

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.



patients or other individuals served.

Activity Date

Requirements for Improvement

1/26/2024

Symbol Key

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- 12. The measure rate is within optimal range

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

Accredita	tion Programs Accreditation Decision	Effective	Last Full S	Survey Last On-Site
		Date	Date	Survey Date
🎯 Hospital	Preliminary Denial of Accreditation	1/26/2024	1/26/2024	1/26/2024

Existence at time of survey of a condition, which in the Joint Commission's view, poses a threat to

The following standard(s) were found to be out of compliance:

- Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat. Note 1: This standard applies to ambulatory health care occupancy (AHCO) classification requirements for hospitals. The application of AHCO in a hospital would need to meet one of the following provisions: multiple occupancies (18/19.1.3), contiguous non-health care occupancy (18/19.1.3.4), separated building occupancies (20/21.1.2). Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: This standard applies to outpatient surgical departments associated with hospitals, regardless of the number of patients rendered incapable. Note 3: In leased facilities, the elements of performance of this standard apply only to the space in which the accredited organization is located; all exits from the space to the outside at grade level; and any Life Safety Code building systems that support the space (for example, fire alarm system, automatic sprinkler system).
- Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat.
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- Label all medications, medication containers, and other solutions on and off the sterile field in perioperative and other procedural settings. Note: Medication containers include syringes, medicine cups, and basins.
- Medical staff bylaws address self-governance and accountability to the governing body.
- · Medication orders are clear and accurate.
- Reduce the risk for suicide. Note: EPs 2-7 apply to patients in psychiatric hospitals or patients being evaluated or treated for behavioral health conditions as their primary reason for care. In addition, EPs 3-7 apply to all patients who express suicidal ideation during the course of care.
- · Report critical results of tests and diagnostic procedures on a timely basis.
- Resuscitative services are available throughout the hospital.
- Staff are familiar with their roles and responsibilities relative to the environment of care.
- The governing body is ultimately accountable for the safety and quality of care, treatment, and services.
- The hospital assesses and manages the patient's pain and minimizes the risks associated with treatment.
- The hospital assesses and reassesses its patients.
- The hospital communicates information related to safety and quality to those who need it, including staff, patients, families, and external interested parties.
- The hospital complies with law and regulation.
- The hospital defines and verifies staff qualifications.



- The hospital designs and manages the physical environment to comply with the Life Safety Code.
- The hospital establishes and maintains a safe, functional environment. Note: The environment is constructed, arranged, and maintained to foster patient safety, provide facilities for diagnosis and treatment, and provide for special services appropriate to the needs of the community.
- The hospital has policies and procedures that guide and support patient care, treatment, and services.
- The hospital honors the patient's right to give or withhold informed consent.
- The hospital identifies the individual(s) responsible for the infection prevention and control program.
- The hospital inspects, tests, and maintains emergency power systems. Note: This standard does not require hospitals to have the types of emergency power equipment discussed below. However, if these types of equipment exist within the building, then the following maintenance, testing, and inspection requirements apply.
- The hospital inspects, tests, and maintains medical equipment.
- The hospital inspects, tests, and maintains medical gas and vacuum systems. Note: This standard does not require hospitals to have the medical gas and vacuum systems discussed below. However, if a hospital has these types of systems, then the following inspection, testing, and maintenance requirements apply.
- The hospital inspects, tests, and maintains utility systems. Note: At times, maintenance is performed by an external service. In these cases, hospitals are not required to possess maintenance documentation but must have access to such documentation during survey and as needed.
- The hospital maintains fire safety equipment and fire safety building features. Note: This standard does not require hospitals to have the types of fire safety equipment and building features described below. However, if these types of equipment or features exist within the building, then the following maintenance, testing, and inspection requirements apply.
- The hospital maintains the integrity of the means of egress.
- The hospital maintains the security and integrity of health information.
- The hospital makes food and nutrition products available to its patients.
- The hospital manages fire risks.
- The hospital manages its environment during demolition, renovation, or new construction to reduce risk to those in the organization.
- The hospital manages risks associated with its utility systems.
- The hospital manages risks related to hazardous materials and waste.
- The hospital manages safety and security risks.
- The hospital prohibits smoking except in specific circumstances.
- The hospital protects occupants during periods when the Life Safety Code is not met or during periods of construction.
- The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke. Note 1: This standard applies to ambulatory health care occupancy (AHCO) classification requirements for hospitals. The application of AHCO in a hospital would need to meet one of the following provisions: multiple occupancies (18/19.1.3), contiguous non-health care occupancy (18/19.1.3.4), separated building occupancies (20/21.1.2). Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: This standard applies to outpatient surgical departments associated with hospitals, regardless of the number of patients rendered incapable. Note 3: In leased facilities, the elements of performance of this standard apply only to the space in which the accredited organization is located; all exits from the space to the outside at grade level; and any Life Safety Code building systems that support the space (for example, fire alarm system, automatic sprinkler system).
- The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke.

Symbol Key

	Symbol Rey
0	This organization achieved the best possible results.
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- The hospital provides and maintains equipment for extinguishing fires. Note 1: This standard applies to ambulatory health care occupancy (AHCO) classification requirements for hospitals. The application of AHCO in a hospital would need to meet one of the following provisions: multiple occupancies (18/19.1.3), contiguous non-health care occupancy (18/19.1.3.4), separated building occupancies (20/21.1.2). Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: This standard applies to outpatient surgical departments associated with hospitals, regardless of the number of patients rendered incapable. Note 3: In leased facilities, the elements of performance of this standard apply only to the space in which the accredited organization is located; all exits from the space to the outside at grade level; and any Life Safety Code building systems that support the space (for example, fire alarm system, automatic sprinkler system).
- The hospital provides and maintains equipment for extinguishing fires.
- The hospital provides and maintains fire alarm systems. Note 1: This standard applies to ambulatory health care occupancy (AHCO) classification requirements for hospitals. The application of AHCO in a hospital would need to meet one of the following provisions: multiple occupancies (18/19.1.3), contiguous non-health care occupancy (18/19.1.3.4), separated building occupancies (20/21.1.2). Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes: This standard applies to outpatient surgical departments associated with hospitals, regardless of the number of patients rendered incapable. Note 3: In leased facilities, the elements of performance of this standard apply only to the space in which the accredited organization is located; all exits from the space to the outside at grade level; and any Life Safety Code building systems that support the space (for example, fire alarm system, automatic sprinkler system).
- The hospital provides and maintains fire alarm systems.
- The hospital provides and maintains operating features that conform to fire and smoke prevention requirements.
- The hospital provides and maintains systems for extinguishing fires.
- The hospital provides care, treatment, and services as ordered or prescribed, and in accordance with law and regulation.
- The hospital provides care, treatment, and services for each patient.
- The hospital provides care, treatment, services, and an environment that pose no risk of an "Immediate Threat to Health or Safety."
- The hospital reduces the risk of infections associated with medical equipment, devices, and supplies.
- The hospital safely administers medications.
- The hospital traces all tissues bi-directionally.
- The hospital uses restraint or seclusion safely.
- The medical record contains information that reflects the patient's care, treatment, and services.
- The patient and their family have the right to have complaints reviewed by the hospital.

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
Advanced Total Hip and Total Knee Replacement	Certification	12/6/2022	10/14/2022	10/14/2022
📀 Primary Stroke Center	Certification	4/22/2023	4/21/2023	4/21/2023

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Certified Programs	Certification Decision	Effective	Last Full Review Last On-S	
		Date	Date	Review Date
🤣 Hip Fracture	Certification	5/14/2022	5/13/2022	5/13/2022
o Sepsis	Certification	5/11/2023	5/10/2023	5/10/2023

Other Accredited Programs/Services

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

		Compared to other Joint Commission Accredited Organizations		
		Nationwide Statewide		
Hospital	2021National Patient Safety Goals	Ø	*	
	National Quality Improvement Goals:			
Reporting Period: Jan 2022 - Dec 2022	Perinatal Care	6 2	6 2	

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Locations of Care

* Primary Location

Locations of Care	Available Services
Advanced Wound Center at Cookeville Regional Medical Center DBA: Advanced Wound Center at Cookeville Regional Medical Center 250 N. Cedar Avenue Cookeville, TN 38501	Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Cardiac & Pulmonary Rehabilitation Center 228 West 4th Street, Suite 100 Cookeville, TN 38501	Services: • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

Locations of Care **Available Services Cookeville Regional** Joint Commission Advanced Certification Programs: **Medical Center** Advanced Total Hip and Total Knee Replacement Authority Primary Stroke Center • DBA: Cookeville Regional Medical Center Authority **Joint Commission Certified Programs:** 1 Medical Center • Hip Fracture Boulevard Sepsis Cookeville, TN 38501 **Other Clinics/Practices located at this site:** Tier 1 Orthopedics 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)
- 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)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Perform Invasive Procedure (Outpatient)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- **Radiation Oncology** (Imaging/Diagnostic Services)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology ٠
- (Imaging/Diagnostic Services) Thoracic Surgery (Surgical
- Services) Ultrasound
- (Imaging/Diagnostic Services) Urology (Surgical Services)
- Vascular Surgery (Surgical Services)



Locations of Care

Locations of Care	Available Services
CRMC Surgery Center - Whitney DBA: CRMC Surgery Center - Whitney 467 North Whitney Avenue Cookeville, TN 38501	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Ambulatory Surgery Center (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)
Outpatient Physical Therapy Department 215 West 6th Street Cookeville, TN 38501	Services: Outpatient Clinics (Outpatient)
Rehab Center 215 West 6th Street Cookeville, TN 38501	Services: Inpatient Unit (Inpatient) Medical /Surgical Unit (Inpatient) Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)
The Sleep Center at CRMC DBA: The Sleep Center at CRMC 100 West 4th Street Suite 350 Cookeville, TN 38501	Services: • Outpatient Clinics (Outpatient)



2021 National Patient Safety Goals

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	\bigotimes
	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	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigcirc

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.



National Quality Improvement Goals

Reporting Period: January 2022 - December 2022

		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.	2	○ ²

		Co	mpared to c Accredit	other Joint ed Organiz		on
		1	Vationwide	ou organiz		wide
Measure	Explanation	Hospital Results	Top Perform er Threshol d:	Average Rate:	Top Perform er Threshol d:	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.	(1 ²	26%	(m) ¹²	26%
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.	15% of 20 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.	45% of 1255 eligible Patients	72%	50%	52%	36%
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	19 per 1000	5	13	7	19

* This information can also be viewed at https://hospitalcompare.io/

---- Null value or data not displayed.

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