

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.

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

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



Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective	Last Full Surv	ey Last On-Site
		Date	Date	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	v Last On-Site Review Date
🎯 Primary Stroke Center	Certification	1/31/2018	1/30/2018	1/30/2018
Certified Programs	Certification Decision	Effective	Last Full Review	v Last On-Site
		Date	Date	Review Date
🥝 Chest Pain	Certification	6/6/2018	6/5/2018	6/5/2018
🥝 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	\bigotimes	*
Hospital	2017National Patient Safety Goals	Ø	

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

Symbol Key

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below the target range/value.
•	This Measure is not applicable for this organization.
-	Not displayed

Footnote Key

- 1. The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. 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.
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Compared to other Joint Commission Accredited



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

		Organizations	
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(10) ²	@ ²
Jul 2017 - Jun 2018	Immunization	(1) ²	2 ²
	Perinatal Care	2 ²	2 ²

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Locations of Care

* Primary Location	Assolitable Osmitas
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	
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: Behavioral Health (Day Programs - Adult) (Partial - Adult) Family Support (Non 24 Hour Care)
Texas Health Behavorial Health Center Richardson 3661 North Plano Road, Suite 2100 Richardson, TX 75082	 Services: Behavioral Health (Day Programs - Adult) (Partial - Adult) Family Support (Non 24 Hour Care)
Texas Health Neighborhood Care and Wellness Center Prosper 1970 West University Drive Prosper, TX 75078	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

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Texas Health Joint Commission Advanced Certification Programs: Presbyterian Hospital Primary Stroke Center 6200 West Parker Road Joint Commission Certified Programs: Plano, TX 75093 Chest Pain Joint Replacement - Hip Joint Replacement - Knee	Locations of Care	Available 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) Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hermatology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Urology (Surgical Services) 	Texas Health Presbyterian Hospital Plano * 6200 West Parker Road	 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 Catheterization Lab (Surgical Services) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) Gastroenterology (Surgical Services) Gi or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hermatology/Oncology Unit (Inpatient) Inpatient Unit (Inpatient) Surgical Services) Ultrasound (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services)



Locations of Care

Locations of Care	Available Services
Texas Health Seay Behavioral Health Hospital 6110 W. Parker Road Plano, TX 75093	 Services: Addiction Care/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) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - 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

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

Symbol Key

The organization has met the National Patient Safety Goal.
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2017 National Patient Safety Goals

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigcirc
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	\bigcirc
	Reconciling Medication Information	\bigcirc
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	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ଷ</u> ଭ ଭ ଭ
	Preventing Surgical Site Infections	\bigcirc
	Preventing Catheter-Associated Urinary Tract Infection	\bigcirc
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	\bigcirc
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigcirc

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National Quality Improvement Goals

Reporting Period: July 2017 - June 2018					
		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 Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored	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.	2 136.00 minutes 563 eligible Patients	56.00	135.00	56.41	125.93
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.	2 305.00 minutes 564 eligible Patients	206.00	320.00	203.15	291.97

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National Quality Improvement Goals

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		Compared to other Joint Commission			
		Accredited Organizations			
Measure Area	Explanation	Nationwide	Statewide		

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide			ewide	
Measure Explanation		Hospital Results	Top 10% Scored at Least:	0	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.	99% of 549 eligible Patients	100%	94%	100%	95%

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O This organization's performance is below the target range/value.				Organizations		
Not displayed	Measure Area	Explanation	Nationwide	Statewide		
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	⊘ ²	№ ²		

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	N Hospital Results	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.	100% of 18 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.	6% of 102 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.	56% of 467 eligible Patients	73%	51%	63%	45%



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