

Accreditation Quality Report





Version: 10 Date: 6/24/2019 6200 West Parker Road, Plano, 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.

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

6200 West Parker Road, Plano, TX Org ID: 49







Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	y 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	Certification Decision	Effective	Last Full Review	w Last On-Site
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	1/31/2018	1/30/2018	1/30/2018
Certified Programs	Certification Decision	Effective	Last Full Review	w Last On-Site
• • • • • • • • • • • • • • • • • • •		Date	Date	Review Date
Chest Pain	Certification	Date 6/6/2018		
J			Date	Review Date

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	Ø	∞ *
Hospital	2017National Patient Safety Goals	Ø	(WA) *

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

Symbol Key

- This organization achieved the best possible results.
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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.
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- The measure results are temporarily suppressed pending resubmission of updated data.
- 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.

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Summary of Quality Information

Compared to other Joint Commission Accredited Organizations			
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	№ 2	№ 2
Jan 2018 - Dec 2018	Immunization	ND 2	ND ²
	Perinatal Care	ND 2	ND 2

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Locations of Care

Locations of Care	Available Services
Pediatric Imaging Center 7000 West Plano Parkway, Suite 120 Plano, TX 75093	Services: • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Sue A. DeMille Women's Diagnostics Center 6020 West Parker Rd., Suite 110 Plano, TX 75093	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Texas Health Behavioral Health Center Allen 915 Exchange Parkway, Suite 150 Allen, TX 75013	Services: Behavioral Health (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth) Family Support (Non 24 Hour Care)
Texas Health Behavioral Health Center Frisco 5858 Main Street, Suite 200 Frisco, TX 75034	Services: Addiction Care/Adult) (Non-detox - Adult) Behavioral Health (Day Programs - Adult) (Partial - Adult) Chemical Dependency (Day Programs - Adult) (Partial - Adult) (Non-detox - Adult) Family Support (Non 24 Hour Care)
Texas Health Behavioral Health Center Prosper 1970 West University Drive, Suite 201 Prosper, TX 75078	Services:
Texas Health Behavorial Health Center Richardson 3661 North Plano Road, Suite 2100 Richardson, TX 75082	Services: • Addiction Care/Adult) (Non-detox - Adult) • Behavioral Health (Day Programs - Adult) (Partial - Adult) • Chemical Dependency (Day Programs - Adult) (Partial - Adult) (Non-detox - Adult) • Family Support (Non 24 Hour Care)
Texas Health Neighborhood Care and Wellness Center Prosper 1970 West University Drive	Services: Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient)

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Locations of Care

* Primary Location

Locations of Care

Texas Health
Presbyterian Hospital
Plano *
6200 West Parker Road
Plano, TX 75093

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Joint Commission Certified Programs:

- Chest Pain
- Joint Replacement Hip
- Joint Replacement Knee

Services:

- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- 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)
- Gynecology (Inpatient)
- Hazardous Medication Compounding (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- 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)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Ultrasound
 (Imaging/Dis
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

*	Primary	/ Location
	I IIIIII I	Location

Locations of Care	Available Services
Texas Health Seay Behavioral Health Hospital 6110 W. Parker Road Plano, TX 75093	Services: Addiction Care/Adult) (Non-detox - Adult) (Detox/Non-detox - Adult) Behavioral Health (Day Programs - Adult/Child/Youth) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial - Adult/Child/Youth) Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult) (Non-detox - Adult) (Non-detox - Adult) (Detox/Non-detox - Adult) Family Support (Non 24 Hour Care)
Texas Health Sports Medicine Frisco 9200 World Cup Way, Suite 201 Frisco, TX 75033	Services: • Outpatient Clinics (Outpatient)

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2017 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.

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

Behavioral Health Care

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

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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	Ø
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	\bigcirc

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National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

		Commission	
		Accredited C	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			on	
		l N	lationwide		State	ewide
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 unit.	141.00 minutes 596 eligible Patients	56.00	137.00	54.17	124.49
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.	304.00 minutes 596 eligible Patients	207.00	321.00	196.72	286.68

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National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

		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 Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average 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.	98% of 552 eligible Patients	100%	94%	100%	95%

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National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

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

		Compared to other Joint Commission Accredited Organizations					
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	ewide 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.	95% of 22 eligible Patients	100%	98%	100%	98%	
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.	5% of 98 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.	57% of 457 eligible Patlents	73%	52%	64%	44%	

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