



2008 Quality Report User Guide



A Guide to using the
Joint Commission
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 a strong commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is one important way to help you determine whether a health care organization can meet your needs. Discuss this report with your doctor and other health care professionals before making a care decision. The Quality Report uses checks, pluses and minuses to help you compare a health care organization with similar accredited organizations. The key area covered in this report is:

- National Patient Safety Goals – guidelines that focus on the highest priority safety and quality issues such as preventing surgery on the wrong side of the body and reducing medication errors.

This guide contains detailed information and explanations about each section of the Quality Report.

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 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, M.D.
President of The Joint Commission



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What is Accreditation?

Who is the Joint Commission?

The Joint Commission is the leading health care accrediting body in the world, evaluating and accrediting nearly 16,000 health care organizations in the United States. These include more than 8,500 of the nation's hospitals and home care providers.

For more than five decades, The Joint Commission has developed state-of-the-art standards and evaluated the compliance of health care organizations with these expectations. The information gathered in the accreditation process is not only valuable to the health care organizations themselves, but to everyone having a stake in the health care delivery system.

How does a health care organization become accredited?

Joint Commission health care professionals visit the organization, interview staff and patients, and view records and procedures. The performance of the organization is judged against The Joint Commission's standards and related expectations. The Ambulatory Care Facility must meet or exceed these stringent Joint Commission performance requirements in order to achieve or maintain accreditation. The performance of the health care organization is then monitored on an on-going basis through several mechanisms.

What care delivery issues are addressed by accreditation?

The Joint Commission's standards set forth performance expectations that address the safety and quality of patient care—that is, areas in which good performance is likely to lead to good outcomes for patients. The standards specifically cover issues that are important to consumers such as:

- Administration of medication
- Evaluation and appropriate treatment of pain
- Sufficient staffing and staff training
- Infection control

How should I use this report?

This report may be used in deciding where to go for your healthcare needs. It contains important information about the quality of care provided by this organization. However this report should be used as only one source of information in evaluating whether a given health care organization is appropriate for your healthcare needs. You should discuss this information with your doctor or other healthcare professional before deciding where to go to receive care for yourself or you loved ones.

When choosing any health care facility, remember to look for the Joint Commission's Gold Seal of Approval™.





About the Summary of Quality Information

The Summary of Quality Information provides an overview of all of the following quality of care components included in the Accreditation Quality Report.

Special Quality Awards

Special Quality Awards are national recognition of achievement by a health care organization that goes above and beyond accreditation. The awards must be national in scope, relate to the delivery of high quality health care, and be awarded by an organization that is an established and credible advocate for improvements in health care. Special Quality Awards are also known as Merit Badges.

Awards currently recognized include the Ernest Amory Codman Award, the Magnet Award, the John M. Eisenberg Award for Patient Safety and Quality, the Franklin Award of Distinction, Hospital Quality Alliance Participant, the Malcolm Baldrige National Quality Award, the American Hospital Quest for Quality Award, the Cheers Award, the American Health Care Association (AHCA) / National Center for Assisted Living (NCAL) Quality Award, the OPTIMA Award, NCCBH Awards of Excellence, Negley Awards for Excellence in Risk Management, the Joint Commission and the National Committee for Quality Assurance (NCQA) the Partnership for Human Research Protection (PHRP) Accreditation, Medal of Honor for Organ Donation, the American Heart Association's "Get with the Guidelines", American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP), Department of Veterans Affairs National Surgical Quality Improvement Program (VA NSQIP), Patient-Centered Designation Program, ACS Bariatric Surgery Center Network Accreditation Program.

Accreditation Decision

The conclusion reached about a health care organization's accreditation status after evaluation of the organization's performance against state-of-the-art consensus standards. See table at the left for a list of possible accreditation decisions.

Accredited Sites and Services

A health care organization may provide multiple care services at a number of locations. The Accreditation Quality Report provides a list of the services that the Joint Commission reviewed for accreditation purposes.

National Patient Safety Goals

National Patient Safety Goals are priority safety recommendations selected by an expert panel. National Patient Safety Goals became part of the accreditation process in 2003.

Accreditation Decisions

Accredited – This decision means an organization is compliant with all standards.

Provisional Accreditation – All Requirements for Improvement have not yet been successfully resolved.

Conditional Accreditation – This decision means that the count of not compliant standards was below the level of performance expected of an organization at the time of a survey.

Preliminary Denial of Accreditation – This decision means that the count of not compliant standards was significantly below the level of performance expected of an organization at the time of a survey.

Denial of Accreditation – Accreditation has been denied to the organization.

Preliminary Accreditation – This decision means the organization has been found in compliance with selected standards that normally apply to a new health care organization.



Summary of Quality Information

The Summary of Quality Information provides a high level overview of important quality of care indicators at a hospital. These quality of care indicators are important factors to take into consideration when selecting a health care organization.

Special Quality Awards
 2005 Hospital Codman Award
 2005 Hospital Quality Alliance Participant

Special Quality Awards
 Awards given the organization for attaining special distinctions in the provision of safe, high quality patient care.

Accreditation Decision
 Accredited.

Accreditation Decision and Decision Effective Date
 The hospital's Joint Commission accreditation decision and the date it was awarded.

Decision Effective Date
 January 15, 2004

Accredited Programs

- Hospital
- Laboratory
- Home Care

Accredited Programs
 Identifies the health care programs and services that are accredited by the Joint Commission.

Other Accredited Programs/Services

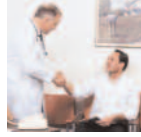
- Laboratory (accredited by the College of American Pathologists)

Other Accredited Programs/Services
 Identifies services accredited by another accrediting body the Joint Commission has determined to have standards and policies comparable to the Joint Commission's.

National Patient Safety Goals
 The overall result at a national level of the hospital's achievement of applicable National Patient Safety Goals.

	Compared to other Joint Commission Accredited Organizations	
	Nationwide	Statewide
Achieving National Patient Safety Goals:	✓	N/A*

* State Results are not Calculated for the National Patient Safety Goals.



Sites and Services

What are sites and services?

The Accreditation Quality Report contains a listing of the site and service information collected as part of the accreditation process. The primary location of a health care organization is the main location where it provides health care.

Q. Why are services displayed on the Accreditation Quality Report?

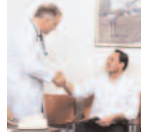
Consumer health care research and focus groups have pointed out that one way health care consumers want to identify potential locations of health care is by the services provided. The Joint Commission has taken steps to support this option as a benefit to our accredited organizations. For example, health care consumers will be able to search for “hospice services” rather than “home care.” The ability to search by accreditation program will still be available.

Q. How are the services determined for an organization?

The services listed on the Accreditation Quality Report come from the data an organization provided on the Application for Accreditation. The Joint Commission then categorizes all of the potential services into “user-friendly” groups to display on the Accreditation Quality Report.

*Primary Location

Locations of Care	Available Services
<p><i>A Sample Health Care Facility*</i> 1199 Sun Valley Road Houston, Texas 48455</p>	<ul style="list-style-type: none"> • Addiction Care (Outpatient) • Blood Donor Center • Cancer Center/Oncology (Inpatient) • Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care Adult/Child/Youth) • EEG/EKG/EMG Lab (Inpatient, Outpatient) • Family Practice (Inpatient, Outpatient) • General Laboratory Tests • Labor & Delivery (Inpatient) • Pediatric Care (Inpatient, Outpatient)
<p><i>A Sample Health Care Facility*</i> 2203 Alamo Road Houston, Texas 48455</p>	<ul style="list-style-type: none"> • Addiction Care (Outpatient) • Audiology (Outpatient) • Blood Donor Center • Cancer Center/Oncology (Inpatient) • Family Practice (Inpatient, Outpatient) • General Laboratory Tests • Hospice Care • Labor & Delivery (Inpatient) • Neonatal Intensive Care (Inpatient) • Rehabilitation (Inpatient, Outpatient) • Sleep Center (Outpatient) • Subacute Care (Inpatient) • Telemetry (Inpatient) • Toxicology • Ultrasound (Inpatient, Outpatient) • Pediatric Care (Inpatient, Outpatient)



About National Patient Safety Goals

National Patient Safety Goals

National Patient Safety Goals are a series of specific actions that accredited organizations are expected to take in order to prevent medical errors.

These actions are designed to help avoid the following:

- patient misidentification,
- miscommunication among caregivers,
- surgery on the wrong body part,
- health care-associated infections,
- medication mix-ups,
- risk of patient harm resulting from falls.

Why are National Patient Safety Goals important?

A panel of national experts have determined taking these simple, proven steps will reduce the frequency of devastating medical errors that affect thousands of patients each year.

How are National Patient Safety Goals determined?

An expert panel of doctors, nurses and patient safety leaders helps the Joint Commission annually formulate its National Patient Safety Goals and related evidence-based requirements.

When would a National Patient Safety Goal not be applicable to an organization?

The National Patient Safety Goals apply to all accredited organizations and to those seeking accreditation. Each goal should be considered with respect to its relevance to the services the organization provides. For example, if the organization does not perform surgical or other invasive procedures, the goal relating to wrong-site surgery would not apply.


How are National Patient Safety Goals evaluated for an organization?

As part of the Joint Commission accreditation process, an organization is reviewed for compliance with applicable National Patient Safety Goals.

- 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.






National Patient Safety Goals



National Patient Safety Goals require accredited health care organizations to focus on a series of specific actions to prevent medical errors. Following these simple proven steps will significantly reduce the frequency of devastating medical errors that affect thousands of patients each year. The Joint Commission's Accreditation Quality Report provides an inventory of the safety goals, the requirements for meeting the goal, and information as to whether the hospital has implemented the goal or an acceptable alternative. An organization must be in compliance with all National Patient Safety Goals in order to receive a  on the summary page. The following information is included under National Patient Safety Goals.

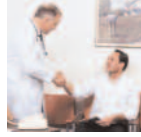
Safety Goals The description of a goal.

Organizations Should The requirements that must be met to achieve the associated safety goal.

Implemented The symbol indicates whether the organization has implemented the requirements or an acceptable alternative.

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.

Safety Goals	Organizations Should	Implemented
Identify Patients Correctly	Use at least two (2) ways to identify a patient when performing procedures, taking blood or giving medicines or blood products. The patient's room number cannot be used to identify the patient.	
	Use a "time-out" just before starting the procedure to allow the entire surgical team to ensure the correct patient, procedure and body part.	



About the Organization Commentary

The Joint Commission provides accreditation information consistent with its public information policy. Each health care organization is invited to submit a brief commentary on its Accreditation Quality Report.

The intent of the commentary is to offer an accredited organization the opportunity to provide its perspective on its Accreditation Quality Report and to convey important messages to the public about its performance and the services it provides.

Submitted commentaries must meet the following criteria:

- The commentary may not be longer than two pages in length and is to be prepared on a standard form.
- Surveyors may not be mentioned by name in the commentary.
- Defamatory or libelous language may not be used.
- The organization may provide only one two-page commentary.

The decision to prepare and submit a commentary is up to the health care organization and is not required. The commentary will be sent with the Accreditation Quality Report each time a request for a Report is made.

When an organization submits a commentary, the commentary is included as the last page of both the online and hard copy versions of the Accreditation Quality Report. Commentaries accessed in Quality Check™ may be read using Adobe Acrobat Reader, a program which is free and easy to download.