



# 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](mailto:qualityreport@jointcommission.org) with your comments and suggestions.



## Summary of Quality Information



### Symbol Key

-  This organization achieved the best possible results.
-  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 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.
7. The Measure results are based on a sample of patients.
8. The number of months with Measure data is below the reporting requirement.
9. 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."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
 Home Care	Accredited	9/3/2022	9/2/2022	9/2/2022
 Hospital	Accredited	9/3/2022	9/2/2022	10/12/2022

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

Home Health Agency

Hospital

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	<b>2022 National Patient Safety Goals</b>		 *
Hospital	<b>2022 National Patient Safety Goals</b>		 *
Reporting Period: Jan 2022 - Dec 2022	<b>National Quality Improvement Goals:</b>		
	Perinatal Care	 <sup>2</sup>	 <sup>2</sup>



## Locations of Care

### \* Primary Location

Locations of Care	Available Services	
<b>Children's Behavioral Health and Eating Disorders Program</b> 1000 North 90th Street, Suite 200 & 201 Omaha, NE 68114	<b>Services:</b> <ul style="list-style-type: none"> <li>Behavioral Health (Non 24 Hour Care - Child/Youth)</li> <li>Eating Disorders (Day Programs - Child/Youth) (Non 24 Hour Care - Child/Youth) (Partial Hospitalization - Child/Youth)</li> <li>Family Support (Non 24 Hour Care)</li> </ul>	
<b>Children's Home Healthcare</b> 3000 South 84th Street Omaha, NE 68124	<b>Services:</b> <ul style="list-style-type: none"> <li>Canes and Crutches</li> <li>Clinical Respiratory</li> <li>Commodes</li> <li>Continuous Positive Airway Pressure</li> <li>Durable Medical Equipment</li> <li>Enteral Equipment and/or Supplies</li> <li>Enteral Nutrients</li> <li>External Infusion Pump Supplies</li> <li>External Infusion Pumps</li> <li>Hazardous Medication Compounding</li> <li>Home Health, Non-Hospice Services</li> <li>Hospital Beds - Electric</li> <li>Hospital Beds - Manual</li> <li>Infusion Nursing</li> <li>Infusion Pharmacy</li> <li>Intermittent Positive Pressure Breathing</li> <li>Mechanical In-Exsufflation Devices</li> <li>Medical Social Services</li> <li>Nebulizers Equipment</li> <li>Occupational Therapy</li> <li>Ostomy Supplies</li> <li>Oxygen</li> <li>Parenteral Equipment and/or Supplies</li> </ul>	<ul style="list-style-type: none"> <li>Parenteral Nutrients</li> <li>Patient Lifts and Accessories</li> <li>Pharmacy, Clinical Consulting Services</li> <li>Pharmacy/Dispensary, General Services</li> <li>Physical Therapy</li> <li>Prosthetics (Home Medical Equipment)</li> <li>Respiratory Assist Devices</li> <li>Respiratory Equipment</li> <li>Skilled Nursing Services</li> <li>Specialty Pharmacy</li> <li>Sterile Medication Compounding</li> <li>Suction Pump</li> <li>Supplies</li> <li>Support Surfaces for Beds (New)</li> <li>Surgical Dressings</li> <li>Telehealth</li> <li>Tracheostomy Supplies</li> <li>Ultraviolet Light Devices</li> <li>Urological Supplies</li> <li>Ventilators All Types</li> <li>Walkers, Canes and Crutches</li> <li>Wheelchairs - Manual Non-Custom</li> <li>Wheelchairs-Standard Manual Related Accessories and Repairs</li> </ul>



## Locations of Care

### \* Primary Location

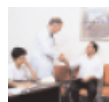
Locations of Care	Available Services
<b>Children's Hospital &amp; Medical Center *</b> 8200 Dodge Street Omaha, NE 68114	<b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Children's Scott Pavillion</li> <li>Children's Specialty Pediatric Center</li> <li>Outpatient Dialysis</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiac Surgery (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>Eating Disorders (Outpatient)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>Gastroenterology (Surgical Services)</li> <li>GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Hazardous Medication Compounding (Inpatient)</li> <li>Hematology/Oncology Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Interventional Radiology (Inpatient, Outpatient, Imaging/Diagnostic Services)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Neurosurgery (Surgical Services)</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Ophthalmology (Surgical Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Pediatric Dentistry (Inpatient - Child/Youth)</li> <li>Pediatric Dermatology (Inpatient - Child/Youth)</li> <li>Pediatric Emergency Medicine (Outpatient - Child/Youth)</li> <li>Pediatric Endocrinology (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Gastroenterology (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric General Surgery (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Nephrology (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Neurosurgery (Inpatient - Child/Youth)</li> <li>Pediatric Ophthalmology (Inpatient - Child/Youth)</li> <li>Pediatric Oral/Maxofacial Surgery (Inpatient - Child/Youth)</li> <li>Pediatric Otolaryngology (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Plastic Surgery (Inpatient - Child/Youth)</li> <li>Pediatric Unit (Inpatient)</li> <li>Pediatric Urology (Inpatient - Child/Youth)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Sleep Laboratory (Sleep Laboratory)</li> <li>Sterile Medication Compounding (Inpatient)</li> <li>Surgical ICU (Intensive Care Unit)</li> <li>Teleradiology (Imaging/Diagnostic Services)</li> <li>Thoracic Surgery (Surgical Services)</li> <li>Transplant Surgery (Surgical Services)</li> </ul>



## Locations of Care

### \* Primary Location

Locations of Care	Available Services
	<ul style="list-style-type: none"> <li>Pediatric Cardiac Catheterization (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Cardiology (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Pediatric Cardiothoracic Surgery (Inpatient - Child/Youth) (Outpatient - Child/Youth)</li> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul>
<b>Children's Outpatient Surgery Center</b> 110 North 175th Street, Suite 1600 Omaha, NE 68118	<b>Services:</b> <ul style="list-style-type: none"> <li>Anesthesia (Outpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul>
<b>Children's Spring Ridge Rehab</b> 17819 Pierce Plaza Omaha, NE 68130	<b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>



## 2022 National Patient Safety Goals

### Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	✓
Improve the safety of using medications.	Reconciling Medication Information	✓
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	✓
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	✓
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	✓

#### Symbol Key

- ✓ The organization has met the National Patient Safety Goal.
- ✗ The organization has not met the National Patient Safety Goal.
- N/A 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."



## 2022 National Patient Safety Goals

### Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	✓
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	✓
Improve the safety of using medications.	Labeling Medications	✓
	Reducing Harm from Anticoagulation Therapy	✓
	Reconciling Medication Information	✓
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	✓
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	✓
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	✓
Universal Protocol	Conducting a Pre-Procedure Verification Process	✓
	Marking the Procedure Site	✓
	Performing a Time-Out	✓

#### Symbol Key

- ✓ The organization has met the National Patient Safety Goal.
- ✗ The organization has not met the National Patient Safety Goal.
- N/A 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."





## National Quality Improvement Goals

Reporting Period: January 2022 - December 2022

### Symbol Key

- This organization achieved the best possible results
- 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.
- 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.
7. The Measure results are based on a sample of patients.
8. The number of months with Measure data is below the reporting requirement.
9. 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.

Compared to other Joint Commission Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	2	2

		Compared to other Joint Commission Accredited Organizations				
		Nationwide		Statewide		
Measure	Explanation	Hospital Results	Top Performer Threshold:	Average Rate:	Top Performer Threshold:	Average Rate:
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.	8 ----	0%	2%	0%	2%

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

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