Older | | | | | |

| 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 | | | | | |
| Male | | | | | |
| Unknown | | | | | |

| 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 | | | | | |
| Medicaid | | | | | |
| Private | | | | | |
| Self-Pay | | | | | |
| Other | | | | | |

| 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 | | | | | |
| Spanish Language | | | | | |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign Language | | | | | |
| Other/Unknown Languages | | | | | |

| 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 | | | | | |
| Has a mobility disability | | | | | |
| Has a cognition disability | | | | | |
| Has a hearing disability | | | | | |
| Has a vision disability | | | | | |
| Has a self-care disability | | | | | |
| Has an independent living disability | | | | | |

| 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 | | | | | |
| Straight or heterosexual | | | | | |
| Bisexual | | | | | |
| Something else | | | | | |
| Don't know | | | | | |
| Not disclosed | | | | | |

| 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 | | | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | | | |
| Male | | | | | |
| Male-to-female (MTF)/ transgender female/trans | | | | | |
| Non-conforming gender | | | | | |
| Additional gender category or other | | | | | |
| Not disclosed | | | | | |

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?"

NA

Total number of respondents to HCAHPS Question 17

NA

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

NA

Total number of people surveyed on HCAHPS Question 17

NA

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

NA

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 | | | | | |
| Asian | | | | | |
| Black or African American | | | | | |
| Hispanic or Latino | | | | | |
| Middle Eastern or North African | | | | | |
| Multiracial and/or Multiethnic (two or more races) | | | | | |
| Native Hawaiian or Pacific Islander | | | | | |
| White | | | | | |

| 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 | | | | | |
| Age 18 to 34 | | | | | |
| Age 35 to 49 | | | | | |
| Age 50 to 64 | | | | | |
| Age 65 Years and Older | | | | | |

| 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 | | | | | |
| Male | | | | | |
| Unknown | | | | | |

| 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 | | | | | |
| Medicaid | | | | | |
| Private | | | | | |
| Self-Pay | | | | | |
| Other | | | | | |

| 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 | | | | | |
| Spanish Language | | | | | |
| Asian Pacific Islander Languages | | | | | |
| Middle Eastern Languages | | | | | |
| American Sign | | | | | |
| Other/Unknown Languages | | | | | |

| 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 | | | | | |
| Has a mobility disability | | | | | |
| Has a cognition | | | | | |
| Has a hearing disability | | | | | |
| Has a vision disability | | | | | |
| Has a self-care | | | | | |
| Has an independent living disability | | | | | |

| 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 | | | | | |
| Straight or heterosexual | | | | | |
| Bisexual | | | | | |
| Something else | | | | | |
| Don't know | | | | | |
| Not disclosed | | | | | |

| 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 | | | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | | | |
| Male | | | | | |
| Male-to-female (MTF)/ transgender female/trans woman | | | | | |
| Non-conforming gender | | | | | |
| Additional gender category or other | | | | | |
| Not disclosed | | | | | |

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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

| 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 | | | |
| Age 18 to 34 | | | |
| Age 35 to 49 | | | |
| Age 50 to 64 | | | |
| Age 65 Years and Older | | | |

| 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 | | | |
| Male | | | |
| Unknown | | | |

| 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 | | | |
| Medicaid | | | |
| Private | | | |
| Self-Pay | | | |
| Other | | | |

| 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 | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| 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 | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| 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 | | | |
| Female-to-male (FTM)/ transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/ transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

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

112

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

3639

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

3.0

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 | 0 | 3639 | 0 |
| Asian | 0 | 3639 | 0 |
| Black or African American | 0 | 3639 | 0 |
| Hispanic or Latino | 0 | 3639 | 0 |
| Middle Eastern or North African | 0 | 0 | 0 |
| Multiracial and/or Multiethnic (two or more races) | 112 | 3639 | 3.0 |
| Native Hawaiian or Pacific Islander | 0 | 0 | 0 |
| White | 18 | 3639 | 0.4 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|----------------------------------|-----------------------------------|----------------------|
| Age 18 to 34 | 71 | 3639 | 1.9 |
| Age 35 to 49 | 27 | 3639 | 0.7 |
| Age 50 to 64 | 0 | 3639 | 0 |
| Age 65 Years and Older | 0 | 3639 | 0 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-----------------------|----------------------------------|-----------------------------------|----------------------|
| Female | 62 | 3639 | 1.7 |
| Male | 50 | 3639 | 1.3 |
| Unknown | 0 | 3639 | 0 |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------|----------------------------------|-----------------------------------|----------------------|
| Medicare | 23 | 3639 | 0.6 |
| Medicaid | 49 | 3639 | 1.3 |
| Private | 40 | 3639 | 1.0 |
| Self-Pay | 0 | 3639 | 0 |
| Other | 0 | 3639 | 0 |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|----------------------------------|-----------------------------------|----------------------|
| English Language | 110 | 3639 | 3.0 |
| Spanish Language | 0 | 3639 | 0 |
| Asian Pacific Islander Languages | 0 | 3639 | 0 |
| Middle Eastern Languages | 0 | 3639 | 0 |
| American Sign Language | 0 | 3639 | 0 |
| Other/Unknown Languages | 0 | 3639 | 0 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|----------------------------------|-----------------------------------|----------------------|
| Does not have a disability | 112 | 3639 | 3.0 |
| Has a mobility disability | 0 | 3639 | 0 |
| Has a cognition disability | 0 | 3639 | 0 |
| Has a hearing disability | 0 | 3639 | 0 |
| Has a vision disability | 0 | 3639 | 0 |
| Has a self-care disability | 0 | 3639 | 0 |
| Has an independent living disability | 0 | 3639 | 0 |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|----------------------------------|-----------------------------------|----------------------|
| Lesbian, gay or homosexual | 0 | 3639 | 0 |
| Straight or heterosexual | 43 | 3639 | 1.1 |
| Bisexual | 0 | 3639 | 0 |
| Something else | 0 | 3639 | 0 |
| Don't know | 0 | 3639 | 0 |
| Not disclosed | 57 | 3639 | 1.5 |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|----------------------------------|-----------------------------------|----------------------|
| Female | 63 | 3639 | 1.7 |
| Female-to-male (FTM)/transgender male/trans man | 0 | 3639 | 0 |
| Male | 45 | 3639 | 1.2 |
| Male-to-female (MTF)/transgender female/trans woman | 0 | 3639 | 0 |
| Non-conforming gender | 0 | 3639 | 0 |
| Additional gender category or other | 0 | 3639 | 0 |
| Not disclosed | 0 | 3639 | 0 |

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

112

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

3639

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

3.0

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 | 0 | 3639 | 0 |
| Asian | 0 | 3639 | 0 |
| Black or African American | 0 | 3639 | 0 |
| Hispanic or Latino | 0 | 3639 | 0 |
| Middle Eastern or North African | 0 | 3639 | 0 |
| Multiracial and/or Multiethnic (two or more races) | 112 | 3639 | 3.0 |
| Native Hawaiian or Pacific Islander | 0 | 3639 | 0 |
| White | 18 | 3639 | 0.4 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|----------------------------------|-----------------------------------|----------------------|
| Age 18 to 34 | 71 | 3639 | 1.9 |
| Age 35 to 49 | 27 | 3639 | 0.7 |
| Age 50 to 64 | 0 | 3639 | 0 |
| Age 65 Years and Older | 0 | 3639 | 0 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-----------------------|----------------------------------|-----------------------------------|----------------------|
| Female | 62 | 3639 | 1.7 |
| Male | 50 | 3639 | 1.3 |
| Unknown | 0 | 3639 | 0 |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------|----------------------------------|-----------------------------------|----------------------|
| Medicare | 23 | 3639 | 0.6 |
| Medicaid | 49 | 3639 | 1.3 |
| Private | 40 | 3639 | 1.0 |
| Self-Pay | 40 | 3639 | 0 |
| Other | 0 | 3639 | 0 |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|----------------------------------|-----------------------------------|----------------------|
| English Language | 110 | 3639 | 3.0 |
| Spanish Language | 0 | 3639 | 0 |
| Asian Pacific Islander Languages | 0 | 3639 | 0 |
| Middle Eastern Languages | 0 | 3639 | 0 |
| American Sign Language | 0 | 3639 | 0 |
| Other/Unknown Languages | 0 | 3639 | 0 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|----------------------------------|-----------------------------------|----------------------|
| Does not have a disability | 112 | 3639 | 3.0 |
| Has a mobility disability | 0 | 3639 | 0 |
| Has a cognition disability | 0 | 3639 | 0 |
| Has a hearing disability | 0 | 3639 | 0 |
| Has a vision disability | 0 | 3639 | 0 |
| Has a self-care disability | 0 | 3639 | 0 |
| Has an independent living disability | 0 | 3639 | 0 |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|----------------------------------|-----------------------------------|----------------------|
| Lesbian, gay or homosexual | 0 | 3639 | 0 |
| Straight or heterosexual | 43 | 3639 | 1.1 |
| Bisexual | 0 | 3639 | 0 |
| Something else | 0 | 3639 | 0 |
| Don't know | 0 | 3639 | 0 |
| Not disclosed | 57 | 3639 | 1.5 |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|----------------------------------|-----------------------------------|----------------------|
| Female | 63 | 3639 | 1.7 |
| Female-to-male (FTM)/transgender male/trans man | 0 | 3639 | 0.0 |
| Male | 45 | 3639 | 1.2 |
| Male-to-female (MTF)/transgender female/trans woman | 0 | 3639 | 0 |
| Non-conforming gender | 0 | 3639 | 0 |
| Additional gender category or other | 0 | 3639 | 0 |
| Not disclosed | 0 | 3639 | 0 |

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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

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

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

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

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

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

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

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

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

112

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

3639

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

3.0

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 | 0 | 3639 | 0 |
| Asian | 0 | 3639 | 0.2 |
| Black or African American | 0 | 3639 | 0 |
| Hispanic or Latino | 0 | 3639 | 0 |
| Middle Eastern or North African | 0 | 3639 | 0 |
| Multiracial and/or Multiethnic (two or more races) | 112 | 3639 | 3.0 |
| Native Hawaiian or Pacific Islander | 0 | 3639 | 0 |
| White | 18 | 3639 | 0.4 |

| Age | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------------------|----------------------------------|-----------------------------------|----------------------|
| Age 18 to 34 | 71 | 3639 | 1.9 |
| Age 35 to 49 | 27 | 3639 | 0.7 |
| Age 50 to 64 | 0 | 3639 | 0.2 |
| Age 65 Years and Older | 0 | 3639 | 0 |

| Sex assigned at birth | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|-----------------------|----------------------------------|-----------------------------------|----------------------|
| Female | 62 | 3639 | 1.7 |
| Male | 50 | 3639 | 1.3 |
| Unknown | 0 | 3639 | 0.1 |

| Payer Type | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|------------|----------------------------------|-----------------------------------|----------------------|
| Medicare | 23 | 3639 | 0.6 |
| Medicaid | 49 | 3639 | 1.3 |
| Private | 40 | 3639 | 1.0 |
| Self-Pay | 0 | 3639 | 0 |
| Other | 0 | 3639 | 0 |

| Preferred Language | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------------|----------------------------------|-----------------------------------|----------------------|
| English Language | 110 | 3639 | 3.0 |
| Spanish Language | 0 | 3639 | 0 |
| Asian Pacific Islander Languages | 0 | 3639 | 0 |
| Middle Eastern Languages | 0 | 3639 | 0 |
| American Sign Language | 0 | 3639 | 0 |
| Other/Unknown Languages | 0 | 3639 | 0 |

| Disability Status | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|--------------------------------------|----------------------------------|-----------------------------------|----------------------|
| Does not have a disability | 112 | 3639 | 3.0 |
| Has a mobility disability | 0 | 3639 | 0 |
| Has a cognition disability | 0 | 3639 | 0 |
| Has a hearing disability | 0 | 3639 | 0 |
| Has a vision disability | 0 | 3639 | 0 |
| Has a self-care disability | 0 | 3639 | 0 |
| Has an independent living disability | 0 | 3639 | 0 |

| Sexual Orientation | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|----------------------------|----------------------------------|-----------------------------------|----------------------|
| Lesbian, gay or homosexual | 0 | 3639 | 0 |
| Straight or heterosexual | 43 | 3639 | 1.1 |
| Bisexual | 0 | 3639 | 0 |
| Something else | 0 | 3639 | 0 |
| Don't know | 0 | 3639 | 0 |
| Not disclosed | 57 | 3639 | 1.5 |

| Gender Identity | Number of inpatient readmissions | Total number of admitted patients | Readmission rate (%) |
|---|----------------------------------|-----------------------------------|----------------------|
| Female | 63 | 3639 | 1.7 |
| Female-to-male (FTM)/transgender male/trans man | 0 | 3639 | 0 |
| Male | 45 | 3639 | 1.2 |
| Male-to-female (MTF)/transgender female/trans woman | 0 | 3639 | 0 |
| Non-conforming gender | 0 | 3639 | 0 |
| Additional gender category or other | 0 | 3639 | 0 |
| Not disclosed | 0 | 3639 | 0 |

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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

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

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

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

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

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

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

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

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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

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

| 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 | | | |
| Male | | | |
| Unknown | | | |

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

| 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 | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| 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 | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

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

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 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 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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North African | | | |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

| 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 | | | |
| Age 35 to 49 | | | |
| Age 50 to 64 | | | |
| Age 65 Years and Older | | | |

| 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 | | | |
| Male | | | |
| Unknown | | | |

| 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 | | | |
| Medicaid | | | |
| Private | | | |
| Self-Pay | | | |
| Other | | | |

| 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 | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| 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 | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| 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 | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

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 patients 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. 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

NA

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

NA

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

NA

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 | | | |
| Asian | | | |
| Black or African American | | | |
| Hispanic or Latino | | | |
| Middle Eastern or North | | | |
| Multiracial and/or Multiethnic (two or more races) | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |

| 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 | | | |
| Age 35 to 49 | | | |
| Age 50 to 64 | | | |
| Age 65 Years and Older | | | |

| 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 | | | |
| Male | | | |
| Unknown | | | |

| 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 | | | |
| Medicaid | | | |
| Private | | | |
| Self-Pay | | | |
| Other | | | |

| 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 | | | |
| Spanish Language | | | |
| Asian Pacific Islander Languages | | | |
| Middle Eastern Languages | | | |
| American Sign Language | | | |
| Other/Unknown Languages | | | |

| 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 | | | |
| Has a mobility disability | | | |
| Has a cognition disability | | | |
| Has a hearing disability | | | |
| Has a vision disability | | | |
| Has a self-care disability | | | |
| Has an independent living disability | | | |

| 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 | | | |
| Straight or heterosexual | | | |
| Bisexual | | | |
| Something else | | | |
| Don't know | | | |
| Not disclosed | | | |

| 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 | | | |
| Female-to-male (FTM)/transgender male/trans man | | | |
| Male | | | |
| Male-to-female (MTF)/transgender female/trans woman | | | |
| Non-conforming gender | | | |
| Additional gender category or other | | | |
| Not disclosed | | | |

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.

| Measures | Stratifications | Stratification Group | Stratification Rate | Reference Group | Reference Rate | Rate Ratio |
|----------|-----------------|----------------------|---------------------|-----------------|----------------|------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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Plan to address disparities identified in the data

Aliso Ridge Behavioral Health is committed to equitable, person-centered psychiatric care. In response to disparities identified in demographic and access data, the following plan outlines targeted strategies to reduce inequities, improve outcomes, and ensure culturally responsive care across all patient populations.

1. Age-Based Disparities in Access and Outcomes

Action:

- Refine age-specific programming (e.g., adolescent vs. geriatric tracks) to ensure developmental relevance.
- Review admission and discharge trends by age group to identify barriers to timely care.
- Train staff on age-related psychiatric presentations and communication strategies.

2. Race and Ethnicity Disparities in Admission and Retention

Action:

- Conduct quarterly equity audits on admission, treatment engagement, and discharge by race/ethnicity.
- Expand cultural competency training and integrate culturally adapted therapeutic modalities.
- Partner with community organizations serving underrepresented racial/ethnic groups.

3. Payor Disparities in Access to Services

Action:

- Analyze service utilization by payor type (e.g., Medi-Cal, private insurance, uninsured).
- Strengthen financial navigation support and streamline authorization processes.
- Advocate for expanded coverage of psychiatric services through local and state channels.

4. Sexual Orientation Disparities in Safety and Engagement

Action:

- Ensure inclusive language and visibility of LGBTQ+ affirming resources throughout the facility.
- Incorporate sexual orientation considerations into safety planning and therapeutic goals.
- Facilitate staff education on minority stress and psychiatric risk factors in LGBTQ+ populations.

5. Gender Identity Disparities in Treatment Experience

Action:

- Implement gender-inclusive documentation and intake protocols.
- Offer staff training on affirming care for transgender and nonbinary patients.
- Monitor incidents and grievances for gender-related concerns and respond with corrective actions.

6. Language Access Disparities

Action:

- Expand translation of patient rights, safety protocols, and discharge materials into additional languages.
- Increase availability of bilingual staff and interpreter services.
- Track language preference and satisfaction in patient surveys.

7. Disparities in Psychiatric Crisis Response

Action:

- Review legal holds and crisis admissions by demographic group to identify patterns.
- Collaborate with local law enforcement and EMS to ensure equitable crisis response.
- Provide community education on psychiatric emergencies and rights.

8. Disparities in Discharge Planning and Continuity of Care

Action:

- Audit discharge plans for inclusion of culturally relevant and accessible resources.
- Strengthen coordination with outpatient providers serving marginalized populations.
- Track readmission rates by demographic group and adjust protocols accordingly.

9. Disparities in Patient Satisfaction and Grievance Trends

Action:

- Disaggregate patient satisfaction and grievance data by demographic variables.
- Use feedback to inform staff training, environmental adjustments, and programming.
- Elevate patient voice through advisory councils and structured feedback loops.

10. Staff Awareness and Responsiveness to Disparities

Action:

- Launch training on health equity, implicit bias, and trauma-informed care.
- Integrate disparity data into Safety Actions Updates and committee reviews.
- Recognize staff contributions to equity through spotlight programs and performance metrics.

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

Collaborative Treatment Planning:

Psychiatric providers, nurses, therapists, and patients worked together to design individualized care plans. These plans reflected each patient's psychiatric history, personal goals, and preferences, ensuring interventions were clinically appropriate and personally meaningful.

Therapeutic Alliance and Patient Voice:

Staff prioritized building trust and rapport, encouraging patients to actively participate in care discussions. Patients were empowered to express their needs, concerns, and recovery goals, reinforcing autonomy and dignity in the treatment process.

Family and Support System Involvement:

Families and caregivers were included in psychiatric care conferences, discharge planning, and safety strategies. This collaborative approach strengthened continuity of care and supported patients in their community reintegration.

Cultural and Trauma-Informed Responsiveness:

Care teams integrated cultural values, lived experiences, and trauma-informed practices into psychiatric interventions. This helped reduce retraumatization and ensured care was respectful, equitable, and sensitive to diverse backgrounds.

Continuous Quality Improvement:

Feedback loops including patient satisfaction surveys, staff debriefs, and interdisciplinary reviews were used to refine psychiatric protocols. This commitment to learning and adaptation ensured care remained defensible, transparent, and patient-centered.

Patient safety

Comprehensive Risk Assessment:

Patients were evaluated upon admission and throughout treatment for psychiatric, medical, and environmental risks. Standardized tools and interdisciplinary reviews ensured that safety concerns were identified early and addressed proactively.

Crisis Prevention and Intervention Protocols:

Staff were trained in de-escalation techniques, trauma-informed approaches, and crisis response. These practices minimized the use of restrictive interventions and promoted therapeutic resolution of psychiatric emergencies.

Environmental Safety Measures:

Psychiatric units were designed to reduce hazards, with ligature-resistant fixtures, secure medication storage, and continuous monitoring of high-risk areas. Routine environmental rounds reinforced a safe and healing milieu.

Workplace Violence (WPV) Prevention:

Aliso Ridge implemented structured WPV assessments, incident follow-up, and interdisciplinary collaboration after staff injuries. These measures protected both patients and staff, reinforcing a culture of mutual safety.

Infection Control and Health Protocols:

Safety extended to physical health through rigorous infection control documentation, interdisciplinary reviews, and staff sign-off processes. This safeguarded vulnerable psychiatric populations from preventable health risks.

Patient Rights and Dignity in Safety Practices:

Safety protocols were balanced with respect for autonomy and dignity. Patients were informed of their rights, and bilingual translations ensured equitable access to safety information and grievance processes.

Addressing patient social drivers of health

Holistic Intake and Assessment:

Beyond psychiatric symptoms, clinicians assessed housing stability, employment status, food security, transportation access, and social support networks. This comprehensive intake ensured that treatment plans reflected both clinical needs and real-world challenges.

Care Coordination and Community Linkages:

Patients were connected to community resources such as housing programs, vocational training, food assistance, and transportation services. Case managers collaborated with local agencies to reduce barriers that could undermine psychiatric recovery.

Family and Social Support Engagement:

Recognizing the role of relationships in recovery, staff facilitated family meetings, caregiver education, and peer support groups. These interventions strengthened patients' social safety nets and promoted continuity of care outside the hospital.

Cultural and Linguistic Accessibility:

Patient rights and educational materials were translated into multiple languages, ensuring equitable access to information. Staff training emphasized cultural responsiveness, helping patients feel understood and respected in their social contexts.

Trauma-Informed and Equity-Focused Practices:

Care teams acknowledged how social inequities and trauma histories shaped psychiatric presentations. Interventions were designed to minimize retraumatization and to empower patients in navigating systemic barriers.

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

Evidence-Based Clinical Practices:

Treatment protocols were grounded in established psychiatric research and best practices, including cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), and medication management. This ensured interventions were both scientifically validated and tailored to psychiatric populations.

Interdisciplinary Collaboration:

Psychiatrists, nurses, therapists, social workers, and case managers worked together to design and monitor treatment plans. Regular interdisciplinary rounds promoted consistency, accountability, and holistic care.

Individualized Care Planning:

Each patient's psychiatric history, strengths, and recovery goals were incorporated into treatment plans. This personalization ensured that care was clinically effective while respecting patient autonomy and dignity.

Medication Management and Monitoring:

Psychopharmacological interventions were closely monitored for efficacy, side effects, and adherence. Patients were educated about their medications, empowering them to participate actively in their treatment decisions.

Therapeutic Milieu and Structured Programming:

Daily schedules included group therapy, psychoeducation, skill-building, and recreational activities. This structured environment reinforced stability, reduced psychiatric symptoms, and promoted recovery.

Care coordination

Interdisciplinary Collaboration:

Psychiatrists, nurses, therapists, social workers, and case managers worked together in daily rounds and treatment conferences. This ensured that psychiatric, medical, and social needs were addressed in a unified plan of care.

Patient and Family Engagement:

Patients and their support systems were included in care discussions, discharge planning, and safety reviews. This collaborative approach strengthened continuity of care and empowered patients to participate in their recovery.

Integration of Social Drivers of Health:

Care coordination extended beyond the hospital walls, linking patients to housing, employment, food security, and transportation resources. Addressing these social factors reduced barriers to psychiatric stability.

Transition and Discharge Planning:

Staff prioritized transitions from the inpatient hospitalization setting by coordinating with outpatient providers, community mental health agencies, and primary care physicians.

Access to care

Equitable Access Through Language and Cultural Support:

Patient rights and educational materials were translated into multiple languages, to reduce barriers for non-English-speaking patients. Staff training emphasized cultural responsiveness to ensure care

was accessible and meaningful across diverse populations.

Insurance and Financial Navigation:

Administrative staff assisted patients and families in navigating insurance coverage and financial concerns, reducing barriers that might otherwise prevent access to psychiatric treatment.

Integration with Community Resources:

Care coordination included referrals to outpatient providers, housing programs, and social services.

Patient and Family Engagement in Care Pathways:

Families and caregivers were included in admission, treatment, and discharge planning, ensuring that patients had support in accessing ongoing psychiatric care after hospitalization.

Methodology Guidelines

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

Y