

Accreditation Quality Report





Version: 14 Date: 10/10/2018





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

Last Full Review Last On-Site

Gwinnett Medical Center 1000 Medical Center Boulevard, Lawrenceville, GA







Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Surve Date	ey Last On-Site Survey Date
Hospital	Accredited	11/7/2015	9/28/2018	9/28/2018
Nursing Care Center	Accredited	11/4/2015	9/26/2018	9/26/2018

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

Advanced Certification	Cel tilleation Decision	Effective	Last I un Reviev	Last On Site
Programs		Date	Date	Review Date
Primary Stroke Center	Certification	5/18/2017	5/17/2017	5/17/2017
Certified Programs	Certification Decision	Effective	Last Full Review	v Last On-Site
		Date	Date	Review Date
Chest Pain	Certification	Date 10/27/2017	Date 10/26/2017	Review Date 10/26/2017
Chest PainJoint Replacement - Hip	Certification Certification			

Effective

Other Accredited Programs/Services

Advanced Certification Certification Decision

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

Special Quality Awards

2012 Top Performer on Key Quality Measures®

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

its,			Compared to other Joint Organiz	
			Nationwide	Statewide
	Hospital	2015National Patient Safety Goals	Ø	(MA) *

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

Symbol Key

- This organization achieved the best ossible results.
- Φ 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.
- This Measure is not applicable for this rganization.
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Footnote Key

- 1. 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.
- 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.
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- 11. There were no eligible patients that met the denominator criteria.









Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	№ ²	№ 2	
Apr 2017 - Mar 2018	Immunization	№ 2	ND 2	
	Perinatal Care	№ ²	№ 2	
Nursing Care Center	2015National Patient Safety Goals	Ø	*	

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Locations of Care

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services
Glancy Rehabilitation Center 3215 McClure Bridge Road Duluth, GA 30096	Other Clinics/Practices located at this site:
	 Inpatient Unit (Inpatient) Outpatient Clinics (Outpatient) Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)
Gwinnett DBA: GMC Health Park-Hamilton Mill 2078 Teron Trace Suite 200 Dacula, GA 30019	Other Clinics/Practices located at this site:
Gwinnett Extended Care Center 650 Professional Drive Lawrenceville, GA 30046	Services:







Locations of Care

* Primary Location

Locations of Care

Gwinnett Medical Center * 1000 Medical Center Boulevard Lawrenceville, GA 30046

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Joint Commission Certified Programs:

- Chest Pain
- Joint Replacement Hip
- Joint Replacement Knee

Other Clinics/Practices located at this site:

- 631 Imaging Center (PET/CT & MRI)
- Cancer Support Center
- Center for Cancer Care -Lawrenceville
- Center for Weight Management - Lawrenceville
- Diabetes & Nutrition Education Center - Lawrenceville
- Gwinnett Breast Center
- Gwinnett SportsRehab -Lawrenceville
- Wound Treatment Center

Services:

- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- 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)
- 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)

- Neuro/Spine ICU (Intensive Care Unit)
- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- 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)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)







Locations of Care

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services
	Medical ICU (Intensive Care Unit)
Gwinnett Medical Center DBA: GMC Pain Management Center 575 Professional Drive Lawrenceville, GA 30046	Services:
Gwinnett Medical Center DBA: Center for Cancer Care - Snellville 1700 Tree Lane, Suite 490 Snellville, GA 30078	Services: Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Gwinnett Medical Center DBA: GMC Health Park-Lawrenceville 665 Duluth Highway Lawrenceville, GA 30046	Other Clinics/Practices located at this site: • Academic Internal Medicine Partners, Suite 401 • Strickland Family Medicine Center, Suite 501 Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)

Org ID: 6705







Locations of Care

* Primary Location

Locations of Care

Gwinnett Medical Center

3620 Howell Ferry Road Duluth, GA 30096

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Joint Commission Certified Programs:

- Joint Replacement Hip
- Joint Replacement Knee

Other Clinics/Practices located at this site:

- Center for Cancer Care -Duluth
- Center for Screening Mammography
- **Duluth Family and Sports** Medicine
- Gwinnett Medical Center -Lawrenceville
- Gwinnett SportsRehab Duluth
- The Concussion Institute at Gwinnett Medical Center -Duluth

Services:

- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- Gl or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)

- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Teleradiology
- (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- **Urology (Surgical Services)**
- Vascular Surgery (Surgical Services)

Gwinnett Medical Center

- Duluth

DBA: Johns Creek Orthopedic Surgery Center 10670 Medlock Bridge

Road Duluth, GA 30097

Services:

- Administration of High Risk Medications (Outpatient)
- Ambulatory Surgery Center (Outpatient)
- Anesthesia (Outpatient)
- Perform Invasive Procedure (Outpatient)







2015 National Patient Safety Goals

Symbol Key

The organization has met the National Patient Safety Goal.

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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."

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
Use Alarms Safely	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	8888
	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	Ø

Compared to other Joint









National Quality Improvement Goals

Reporting Period: April 2017 - March 2018

		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.	N 2	№ 2	

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	Hospital	Top 10%	Weighte	Top 10%	Weighte
		Results	Scored at Most:	d Median:	Scored at Most:	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.	172.00 minutes 869 eligible Patients	55.00	135.00	53.20	142.85
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.	353.00 minutes 874 eligible Patients	205.00	319.00	236.22	343.86

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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 2017 - March 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.	94% of 639 eligible Patients	100%	94%	100%	92%

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Org ID: 6705







National Quality Improvement Goals

Reporting Period: April 2017 - March 2018

Compared to other Joint **Accredited Organizations** Measure Area Statewide Explanation Nationwide 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:	State 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.	100% of 30 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 143 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.	32% of 583 eligible Patients	73%	51%	59%	40%

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2015 National Patient Safety Goals

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Nursing Care Center

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the safety of using medications.	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Central-Line Associated Blood Stream Infections	Ø
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
Prevent health care-associated pressure ulcers (decubitus ulcers).	Assessing Resident Risk for Pressure Ulcers	Ø