



# 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](mailto:qualityreport@jointcommission.org) with your comments and suggestions.

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



## Summary of Quality Information



### Symbol Key

-  This organization achieved the best possible results.
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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 |
|--|------------------------|----------------|-----------------------|--------------------------|
|  Behavioral Health Care | Accredited             | 12/7/2017      | 12/6/2017             | 12/6/2017                |
|  Hospital               | Accredited             | 12/9/2017      | 12/8/2017             | 12/8/2017                |

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

Hospital

| Advanced Certification Programs   | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|---|------------------------|----------------|-----------------------|--------------------------|
|  Primary Stroke Center | Certification          | 1/31/2018      | 1/30/2018             | 1/30/2018                |

| Certified Programs   | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|--|------------------------|----------------|-----------------------|--------------------------|
|  Chest Pain               | Certification          | 6/27/2016      | 6/5/2018              | 6/5/2018                 |
|  Heart Failure            | Certification          | 2/9/2018       | 12/14/2017            | 12/14/2017               |
|  Joint Replacement - Hip  | Certification          | 2/17/2018      | 2/16/2018             | 2/16/2018                |
|  Joint Replacement - Knee | Certification          | 2/17/2018      | 2/16/2018             | 2/16/2018                |





### Other Accredited Programs/Services

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

### Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2012 Hospital Magnet Award

|                        |                                   | Compared to other Joint Commission Accredited Organizations                           |   |
|------------------------|-----------------------------------|---|---|
|                        |                                   | Nationwide  | Statewide   |
| Behavioral Health Care | 2017National Patient Safety Goals |  |  * |
| Hospital               | 2017National Patient Safety Goals |  |  * |



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### Compared to other Joint Commission Accredited Organizations

#### Nationwide

#### Statewide

### National Quality Improvement Goals:

Reporting Period:  
Oct 2016 -  
Sep 2017

Emergency Department

 <sup>2</sup>

 <sup>2</sup>

Immunization

 <sup>2</sup>

 <sup>2</sup>

Perinatal Care

 <sup>2</sup>

 <sup>2</sup>



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## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services   |
|---|--|
| <b>Pediatric Imaging Center</b><br>7000 West Plano Parkway, Suite 120<br>Plano, TX 75093  | <b>Services:</b> <ul style="list-style-type: none"> <li>Anesthesia (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>   |
| <b>Sue A. DeMille Women's Diagnostics Center</b><br>6020 West Parker Rd., Suite 110<br>Plano, TX 75093  | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>  |
| <b>Texas Health Behavioral Health Center Prosper</b><br>1970 West University Drive, Suite 201<br>Prosper, TX 75078  | <b>Services:</b> <ul style="list-style-type: none"> <li>Behavioral Health (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth)</li> <li>Family Support (Non 24 Hour Care)</li> </ul>   |
| <b>Texas Health Behavioral Health Center Richardson</b><br>3661 North Plano Road, Suite 2100<br>Richardson, TX 75082  | <b>Services:</b> <ul style="list-style-type: none"> <li>Behavioral Health (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth)</li> <li>Family Support (Non 24 Hour Care)</li> </ul>   |
| <b>Texas Health Neighborhood Care and Wellness Center Prosper</b><br>DBA: Texas Health Neighborhood Care and Wellness Center Prosper<br>1970 West University Drive<br>Prosper, TX 75078 | <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of Blood Product (Outpatient)</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>  |
| <b>Texas Health Plano Seay Behavioral Health Center Frisco</b><br>5858 Main Street, Suite 200<br>Frisco, TX 75034   | <b>Services:</b> <ul style="list-style-type: none"> <li>Addiction Care/Adult/Child/Youth (Non-detox - Adult)</li> <li>Behavioral Health (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth)</li> <li>Chemical Dependency (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth) (Non-detox - Adult)</li> <li>Peer Support (Non 24 Hour Care)</li> </ul> |



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services   |
|---|--|
| <b>Texas Health Presbyterian Hosp Seay Behavioral Health Center</b><br>6110 W. Parker Road<br>Plano, TX 75093 | <b>Services:</b> <ul style="list-style-type: none"> <li>Addiction Care/Adult (Detox/Non-detox - Adult)</li> <li>Behavioral Health (Day Programs - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial - Adult/Child/Youth)</li> <li>Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult) (Detox/Non-detox - Adult)</li> <li>Family Support (Non 24 Hour Care)</li> </ul> |



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services  |
|---|---|
| <b>Texas Health Presbyterian Hospital Plano *</b><br>6200 West Parker Road<br>Plano, TX 75093                   | <b>Joint Commission Advanced Certification Programs:</b> <ul style="list-style-type: none"> <li>Primary Stroke Center</li> </ul> <b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>Chest Pain</li> <li>Heart Failure</li> <li>Joint Replacement - Hip</li> <li>Joint Replacement - Knee</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiac Surgery (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Dialysis Unit (Inpatient)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (Inpatient)</li> <li>Hematology/Oncology Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Neurosurgery (Surgical Services)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Ophthalmology (Surgical Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Orthopedic/Spine Unit (Inpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Surgical Unit (Inpatient)</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul> |
| <b>Texas Health Resources Ben Hogan Sports Medicine</b><br>9200 World Cup Way,<br>Suite 201<br>Frisco, TX 75033 | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>  |





## 2017 National Patient Safety Goals

### Symbol Key

-  The organization has met the National Patient Safety Goal.
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### Behavioral Health Care

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




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### Hospital

| Safety Goals   | Organizations Should                                       | Implemented   |
|--|--|---|
| Improve the accuracy of patient identification.                              | Use of Two Patient Identifiers                             |    |
|  | Eliminating Transfusion Errors                             |    |
| 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                            |   |
|  | Preventing Multi-Drug Resistant Organism Infections        |  |
|  | Preventing Central-Line Associated Blood Stream Infections |  |
|  | Preventing Surgical Site Infections                        |  |
|  | Preventing Catheter-Associated Urinary Tract Infection     |  |
| 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                                      |  |



## National Quality Improvement Goals

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Compared to other Joint Commission Accredited Organizations

| Measure Area         | Explanation   | Nationwide  | Statewide   |
|----------------------|---|---|---|
| Emergency Department | This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission. |  2 |  2 |

Compared to other Joint Commission Accredited Organizations

| Measure  | Explanation   | Hospital Results   | Compared to other Joint Commission Accredited Organizations |                  |                         |                  |
|--|---|--|---|------------------|-------------------------|------------------|
|  |   |  | Nationwide  |                  | Statewide               |                  |
|  |   |  | Top 10% Scored at Most:                                     | Weighted Median: | Top 10% Scored at Most: | Weighted 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 unit. |  2<br>139.00 minutes<br>525 eligible Patients  | 55.00   | 131.00           | 50.13                   | 118.85           |
| Median Time from ED Arrival to ED Departure for Admitted ED Patients | The amount of time (in minutes) from the time the patient arrives in the Emergency Department until the patient is admitted as an inpatient into the hospital.  |  2<br>290.00 minutes<br>526 eligible Patients | 205.00  | 317.00           | 204.62                  | 287.18           |



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This information can also be viewed at [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)

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Compared to other Joint Commission Accredited Organizations

| Measure Area | Explanation  | Nationwide  | Statewide   |
|--------------|--|---|---|
| Immunization | This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza. |  2 |  2 |

Compared to other Joint Commission Accredited Organizations

| Measure                | Explanation   |   |                          |         |                          |         |
|------------------------|---|---|--------------------------|---------|--------------------------|---------|
|                        |   | Hospital Results  | Nationwide               | Average | Statewide                | Average |
|                        |   |   | Top 10% Scored at Least: | Rate:   | Top 10% Scored at Least: | Rate:   |
| Influenza Immunization | This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated. | <br>99% of 522 eligible Patients | 100%                     | 94%     | 100%                     | 96%     |



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Compared to other Joint Commission Accredited Organizations

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|----------------|--|---|---|
| Perinatal Care | This category of evidenced based measures assesses the care of mothers and newborns. |  2 |  2 |

Compared to other Joint Commission Accredited Organizations

| Measure                       | Explanation   | Compared to other Joint Commission Accredited Organizations   |                                     |               |                                    |               |
|-------------------------------|---|---|-------------------------------------|---------------|------------------------------------|---------------|
|                               |   | Hospital Results  | Nationwide Top 10% Scored at Least: | Average Rate: | Statewide Top 10% Scored at Least: | Average Rate: |
| 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.   | <br>96% of 26 eligible Patients    | 100%                                | 98%           | 100%                               | 97%           |
| 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. 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. | <br>4% of 97 eligible Patients   | 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.   | <br>58% of 468 eligible Patients | 74%                                 | 52%           | 68%                                | 46%           |



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