

# 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, 1625 North Campbell, Tucson, AZ



# **Summary of Quality Information**

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	V 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	1/18/2019

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

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

Banner University Medical Center-Tucson

1625 N. Campbell Avenue, Tucson, AZ. 85719

Hospital

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

Advanced Certification	<b>Certification Decision</b>	Effective	Last Full Review	v Last On-Site
Programs		Date	Date	<b>Review Date</b>
Advanced Comprehensive Stroke Center	Certification	10/10/2019	8/21/2019	8/21/2019
🥝 Primary Stroke Center	Certification	5/27/2017	5/26/2017	5/26/2017
🥝 Ventricular Assist Device	Certification	7/12/2019	7/11/2019	7/11/2019

#### **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

#### Symbol 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.
Э	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.

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

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Compared to other Joint Commission Accredited



# **Summary of Quality Information**

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		Organizations		
		Nationwide	Statewide	
Home Care	2017National Patient Safety Goals	${igodot}$	<b>*</b>	
Hospital	2019National Patient Safety Goals	Ø	*	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	<b>(10)</b> <sup>2</sup>		
Apr 2018 - Mar 2019	Perinatal Care	<b>()</b> <sup>2</sup>	<b>1</b>	

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

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# **Locations of Care**

#### \* Primary Location

Available	e Services
Joint Commission Advanced Advanced Comprehensive Stroke Primary Stroke Center Ventricular Assist Device Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiotoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Durable Medical Equipment Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) External Infusion Pump Supplies External Infusion Pumps Gastroenterology (Surgical Services) GI or Endoscopy Lab (Imaging/Diagnostic Services) GI or Endoscopy Lab (Imaging/Diagnostic Services) GJ or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hematology/Oncology Unit (Inpatient)	Certification Programs:
	Joint Commission Advanced Advanced Comprehensive Stroke Primary Stroke Center Ventricular Assist Device Services: Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiotoracular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Durable Medical Equipment Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) External Infusion Pumps Gastroenterology (Surgical Services) GI or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient)

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# **Locations of Care**

#### \* Primary Location **Available Services** Locations of Care **Banner-UMC Tucson University of Arizona** Services: **Cancer Center** Administration of High Risk Medications (Outpatient) DBA: Banner-UMC • Outpatient Clinics (Outpatient) Tucson University of Arizona Cancer Center 1891 West Orange Grove Road BLDG 1, BLDG 2 Tucson, AZ 85704 **Banner-University Medical Center Green** Services: Valley • Outpatient Clinics (Outpatient) DBA: Banner-University Medical Center Green Valley 1141 South La Canada Drive Green Valley, AZ 85614 Banner-University **Medical Center** Services: Orthopedics • Outpatient Clinics (Outpatient) DBA: Banner UMC Orthopedics 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 • Hazardous Medication Compounding (Outpatient) **Cancer Center** Outpatient Clinics (Outpatient) 3838 North Campbell Avenue Tucson, AZ 85719 **Banner-University** Medical Center Tucson Services: **Primary Care** Outpatient Clinics (Outpatient) DBA: Banner-University Medical Center Tucson **Primary Care** 265 West Ina Road Tucson, AZ 85704 **Banner-University Medical Center Tucson** Services: **Primary Care Pediatr** • Outpatient Clinics (Outpatient) DBA: Banner UMC **Primary Care Pediatrics** 7901 East 22nd Street Tucson, AZ 85710





# **Locations of Care**

Locations of Care	Available Services
Banner-University Medical Center Tucson- Medical Imaging DBA: Banner-University Medical Center Tucson- Medical Imaging 4291 North Campbell Avenue Tucson, AZ 85719	Services: • Outpatient Clinics (Outpatient)
Banner-University Medical CenterTucson Campus-Banner Univers DBA: Banner University Medicine North 3838 North Campbell Avenue, Building 2 Tucson, AZ 85719	Services: <ul> <li>Outpatient Clinics (Outpatient)</li> </ul>

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# **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.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

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# **2019 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	$\bigcirc$
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	$\bigcirc$
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 Infections that are difficult to treat	$\bigcirc$
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ୍ର ତ
	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	$\bigcirc$
	Performing a Time-Out	$\bigcirc$

### Symbol Key

The organization has met the National Patient Safety Goal. The organization has not met the e National Patient Safety Goal. The Goal is not applicable for this organization.

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Org ID: 9514

pared to other Joint

edited Organizations

Statewide

**№**<sup>2</sup>

Top 10%

Scored

at Most:

61.30

wide

Weighte

d

Median:

142.47

Commission

de

2

Compared to other Joint Commission

Accredited Organizations

Weighte

d

Median:

136.00

Nationwide

Top 10%

Scored

at Most:

55.00

Hospital

Results

156.00 minutes

648 eligible Patients



# **National Quality Improvement Goals**

Symbol Key				
This organization achieved the best possible results This organization's performance is		Reporting F	Period: April 2018 - March 2019	
above the target range/value.				
This organization's performance is similar to the target range/value.				Comp
This organization's performance is below the target range/value.				Accree
Not displayed	Mea	asure Area	Explanation	Nationwide
		ergency partment	This category of evidence based measures assesses the time patients remain in the hospital Emergency	<b>(</b> ) <sup>2</sup>

#### Footnote Key

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unit.	

Explanation

The amount of time (in minutes) it

takes from the time the physician

decides to admit a patient into the

Department until the patient actually

leaves the ED to go to the inpatient

hospital from the Emergency

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

Department prior to inpatient admission.

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

unit

Null value or data not displayed.

Measure

Admit Decision Time to ED

Patients

Departure Time for Admitted

Symbol Key

ossible results

lot displayed

reported.

overall result.

Ø

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

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The measure results are temporarily suppressed pending resubmission of

There were no eligible patients that met

the denominator criteria.

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The measure meets the Privacy Disclosure Threshold rule.

#### Banner-University Medical Center Tucson Campus

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# **National Quality Improvement Goals**

	Reporting Period: April 2018 - March 2019									
Compared to othe Commission										
			Accredited Organizations							
Meas	sure Area	Explanation	Nationwide	Statewide						
Perir	natal 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				
	En la castina	Nationwide			Statewide Top 10% Average	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Scored at Least:	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 14 eligible Patients	100%	98%	100%	100%
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 39 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.	43% of 242 eligible Patients	73%	52%	56%	44%



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Null value or data not displayed. \_\_\_\_