



# 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, 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 the key area of 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.




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.

Mark R. Chassin, MD, MPP, MPH  
President of the Joint Commission






## Summary of Quality Information

### 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."

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
 Ambulatory Care	Accredited	12/21/2017	10/4/2017	10/4/2017
 Hospital	Accredited	8/22/2015	8/21/2015	8/21/2015

Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
 Primary Care Medical Home - Ambulatory Care	Primary Care Medical Home	12/21/2017	10/4/2017	10/4/2017

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Ambulatory Care	<b>2017 National Patient Safety Goals</b>		 *
Hospital	<b>2015 National Patient Safety Goals</b>		 *
<b>National Quality Improvement Goals:</b>			
Reporting Period: Apr 2016 - Mar 2017	Immunization	 <sup>2</sup>	 <sup>2</sup>
	Perinatal Care	 <sup>2</sup>	 <sup>2</sup>
	Substance Use	 <sup>2</sup>	 <sup>2</sup>
	Tobacco Treatment	 <sup>2</sup>	 <sup>2</sup>



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



# Locations of Care




## \* Primary Location

Locations of Care	Available Services
<b>366 MDG Physical Therapy Clinic</b> 385 Aardvark Ave, Bldg 2371 Mountain Home AFB, ID 83648	<b>Services:</b> <ul style="list-style-type: none"> <li>Other Medical/Dental Services (Outpatient)</li> <li>Physical Medicine and Rehabilitation (Outpatient)</li> </ul>
<b>366th Medical Group (ACC) *</b> 90 Hope Dr, Bldg 6000 Mountain Home AFB, ID 83648-5300	<b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>Primary Care Medical Home - Ambulatory Care</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Allergy (Outpatient)</li> <li>Computed Tomography (CT) (Outpatient)</li> <li>Dentistry (Outpatient)</li> <li>Diagnostic Imaging (Outpatient)</li> <li>Family Practice (Outpatient)</li> <li>Gynecology (Outpatient)</li> <li>Mammography (Outpatient)</li> <li>Optometry/Eye Care (Outpatient)</li> <li>Pediatric Medicine (Outpatient)</li> <li>Pharmacy/Dispensary, General (Outpatient)</li> <li>X-ray (Outpatient)</li> </ul>













## 2017 National Patient Safety Goals

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### Ambulatory Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
	Eliminating Transfusion Errors	
Improve the safety of using medications.	Labeling Medications	
	Reducing Harm from Anticoagulation Therapy	
	Reconciling Medication Information	
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	
	Preventing Surgical Site Infections	
Universal Protocol	Conducting a Pre-Procedure Verification Process	
	Marking the Procedure Site	
	Performing a Time-Out	



















## 2015 National Patient Safety Goals

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### Hospital






Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
	Eliminating Transfusion Errors	
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	
Use Alarms Safely	Use Alarms Safely on Medical Equipment	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
	Preventing Multi-Drug Resistant Organism Infections	
	Preventing Central-Line Associated Blood Stream Infections	
	Preventing Surgical Site Infections	
	Preventing Catheter-Associated Urinary Tract Infection	
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	



## National Quality Improvement Goals

Reporting Period: April 2016 - March 2017



### Symbol Key

-  This organization achieved the best possible results
-  This organization's performance is above the target range/value.
-  This organization's performance is similar to the target range/value.
-  This organization's performance is below 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.

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.	 2	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation					
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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.	 82% of 71 eligible Patients	100%	94%	99%	93%



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\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)

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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

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	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.	 0% of 5 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.	 78% of 107 eligible Patients	74%	53%	84%	66%



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Compared to other Joint Commission Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Substance Use	This category of evidence based measures assesses the overall quality of care provided for Substance Abuse	 2	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation					
		Nationwide		Statewide		
		Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Alcohol Use Screening	The number of patients who were asked about unhealthy use of alcohol within the first three days of admission to the hospital.	 84% of 32 eligible Patients	100%	89%	---- <sup>3</sup>	---- <sup>3</sup>



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Compared to other Joint Commission Accredited Organizations

Measure Area	Explanation	Nationwide	Statewide
Tobacco Treatment	This category of evidence based measures assesses the overall quality of care provided for tobacco use	 2	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	Average Rate:
Tobacco Use Screening	The number of patients who were asked about tobacco use within the first three days of admission to the hospital.	 94% of 80 eligible Patients	100%	98%	---- <sup>3</sup>	---- <sup>3</sup>



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