

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, 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 the key area of 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.

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.

Mark R. Chassin, MD, MPP, MPH President of the Joint Commission



Summary of Quality Information

Accreditation Decision

Accredited

Decision Effective Date October 22, 2005

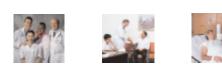
Accredited Programs	Last Full Survey Date	Last On-Site Survey Date
Ambulatory Care	12/19/2008	12/19/2008
Pathology and Clinical Laboratory	9/28/2007	9/28/2007

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Ambulator y Care	2005 National Patient Safety Goals	Ø	*
Pathology and Clinical Laborator	2007 National Patient Safety Goals	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.

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



Locations of Care

* Primary Location	
Locations of Care	Available Services
Nuestra Clinica del Valle Alton 330 West Dawes Mission, TX 78572	General Laboratory TestsPediatric Medicine (Outpatient)
Nuestra Clinica del Valle Donna 301 S. 17th Street Donna, TX 78537	 Family Practice (Outpatient) General Laboratory Tests Pediatric Medicine (Outpatient) Pharmacy/Dispensary (Outpatient)
Nuestra Clinica del Valle Memorial 201 S. Los Ebanos Blvd Mission, TX 78574	 Family Practice (Outpatient) General Laboratory Tests Pediatric Medicine (Outpatient)
Nuestra Clinica del Valle Mission * 611 N. Bryan Road Mission, TX 78572	 Behavioral Health (Non 24 Hour Care - Adult/Child/Youth) Dentistry (Outpatient) Diagnostic Imaging (Outpatient) Family Practice (Outpatient) General Laboratory Tests General Practice (Outpatient) Internal Medicine (Outpatient) Pediatric Medicine (Outpatient) Pharmacy/Dispensary (Outpatient) Podiatry (Outpatient)
Nuestra Clinica del Valle San Carlos 300 N. 86th Street Edinburg, TX 78539	 Family Practice (Outpatient) General Laboratory Tests Pediatric Medicine (Outpatient)
Nuestra Clinica Del Valle San Juan 801 W. 1st Street San Juan, TX 78589	 General Laboratory Tests Toxicology
Nuestra Clinica del Valle, Inc 1200 E. Santa Rosa Edcouch, TX 78538	 Dentistry (Outpatient) Diagnostic Imaging (Outpatient) Family Practice (Outpatient) General Laboratory Tests General Practice (Outpatient) Internal Medicine (Outpatient) Pediatric Medicine (Outpatient) Pharmacy/Dispensary (Outpatient) Pharmacy/Dispensary (Outpatient) Podiatry (Outpatient)
Nuestra Clinica del Valle, Inc 1500 First Street Mercedes, TX 78570	 Dentistry (Outpatient) Diagnostic Imaging (Outpatient) Family Practice (Outpatient) General Laboratory Tests General Practice (Outpatient) Internal Medicine (Outpatient) Pediatric Medicine (Outpatient) Pharmacy/Dispensary (Outpatient) Pharmacy/Dispensary (Outpatient) Podiatry (Outpatient)
Nuestra Clinica Del Valle, PSJA 2900 North Raul Longoria-Rear San Juan, TX 78589	 General Laboratory Tests Pediatric Medicine (Outpatient)



2005 National Patient Safety Goals

Ambulatory Care

Safety Goals	Organizations Should	Implemented
Identify Patients Correctly	Use at least two (2) ways to identify a patient when performing procedures, taking blood or giving medicines or blood products. The patient's room number cannot be used to identify the patient.	Ø
Improve Effective Communication	Assure a staff member who receives an order over the phone or verbally, will "read back" the order to the person who gave the order.	Ø
	Create a list of acceptable standardized abbreviations and a "Do Not Use" list to help reduce the risk of errors. Medical abbreviations can lead to errors.	Ø
	Improve the time it takes to get test results to the appropriate caregiver.	
Improve the Safety of High-Alert Medications	Remove high-alert medications from patient care units. Medications that have the highest risk of causing injury when misused are called "High-Alert" Medications.	Ø
	Standardize and limit the number of drug concentrations.	\bigotimes
	Create a list of medicines that have names that either look alike or sound alike and use the list to prevent errors involving those medicines.	Ø
Improve Infusion Pump Safety	Assure pumps used to give fluids or medicine into a vein are set so that the fluid cannot be given too quickly. An infusion pump releases an amount of medicine in a specific period of time.	()
Reduce Health Care Acquired Infections	Follow current Centers for Disease Control (CDC) handwashing guidelines.	Ø
	Manage as sentinel events all cases of health care-acquired infections. A sentinel event is any unanticipated death or major permanent loss of function.	Ø
Ensure medicines aren't accidentally stopped.	When admitting a patient, create a list, with the patient's assistance, of the medicines that the patient takes. The list should be updated with new medicines prescribed in the facility. [To be fully implemented by January 2006.]	Ø
	The complete list of a patient's medicines is passed on to new caregivers—even if the caregiver is outside of the facility.	Ø
Reduce the risk of fires during surgery.	Surgical staff members know how to control heat and fuels, like oxygen and gas, in the operating room. Also, there are guidelines to follow to prevent oxygen from being trapped under sheets and other materials that can catch fire.	•
Universal Protocol	Beginning July 1, 2004, the Universal Protocol for preventing wrong site, wrong procedure, and wrong person surgery became effective.	Ø

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2007 National Patient Safety Goals

Pathology and Clinical Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use at least two patient identifiers when providing care, treatment or services.	Ø
	Prior to the start of any invasive procedure, conduct a final verification process, (such as a "time out,") to confirm the correct patient, procedure and site using active—not passive—communication techniques.	
Improve the effectiveness of communication among caregivers.	For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the information record and "read-back" the complete order or test result.	Ø
	Standardize a list of abbreviations, acronyms, symbols, and dose designations that are not to be used throughout the organization.	Ø
	Measure, assess and if appropriate, take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.	Ø
	Implement a standardized approach to "hand off" communications, including an opportunity to ask and respond to questions.	Ø
Reduce the risk of health care-associated infections	Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.	Ø
	Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.	
Encourage patients' active involvement in their own care as a patient safety strategy.	Define and communicate the means for patients and their families to report concerns about safety and encourage them to do so.	Ø

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