

# 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

DBA: Tennova Healthcare,

7565 Dannaher Drive, Powell, TN



## **Summary of Quality Information**

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	V Last On-Site Survey Date
🤣 Hospital	Accredited	7/1/2017	6/30/2017	11/15/2019
olimitation States (Second States) 🙆	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

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
Acute Stroke Ready Hospital	Certification	6/8/2019	6/7/2019	6/7/2019
o Primary Stroke Center	Certification	6/7/2019	6/6/2019	6/6/2019
Certified Programs	<b>Certification Decision</b>	Effective	Last Full Review	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	2019National Patient Safety Goals	Ø	<b>*</b>
	National Quality Improvement Goals:		
Reporting Period: Oct 2018 - Sep 2019	Emergency Department	(10) <sup>2</sup>	(in) <sup>2</sup>
Laboratory	2018National Patient Safety Goals	Ø	<b>∞</b> *

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

### Symbol Key

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	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 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.
- The Measure results are based on a sample of patients.
   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.







## **Locations of Care**

### \* Primary Location

Metro Knoxville HMA         LLC *         DBA: North Knoxville         Medical Center         7565 Dannaher Drive         Powell, TN 37849         Joint Commission Certified Programs:         • Joint Replacement - Hip         • Joint Replacement - Knee         Services:         • Cardiac Catheterization Lab         • Nuclear Medicine         (Surgical Services)	Locations of Care	Available Services		
<ul> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Dialysis Unit (Inpatient)</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>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic</li> <li>Ultrasound</li> </ul>	Metro Knoxville HMA LLC * DBA: North Knoxville Medical Center 7565 Dannaher Drive	<ul> <li>Joint Commission Advanced Certification Programs:</li> <li>Primary Stroke Center</li> <li>Joint Commission Certified Programs: <ul> <li>Joint Replacement - Hip</li> <li>Joint Replacement - Knee</li> </ul> </li> <li>Services: <ul> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>CT Scanner (Imaging/Diagnostic Services)</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>General Laboratory Tests (Imaging/Diagnostic Services)</li> <li>General Laboratory Tests (Imaging/Diagnostic Services)</li> <li>Goneral Laboratory Tests (Imaging/Diagnostic Services)</li> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inderical /Surgical Unit (Ingaing/Diagnostic Services)</li> <li>Medical ICU (Intensive Care Unit)</li> </ul></li></ul>		







## **Locations of Care**

### \* Primary Location

Locations of Care	Locations of Care Available Services		
Locations of Care Metro Knoxville HMA LLC DBA: Turkey Creek Medical Center 10820 Parkside Drive Knoxville, TN 37934	<ul> <li>Joint Commission Advanced Certification Programs: <ul> <li>Acute Stroke Ready Hospital</li> </ul> </li> <li>Services: <ul> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>Cardiovascular Unit (Ingatient)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Dialysis Unit (Inpatient)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> </ul></li></ul>		
Metro Knoxville HMA LLC DBA: The Birthing Center at North Knoxville Medical Center 7557A Dannaher Drive, Suite 120 Powell, TN 37849	Services: • Inpatient Unit (Inpatient) • Labor & Delivery (Inpatient) • Normal Newborn Nursery (Inpatient)		



Org ID: 7852



LLC



## **Locations of Care**

#### \* Primary Location Locations of Care Available Services Metro Knoxville HMA Services: DBA: Ground Floor • Administration of Blood Product (Outpatient) Surgery Suite Administration of High Risk Medications (Outpatient) 7557B Dannaher Drive Ambulatory Surgery Center (Outpatient) Powell, TN 37849 • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient) **Tennova Ambulatory Care Center South** Services: 7323 Chapman Highway, • Outpatient Clinics (Outpatient) Suite 190 Knoxville, TN 37920 **Tennova Physical Therapy and Sports** Services: **Medicine North** • Outpatient Clinics (Outpatient) 7540 Dannaher Drive, Suite 200 Powell, TN 37849 **Tennova Sleep Center** North Services: 7557A Dannaher Drive, • Outpatient Clinics (Outpatient) Suite 240 Powell, TN 37849 Tennova Sleep Center West Services: 10800 Parkside Drive, • Outpatient Clinics (Outpatient) Suite 202 Knoxville, TN 37934 **Tennova Surgery Center** West Services: 10800 Parkside Drive, • Ambulatory Surgery Center (Outpatient) Suite 101 • Anesthesia (Outpatient) Knoxville, TN 37934 • Perform Invasive Procedure (Outpatient)

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



## **2019 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	$\bigcirc$
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	$\bigcirc$
	Reconciling Medication Information	$\bigcirc$
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 Infections that are difficult to treat	$\bigcirc$
	Preventing Central-Line Associated Blood Stream Infections	<u>ଷ</u> ଭ ଭ ଭ
	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 Goal.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

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## **National Quality Improvement Goals**

### Reporting Period: October 2018 - September 2019

		Compared to other Join Commission	
		Accredited C	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.	@ <sup>2</sup>	@ <sup>2</sup>

	Compared to other Joint Commission Accredited Organizations					
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Scored	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.	2 175.00 minutes 710 eligible Patients	55.00	134.00	43.76	111.84

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.

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## **2018 National Patient Safety Goals**

## Laboratory

Safety Goals	Organizations Should	Implemented
Improve the accuracy of Use of Two Patient Identifiers patient identification.		<b>•</b>
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	<b>(</b>

### Symbol Key

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 The Goal is not applicable for this organization.