

# Accreditation Quality Report





Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the prevention of medical errors such as surgery on the wrong side of the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.

#### University of California San Diego Medical Center 200 West Arbor Drive, San Diego, CA



### **Summary of Quality Information**

#### Symbol Key

| 0        | This organization achieved the best possible results.                 |
|----------|---|
| <b>Ð</b> | This organization's performance is above the target range/value.      |
| Ø        | This organization's performance is similar to the target range/value. |
| Θ        | This organization's performance is below the target range/value.      |
| •        | This Measure is not applicable for this organization.                 |
| •••      | Not displayed   |

#### **Footnote Key**

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
   Test Measure: a measure being
- evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- **11.** There were no eligible patients that met the denominator criteria.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

| Accreditation Programs                       | Accreditation Decision | Effective<br>Date | Last Full Survey<br>Date | Last On-Site<br>Survey Date |
|--|------------------------|-------------------|--------------------------|-----------------------------|
| Behavioral Health Care and<br>Human Services | Accredited             | 10/9/2019         | 10/8/2019                | 10/8/2019                   |
| 🥝 Home Care                                  | Accredited             | 10/11/2019        | 10/10/2019               | 10/10/2019                  |
| 🙆 Hospital                                   | Accredited             | 5/15/2021         | 10/11/2019               | 5/14/2021                   |

#### Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS)

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

UCSD Home Infusion and Specialty Pharmacy

9610 Ridgehaven Court, Suite A, San Diego, CA. 92123

Home Infusion Therapy

Hospital

#### Certification programs recognized by the Centers for Medicare and Medicaid Services (CMS) Ventricular Assist Device

| Advanced Certification                  | Certification Decision | Effective  | Last Full Review | Last On-Site       |
|---|------------------------|------------|------------------|--------------------|
| Programs                                |                        | Date       | Date             | <b>Review Date</b> |
| Advanced Comprehensive<br>Stroke Center | Certification          | 6/18/2022  | 6/17/2022        | 6/17/2022          |
| 🍪 Chronic Kidney Disease                | Certification          | 12/15/2021 | 12/14/2021       | 12/14/2021         |
| olimits Ventricular Assist Device       | Certification          | 4/22/2022  | 4/21/2022        | 4/21/2022          |

#### **Other Accredited Programs/Services**

• Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

• Laboratory (Accredited by American Society for Histocompatibility and Immunogenetics (ASHI))

#### **Special Quality Awards**

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
2012 ACS National Surgical Quality Improvement Program
2012 Silver - The Medal of Honor for Organ Donation
2011 Hospital Magnet Award
2010 Silver - The Medal of Honor for Organ Donation

200 West Arbor Drive, San Diego, CA

Compared to other Joint Commission Accredited



# **Summary of Quality Information**

| Symbol Key |
|------------|
|------------|

| 0        | This organization achieved the best possible results.                 |
|----------|---|
| <b>+</b> | This organization's performance is above the target range/value.      |
| Ø        | This organization's performance is similar to the target range/value. |
| Θ        | This organization's performance is below the target range/value.      |
| •        | This Measure is not applicable for this organization.                 |
| •••      | Not displayed   |

#### **Footnote Key**

| 1. | The Measure or Measure Set was not |
|----|------------------------------------|
|    | reported.                          |

- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
   Test Measure: a measure being
- evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- **11.** There were no eligible patients that met the denominator criteria.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

|   |                                     | Organizations  |                |
|---|-------------------------------------|----------------|----------------|
|   |                                     | Nationwide     | Statewide      |
| Behavioral<br>Health<br>Care and<br>Human<br>Services | 2019National Patient Safety Goals   | Ø              | <sup>*</sup>   |
| Home Care   | 2019National Patient Safety Goals   | $\bigotimes$   | <b>₩</b> )*    |
| Hospital  | 2021National Patient Safety Goals   | Ø              | *              |
|   | National Quality Improvement Goals: |                |                |
| Reporting<br>Period:<br>Apr 2020 -<br>Mar 2021        | Perinatal Care                      | @ <sup>2</sup> | @ <sup>2</sup> |

The Joint Commission only reports measures endorsed by the National Quality Forum.



# **Locations of Care**

| Locations of Care   | Available Services   |
|---|--|
| Koman Family<br>Outpatient Pavilion<br>9400 Campus Point Drive<br>La Jolla, CA 92037  | <ul> <li>Services:</li> <li>Administration of Blood<br/>Product (Outpatient)</li> <li>Administration of High Risk<br/>Medications (Outpatient)</li> <li>Ambulatory Surgery Center<br/>(Outpatient)</li> <li>Ambulatory Surgery Center</li> <li>Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Hazardous Medication<br/>Compounding (Outpatient)</li> <li>Perform Invasive Procedure<br/>(Outpatient)</li> </ul> |
| Outpatient Services -<br>Maternal Fetal Care at<br>Sorrento Valley<br>DBA: UC San Diego<br>Maternal - Fetal Care and<br>Genetics<br>4910 Directors Place,<br>Suite 200<br>San Diego, CA 92121 | Other Clinics/Practices located at this site:<br>• Sorrento Valley Maternal Fetal Care and Genetics<br>Services:<br>• Administration of Blood Product (Outpatient)<br>• Outpatient Clinics (Outpatient)<br>• Perform Invasive Procedure (Outpatient)   |
| Radiation Oncology and<br>PET/CT Scanner Center<br>3960 Health Sciences<br>Drive<br>La Jolla, CA 92093  | Services: <ul> <li>Outpatient Clinics (Outpatient)</li> </ul>  |
| Regents UC UC San<br>Diego Health Vascular<br>&Endovas Office Surg<br>4510 Executive Drive<br>San Diego, CA 92121   | Services:<br>• Anesthesia (Outpatient)<br>• Outpatient Clinics (Outpatient)<br>• Perform Invasive Procedure (Outpatient)   |
| The Rebecca and John<br>Moores UCSD Cancer<br>Center<br>3855 Health Sciences<br>Drive<br>La Jolla, CA 92037   | <ul> <li>Services:</li> <li>Administration of Blood<br/>Product (Outpatient)</li> <li>Administration of High Risk<br/>Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Hazardous Medication<br/>Compounding (Outpatient)</li> <li>High Risk Sterile Medication<br/>Compounding (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure<br/>(Outpatient)</li> </ul> |
| UC San Diego Health<br>Eating Disorders Center<br>for Treatment Re<br>4510 Executive Drive,<br>Suite 315<br>San Diego, CA 92121   | Services:<br>• Eating Disorders/Adult/Child/Youth)<br>(Day Programs - Adult/Child/Youth)<br>(Partial Hospitalization - Adult/Child/Youth)<br>• Family Support (Non 24 Hour Care)<br>• Peer Support (Non 24 Hour Care)  |
| UC San Diego Health<br>System - Encinitas<br>Cancer Services<br>1200 Garden View Road,<br>Suite 200/210<br>Encinitas, CA 92024  | Services:<br>• Administration of Blood Product (Outpatient)<br>• Administration of High Risk Medications (Outpatient)<br>• Hazardous Medication Compounding (Outpatient)<br>• Outpatient Clinics (Outpatient)  |

200 West Arbor Drive, San Diego, CA



# **Locations of Care**

| Locations of Care  | Available   | Services  |
|--|---|---|
| UCSD Home Infusion<br>and Specialty Pharmacy<br>9610 Ridgehaven Court,<br>Suite A<br>San Diego, CA 92123             | Services:<br>• Durable Medical Equipment<br>• Enteral Equipment and/or<br>Supplies<br>• Enteral Nutrients<br>• External Infusion Pump<br>Supplies<br>• External Infusion Pumps<br>• Freestanding Ambulatory<br>Infusion Services<br>• Hazardous Medication<br>Compounding<br>• Home Health, Non-Hospice<br>Services<br>• Infusion Nursing | <ul> <li>Infusion Pharmacy</li> <li>Parenteral Equipment and/or<br/>Supplies</li> <li>Parenteral Nutrients</li> <li>Pharmacy, Clinical Consulting<br/>Services</li> <li>Pharmacy/Dispensary,General<br/>Services</li> <li>Specialty Pharmacy</li> <li>Sterile Medication<br/>Compounding</li> <li>Supplies</li> </ul> |
| UCSD Hyperbaric<br>Medicine and Wound<br>Healing Center<br>477 North El Camino<br>Real, D-204<br>Encinitas, CA 92024 | Services:<br>• Outpatient Clinics (Outpatient)  |   |



# **Locations of Care**

#### \* Primary Location

| Locations of Care  |  |
|--|--|
| Locations of Care<br>UCSD Medical Center -<br>Hillcrest *<br>200 West Arbor Drive<br>San Diego,<br>CA 92103-8949 |  |



# **Locations of Care**

#### \* Primary Location

| Locations of Care   | Available Services  |
|---|---|
| UCSD Medical Center -<br>La Jolla<br>DBA: Jacobs Medical<br>Center and Sulpizio<br>Cardiovascular Center<br>9300 Campus Point Drive<br>La Jolla, CA 92037 | <ul> <li>Joint Commission Advanced Certification Programs:</li> <li>Advanced Comprehensive Stroke Center</li> <li>Ventricular Assist Device</li> </ul> Services: <ul> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiovascular Unit (Inpatient)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (Inpatient)</li> <li>Heatology/Oncology Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Transplant Surgery (Surgical Services)</li> <li>Uralogy (Surgical Services)</li> <li>Transplant Surgery (Surgical Services)</li> <li>Urasound (Imaging/Diagnostic Services)</li> <li>Uralogy (Surgical Services)</li> <li>Urasound (Imaging/Diagnostic Services)</li> <li>Uralogy (Surgical Services)</li> <li>Urasound (Imaging/Diagnostic Services)</li> <li>Uralogy (Surgical Service</li></ul> |
| UCSD Medical Offices<br>South<br>4168 Front Street<br>San Diego, CA 92103   | Joint Commission Advanced Certification Programs: <ul> <li>Chronic Kidney Disease</li> </ul> Services:  |



# **Locations of Care**

#### \* Primary Location

| Locations of Care  | Available Services   |
|--|--|
| UCSD Senior Behavioral<br>Health Intensive<br>Outpatient Program<br>DBA: UCSD Senior<br>Behavioral Health<br>Intensive Outpatient<br>Program<br>410 Dickinson Street, Ste.<br>100<br>San Diego, CA 92103 | Services:<br>• Behavioral Health (Non 24 Hour Care - Adult)<br>• Community Integration (Non 24 Hour Care)<br>• Family Support (Non 24 Hour Care) |
| University of California<br>Shiley Eye Center<br>9415 Campus Point Drive,<br>3rd Floor<br>La Jolla, CA 92037   | Services:<br>• Ambulatory Surgery Center (Outpatient)<br>• Anesthesia (Outpatient)   |

200 West Arbor Drive, San Diego, CA



# **2019 National Patient Safety Goals**

### **Behavioral Health Care and Human Services**

| Safety Goals   | Organizations Should                        | Implemented |
|--|---|-------------|
| Improve the accuracy of the<br>identification of individuals<br>served.                                    | Use of Two Identifiers                      | Ø           |
| Improve the safety of using medications.   | Reconciling Medication Information          | Ø           |
| Reduce the risk of health care-associated infections.  | Meeting Hand Hygiene Guidelines             | Ø           |
| The organization identifies<br>safety risks inherent in the<br>population of the individuals<br>it serves. | Identifying Individuals at Risk for Suicide | Ø           |

### Symbol Key

The organization has met the National Patient Safety Goal.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

200 West Arbor Drive, San Diego, CA



# **2019 National Patient Safety Goals**

### **Home Care**

| Safety Goals   | Organizations Should                          | Implemented |
|--|---|-------------|
| Improve the accuracy of patient identification.                                    | Use of Two Patient Identifiers                | Ø           |
| Improve the safety of using medications.   | Reconciling Medication Information            | Ø           |
| Reduce the risk of health care-associated infections.                              | Meeting Hand Hygiene Guidelines               | Ø           |
| Reduce the risk of patient harm resulting from falls.                              | Implementing a Fall Reduction Program         | Ø           |
| The organization identifies<br>safety risks inherent in its<br>patient population. | Identifying Risks Associated with Home Oxygen | Ø           |

#### Symbol Key

The organization has met the National Patient Safety Goal.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

200 West Arbor Drive, San Diego, CA



# **2021 National Patient Safety Goals**

### Hospital

| Safety Goals   | Organizations Should                                    | Implemented  |
|--|---|--------------|
| Improve the accuracy of patient identification.                                    | Use of Two Patient Identifiers                          | Ø            |
| Improve the effectiveness of<br>communication among<br>caregivers.                 | Timely Reporting of Critical Tests and Critical Results | Ø            |
| Improve the safety of using medications.   | Labeling Medications                                    | Ø            |
|  | Reducing Harm from Anticoagulation Therapy              | $\bigcirc$   |
|  | Reconciling Medication Information                      | Ō            |
| Reduce the harm<br>associated with clinical<br>alarm systems.                      | Use Alarms Safely on Medical Equipment                  | Ø            |
| Reduce the risk of health care-associated infections.                              | Meeting Hand Hygiene Guidelines                         | Ø            |
| The organization identifies<br>safety risks inherent in its<br>patient population. | Identifying Individuals at Risk for Suicide             | Ø            |
| Universal Protocol   | Conducting a Pre-Procedure Verification Process         | $\bigotimes$ |
|  | Marking the Procedure Site                              | $\bigcirc$   |
|  | Performing a Time-Out                                   | $\bigotimes$ |

### Symbol Key

The organization has met the National Patient Safety Goal. The organization has not met the (-National Patient Safety Goal. The Goal is not applicable for this **N** organization.

Symbol Key

ossible results

ot displayed

reported.

overall result.

0

 $\oslash$ 

e

ND

2.

4.

5.

8.

9.

11

valid.

sample of patients.

updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

above the target range/value. This organization's performance is

below the target range/value.

Footnote Key

The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

There were no eligible patients that met

the denominator criteria.

For further information and explanation of the **Quality Report contents,** refer to the "Quality Report User Guide."

The measure meets the Privacy Disclosure Threshold rule.

### University of California San Diego Medical Center

200 West Arbor Drive, San Diego, CA



### **National Quality Improvement Goals**

| Reporting Per  | iod: April 2020 - March 2021  |                       |   |
|----------------|---|-----------------------|---|
|                |   | Comn                  | o other Joint<br>hission<br>Drganizations |
| Measure Area   | Explanation   | Nationwide            | Statewide                                 |
| Perinatal Care | This category of evidenced based measures assesses the<br>care of mothers and newborns. | <b>№</b> <sup>2</sup> | <b>™</b> <sup>2</sup>                     |

|   |  | Со                                    | Compared to other Joint Commission<br>Accredited Organizations |                  |                                |                 |
|---|--|---------------------------------------|--|------------------|--------------------------------|-----------------|
|   |  | Ν                                     | lationwide   | Ŭ                | State                          | ewide           |
| Measure   | Explanation  | Hospital<br>Results                   | Top 10%<br>Scored<br>at Least:                                 | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Averag<br>Rate: |
| Cesarean Birth  | This measure reports the number of<br>first-time moms with a full-term,<br>single baby in a head-down position<br>who delivered the baby by cesarean<br>section.   | <b>(</b>                              | 16%  | 25%              | 16%                            | 23%             |
| Elective Delivery   | This measure reports the overall<br>number of mothers who had elective<br>vaginal deliveries or elective<br>cesarean sections at equal to and<br>greater than 37 weeks gestation to<br>less than 39 weeks gestation. An<br>elective delivery is the delivery of a<br>newborn(s) when the mother was not<br>in active labor or presented with<br>spontaneous ruptured membranes<br>prior to medical induction and/or<br>cesarean section. | 0% of<br>41 eligible<br>Patients      | 0%   | 2%               | 0%                             | 2%              |
| Exclusive Breast Milk Feeding   | This measure reports the overall<br>number of newborns who are<br>exclusively breast milk fed during the<br>newborns entire hospitalization.<br>Exclusive breast milk feeding is when<br>a newborn receives only breast milk<br>and no other liquids or solids except<br>for drops or syrups consisting of<br>vitamins, minerals, or medicines.  | 83% of<br>366 eligible<br>Patients    | 71%  | 50%              | 80%                            | 62%             |
| Unexpected Complications in<br>Term Newborns per 1000<br>livebirths - Moderate Rate | The moderate rate equals the number of patients with moderate complications.   | 2618% of<br>2864 eligible<br>Patients | 212%   | 1780%            | 0%                             | 14219           |
| Unexpected Complications in<br>Term Newborns per 1000<br>livebirths - Overall Rate  | This measure looks at the number of<br>full-term single babies with a normal<br>birth weight and with no preexisting<br>conditions, these are babies that are<br>expected to do well and routinely go<br>home with the mother.   | 3770% of<br>2864 eligible<br>Patients | 1508%  | 3084%            | 1258%                          | 2777%           |



The Joint Commission only reports measures endorsed by the National Quality Forum.

This information can also be viewed at www.hospitalcompare.hhs.gov

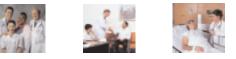
Null value or data not displayed.

13

Reporting Period: April 2020 - March 2021

200 West Arbor Drive, San Diego, CA

Compared to other Joint



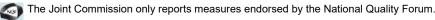
### **National Quality Improvement Goals**

| Symbol Key  |  |
|---|--|
| This organization achieved the best possible results                  |  |
| This organization's performance is above the target range/value.      |  |
| This organization's performance is similar to the target range/value. |  |
| O This organization's performance is below the target range/value.    |  |
| Not displayed   |  |
|   |  |

#### **Footnote Key**

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
- The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- The number of months with Measure data is below the reporting requirement.
   The measure results are temporarily
- The measure results are temporarily suppressed pending resubmission of updated data.
- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
   There were no eligible patients that met
- the denominator criteria.

|   |   |   |  | Commission<br>Accredited Organizations<br>Nationwide Statewide |                  |                                   |                  |
|---|---|---|--|--|------------------|-----------------------------------|------------------|
| Measure Area  |   | Explanation   |  |  |                  |                                   |                  |
|   |   |   |  | Inationwi  | ue               | Statewice                         | 3                |
| Perinatal Care  |   | his category of evidenced based measures as<br>are of mothers and newborns. |  | ssesses the 2  |                  | ••• <sup>2</sup> ••• <sup>2</sup> |                  |
|   |   |   | Compared to other Joint Commission<br>Accredited Organizations |  |                  |                                   |                  |
|   | 1 |   |  | lationwide   |                  | State                             | ewide            |
| Measure Explanation   |   | Explanation   | Hospital<br>Results  | Top 10%<br>Scored<br>at Least:                                 | Average<br>Rate: | Top 10%<br>Scored<br>at Least:    | Average<br>Rate: |
| Unexpected Complication<br>Term Newborns per 1000<br>livebirths - Severe Rate |   | The severe rate equals the number of patients with severe complications.    | 1152% of<br>2864 eligible                                      | 501%   | 1303%            | 505%                              | 1356%            |



- This information can also be viewed at www.hospitalcompare.hhs.gov
- --- Null value or data not displayed.