

# 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

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **Summary of Quality Information**

S	vm	bol	Key
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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	v Last On-Site Survey Date
📀 Home Care	Accredited	11/6/2014	11/5/2014	11/5/2014
🥝 Hospital	Accredited	11/8/2014	11/7/2014	12/22/2014
olimitation States and	Accredited	12/11/2015	12/10/2015	12/10/2015

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

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

Banner University Medical Center-Tucson

1501 N. Campbell Avenue, Tucson, AZ. 85724

Hospital

### Certification programs recognized by the Centers for Medicare and Medicaid Services (CMS) Ventricular Assist Device

<b>Advanced Certification</b>	<b>Certification Decision</b>	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	<b>Review Date</b>
Primary Stroke Center	Certification	5/27/2017	5/26/2017	5/26/2017
oVentricular Assist Device	Certification	4/19/2017	4/18/2017	4/18/2017

#### **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**

2014 Hospital Magnet Award
2012 Gold Plus Get With The Guidelines - Stroke
2010 Silver - The Medal of Honor for Organ Donation

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **Summary of Quality Information**

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	2014National Patient Safety Goals	${\mathfrak O}$	<b>∞</b> *
Hospital	2014National Patient Safety Goals	Ø	<b>*</b>
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	<b>(10)</b> <sup>2</sup>	<b>1</b>
Jan 2016 - Dec 2016	Immunization	<b>№0</b> <sup>2</sup>	2 <sup>2</sup>
	Perinatal Care	<b>№0</b> <sup>2</sup>	2 <sup>2</sup>
	Tobacco Treatment	2 <sup>2</sup>	2 <sup>2</sup>
	Venous Thromboembolism (VTE)	2 <sup>2</sup>	
Laboratory	2015National Patient Safety Goals	${igodot}$	<b>∞</b> *

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## **Locations of Care**

#### \* Primary Location Locations of Care Available Services Banner University Medical Center - Surgical Specialist DBA: Banner University Medical Center - Surgical Specialists 1501 N. Campbell Avenue Suite 4400 Tucson, AZ 85724

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## **Locations of Care**

#### \* Primary Location

* Primary Location	Association Complexes
Locations of Care	Available Services
Banner University Medical Center-Tucson * DBA: Banner University Medical Center-Tucson 1501 N. Campbell Avenue Tucson, AZ 85724	<ul> <li>Joint Commission Advanced Certification Programs:</li> <li>Primary Stroke Center</li> <li>Ventricular Assist Device</li> <li>Other Clinics/Practices located at this site: <ul> <li>Banner-University Medical Center Tucson Medicine Multispecia</li> <li>Banner-University Medical Center Tucson Pulmonary Specialist</li> <li>Banner-University Medical Center Tucson Surgical specialists</li> <li>Banner-University Medical Center Tucson Surgical specialists</li> </ul> </li> <li>Services:</li> </ul>
	<ul> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiotoracic Surgery (Surgical Services)</li> <li>Coronary Care Unit (Inpatient)</li> <li>Dialysis Unit (Inpatient)</li> <li>Durable Medical Equipment</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>External Infusion Pumps</li> <li>Gastroenterology (Surgical Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gl or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient Unit (Inpatient)</li> <li>Inpatient 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 /Surgical Unit (Inpatient)</li> </ul>

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **Locations of Care**

Locations of Care	Available Services
Banner University	
Medical	Services:
Center-Tucson-Multispe	
cialty	Outpatient Clinics (Outpatient)
1501 N. Campbell Avenue	
- 6 OPC	
Tucson, AZ 85724	
Banner University	
Medical	Services:
Center-Tucson-Surgical	
Specialists	<ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
-	
1501 N. Campbell Avenue Suite 5400	
Tucson, AZ 85724	
Banner University	G
Medical Ctr-Tucson-	Services:
Pulmonary Specialists	<ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
1501 N. Campbell Avenue	
- 2 OPC	
Tucson, AZ 85724	
Banner-UMC Tucson	
University of Arizona	Services:
Cancer Center	<ul> <li>Administration of High Risk Medications (Outpatient)</li> </ul>
DBA: Banner-UMC	General Laboratory Tests
Tucson University of	Outpatient Clinics (Outpatient)
Arizona Cancer Center	
1891 West Orange Grove	
Road BLDG 1, BLDG 2	
Tucson, AZ 85704	
Banner-University	
Medical Center Green	Services:
Valley	General Laboratory Tests
DBA: Banner-University	Outpatient Clinics (Outpatient)
Medical Center Green	
Valley	
1141 South La Canada	
Drive	
Green Valley, AZ 85614	
Banner-University	
Medical Center	Services:
Orthopedics and	<ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
Physical th	
DBA: Banner UMC	
Orthopedics and Physical	
therapy	
707 N. Alvernon, Suite	
203 and Suite 205	
Tucson, AZ 85711	
Banner-University	
Medical Center Tucson	Services:
Cancer Center	Administration of Blood Product (Outpatient)
DBA: Banner-University	<ul> <li>Administration of High Risk Medications (Outpatient)</li> </ul>
Medical Center Tucson	<ul> <li>General Laboratory Tests</li> </ul>
Cancer Center	<ul> <li>Outpatient Clinics (Outpatient)</li> </ul>
3838 North Campbell	
Avenue	

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **Locations of Care**

* Primary Location	
Locations of Care	Available Services
Banner-University Medical Center Tucson La Cholla Multispeci DBA: Banner- UMC La Cholla Multispeciality Services 6261 N La Cholla Blvd, Suite 131 Tucson, AZ 85704	<ul> <li>Services:</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>
Banner-University Medical Center Tucson Pre-surgery Services DBA: Banner-University Medical Center Tucson Pre-surgery Services 1605 N. Campbell Ave Tucson, AZ 85724	Services: • Outpatient Clinics (Outpatient)
Banner-University Medical Center Tucson Primary Care DBA: Banner-University Medical Center Tucson Primary Care 265 West Ina Road Tucson, AZ 85704	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
Banner-University Medical Center Tucson Primary Care Pediatr DBA: Banner UMC Primary Care Pediatrics 7901 East 22nd Street Tucson, AZ 85710	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
Banner-University Medical Center Tucson- Medical Imaging DBA: Banner-University Medical Center Tucson- Medical Imaging 4291 North Campbell Avenue Tucson, AZ 85719	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **2014 National Patient Safety Goals**

## Home Care

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

### 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.

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **2014 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	$\bigotimes$
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	<u>Ø</u>
Use Alarms Safely	Use Alarms Safely on Medical Equipment	$\bigotimes$
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	$\bigcirc$
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ୍ର 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	$\bigotimes$
	Marking the Procedure Site	$\bigcirc$
	Performing a Time-Out	$\bigotimes$

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## **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

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		Accredited C	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.	@ <sup>2</sup>	@ <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				
		1	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.	213.00 minutes 322 eligible Patients	54.00	126.00	60.16	137.70
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.	2 389.00 minutes 323 eligible Patients	203.00	313.00	246.36	328.42

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DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ

Org ID: 9514



## **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission	
		Accredited 0	Organizations
Measure Area	Explanation	Nationwide	Statewide
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	<b>™</b> <sup>2</sup>	<b>№</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				
		٨	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:		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.	73% of 527 eligible Patients	100%	94%	99%	94%

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### Banner-University Medical Center Tucson Campus

DBA: Banner-University Medical Center Tucson, 1501 North Campbell Avenue, Tucson, AZ



## **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission	
		Accredited C	Organizations
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> <sup>2</sup>	<b>™</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				n
		Nationwide Statewide				wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	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 12 eligible Patients	100%	98%	100%	99%
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.	4% of 47 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.	43% of 270 eligible Patients	75%	53%	66%	46%



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## **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission	
		Accredited C	Organizations
Measure Area	Explanation	Nationwide Statewid	
Tobacco Treatment	This category of evidence based measures assesses the overall quality of care provided for tobacco use	<b>0</b> <sup>2</sup>	<b>⊘</b> <sup>2</sup>

		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:
Tobacco Use Screening	The number of patients who were asked about tobacco use within the first three days of admission to the hospital.	96% of 607 eligible Patients	100%	98%	100%	99%
Tobacco Use Treatment	The number of patients who use tobacco who actually received counseling or medications to help them stop using tobacco.	8% of 136 eligible Patients	68%	35%	50%	17%
Tobacco Use Treatment at Discharge	The number of patients who use tobacco who accepted counseling and/or medications to help them stop using tobacco after they leave the hospital.	0 1% of 103 eligible Patients	33%	11%	10%	4%
Tobacco Use Treatment Provided or Offered	The number of patients who use tobacco who were offered or received counseling or medications to help them stop using tobacco. This measure also includes patients who were offered the counseling and/or medications but refused them.	11% of 136 eligible Patients	99%	70%	92%	50%
Tobacco Use Treatment Provided or Offered at Discharge	The number of patients who use tobacco who were offered or accepted counseling or medications to help them stop using tobacco after they leave the hospital. This measure also includes patients who were offered the counseling and/or medications but refused them.	0% of 103 eligible Patients	94%	49%	92%	35%

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## **National Quality Improvement Goals**

#### Reporting Period: January 2016 - December 2016

		Compared to other Joint Commission		
		Accredited C	Organizations	
Measure Area	Explanation	Nationwide	Statewide	
Venous Thromboembolism (VTE)	This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots.	<b>1 2</b>	<b>○</b> <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Rate:	Top 10% Scored at Least:	Average Rate:
VTE Discharge Instructions	Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions.	94% of 90 eligible Patients	100%	93%	100%	89%

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## **2015 National Patient Safety Goals**

### Laboratory

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
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø

### 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.