



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.




Summary of Quality Information

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.

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

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
 Hospital	Preliminary Denial of Accreditation	6/19/2021	6/18/2021	7/6/2021




The following standard(s) were found to be out of compliance:

- A pharmacist reviews the appropriateness of all medication orders for medications to be dispensed in the hospital.
- Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat.
- Leaders create and maintain a culture of safety and quality throughout the hospital.
- Maintain and communicate accurate patient medication information.
- Medical staff bylaws address self-governance and accountability to the governing body.
- Medication orders are clear and accurate.
- Medications are labeled.
- Staff and licensed independent practitioners performing waived tests are competent.
- Staff participate in ongoing education and training.
- The governing body is ultimately accountable for the safety and quality of care, treatment, and services.
- The hospital assesses and reassesses the patient and his or her condition according to defined time frames.
- The hospital collects data to monitor its performance.
- The hospital complies with law and regulation.
- The hospital conducts fire drills.
- The hospital defines and verifies staff qualifications.
- The hospital effectively manages its programs, services, sites, or departments.
- The hospital establishes and maintains a safe, functional environment. Note: The environment is constructed, arranged, and maintained to foster patient safety, provide facilities for diagnosis and treatment, and provide for special services appropriate to the needs of the community.
- The hospital has a reliable emergency electrical power source.
- The hospital has an organizationwide, integrated patient safety program within its performance improvement activities.
- The hospital honors the patient's right to give or withhold informed consent.
- The hospital implements its infection prevention and control plan.
- The hospital inspects, tests, and maintains medical gas and vacuum systems. Note: This standard does not require hospitals to have the medical gas and vacuum systems discussed below. However, if a hospital has these types of systems, then the following inspection, testing, and maintenance requirements apply.
- The hospital inspects, tests, and maintains utility systems. Note: At times, maintenance is performed by an external service. In these cases, hospitals are not required to possess maintenance documentation but must have access to such documentation during survey and as needed.
- The hospital maintains complete and accurate medical records for each individual patient.
- The hospital maintains fire safety equipment and fire safety building features. Note: This standard does not require hospitals to have the types of fire safety equipment and building features described below. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.
- The hospital makes space and equipment available as needed for the provision of care, treatment, and services.



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- The hospital manages risks associated with its utility systems.
- The hospital manages risks related to hazardous materials and waste.
- The hospital manages safety and security risks.
- The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke.
- The hospital provides and maintains systems for extinguishing fires.
- The hospital provides care, treatment, services, and an environment that pose no risk of an "Immediate Threat to Health or Safety," also known as "Immediate Threat to Life" or ITL situation.
- The hospital respects the patient's right to participate in decisions about his or her care, treatment, and services. Note: For hospitals that use Joint Commission accreditation for deemed status purposes: This right is not to be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate.
- The hospital respects, protects, and promotes patient rights.
- The hospital safely prepares medications.
- The organized medical staff oversees the quality of patient care, treatment, and services provided by practitioners privileged through the medical staff process.
- Those who work in the hospital are focused on improving safety and quality.

 Laboratory Accredited 1/16/2020 1/15/2020 1/15/2020

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

Pathology and Clinical Laboratory

Hospital

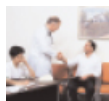
		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Hospital	2021 National Patient Safety Goals		 *
Laboratory	2020 National Patient Safety Goals		 *



Locations of Care




* Primary Location

Locations of Care	Available Services
Eleanor Slater Hospital * 111 Howard Avenue Cranston, RI 02920	Services: <ul style="list-style-type: none"> • Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult) • General Laboratory Tests • Inpatient Unit (Inpatient) • Long Term Acute Care Unit (Inpatient) • Toxicology
Eleanor Slater Hospital Zambarano Site 2090 Wallum Lake Road Pascoag, RI 02859	Services: <ul style="list-style-type: none"> • Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult) • General Laboratory Tests • Inpatient Unit (Inpatient) • Long Term Acute Care Unit (Inpatient)














2021 National Patient Safety Goals

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Hospital

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






2020 National Patient Safety Goals

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Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	

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