

# 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



# **Summary of Quality Information**

#### Symbol Key

0	This organization achieved the best possible results.
<b>Ð</b>	This organization's performance is above the target range/value.
	This organization's performance is similar to the target range/value.
Э	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.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- 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.

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
📀 Home Care	Accredited	8/12/2016	7/11/2019	7/11/2019
🎯 Hospital	Accredited	8/13/2016	7/12/2019	7/12/2019

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

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

Tanner Breast Health

157 Clinic Avenue, Carrollton, GA. 30117

Tanner Sleep Disorder Center

100 Professional Park Suite 307, Carrollton, GA. 30117

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
🤣 Primary Stroke Center	Certification	3/26/2019	3/25/2019	3/25/2019
Certified Programs	<b>Certification Decision</b>	Effective	Last Full Review	v Last On-Site
U U		Date	Date	<b>Review Date</b>
🤣 Joint Replacement - Hip	Certification	<b>Date</b> 2/28/2018	<b>Date</b> 2/27/2018	<b>Review Date</b> 2/27/2018
<ul> <li>Joint Replacement - Hip</li> <li>Joint Replacement - Knee</li> </ul>	Certification Certification			

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures® 2013 Top Performer on Key Quality Measures® 2012 Top Performer on Key Quality Measures®

		Compared to other Joint Commission Accredited Organizations		
		Nationwide Statewide		
Home Care	2018National Patient Safety Goals	$\bigotimes$	<b>*</b>	
Hospital	2016National Patient Safety Goals	Ø	<b>*</b>	

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

Compared to other Joint Commission Accredited



# **Summary of Quality Information**

S	/m	bol	l Ke	V

0	This organization achieved the best possible results.
Ð	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.
- 7. The Measure results are based on a sample of patients. 8. The number of months with Measure
- data is below the reporting requirement.
- 9. 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."

		Organizations	
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	<b>1</b>	(m) <sup>2</sup>
Jan 2018 - Dec 2018	Immunization	<b>()</b> <sup>2</sup>	2 <sup>2</sup>
	Perinatal Care	(m) <sup>2</sup>	2 <sup>2</sup>

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



# **Locations of Care**

Locations of Care	Available Services
Center for Behavioral Health (CBH) 523 Dixie Street Carrollton, GA 30117	<ul> <li>Services:</li> <li>Behavioral Health (Non 24 Hour Care - Adult/Child/Youth)</li> <li>Case Management (Non 24 Hour Care - Adult/Child/Youth)</li> <li>Community Integration (Non 24 Hour Care)</li> <li>Family Support (Non 24 Hour Care)</li> <li>In-Home Behavioral Health Services (Non 24 Hour Care - Adult/Child/Youth)</li> </ul>
Hospice DME Warehouse 1035 Blandenburg Road Carrollton, GA 30116 Infusion Center 100 Professional Park Suite 107 Carrollton, GA 30117	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient)
Patient Services Center 119 Ambulance Drive Carrollton, GA 30117	Services: • Outpatient Clinics (Outpatient)
Roy Richards Cancer Center 165 Clinic Avenue Carrollton, GA 30117	Services: <ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
Tanner Advanced Wound Center 119 Ambulance Drive, Carrollton, GA 30117 Carrollton, GA 30117	Services: • Outpatient Clinics (Outpatient)
Tanner Breast Health 157 Clinic Avenue Carrollton, GA 30117	Services: • Breast Prostheses and Accessories • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) • Prosthetics (Home Medical Equipment)
Tanner Health Services100 Professional Park,Suite 107Carrollton, GA 30117	Services: <ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
Tanner Home Health 150 Henry Burson Drive, Suite 105 B Carrollton, GA 30117	<ul> <li>Services:</li> <li>Home Health Aides</li> <li>Home Health, Non-Hospice Services</li> <li>Medical Social Services</li> <li>Occupational Therapy</li> <li>Physical Therapy</li> <li>Skilled Nursing Services</li> <li>Speech Language Pathology</li> </ul>
Tanner Hospice Care 150 Henry Burson Drive, Suite 102 Carrollton, GA 30117	Services: • Hospice Care



# **Locations of Care**

Locations of Care	Available Services
Tanner Medical Center * 705 Dixie Street Carrollton, GA 30117	<ul> <li>Joint Commission Advanced Certification Programs:</li> <li>Primary Stroke Center</li> <li>Joint Replacement - Hip</li> <li>Joint Replacement - Hip</li> <li>Joint Replacement - Knee</li> <li>Spine Surgery</li> <li>Services: <ul> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Coronary Care Unit (Inpatient)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>Gartoenterology (Surgical Services)</li> <li>Gartoenterology (Ingatient)</li> <li>Indextonul (Inpatient)</li> <li>Pazardous Medication Compounding (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient Unit (Inpatient)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> </ul></li></ul>
Tanner Medical Center Mobile Mammography Unit 1 157 Clinic Avenue,	Services: • Outpatient Clinics (Outpatient)



# **Locations of Care**

#### \* Primary Location Locations of Care Available Services Tanner Pain Management Center Services: 150 Henry Burson Drive, Administration of High Risk Medications (Outpatient) Suite 110 • Anesthesia (Outpatient) Carrollton, GA 30117 • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) Tanner Sleep Disorder Center Services: 100 Professional Park Continuous Positive Airway PressureOutpatient Clinics (Outpatient) Suite 307 Carrollton, GA 30117 Respiratory Equipment



# **2018 National Patient Safety Goals**

### Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient 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
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø

#### 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."



# **2016 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	$\bigotimes$
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	0 0
Use Alarms Safely	Use Alarms Safely on Medical Equipment	$\bigotimes$
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	$\bigotimes$
	Preventing Central-Line Associated Blood Stream Infections	<u>ଷ</u> ର ତ
	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	$\bigcirc$

#### Symbol Key

The organization has met the National Patient Safety Cool Patient Safety Goal. The organization has not met the e 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."

d to other lain

pared to other Joint Cor



# **National Quality Improvement Goals**

Reporting Period: January 2018 - December 2018

#### Symbol Key

This organization achieved the best possible results
 This organization's performance is above the target range/value.
 This organization's performance is similar to the target range/value.
 This organization's performance is below the target range/value.
 Not displayed

#### **Footnote Key**

- 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.
- The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- **9.** 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.
   There were no eligible relients that me
- **1.** 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."

	Compared to other Joint	
	Accredited O	rganizations
Explanation	Nationwide	Statewide
This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	@ <sup>2</sup>	<b>№</b> <sup>2</sup>
	This category of evidence based measures assesses the time patients remain in the hospital Emergency	Comm Accredited O Explanation Nationwide This category of evidence based measures assesses the time patients remain in the hospital Emergency 2

		Accredited Organizations				n
		Ν	Nationwide Statev		wide	
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.	2 118.00 minutes 698 eligible Patients	56.00	137.00	56.42	148.44
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.	2 308.00 minutes 698 eligible Patients	207.00	321.00	234.39	351.52

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

This information can also be viewed at www.hospitalcompare.hhs.gov
 Null value or data not displayed.



# **National Quality Improvement Goals**

#### Reporting Period: January 2018 - December 2018

		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.	<b>™</b> <sup>2</sup>	<b>™</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statewi			wide	
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.	96% of 520 eligible Patients	100%	94%	100%	93%

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

This information can also be viewed at www.hospitalcompare.hhs.gov

-- Null value or data not displayed.

#### Symbol Key

This organization achieved the best possible results
 This organization's performance is above the target range/value.
 This organization's performance is similar to the target range/value.
 This organization's performance is below the target range/value.
 Not displayed

#### **Footnote Key**

- 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.
- The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- **9.** 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.
   There were no eligible rationts that me
- 1. 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." Symbol Key

ossible results

Ð

 $\oslash$ 

-

ND

1.

2.

3.

4.

5.

8.

9.

11

valid.

sample of patients.

updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

reported.

overall result.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

above the target range/value. This organization's performance is

below the target range/value. ot displayed

Footnote Key

The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

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."

The measure meets the Privacy Disclosure Threshold rule.



# **National Quality Improvement Goals**

#### Reporting Period: January 2018 - December 2018

		Compared to other Joint Commission	
		Accredited Organizations	
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> <sup>2</sup>	<b>™</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statev			wide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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 15 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.	1% of 155 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.	43% of 1122 eligible Patients	73%	52%	57%	40%



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

This information can also be viewed at www.hospitalcompare.hhs.gov

Null value or data not displayed. ----