

# Accreditation Quality Report





# Covenant Medical Center 3615 19th Street, Lubbock, TX

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.

3615 19th Street, Lubbock, TX







# **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
	Accredited	10/21/2017	4/23/2021	7/7/2021

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

Hospital

Advanced Certification Programs	<b>Certification Decision</b>	Effective Date	Last Full Rev Date	iew Last On-Site Review Date
Advanced Palliative Care	Certification	5/19/2021	5/18/2021	5/18/2021
Primary Stroke Center	Certification	2/26/2019	2/25/2019	2/25/2019

#### **Special Quality Awards**

2012 Gold Plus Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2018National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	<b>№</b> 2	ND <sup>2</sup>	
Jan 2019 - Dec 2019	Perinatal Care	ND 2	ND 2	

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

#### 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.
- This organization's performance is below the target range/value.
- This Measure is not applicable for this organization.
- Not displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 3. The number of patients is not enough for comparison purposes.
- 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.
- 10. 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." Org ID: 266567

3615 19th Street, Lubbock, TX Org ID: 266567







# **Locations of Care**

*	<b>Primary</b>	Location

Locations of Care	Available Services
Convenant Neuroscience Patient Resource and Rehab Center 3610 22nd St, Ste 301	Other Clinics/Practices located at this site:  • Covenant Sleep Disorder Center  Services:
Lubbock, TX 79410	Outpatient Clinics (Outpatient)
Covenant Counseling Center 3715 20th Street Lubbock, TX 79410	Services:  • Outpatient Clinics (Outpatient)
Covenant Health Pulmonary 3621 22nd St. Ste 400 Lubbock, TX 79410	Services:  • Outpatient Clinics (Outpatient)
Covenant Lifestyles Cardiac Rehab 3515 21st St 6th floor Lubbock, TX 79410	Services:  • Outpatient Clinics (Outpatient)
Covenant Medical Center DBA: Covenant Health Emergency Center 10205 Quaker Ave Lubbock, TX 79424	Services:      Administration of High Risk Medications (Outpatient)     Anesthesia (Outpatient)     Perform Invasive Procedure (Outpatient)
Covenant Medical Center DBA: Covenant Health Emergency Center 7905 Milwaukee Ave Lubbock, TX 79424	Services:      Administration of High Risk Medications (Outpatient)     Anesthesia (Outpatient)     Perform Invasive Procedure (Outpatient)



3615 19th Street, Lubbock, TX





## **Locations of Care**

#### \* Primary Location

# Locations of Care Covenant Medical Center \* 3615 19th Street

Lubbock, TX 79410

## Available Services

#### **Joint Commission Advanced Certification Programs:**

- · Advanced Palliative Care
- Primary Stroke Center

#### Other Clinics/Practices located at this site:

Covenant Lifestyle Cardiac Rehab

#### **Services:**

- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Hazardous Medication Compounding (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Inpatient, Outpatient, Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)

- Medical ICU (Intensive Care Unit)
- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

#### Covenant Radiation Treatment Center 424 N Utica Ave Lubbock, TX 79416

#### **Services:**

Outpatient Clinics (Outpatient)

Org ID: 266567



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# **Locations of Care**

#### \* Primary Location

Locations of Care

Southwest Medical Park 9812 Slide Road Lubbock, TX 79424

#### Available Services

#### Other Clinics/Practices located at this site:

- Outpatient Therapy (PT/OT)
- Radiology

#### **Services:**

• Outpatient Clinics (Outpatient)

Org ID: 266567







# **2018 National Patient Safety Goals**

#### **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.

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# Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	8 8
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	8 8 8 8
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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Measure Area

Emergency

Department





# **National Quality Improvement Goals**

Reporting Period: January 2019 - December 2019

Commission				
Accredited C	rganizations			
Nationwide	Statewide			
<b>№</b> 2	<b>№</b> 2			

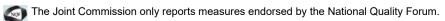
Compared to other Joint

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d Median:
Admit Decision Time to ED Departure Time for Admitted Patients	The amount of time (in minutes) it takes from the time the physician decides to admit a patient into the hospital from the Emergency Department until the patient actually leaves the ED to go to the inpatient	173.00 minutes 822 eligible Patients	55.00	133.00	57.00	118.11

Explanation

This category of evidence based measures assesses the

time patients remain in the hospital Emergency Department prior to inpatient admission.



\* This information can also be viewed at www.hospitalcompare.hhs.gov
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Compared to other Joint







## **National Quality Improvement Goals**

#### Reporting Period: January 2019 - December 2019

**Accredited Organizations** Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Соі	mpared to c			on
		Accredited Organizations Nationwide Statewi				wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	
Antenatal Steroids	This measure reports the overall number of mothers who were at risk of preterm delivery at 24-32 weeks gestation receiving antenatal steroids prior to delivering preterm newborns. Antenatal steroids are steroids given before birth.	3	100%	98%	100%	98%
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	8 	12%	25%	15%	27%
Elective Delivery	This measure reports the overall number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to less than 39 weeks gestation. An elective delivery is the delivery of a newborn(s) when the mother was not in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section.	₩ <b>D</b> 3	0%	2%	0%	2%
Exclusive Breast Milk Feeding	This measure reports the overall number of newborns who are exclusively breast milk fed during the newborns entire hospitalization.  Exclusive breast milk feeding is when a newborn receives only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines.	₩D <sup>3</sup>	73%	51%	61%	44%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	10				

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Measure Area

Perinatal Care

Org ID: 266567







## **National Quality Improvement Goals**

#### Reporting Period: January 2019 - December 2019

Compared to other Joint **Accredited Organizations** Explanation Nationwide Statewide This category of evidenced based measures assesses the care of mothers and newborns.

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	10				
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	10				



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