



# 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.

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



## Summary of Quality Information

### Symbol Key

- This organization achieved the best possible results.
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| Accreditation Programs | Accreditation Decision | Effective Date | Last Full Survey Date | 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               |
| 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 Programs | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|---------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Primary Stroke Center           | Certification          | 5/19/2015      | 5/26/2017             | 5/26/2017                |
| Ventricular 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



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|  |   | Compared to other Joint Commission Accredited Organizations |              |
|--|---|---|--------------|
|  |   | Nationwide  | Statewide    |
| Home Care                                  | <b>2014 National Patient Safety Goals</b> |   | *            |
| Hospital                                   | <b>2014 National Patient Safety Goals</b> |   | *            |
| <b>National Quality Improvement Goals:</b> |   |   |              |
| Reporting Period:<br>Oct 2015 - Sep 2016   | Emergency Department                      | <sup>2</sup>  | <sup>2</sup> |
|  | Immunization                              | <sup>2</sup>  | <sup>2</sup> |
|  | Perinatal Care                            | <sup>2</sup>  | <sup>2</sup> |
|  | Tobacco Treatment                         | <sup>2</sup>  | <sup>2</sup> |
|  | Venous Thromboembolism (VTE)              | <sup>2</sup>  | <sup>2</sup> |
| Laboratory                                 | <b>2015 National Patient Safety Goals</b> |   | *            |



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## Locations of Care

\* Primary Location

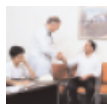
| Locations of Care   | Available Services   |
|---|--|
| <b>Banner University<br/>Medical Center- Surgical<br/>Specialist</b><br>DBA: Banner University<br>Medical Center - Surgical<br>Specialists<br>1501 N. Campbell Avenue<br>Suite 4400<br>Tucson, AZ 85724 | <b>Services:</b> <ul style="list-style-type: none"><li>• Outpatient Clinics (Outpatient)</li></ul> |



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services   |
|---|--|
| <b>Banner University Medical Center-Tucson *</b><br>DBA: Banner University Medical Center-Tucson<br>1501 N. Campbell Avenue<br>Tucson, AZ 85724 | <b>Joint Commission Advanced Certification Programs:</b> <ul style="list-style-type: none"> <li>Primary Stroke Center</li> <li>Ventricular Assist Device</li> </ul> <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Banner-University Medical Center Tucson Medicine Multispecialty</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> <b>Services:</b> <ul style="list-style-type: none"> <li>Brachytherapy (Imaging/Diagnostic Services)</li> <li>Cardiac Catheterization Lab (Surgical Services)</li> <li>Cardiac Surgery (Surgical Services)</li> <li>Cardiothoracic Surgery (Surgical Services)</li> <li>Cardiovascular Unit (Inpatient)</li> <li>Coronary Care Unit (Inpatient)</li> <li>Dialysis Unit (Inpatient)</li> <li>Durable Medical Equipment (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>External Infusion Pumps</li> <li>Gastroenterology (Surgical Services)</li> <li>General Laboratory Tests</li> <li>GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>Gynecological Surgery (Surgical Services)</li> <li>Gynecology (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>Neurosurgery (Surgical Services)</li> <li>Normal Newborn Nursery (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Orthopedic/Spine Unit (Inpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Pediatric Unit (Inpatient)</li> <li>Pharmacy/Dispensary, General Services</li> <li>Plastic Surgery (Surgical Services)</li> <li>Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Radiation Oncology (Imaging/Diagnostic Services)</li> <li>Sleep Laboratory (Sleep Laboratory)</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> <li>Ultrasound (Imaging/Diagnostic Services)</li> <li>Urology (Surgical Services)</li> <li>Vascular Surgery (Surgical Services)</li> </ul> |



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services   |
|---|--|
| <b>Banner University Medical Center-Tucson-Multispecialty</b><br>1501 N. Campbell Avenue<br>- 6 OPC<br>Tucson, AZ 85724   | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner University Medical Center-Tucson-Surgical Specialists</b><br>1501 N. Campbell Avenue<br>Suite 5400<br>Tucson, AZ 85724  | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner University Medical Ctr-Tucson-Pulmonary Specialists</b><br>1501 N. Campbell Avenue<br>- 2 OPC<br>Tucson, AZ 85724   | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-UMC Tucson University of Arizona Cancer Center</b><br>DBA: Banner-UMC<br>Tucson University of Arizona Cancer Center<br>1891 West Orange Grove Road BLDG 1, BLDG 2<br>Tucson, AZ 85704 | <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Green Valley</b><br>DBA: Banner-University Medical Center Green Valley<br>1141 South La Canada Drive<br>Green Valley, AZ 85614                              | <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Orthopedics and Physical Therapy</b><br>DBA: Banner UMC<br>Orthopedics and Physical therapy<br>707 N. Alvernon, Suite 203 and Suite 205<br>Tucson, AZ 85711 | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Tucson Cancer Center</b><br>DBA: Banner-University Medical Center Tucson Cancer Center<br>3838 North Campbell Avenue<br>Tucson, AZ 85719                    | <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of Blood Product (Outpatient)</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 Campus

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

Org ID: 9514



## Locations of Care




### \* Primary Location

| Locations of Care  | Available Services   |
|--|--|
| <b>Banner-University Medical Center Tucson La Cholla Multispecialty Services</b><br>DBA: Banner- UMC La Cholla Multispecialty Services<br>6261 N La Cholla Blvd, Suite 131<br>Tucson, AZ 85704 | <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of High Risk Medications (Outpatient)</li> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul> |
| <b>Banner-University Medical Center Tucson Pre-surgery Services</b><br>DBA: Banner-University Medical Center Tucson Pre-surgery Services<br>1605 N. Campbell Ave<br>Tucson, AZ 85724           | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Tucson Primary Care</b><br>DBA: Banner-University Medical Center Tucson Primary Care<br>265 West Ina Road<br>Tucson, AZ 85704                              | <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Tucson Primary Care Pediatric</b><br>DBA: Banner UMC Primary Care Pediatrics<br>7901 East 22nd Street<br>Tucson, AZ 85710                                  | <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Banner-University Medical Center Tucson-Medical Imaging</b><br>DBA: Banner-University Medical Center Tucson-Medical Imaging<br>4291 North Campbell Avenue<br>Tucson, AZ 85719               | <b>Services:</b> <ul style="list-style-type: none"> <li>General Laboratory Tests</li> <li>Outpatient Clinics (Outpatient)</li> </ul>   |








## 2014 National Patient Safety Goals

### Symbol Key

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### 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 |  |



















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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: October 2015 - September 2016



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Compared to other Joint Commission  
Accredited 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

| Measure  | Explanation   | Hospital Results  | Compared to other Joint Commission Accredited Organizations |                  |                         |                  |
|--|---|---|---|------------------|-------------------------|------------------|
|  |   |   | Nationwide  |                  | Statewide               |                  |
|  |   |   | Top 10% Scored at Most:                                     | Weighted Median: | Top 10% Scored at Most: | Weighted 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. |  <sup>2</sup><br>208.00 minutes<br>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.  |  <sup>2</sup><br>401.00 minutes<br>392 eligible Patients | 202.00  | 311.00           | 232.83                  | 328.14           |



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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   | 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: |
| 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. | <br>68% of 532 eligible Patients | 100%                                | 94%           | 99%                                | 94%           |



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|----------------|--|------------|-----------|
| 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   | Hospital<br>Results                    | Nationwide                     |                  | Statewide                      |                  |
|-------------------------------|---|--|--------------------------------|------------------|--------------------------------|------------------|
|                               |   |  | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Top 10%<br>Scored<br>at Least: | Average<br>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.   | <br>100% of<br>13 eligible<br>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. 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. | <br>5% of<br>42 eligible<br>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.   | <br>47% of<br>270 eligible<br>Patients | 75%                            | 53%              | 66%                            | 47%              |

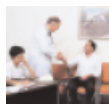


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Commission

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 |                          |               |                          |               |
|--|---|---|--------------------------|---------------|--------------------------|---------------|
|  |   | Nationwide  |                          | Statewide     |                          |               |
|  |   | 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.   | 8<br>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.   | 8<br>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.  | 8<br>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.                               | 8<br>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. | 8<br>6% of 80 eligible Patients                             | 94%                      | 48%           | 91%                      | 33%           |



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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 |
|------------------------------|---|------------|-----------|
| 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 Results                | Statewide                |               |                          |               |
|----------------------------|--|---------------------------------|--------------------------|---------------|--------------------------|---------------|
|                            |  |                                 | Top 10% Scored at Least: | Average 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. | <br>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](http://www.hospitalcompare.hhs.gov)




---- Null value or data not displayed.

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






## 2015 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.

### Laboratory

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

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