

Accreditation Quality Report





Version: 12 Date: 10/20/2018





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









Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	2/13/2016	2/12/2016	12/23/2016

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

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

Ventricular Assist Device

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Site		
Programs		Date	Date	Review Date	
Advanced Comprehensive Stroke Center	Certification	11/8/2017	11/7/2017	11/7/2017	
Ventricular Assist Device	Certification	9/14/2016	9/13/2016	9/13/2016	
Certified Programs	Certification Decision	Effective	Last Full Revie	w Last On-Site	
		Date	Date	Review Date	
oint Replacement - Hip	Certification	12/5/2017	12/4/2017	12/4/2017	
O Joint Replacement - Knee	Certification	12/5/2017	12/4/2017	12/4/2017	

Other Accredited Programs/Services

- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))
- Laboratory (Accredited by American Society for Histocompatibility and Immunogenetics (ASHI))

Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2015 Silver Get With The Guidelines - Resuscitation

2013 Hospital Magnet Award

2012 ACS National Surgical Quality Improvement Program

2012 Gold Plus Get With The Guidelines - Stroke

2012 Silver - The Medal of Honor for Organ Donation

Symbol Key

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Footnote Key

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- The Measure Set does not have an overall result.
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- The measure meets the Privacy Disclosure Threshold rule
- The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations			
		Nationwide	Statewide		
Hospital	2016National Patient Safety Goals	Ø	N/A *		
	National Quality Improvement Goals:				
Reporting Period:	Emergency Department	ND ²	ND 2		
Apr 2017 - Mar 2018	Immunization	ND 2	ND 2		
	Perinatal Care	№ 2	№ ²		

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Locations of Care

* Primary Lo	cation
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Locations of Care	Available Services
Barnes Jewish Extended Care 401 Corporate Park Drive Clayton, MO 63105	Services: Rehabilitation Services Skilled Nursing Care
Barnes Jewish Hospital Center for Outpatient Health 4901 Forest Park Parkway Saint Louis, MO 63108	Services: Behavioral Health (Non 24 Hour Care - Adult) Chemical Dependency (Non 24 Hour Care - Adult) (Detox - Adult) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Barnes Jewish Hospital Invitrofertilization 4444 Forest Park Saint Louis, MO 63108	Services: • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Barnes Jewish Hospital Psychiatric Support Center 5355 Delmar Blvd Saint Louis, MO 63112	Services: • Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)
Barnes-Jewish Hospital DBA: Center for Advanced Medicine - South County 5201 Midamerica Plaza Saint Louis, MO 63129	Services:

Org ID: 8387







Locations of Care

* Primary Location

Locations of Care

Barnes-Jewish Hospital *

1 Barnes Jewish Plaza Saint Louis, MO 63110

Available Services

Joint Commission Advanced Certification Programs:

- Advanced Comprehensive Stroke Center
- Ventricular Assist Device

Joint Commission Certified Programs:

- Joint Replacement Hip
- Joint Replacement Knee

Services:

- Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)
- Brachytherapy (Imaging/Diagnostic 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)
- 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 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)
- Radiation Oncology (Imaging/Diagnostic Services)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Transplant Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)







Locations of Care

*	Primary	/ Location
	I IIIIIIIII)	Location

Locations of Care	Available Services
Barnes-Jewish Hospital Laboratory and Radiology Dept 1110 Highlands Plaza Dr E., Ste 325 Saint Louis, MO 63110	Services: • Outpatient Clinics (Outpatient)
Barnes-Jewish Hospital Outpatient Orthopedic Center 14532 South Outer Forty Drive Chesterfield, MO 63017	Services:
Siteman Cancer Center - South County DBA: Barnes Jewish Hospital - Radiation Oncology Services 5225 Midamerica Plaza Saint Louis, MO 63129	Services: • Outpatient Clinics (Outpatient)







2016 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
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

Org ID: 8387

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.	№ ²	№ 2	

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	Top 10%	Weighte	State Top 10%	Weighte
	,	Results	Scored	d Median:	Scored	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.	ND 2 247.00 minutes 448 eligible Patients	55.00	135.00	53.94	110.27
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.	465.00 minutes 449 eligible Patients	205.00	319.00	202.70	266.06

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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

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.

		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.	98% of 542 eligible Patients	100%	94%	100%	96%

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1 Barnes Jewish Plaza, Saint Louis, MO

Compared to other Joint







National Quality Improvement Goals

Reporting Period: April 2017 - March 2018

Accredited Organizations Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Соі	mpared to o	other Joint ed Organiz		on
Measure	Explanation	Hospital Results	Nationwide	Average Rate:		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.	98% of 58 eligible Patients	at Least:	98%	at Least:	97%
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.	0% of 46 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.	33% of 377 eligible Patients	73%	51%	66%	52%

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