

# Accreditation Quality Report





# Barnes-Jewish Hospital 1 Barnes Jewish Plaza, Saint Louis, MO

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.









# **Summary of Quality Information**

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Y Last On-Site Survey Date
Hospital	Accredited	8/4/2023	5/27/2022	10/5/2023

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

<b>Advanced Certification</b>	<b>Certification Decision</b>	<b>Effective</b>	Last Full Review Last On-Site	
Programs		Date	Date	<b>Review Date</b>
Advanced Comprehensive Stroke Center	Certification	6/25/2022	6/24/2022	6/24/2022
Comprehensive Cardiac Center	Certification	6/27/2023	4/14/2023	4/14/2023
Ventricular Assist Device	Certification	10/5/2022	10/4/2022	10/4/2022
<b>Certified Programs</b>	<b>Certification Decision</b>	<b>Effective</b>	Last Full Review Last On-Site	
		Date	Date	<b>Review Date</b>
Joint Replacement - Hip	Certification	2/19/2022	2/18/2022	2/18/2022
Joint Replacement - Knee	Certification	2/19/2022	2/18/2022	2/18/2022

# **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))

		•	Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide		
Hospital 2023Na	tional Patient Safety Goals	Ø	*		
Nationa	l Quality Improvement Goals:				
Reporting Period: Jan 2021 - Dec 2021	Care	<b>№</b> 0 <sup>2</sup>	<b>№</b> <sup>2</sup>		

# Symbol Key

- This organization achieved the best oossible results.
- Φ This organization's performance is better than the target range/value.
- This organization's performance is similar to the target range/value.
- This organization's performance is worse than the target range/value.
- This Measure is not applicable for this organization.
- Not displayed

### Footnote Key

- 1. The Measure or Measure Set was not
- The Measure Set does not have an overall result.
- 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.
- 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
- National Quality Forum Endorsement. 11. There were no eligible patients that met the denominator criteria.
- 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."

1 Barnes Jewish Plaza, Saint Louis, MO







# **Locations of Care**

* Primary Location				
Locations of Care				
Barnes Jewish				

Extended Care 401 Corporate Park Drive Clayton, MO 63105

### Barnes Jewish Hospital Center for Outpatient Health

4901 Forest Park Parkway Saint Louis, MO 63108

# Services:

**Services:** 

- Behavioral Health (Non 24 Hour Care Adult)
- Chemical Dependency (Non 24 Hour Care Adult) (Detox - Adult)
- Outpatient Clinics (Outpatient)

• Rehabilitation Services

• Skilled Nursing Care

• 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 Care 5355 Delmar Blvd Saint Louis, MO 63112

#### **Services:**

• Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)

Available Services







# **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
- Comprehensive Cardiac Center
- Ventricular Assist Device

### **Joint Commission Certified Programs:**

- Joint Replacement Hip
- Joint Replacement Knee

#### Other Clinics/Practices located at this site:

- Cardiac Rehab: Heart Care Institute LLC
- Cardiac Surgery: Washington University
- Cardio-Oncology & Amyloidosis: Washington University
- EP and Device: Washington University
- General Cardiology: Washington University
- Heart Failure: Washington University
- Heart Transplant: Washington University
- Heart Valve: Washington University
- Hypertrophic Cardiology Center of Excellence: Washington Uni
- VAD: Washington University

#### **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)

- Neuro/Spine 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)
- 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)
- Sterile Medication
   Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)

Org ID: 8387







# **Locations of Care**

Locations of Care	Available Services		
	<ul> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Hematology/Oncology Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Imaging/Diagnostic Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Transplant Surgery (Surgical Services)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Vascular Surgery (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul>		
Barnes-Jewish Hospital Center for Advanced Medicine South Co 5201 Midamerica Plaza Saint Louis, MO 63129	Services:  • Ambulatory Surgery Center (Outpatient)  • Anesthesia (Outpatient)  • Perform Invasive Procedure (Outpatient)		
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)		







# 2023 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
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
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	$\mathbf{O}$
	Performing a Time-Out	Ø









# **National Quality Improvement Goals**

Reporting Period: January 2021 - December 2021

Compared to other Joint
Commission
Accredited Organizations
ationwide Statewide

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Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> 2	<b>№</b> 2

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statewide			wide	
Measure	Explanation	Hospital	Тор	Average	Тор	Average
		Results	Perform	Rate:	Perform	Rate:
			er		er	
			Threshol d:		Threshol d:	
Cesarean Birth	This measure reports the number of		u.		u.	
Cocarcan Enur	first-time moms with a full-term,	$\oplus$	12		12	
	single baby in a head-down position	•	N/D	26%	(N/D)	22%
	who delivered the baby by cesarean section.					
Floative Delivery	This measure reports the overall					
Elective Delivery	number of mothers who had elective					
	vaginal deliveries or elective					
	cesarean sections at equal to and	$\sim$				
	greater than 37 weeks gestation to	igotimes				
	less than 39 weeks gestation. An elective delivery is the delivery of a		0%	2%	0%	2%
	newborn(s) when the mother was not	3% of 31 eligible				
	in active labor or presented with	Patients				
	spontaneous ruptured membranes					
	prior to medical induction and/or cesarean section.					
Evaluaiva Propet Mills Fooding	This measure reports the overall					
Exclusive Breast Milk Feeding	number of newborns who are					
	exclusively breast milk fed during the					
	newborns entire hospitalization.					
	Exclusive breast milk feeding is when	37% of	71%	49%	65%	49%
	a newborn receives only breast milk and no other liquids or solids except	334 eligible Patients				
	for drops or syrups consisting of	rauents				
	vitamins, minerals, or medicines.					
Unexpected Complications in	The severe rate equals the number	$\oplus$				
Term Newborns per 1000	of patients with severe complications.	0	5	13	7	16
livebirths - Severe Rate		41 per 1000				

- \* This information can also be viewed at https://hospitalcompare.io/
- ---- Null value or data not displayed.

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