

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

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	7 m h	Key
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Footnote Key

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- The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
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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	Last On-Site Survey Date
🎯 Home Care	Accredited	9/21/2017	9/20/2017	9/20/2017
🎯 Hospital	Accredited	9/23/2017	9/22/2017	11/6/2017
olimitation States Contraction States Contractico S	Accredited	1/6/2018	1/5/2018	1/5/2018

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	Last On-Site
Programs		Date	Date	Review Date
🥝 Primary Stroke Center	Certification	5/27/2017	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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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations	
		Nationwide Statewide	
Home Care	2017National Patient Safety Goals	Ø	™ *
Hospital	2017National Patient Safety Goals	Ø	№ *
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(10) ²	1
Jan 2017 - Dec 2017	Immunization		NO ²
	Perinatal Care	ND ²	№ ²
Laboratory	2018National Patient Safety Goals	Ø	*

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Locations of Care

* Primary Location

Locations of Care	Availabl	e Services
Banner University Medical Center-Tucson * DBA: Banner University Medical Center-Tucson 1501 N. Campbell Avenue Tucson, AZ 85724	Joint Commission Advanced Primary Stroke Center Ventricular Assist Device Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Coronary Care Unit (Inpatient) Cardiovascular Unit (Inpatient) Castroes) EacleKG/EMG Lab (Imaging/Diagnostic Services) External Infusion Pump Supplies External Infusion Pumps Gastroenterology (Surgical Services) General Laboratory Tests Gl or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hematology/Oncology Unit (Inpatient) Infusion Pharmacy Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient)	

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Locations of Care

* Primary Location

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Locations of Care	Available Services
Banner-UMC Tucson University of Arizona Cancer Center DBA: Banner-UMC Tucson University of Arizona Cancer Center 1891 West Orange Grove Road BLDG 1, BLDG 2 Tucson, AZ 85704	 Services: Administration of High Risk Medications (Outpatient) General Laboratory Tests Outpatient Clinics (Outpatient)
Banner-University	
Medical Center Green Valley DBA: Banner-University Medical Center Green Valley 1141 South La Canada Drive Green Valley, AZ, 85614	Services: • General Laboratory Tests • Outpatient Clinics (Outpatient)
Green Valley, AZ 85614 Banner-University	
Medical Center Orthopedics and Physical th DBA: Banner UMC Orthopedics and Physical therapy 707 N. Alvernon, Suite 203 and Suite 205 Tucson, AZ 85711	Services: • Outpatient Clinics (Outpatient)
Banner-University Medical Center Tucson Cancer Center DBA: Banner-University Medical Center Tucson Cancer Center 3838 North Campbell Avenue Tucson, AZ 85719	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • General Laboratory Tests • 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)

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Locations of Care

* Primary Location Locations of Care Available Services **Banner-University Medical Center Tucson-**Services: **Medical Imaging** • General Laboratory Tests DBA: Banner-University • Outpatient Clinics (Outpatient) Medical Center Tucson-Medical Imaging 4291 North Campbell Avenue Tucson, AZ 85719 **Banner-University** Medical CenterTucson Services: **Campus-Banner Univers** • Outpatient Clinics (Outpatient) DBA: Banner University Medicine North 3838 North Campbell Avenue, Building 2 Tucson, AZ 85719

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



2017 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.
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2017 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	\bigotimes
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	\bigotimes
	Preventing Central-Line Associated Blood Stream Infections	<u>ଷ</u> ଭ ଭ ଭ
	Preventing Surgical Site Infections	\bigotimes
	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	\bigotimes
	Performing a Time-Out	\bigcirc

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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

			o other Joint hission	
			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.	@ ²	@ ²	

Compared to other Joint Commission Accredited Organizations			'n			
		١	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.	2 144.00 minutes 559 eligible Patients	55.00	132.00	57.93	127.84
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.	2 420.00 minutes 559 eligible Patients	204.00	317.00	233.80	314.31

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This information can also be viewed at www.hospitalcompare.hhs.gov
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Org ID: 9514



National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

		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 ²

		Compared to other Joint Commission Accredited Organizations			n	
		Nationwide		Statewide		
Measure	Explanation	Hospital	Top 10%	Average	Top 10%	Average
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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.	87% of 560 eligible Patients	100%	94%	99%	95%

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National Quality Improvement Goals

Reporting Period: January 2017 - December 2017

		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.	2	○ ²	

		Compared to other Joint Commission Accredited Organizations				n
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 11 eligible Patients	100%	98%	100%	98%
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 47 eligible Patients	0%	2%	0%	1%
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 262 eligible Patients	73%	52%	74%	45%



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2018 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

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