

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



Summary of Quality Information

Symbol Key

0	This organization achieved the best possible results.
	This organization's performance is above the target range/value.
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	This Measure is not applicable for this organization.
•	Not displayed

Footnote Key

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- 4. The measure meets the Privacy Disclosure Threshold rule.
- 5. The organization scored above 90% but was below most other organizations.
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For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🎯 Hospital	Accredited	12/15/2018	12/14/2018	1/23/2019

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 Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	11/8/2017	11/19/2019	11/19/2019
Ventricular Assist Device	Certification	11/7/2018	11/6/2018	11/6/2018
Certified Programs	Certification Decision	Effective	Last Full Review	Last On-Site
		Date	Date	Review Date
🥝 Joint Replacement - Hip	Certification	12/5/2017	1/22/2020	1/22/2020
🮯 Joint Replacement - Knee	Certification	12/5/2017	1/22/2020	1/22/2020

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 Old Plus The Guidelines - Stroke

2012 Silver - The Medal of Honor for Organ Donation



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		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2018National Patient Safety Goals	\bigotimes	*	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	(10) ²	2 ²	
Jul 2018 - Jun 2019	Perinatal Care	2 ²	2 ²	

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

1 Barnes Jewish Plaza, Saint Louis, MO



Locations of Care

* Primary Location	
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: • Ambulatory Surgery Center (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

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Locations of Care	Available Services	
Barnes-Jewish Hospital * 1 Barnes Jewish Plaza Saint Louis, MO 63110	 Joint Commission Advanced Certification Programs: Advanced Comprehensive Stroke Center Ventricular Assist Device 	
1 Barnes Jewish Plaza	 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) Cardiotoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Cardioscurgery (Surgical Services) Ear/Nose/Throat Surgery (Surgical Services) Ear/Nose/Throat Surgery (Surgical Services) Ear/Nose/Throat Surgery (Surgical Services) Gastroenterology (Surgical Services) Gornecological Surgery (Surgical Services) Gornecology (Inpatient) Hazardous Medication Compounding (Inpatient) Hazardous Medication Compounding (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology Ventro/Spine ICU (Intensive Care Unit (PACU) (Inpatient) Surgical ICU (Intensive Care Unit (Inpatient) Surgical ICU (Intensive Care Unit (Inpatient) Surgical ICU (Intensive Care Unit (Inpatient) Surgical ICU (Intensive Care Unit (Inpatient)<	s) al nt) s) s
	 (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit Vascular Surgery (Surgical Services) 	

(Inpatient)



Locations of Care

* Primary Location	* Primary Location		
Locations of Care	Available Services		
	Medical ICU (Intensive Care Unit)		
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: • Ambulatory Surgery Center (Outpatient) • Anesthesia (Outpatient) • Perform Invasive Procedure (Outpatient)		
Siteman Cancer Center - South County DBA: Barnes Jewish Hospital - Radiation Oncology Services 5225 Midamerica Plaza Saint Louis, MO 63129	Services: Outpatient Clinics (Outpatient) 		



2018 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 Multi-Drug Resistant Organism Infections	\bigotimes
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ
	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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Reporting Period: July 2018 - June 2019

National Quality Improvement Goals

S١	/m	bol	Key

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		Compared to other Joint Commission	
		Accredited C	rganizations
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	O ²

		Compared to other Joint Commission Accredited Organizations				
		٩	lationwide		State	wide
Measure Explanation		Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	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.	VCD ² 249.00 minutes 428 eligible Patients	55.00	135.00	58.91	109.36

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This information can also be viewed at www.hospitalcompare.hhs.gov

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1 Barnes Jewish Plaza, Saint Louis, MO



National Quality Improvement Goals

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Not displayed	Measure Area	Explanation	Nationwide	Statewide	
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	⊘ ²	∞ ²	
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		Compared to other Joint Commission Accredited Organizations					
Measure	Explanation	N 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 43 eligible Patients	100%	98%	100%	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.	5% of 38 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.	40% of 335 eligible Patients	73%	52%	66%	51%	



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