



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 | Accredited | 10/8/2022 | 10/7/2022 | 11/14/2022 |
|  Laboratory | Accredited | 4/13/2023 | 4/12/2023 | 4/12/2023 |

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

Pathology and Clinical Laboratory

Hospital

| Certified Programs | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|---|------------------------|----------------|-----------------------|--------------------------|
|  Respiratory Failure | Certification | 11/3/2021 | 11/2/2021 | 11/2/2021 |
|  Sepsis | Certification | 7/15/2022 | 5/25/2022 | 5/25/2022 |

| | | Compared to other Joint Commission Accredited Organizations | |
|------------|---|---|---|
| | | Nationwide | Statewide |
| Hospital | 2022 National Patient Safety Goals |  |  * |
| Laboratory | 2023 National Patient Safety Goals |  |  * |



Kindred Hospital San Antonio

DBA: Kindred Hospital San Antonio,
3636 Medical Drive, San Antonio, TX

Org ID: 4922



Locations of Care

* Primary Location

| Locations of Care | Available Services |
|---|---|
| Kindred Hospital San Antonio * DBA: Kindred Hospital San Antonio 3636 Medical Drive San Antonio, TX 78229 | Joint Commission Certified Programs: <ul style="list-style-type: none"> • Respiratory Failure • Sepsis Services: <ul style="list-style-type: none"> • CT Scanner (Imaging/Diagnostic Services) • EEG/EKG/EMG Lab (Imaging/Diagnostic Services) • General Laboratory Tests • Inpatient Unit (Inpatient) • Medical /Surgical Unit (Inpatient) • Medical ICU (Intensive Care Unit) • Teleradiology (Imaging/Diagnostic Services) • Ultrasound (Imaging/Diagnostic Services) |



2022 National Patient Safety Goals

Symbol Key

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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 |  |



2023 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.

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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