

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

C.	m	hal	Vor
D)	<u>у Ш</u>	DOL	Key

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below 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.
- 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.
- The Measure results are based on a sample of patients.
 The number of months with Measure
- 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.

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

Accreditation Programs	Accreditation Decision	Effective	Last Full Survey	Last On-Site
		Date	Date	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
🮯 Laboratory	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

Advanced Certification	Certification Decision	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	Review Date
orimary Stroke Center	Certification	5/19/2015	5/26/2017	5/26/2017
o Ventricular Assist Device	Certification	2/25/2015	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	\oslash	™ *
Hospital	2014National Patient Safety Goals	Ø	*
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department		1
Oct 2015 - Sep 2016	Immunization		1
	Perinatal Care		1
	Tobacco Treatment		№ ²
	Venous Thromboembolism (VTE)	ND ²	
Laboratory	2015National Patient Safety Goals	Ø	*

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

Symbol Key

	~
0	This organization achieved the best possible results.
Ð	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below 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.
- The measure results are temporarily suppressed pending resubmission of updated data.
 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.

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 - Surgical Specialist DBA: Banner University Medical Center - Surgical Specialists 1501 N. Campbell Avenue Suite 4400 Tucson, AZ 85724

© Copyright 2024, The Joint Commission

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



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	 Joint Commission Advanced Certification Programs: Primary Stroke Center Ventricular Assist Device Other Clinics/Practices located at this site: Banner-University Medical Center Tucson Medicine Multispecia Banner-University Medical Center Tucson Pulmonary Specialist Banner-University Medical Center Tucson Surgical specialists Banner-University Medical Center Tucson Surgical specialists Services:
	 Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiotoracic Surgery (Surgical Services) Coronary Care Unit (Inpatient) Dialysis Unit (Inpatient) Durable Medical Equipment Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) External Infusion Pumps Gastroenterology (Surgical Services) Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecological Surgery (Surgical Services) Gynecological Surgery (Surgical Services) Gynecological Surgery (Surgical Services) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical /Surgical Unit (Inpatient)

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	 Outpatient Clinics (Outpatient)
-	
1501 N. Campbell Avenue Suite 5400	
Tucson, AZ 85724	
Banner University	G
Medical Ctr-Tucson-	Services:
Pulmonary Specialists	 Outpatient Clinics (Outpatient)
1501 N. Campbell Avenue	
- 2 OPC	
Tucson, AZ 85724	
Banner-UMC Tucson	
University of Arizona	Services:
Cancer Center	 Administration of High Risk Medications (Outpatient)
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	 Outpatient Clinics (Outpatient)
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	 Administration of High Risk Medications (Outpatient)
Medical Center Tucson	 General Laboratory Tests
Cancer Center	 Outpatient Clinics (Outpatient)
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	 Services: Administration of High Risk Medications (Outpatient) General Laboratory Tests Outpatient Clinics (Outpatient)
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

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



National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

			o other Joint hission
		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.	@ ²	@ ²

		Compared to other Joint Commission Accredited Organizations				
		N	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.	208.00 minutes 391 eligible Patients	53.00	124.00	74.33	138.11
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.	401.00 minutes 392 eligible Patients	202.00	311.00	232.83	328.14

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

This information can also be viewed at www.hospitalcompare.hhs.gov -- Null value or data not displayed.

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

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 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.
- 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.

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

Org ID: 9514



National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

		Compared to other Joint Commission	
		Accredited Organization	
Measure Area	Explanation	Nationwide Statewi	
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	⊘ ²	⊘ ²

		Compared to other Joint Commission Accredited Organizations				
		Ν	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	0	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.	68% of 532 eligible Patients	100%	94%	99%	94%

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

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

-- Null value or data not displayed.

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.
 This organization's performance is below the target range/value.
 Not displayed

Footnote Key

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 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.
- 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.
- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
 There were no eligible rations that me
- 1. There were no eligible patients that met the denominator criteria.

Symbol Key

ossible results

ot displayed

Ð

 \oslash

e

ND

1.

2.

3.

4.

5.

8.

9.

11

valid.

sample of patients.

updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

reported.

overall result.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

above the target range/value. This organization's performance is

below the target range/value.

Footnote Key

The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

There were no eligible patients that met

the denominator criteria.

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

The measure meets the Privacy Disclosure Threshold rule.

Banner-University Medical Center Tucson Campus

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



National Quality Improvement Goals

Reporting Period: October 2015 - September 2016

		Compared to other Joint Commission		
		Accredited C	Organizations	
Measure Area	Explanation	Nationwide Statewig		
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	N Hospital Results	Top 10% Scored at Least:	Average Rate:	State Top 10% Scored at Least:	wide 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 13 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.	5% of 42 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.	47% of 270 eligible Patients	75%	53%	66%	47%



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

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

Null value or data not displayed. ____

Symbol Key

ossible results

lot displayed

reported.

overall result.

0

 \oslash

e

ND

2.

3.

4.

5.

8.

9.

11

valid.

sample of patients.

updated data. **10.** Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

above the target range/value. This organization's performance is

below the target range/value.

Footnote Key

The Measure or Measure Set was not

The Measure Set does not have an

The number of patients is not enough for comparison purposes.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

There were no eligible patients that met

the denominator criteria.

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

The measure meets the Privacy Disclosure Threshold rule.

Banner-University Medical Center Tucson Campus

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



National Quality Improvement Goals

Reporting Period: October 2015 - September 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	0 ²	0 ²

		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 418 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.	5% of 105 eligible Patients	66%	34%	53%	15%
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.	1% of 80 eligible Patients	33%	11%	9%	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.	6% of 105 eligible Patients	99%	68%	91%	46%
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.	6% of 80 eligible Patients	94%	48%	91%	33%

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

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

---- Null value or data not displayed.

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



National Quality Improvement Goals

Reporting Period: October 2015 - September 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.	™ ²	@ ²

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	Nationwide Top 10% Scored	Average	State Top 10% Scored	
		Results	at Least:		at Least:	Nate.
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 96 eligible Patients	100%	93%	100%	89%

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

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

--- Null value or data not displayed.

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.
 This organization's performance is below the target range/value.
 Not displayed

Footnote Key

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
- The organization scored above 90% but was below most other organizations.
 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.
- Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
 There were no eligible patients that med
- 1. There were no eligible patients that met the denominator criteria.

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



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.