

DBA: Banner-University Medical Center Tucson, 1625 North Campbell, Tucson, AZ

Org ID: 9514

Accreditation Quality Report





Version: 5 Date: 7/9/2021

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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.

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Summary of Quality Information

1	Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
	Hospital	Accredited	9/23/2017	4/30/2021	7/8/2021

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

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	v Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	10/10/2019	8/21/2019	8/21/2019
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 Award2012 Gold Plus Get With The Guidelines - Stroke2010 Silver - The Medal of Honor for Organ Donation

	Compared to other Joint Com Organization			
		Nationwide	Statewide	
Hospital	2019National Patient Safety Goals	Ø	N/A *	

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

Symbol Key

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Footnote Key

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- 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.
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- 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 met the denominator criteria.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide." Org ID: 9514

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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	№ 2	ND ²	
Jan 2019 - Dec 2019	Perinatal Care	№ 2	№ 2	

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Locations of Care

* Primary Location

Locations of Care

Banner University

Medical Center-Tucson * DBA: Banner University Medical Center-Tucson 1625 N. Campbell Avenue Tucson, AZ 85719

Available Services

Joint Commission Advanced Certification Programs:

- Advanced Comprehensive 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)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Neuro/Spine ICU (Intensive Care Unit)
- Neuro/Spine Unit (Inpatient)

- Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)
- Transplant Surgery (Surgical Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

* Primary Location	
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) • 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: • Outpatient Clinics (Outpatient)
Banner-University Medical Center Orthopedics DBA: Banner UMC Orthopedics 707 N. Alvernon, 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) Hazardous Medication Compounding (Outpatient) 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: • 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: • Outpatient Clinics (Outpatient)

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Locations of Care

* Primary Location	
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: • Outpatient Clinics (Outpatient)

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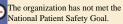




2019 National Patient Safety Goals

Symbol Key

The organization has met the National Patient Safety Goal.



The Goal is not applicable for this organization.

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
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	Ø
	Reconciling Medication Information	Ø
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	Ø
	Preventing Central-Line Associated Blood Stream Infections	0000
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Commission					
Accredited C	Accredited Organizations				
Nationwide	Statewide				
O 2	O 2				

Org ID: 9514

		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				
		1	Nationwide		Statewide	
Measure	Explanation	Hospital	Top 10%	Weighte	Top 10%	Weighte
		Results	Scored	d	Scored	d
			at Most:	Median:	at Most:	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.	179.00 minutes 663 eligible Patients	55.00	133.00	67.62	146.60

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National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Compared to other Joint

Org ID: 9514

		Accredited Organizations	
Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	№ 2	№ 2

		Соі	mpared to c			on
		Accredited Organizations Nationwide Statev			wide	
Measure	Explanation	Hospital		Average	Top 10%	
		Results	Scored	Rate:	Scored	Rate:
			at Least:		at Least:	
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 15 eligible Patients	100%	98%	100%	99%
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	⊕	12%	25%	10%	22%
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 49 eligible Pattents	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.	37% of 268 eligible Patients	73%	51%	55%	44%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	2686.00 minutes 1154 eligible Patients				

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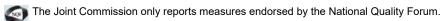
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Compared to other Joint Commission
Accredited Organizations

		Accredited 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				
		Nationwide		Statewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are	3899.00 minutes				
	expected to do well and routinely go home with the mother.	1154 eligible Patients				
Unexpected Complications in Term Newborns per 1000	The severe rate equals the number of patients with severe complications.	10				
livebirths - Severe Rate		1213.00 minutes 1154 eligible				



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