

Accreditation Quality Report





Version: 1 Date: 2/2/2023

6200 West Parker Road, Plano, TX Org ID: 4989

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.

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care and Human Services	Accredited	7/29/2021	7/28/2021	7/28/2021
Mospital	Accredited	7/31/2021	7/30/2021	10/22/2021

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

Hospital

Advanced Certifi	cation	Certification Decision	Effective	Last Full Review Last On-S	
Programs			Date	Date	Review Date
Advanced Total H Total Knee Replace	ip and ement	Certification	9/22/2022	7/27/2022	7/27/2022
Primary Heart Atta	ack	Certification	1/30/2021	12/16/2022	12/16/2022

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 and Human Services	2021National Patient Safety Goals	Ø	*		
Hospital	2021National Patient Safety Goals	Ø	™ *		

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.
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- 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.
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- 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."

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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
	National Quality Improvement Goals:			
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	© ²	²	

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Locations of Care

Locations of Care	Available Services
Plano 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 1105 N. Central Expressway, Medical Building 2, Suite 2310 Allen, TX 75013	Services: Behavioral Health (Day Programs - Adult/Child/Youth) (Partial Hospitalization - Adult/Child/Youth) Family Support (Non 24 Hour Care)
Texas Health Behavioral Health Center Frisco 5858 Main Street, Suite 101 Frisco, TX 75034	Services: Behavioral Health (Day Programs - Adult/Child/Youth) (Partial Hospitalization - Adult/Child/Youth) 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/Child/Youth) (Partial Hospitalization - Adult/Child/Youth) • Family Support (Non 24 Hour Care)
Texas Health Behavorial Health Center Richardson 3661 North Plano Road, Suite 2100 Richardson, TX 75082	Services: • Addiction Services/Adult/Child/Youth) (Non-detox - Adult) • Behavioral Health (Day Programs - Adult/Child/Youth) (Partial Hospitalization - Adult/Child/Youth) • Chemical Dependency (Day Programs - Adult/Child/Youth) (Partial Hospitalization - Adult/Child/Youth) (Non-detox - Adult) • Family Support (Non 24 Hour Care)
Texas Health Presbyterian Hospital Plano DBA: 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:

- · Advanced Total Hip and Total Knee Replacement
- Primary Heart Attack Center

Other Clinics/Practices located at this site:

• Texas Center for Joint Replacement

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/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

* Primary Location

Locations of Care **Texas Health Seay Behavioral Health Services:** Hospital 6110 W. Parker Road Plano, TX 75093

Available Services

- Addiction Services/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 Hospitalization - Adult/Child/Youth)
- Chemical Dependency (Day Programs Adult) (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) (Partial Hospitalization - Adult) (Non-detox - Adult) (Detox/Non-detox - Adult)
- Family Support (Non 24 Hour Care)

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2021 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 and Human Services

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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2021 National Patient Safety Goals

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	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
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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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Measure Area Explanation Nationwide Statewide

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

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		Col	mpared to c Accredit	ed Organiz		וונ
			Nationwide			ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	35% of 266 eligible Patients	16%	25%	17%	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.	14% of 76 eligible Patients	0%	2%	0%	3%
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.	55% of 466 eligible Patlents	71%	50%	59%	41%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1413% of 2689 eligible Patients	212%	1780%	186%	2213%
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.	1859% of 2689 eligible Patients	1508%	3084%	1626%	3200%

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- * This information can also be viewed at www.hospitalcompare.hhs.gov
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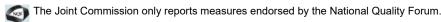
National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Measure Area Explanation Nationwide Statewide

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		Compared to other Joint Commission Accredited Organizations				
		N	lationwide		State	wide
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 - Severe Rate	The severe rate equals the number of patients with severe complications.	446% of 2689 eligible Patients	501%	1303%	373%	987%



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