

Hospital Equity Measures Report

General Information

Report Type:	Hospital Equity Measures Report
Year:	2024
Hospital Name:	ALVARADO PARKWAY INSTITUTE B.H.S.
Facility Type:	Acute Psychiatric Hospital
Hospital HCAI ID:	106370749
Report Period:	1/1/2024 - 12/31/2024
Status:	Complete
Due Date:	11/29/2025
Last Updated:	01/23/2026
Hospital Location with Clean Water and Air:	Y
Hospital Web Address for Equity Report:	https://apibhs.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.

2561

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	2538	2561	99.1
Spanish Language	17	2561	0.7
Asian Pacific Islander Languages	suppressed	2561	suppressed
Middle Eastern Languages	suppressed	2561	suppressed
American Sign Language	0	2561	0
Other Languages	suppressed	2561	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 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

258

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

2561

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

10.1

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	125	48.4		
Housing Instability	119	46.1		
Transportation Problems	114	44.2		
Utility Difficulties	88	34.1		
Interpersonal Safety	118	45.7		

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

73

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

2561

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

2.9

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	15	suppressed
Asian	suppressed	112	suppressed
Black or African American	15	280	5.4
Hispanic or Latino	12	557	2.2
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	suppressed	209	suppressed
Native Hawaiian or Pacific Islander			
White	54	1791	3

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	21	981	2.1
Age 35 to 49	21	723	2.9
Age 50 to 64	21	620	3.4
Age 65 Years and Older	suppressed	217	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	19	960	2
Male	54	1601	3.4
Unknown			

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	16	421	3.8
Medicaid	26	693	3.8
Private	29	1362	2.1
Self-Pay	suppressed	26	suppressed
Other	suppressed	85	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	73	2538	2.9
Spanish Language	suppressed	17	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	suppressed

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	suppressed	64	suppressed
Straight or heterosexual	30	1569	1.9
Bisexual	suppressed	19	suppressed
Something else	suppressed	71	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	38	836	4.5

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	18	914	2
Female-to-male (FTM)/transgender male/trans man	suppressed	11	suppressed
Male	52	1541	3.4
Male-to-female (MTF)/transgender female/trans woman	suppressed	29	suppressed
Non-conforming gender	suppressed	44	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	50	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

26

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

2561

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

1

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	15	suppressed
Asian	suppressed	112	suppressed
Black or African American	suppressed	280	suppressed
Hispanic or Latino	suppressed	557	suppressed
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	suppressed	209	suppressed
Native Hawaiian or Pacific Islander			
White	19	1791	1.1

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	981	suppressed
Age 35 to 49	suppressed	723	suppressed
Age 50 to 64	suppressed	620	suppressed
Age 65 Years and Older	suppressed	217	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	11	960	1.1
Male	15	1601	0.9
Unknown			

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	421	suppressed
Medicaid	suppressed	693	suppressed
Private	13	1362	1
Self-Pay	suppressed	26	suppressed
Other	suppressed	85	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	26	2538	1
Spanish Language	suppressed	17	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	suppressed

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	suppressed	64	suppressed
Straight or heterosexual	17	1569	1.1
Bisexual	suppressed	19	suppressed
Something else	suppressed	71	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	836	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	914	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	13	1541	0.8
Male-to-female (MTF)/transgender female/trans woman	suppressed	29	suppressed
Non-conforming gender	suppressed	44	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	50	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

2561

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

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	15	suppressed
Asian	suppressed	112	suppressed
Black or African American	suppressed	280	suppressed
Hispanic or Latino	suppressed	557	suppressed
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	suppressed	209	suppressed
Native Hawaiian or Pacific Islander	suppressed	suppressed	suppressed
White	suppressed	1791	suppressed

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	suppressed	981	suppressed
Age 35 to 49	suppressed	723	suppressed
Age 50 to 64	suppressed	620	suppressed
Age 65 Years and Older	suppressed	217	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	960	suppressed
Male	suppressed	1601	suppressed
Unknown			

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	421	suppressed
Medicaid	suppressed	693	suppressed
Private	suppressed	1362	suppressed
Self-Pay	suppressed	26	suppressed
Other	suppressed	85	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	suppressed	2538	suppressed
Spanish Language	suppressed	19	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	suppressed

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	suppressed	64	suppressed
Straight or heterosexual	suppressed	1569	suppressed
Bisexual	suppressed	19	suppressed
Something else	suppressed	71	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	suppressed	836	suppressed

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	914	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	11	suppressed
Male	suppressed	1541	suppressed
Male-to-female (MTF)/transgender female/trans woman	suppressed	31	suppressed
Non-conforming gender	suppressed	44	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	50	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

46

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

2561

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

1.8

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	15	suppressed
Asian	suppressed	112	suppressed
Black or African American	11	280	3.9
Hispanic or Latino	suppressed	557	suppressed
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	suppressed	209	suppressed
Native Hawaiian or Pacific Islander			
White	34	1791	1.9

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	11	981	1.1
Age 35 to 49	18	723	2.5
Age 50 to 64	15	620	2.4
Age 65 Years and Older	suppressed	217	suppressed

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	960	suppressed
Male	38	1601	2.4
Unknown			

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	suppressed	421	suppressed
Medicaid	22	693	3.2
Private	15	1362	1.1
Self-Pay	suppressed	26	suppressed
Other	suppressed	85	suppressed

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	46	2538	1.8
Spanish Language	suppressed	19	suppressed
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	suppressed

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	suppressed	64	suppressed
Straight or heterosexual	13	1569	0.8
Bisexual	suppressed	19	suppressed
Something else	suppressed	71	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	29	836	3.5

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	suppressed	914	suppressed
Female-to-male (FTM)/transgender male/trans man	suppressed	11	suppressed
Male	38	1541	2.5
Male-to-female (MTF)/transgender female/trans woman	suppressed	31	suppressed
Non-conforming gender	suppressed	44	suppressed
Additional gender category or other	suppressed	suppressed	suppressed
Not disclosed	suppressed	50	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

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

278

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

281

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

98.9

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	suppressed	suppressed
Asian	12	12	100
Black or African American	40	40	100
Hispanic or Latino	63	72	87.5
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	13	26	50
Native Hawaiian or Pacific Islander			
White	216	231	93.5

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	98	107	91.6
Age 35 to 49	92	108	85.2
Age 50 to 64	69	89	77.5
Age 65 Years and Older	18	21	85.7

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	101	116	87.1
Male	177	210	84.3
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	55	64	85.9
Medicaid	90	115	78.3
Private	124	135	91.9
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	12	suppressed

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	276	324	85.2
Spanish Language	suppressed	suppressed	suppressed
Asian Pacific Islander Languages			
Middle Eastern Languages			
American Sign Language			
Other/Unknown Languages	suppressed	suppressed	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			
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	suppressed	12	suppressed
Straight or heterosexual	152	175	86.9
Bisexual	suppressed	suppressed	suppressed
Something else	suppressed	suppressed	suppressed
Don't know			
Not disclosed	112	130	86.2

Gender Identity	Number of eligible patients who received metabolic screening	Total number of eligible discharges	Rate of eligible patients who received metabolic screening (%)
Female	91	106	85.8
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	176	208	84.6
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	suppressed	suppressed	suppressed
Additional gender category or other			
Not disclosed	suppressed	suppressed	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 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

158

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

239

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

66.1

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	suppressed	suppressed	suppressed
Black or African American	18	30	60
Hispanic or Latino	40	69	58
Middle Eastern or North African			
Multiracial and/or Multiethnic (two or more races)	suppressed	22	suppressed
Native Hawaiian or Pacific Islander			
White	130	206	63.1

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	46	94	48.9
Age 35 to 49	57	101	56.4
Age 50 to 64	49	75	65.3
Age 65 Years and Older	suppressed	11	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	40	80	50
Male	118	202	58.4
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	16	37	43.2
Medicaid	48	104	46.2
Private	91	136	66.9
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	157	281	55.9
Spanish Language	suppressed	suppressed	suppressed
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	suppressed	suppressed	suppressed
Straight or heterosexual	94	157	59.9
Bisexual			
Something else	suppressed	suppressed	suppressed
Don't know			
Not disclosed	59	109	54.1

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	38	77	49.4
Female-to-male (FTM)/transgender male/trans man			
Male	116	200	58
Male-to-female (MTF)/transgender female/trans woman			
Non-conforming gender			
Additional gender category or other			
Not disclosed	suppressed	suppressed	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 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

133

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

239

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

55.6

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	suppressed	suppressed	suppressed
Black or African American	15	30	50
Hispanic or Latino	36	69	52.2
Middle Eastern or North			
Multiracial and/or Multiethnic (two or more races)	suppressed	22	suppressed
Native Hawaiian or Pacific Islander			
White	109	206	52.9

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	39	94	41.5
Age 35 to 49	46	101	45.5
Age 50 to 64	42	75	56
Age 65 Years and Older	suppressed	11	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	33	80	41.3
Male	100	202	49.5
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	15	37	40.5
Medicaid	35	104	33.7
Private	80	136	58.8
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	132	281	47
Spanish Language	suppressed	suppressed	suppressed
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	suppressed	suppressed	suppressed
Straight or heterosexual	81	157	51.6
Bisexual			
Something else	suppressed	suppressed	suppressed
Don't know			
Not disclosed	48	109	44

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	31	77	40.3
Female-to-male (FTM)/ transgender male/trans man	suppressed	suppressed	suppressed
Male	100	200	50
Male-to-female (MTF)/ transgender female/trans woman			
Non-conforming gender			
Additional gender category or other			
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.

Measures	Stratifications	Stratification Group	Stratification Rate	Reference Group	Reference Rate	Rate Ratio
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Co-Occurring)	Sexual Orientation	Choose not to disclose	3.5	Straight or heterosexual	0.8	4.4
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Mental Health)	Expected Payor	Medicaid	3.2	Private	1.1	2.9
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Race and/or Ethnicity	Black or African American	5.4	Hispanic or Latino	2.2	2.5
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Sexual Orientation	Choose not to disclose	4.5	Straight or heterosexual	1.9	2.4
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Co-Occurring)	Age (excluding maternal measures)	35 to 49	2.5	18 to 34	1.1	2.3
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Co-Occurring)	Age (excluding maternal measures)	50 to 64	2.4	18 to 34	1.1	2.2
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (Co-Occurring)	Race and/or Ethnicity	Black or African American	3.9	White	1.9	2.1
CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) program Screening for Metabolic Disorders.	Race and/or Ethnicity	Multiracial and/or Multiethnic (two or more races)	50	Black or African American	100	2
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Expected Payor	Medicaid	3.8	Private	2.1	1.8
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Expected Payor	Medicare	3.8	Private	2.1	1.8

Plan to address disparities identified in the data

We are committed to reducing recidivism and disparities in treatment through an equity-focused approach. This plan addresses systemic factors influencing recidivism and quality of care, including race, payer type, sexual orientation, and age among patients with co-occurring and mental health disorders. We emphasize competent care, continuity of care, and psychosocial support to ensure all patients receive quality care, follow-up and resources. Strategies include integrating Social Determinants of Health screening upon admission, improving hand-off communication, and promoting trust through inclusive practices. Our approach to health equity ensures that all benefits of treatment such as assessments, screenings, treatment planning, and resources are provided for all patients in our system.

Our top 10 identified healthcare disparities are:

- 1."60Ö67W' ing Disorders readmission rate where sexual orientation is not disclosed
- 2."60Ö67W' ing Disorders readmission rate where payer type is Medicaid

3. •&V FÖ—76—öâ —â â • b ate where race and/or ethnicity is Black or African American
4. •&V FÖ—76—öâ —â â • b ate where sexual orientation is not disclosed
5. "6òÖö67W" ing Disorders readmission rate where age is 35 to 49 years old
6. "6òÖö67W" ing Disorders readmission rate where age is 50 to 64 years old
7. "6òÖö67W" ing Disorders readmission rate where race and/or ethnicity is Black or African American
8. •67&VVæ—æ`or metabolic disorders rate where race and/or ethnicity is Multiracial and/or Multiethnic
9. •&V FÖ—76—öâ —â â • b ate where payer type is Med

Population Impact:

The above populations may experience challenges accessing inclusive care options that respond to their specific needs. Patients with undisclosed sexual orientation may avoid disclosure due to fear of discrimination, impacting care planning. Medicaid and Medicare patients may suffer from severe persistent mental illness presenting additional obstacles to accessing care and often require acute care more frequently. The latter may overcome such obstacles with stable housing and ongoing care and structured treatment. Multiracial or Black/African American patients with mental health or co-occurring disorders may experience cultural barriers to treatment, stigma when seeking help, or concerns that providers will be insensitive to their needs.

Measurable objectives and time frames to reduce the top 10 healthcare disparities:

Goal 1 (disparities #1 and #4): Reduce recidivism rate of Mental Health and Co-occurring Disorders where sexual orientation is not disclosed by 10% by November 2026

Action Step 1: Ensure clinical staff receive training in competency pertaining to mental health and substance use treatment of LGBTQIA2S+/gender non-conforming patients.

Action Step 2: Refer LGBTQIA2S+/gender non-conforming patients to at least one community resource specializing in the treatment of LGBTQIA@S+/gender non-conforming patients.

Goal 2 (disparity #2, #9, and #10): Reduce recidivism rates for patients whose payer is Medicaid or Medicare by 10% by November 2026.

Action Step 1: Refer to outpatient programs specializing in mental health diagnoses within 7 days of discharge.

Action Step 2: Collaborate with housing partners who ensure stable housing and encourage outpatient program attendance for their residents.

Goal 4: (disparities #3 and #7): Reduce recidivism rates for Black/African American patients (with mental health or co-occurring disorders) by 5% by November 2026.

Action Step 1: Ensure clinical staff receive training in competency pertaining to treatment of Black/African American patients.

Action Step 2: Refer Black/African American patients to treatment providers and programs that are known to be inclusive and culturally sensitive.

Goal 5: (disparities #5 and #6): Reduce recidivism rates for patients between 35 and 64 years old for Co-occurring disorders by November 2026.

Action Step 1: Refer to outpatient programs specializing in mental health diagnoses within 7 days of discharge.

Action Step 2: Involve patients' families in treatment planning, education, and discharge planning.

Goal 6: (disparity #8): Increase the screening for metabolic disorders rate where race and/or ethnicity is Multiracial and/or Multiethnic by 5% by November 2026.

Action Step 1: Ensure clinical staff receive training in competency pertaining to treatment of Multiracial and/or Multiethnic patients.

Action Step 2: Ensure language access and patient education materials tailored to diverse populations.

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

Person-centered care is essential to preventing recidivism and increasing quality of care. Our Mission, Improving Mental Health and Quality of Life by Helping People Maximize their Potential, aligns with a person-centered approach as do our Values: People, Service, and Results. We prioritize individualized care planning, respecting patient preferences and identities. Upon hire and annually, staff are trained in cultural diversity and inclusive communication to build trust and engagement. Patients are encouraged to participate actively in their treatment plans. Our patients' families and support systems are included in the process when appropriate and requested by the patient. Feedback mechanisms, including surveys and patient advocacy, allow patient participation. When recidivism occurs, we work with our patients to identify barriers to preventing readmissions and offer varied clinical discharge approaches to help decrease further recidivism.

Patient safety

Patient safety initiatives reduce risks that contribute to readmissions. We adhere to National Patient Safety Goals, ensuring accurate identification, effective communication, and medication safety. Patients and their support systems are engaged in safety planning, specifically to address self-harm/suicide risk, harm to others, domestic violence, and relapse prevention. Clear discharge and medication prescription instructions are offered to improve treatment adherence post-discharge. Continuity of treatment is provided through our outpatient services to reduce risks of recidivism. For patients unable to participate in our outpatient services, other options are provided to ensure continuity of treatment.

Addressing patient social drivers of health

Social Determinants of Health (SDoH) significantly impact recidivism. Alvarado Parkway Institute uses the Protocol for Responding to & Assessing Patients' Assets, Risks & Experience (PRAPARE). Specific treatment plan problem areas and goals are formulated based on PRAPARE findings and are addressed in our Psychosocial/Discharge Planning Assessment and again upon discharge where post-hospitalization appointments and resources are offered in our Discharge Packet. The PRAPARE screens for housing, transportation, and food insecurity to identify barriers to recovery. Interventions, informed by the PRAPARE include connecting patients to community resources; providing transportation assistance; providing resources to ensure ability to pay for treatment/medications, bills, and self-care items; and assisting with finding transitional housing after discharge. Per our unhoused protocol, patients in need of food and weather appropriate clothing are discharged with those resources. These efforts ensure patients have the support needed to prevent recidivism.

Performance in the priority area continued

Performance across all of the following priority areas.

Effective treatment

Effective treatment protocols help prevent recidivism. We implement evidence-based practices and monitor adherence to clinical guidelines through our Pharmacy and Therapeutics Committee, Safety Committee, and ultimately the Medical Executive Committee and Board of Trustees. We have robust clinical teams that provide individual, group, and family therapies, as well as

psychoeducation, discharge planning, and activity groups.

Medication reconciliation and patient education are prioritized to prevent post-discharge complications. Long acting injectables are offered to patients who have potential to benefit from them, reducing recidivism rate due to lack of treatment adherence. Care teams collaborate to ensure treatment plans are clear, achievable, and offered in a manner the patient can understand.

Care coordination

Care coordination ensures smooth transitions between care settings. Follow-up appointments and clear discharge instructions are provided. Clinical liaisons identify patients who may benefit from outpatient care at Alvarado Parkway Institute and guide them throughout their transition between settings. Social Services refers to outpatient or next level treatment options for patients dispositioning outside of our system. Specific treatment plans, informed by our SDoH screening and partnerships with community case management and other resources, focus on issues for which multidisciplinary teams work to address medical and psychosocial needs, reducing gaps leading to recidivism.

Access to care

Access to care is vital for preventing recidivism. We address barriers such as transportation, financial constraints, literacy/education, and language needs through targeted support services. Patients receive assistance with scheduling, accessing transportation, finding resources in the community, and interpreter services to ensure continuity of care. Appointments are scheduled within 7 days of discharge to help decrease recidivism.

Methodology Guidelines

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

Y