**Quality Check®** 

Org ID: 7852

# Accreditation Quality Report





Version: 18 Date: 11/16/2019



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

DBA: Tennova Healthcare, 7565 Dannaher Drive, Powell, TN

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# **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Surve	y Last On-Site Survey Date
Hospital	Accredited	7/1/2017	6/30/2017	10/1/2019
Laboratory	Accredited	3/9/2018	10/12/2018	10/12/2018

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

Pathology and Clinical Laboratory

Hospital

## **Footnote Key**

Symbol Key

oossible results.

organization.

Not displayed

Φ

This organization achieved the best

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

- 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.
- 8. The number of months with Measure data is below the reporting requirement.
- 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
- 11. There were no eligible patients that met the denominator criteria.

National Quality Forum Endorsement.

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

Advanced Certification Programs	<b>Certification Decision</b>	Effective Date	Last Full Review	v Last On-Site Review Date
Acute Stroke Ready Hospital	Certification	6/8/2019	6/7/2019	6/7/2019
Primary Stroke Center	Certification	6/7/2019	6/6/2019	6/6/2019
Certified Programs	<b>Certification Decision</b>	<b>Effective</b>	<b>Last Full Review</b>	v Last On-Site
		Date	Date	<b>Review Date</b>
Joint Replacement - Hip	Certification	10/3/2018	10/2/2018	10/2/2018
Joint Replacement - Knee	Certification	10/3/2018	10/2/2018	10/2/2018

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide		
Hospital	2018National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period: Apr 2018 - Mar 2019	Emergency Department	(II) 2	(v) <sup>2</sup>	
Laboratory	2018National Patient Safety Goals	Ø	N/A *	

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

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# **Locations** of Care

**Treatment Center Turkey** 

10810 Parkside Drive

Knoxville, TN 37934

Creek

#### \* Primary Location Available Services **Locations of Care Metro Knoxville HMA Joint Commission Advanced Certification Programs:** • Primary Stroke Center 7565 Dannaher Drive Powell, TN 37849 **Joint Commission Certified Programs:** Joint Replacement - Hip Joint Replacement - Knee **Services:** • Cardiac Catheterization Lab • Ophthalmology (Surgical Services) (Surgical Services) CT Scanner Orthopedic Surgery (Surgical (Imaging/Diagnostic Services) Services) • Orthopedic/Spine Unit Dialysis Unit (Inpatient) (Inpatient) • Ear/Nose/Throat Surgery Plastic Surgery (Surgical (Surgical Services) Services) EEG/EKG/EMG Lab Positron Emission Tomography (Imaging/Diagnostic (PET) (Imaging/Diagnostic Services) Services) Post Anesthesia Care Unit Gastroenterology (Surgical Services) (PACU) (Inpatient) **General Laboratory Tests** Radiation Oncology Gl or Endoscopy Lab (Imaging/Diagnostic Services) (Imaging/Diagnostic Sleep Laboratory (Sleep Services) Laboratory) Surgical ICU (Intensive Care Gynecological Surgery (Surgical Services) Unit) Teleradiology Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) (Imaging/Diagnostic Thoracic Surgery (Surgical Services) Services) Magnetic Resonance Toxicology Imaging (Imaging/Diagnostic Ultrasound (Imaging/Diagnostic Services) Services) Medical /Surgical Unit Urology (Surgical Services) (Inpatient) Medical ICU (Intensive Care Unit) Nuclear Medicine (Imaging/Diagnostic Services) Tennova Ambulatory **Care Center South Services:** 7323 Chapman Highway, Outpatient Clinics (Outpatient) Suite 190 Knoxville, TN 37920 **Tennova Comprehensive Pain Services:**

• Anesthesia (Outpatient)

Outpatient Clinics (Outpatient)

• Perform Invasive Procedure (Outpatient)

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# **Locations of Care**

*	<b>Primary</b>	Location

Locations of Care	Available Services
Tennova Physical Therapy and Sports Medicine, North 7540 Dannaher Drive, Suite 200 Powell, TN 37849	Services:  • Outpatient Clinics (Outpatient)
Tennova Sleep Center North 7557A Dannaher Drive, Suite 240 Powell, TN 37849	Services:  • Outpatient Clinics (Outpatient)
Tennova Sleep Center West 10800 Parkside Drive, Suite 202 Knoxville, TN 37934	Services:  • Outpatient Clinics (Outpatient)
Tennova Surgery Center West 10800 Parkside Drive, Suite 101 Knoxville, TN 37934	Services:

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# **Locations of Care**

#### \* Primary Location

**Locations of Care** 

**Turkey Creek Medical** 10820 Parkside Drive Knoxville, TN 37934

## Available Services

### **Joint Commission Advanced Certification Programs:**

• Acute Stroke Ready Hospital

#### Services:

- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular 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)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)

- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical
- Services) Orthopedic/Spine Unit
- (Inpatient) Plastic Surgery (Surgical
- Services) Post Anesthesia Care Unit
- (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Surgical ICU (Intensive Care Unit)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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# **2018 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."

# 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
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	Ø
	Preventing Central-Line Associated Blood Stream Infections	0000
	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

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# **National Quality Improvement Goals**

Reporting Period: April 2018 - March 2019

Compared t	o other Joint
Comm	nission
Accredited C	Organizations
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		7 tool outloa C	rgariizationio
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.	<b>N</b> 2	<b>™</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	ewide
Measure	Explanation	Hospital	Top 10%	Weighte	Top 10%	Weighte
		Results	Scored	ď	Scored	ď
			at Most:	Median:	at Most:	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.	162.00 minutes 642 eligible Patients	55.00	136.00	42.25	111.33



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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 Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- lot displayed

### Footnote Key

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# **2018 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.

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# Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	(N/A)
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	N/A