

2004 HOSPITAL QUALITY REPORT

DRAFT



Joint Commission
on Accreditation of
Healthcare Organizations

Org# 12345

A Sample Hospital

1199 Sun Valley Road
Houston, Texas

Table of Contents

- Summary of Quality Information
- Available Quality Reports
 - Hospital
 - Long Term Care

Glossary of Terms

A Sample Hospital

*1199 Sun Valley Road
Houston, Texas*



Accredited by:

JCAHO

*Joint Commission on Accreditation
of Healthcare Organizations*

2004 HOSPITAL QUALITY REPORT



What is Accreditation?

Who is the Joint Commission?

The Joint Commission on Accreditation of Healthcare Organizations is the leading health care accrediting body in the world, evaluating and accrediting nearly 17,000 health care organizations in the United States. The Joint Commission accredits more than 8,500 of the nation's hospitals and home care providers and over 8,000 other healthcare organizations.

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

How does a hospital become accredited?

Joint Commission health care professionals visit the hospital, interview staff and review records and procedures. The activity at the hospital is compared to the Joint Commission's performance guidelines and standards. The hospital must meet or exceed stringent Joint Commission performance requirements. When the hospital has shown that its performance meets this level of excellence, it becomes "Accredited". On an ongoing basis to monitor performance, a series of quality checks and a self-assessment are part of the accreditation process.

What care delivery issues are addressed by accreditation?

The Joint Commission's standards set forth performance expectations that affect 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 include consideration of issues that are important to consumers such as:

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

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



Joint Commission
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Org# 5555

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- Guide to Selecting a Hospital

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Summary of Quality Information

Quality Distinctions

Special Quality Awards

2003 Hospital Codman Award

Participant in the Hospital Voluntary Public Reporting Initiative.

Hospital Disease-Specific Care Certification

Diabetic Care Certification Date: June 22, 2003

Accreditation Decision

Accredited. This organization is in full compliance with all applicable standards.

Decision Effective Date

January 15, 2004

Accredited Services

- Hospital Services with Behavioral Health
- Laboratory
- Home Care

Other Accredited Programs/Services

- Blood Bank (accredited by the *American Association of Blood Banks*)

	Compared to other JCAHO Accredited Hospitals	
	National Results	State Results
2004 National Patient Safety Goals: ¹	✓	N/A ²
2003 National Quality Improvement Goals:		
Heart Attack Care	✓	✓
Heart Failure Treatment	+	+
Patient Perception of Care Survey Results: ³	—	—

¹ Organizations Cannot Score Better than "Within the Expected Range"

² State Results are not Calculated for the National Patient Safety Goals.

³ Data provided by the "Patient Perception of Care Survey Results Instrument."

KEY



This Organization Achieved the Best Possible Results



This Organization's Performance is Above the Performance of Most JCAHO Accredited Organizations



This Organization's Performance is Similar to the Performance of Most JCAHO Accredited Organizations



This Organization's Performance is Below the Performance of Most JCAHO Accredited Organizations



No Data is Available for this Measure



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Link to Organization Commentary

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Summary of Quality Information

Accredited organizations strive to meet and exceed the highest standard of patient care and quality. The Summary of Quality Information provides the Joint Commission accreditation decision, Patient Experience of Care, National Patient Safety Goals and National Quality Improvement Goals.

National Patient Safety Goals

National Patient Safety Goals are selected each year by a panel of experts convened by the Joint Commission as an effective way to focus health care organizations on current patient safety priorities.

National Quality Improvement Goals

The Joint Commission selects National Quality Improvement Goals for key treatments that impact tens of thousands of patients every year. The report tracks outcomes for common conditions such as heart attack, heart failure, pregnancy and pneumonia.

Patient Perception of Care

The Joint Commission publishes the results of a National Hospital Patient Perception of Care Survey. The Survey represents the patient assessment of the care experience.

(Click *italics* for more detail)



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JCAHO 2004 National Patient Safety Goals¹



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- Summary of Quality Information
- What are National Patient Safety Goals?
- Why are National Patient Safety Goals Important?
- How are National Patient Safety Goals Selected?
- How is Compliance with National Patient Safety Goals Determined?
- When would a National Patient Safety Goal be not applicable to an organization?

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Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification	Use at least two patient identifiers (neither to be the patient's room number) whenever taking blood samples or administering medications or blood products.	
	Prior to the start of any surgical or invasive procedure, conduct a final verification process, such as a "time out," to confirm the correct patient, procedure and site, using active-not passive-communication techniques.	
Improve the effectiveness of communication among caregivers	Implement a process for taking verbal or telephone orders that requires a verification "read-back" of the complete order by the person receiving the order.	
	Standardize the abbreviations, acronyms and symbols used throughout the organization, including a list of abbreviations, acronyms and symbols not to be used.	
Improve the safety of using high-alert medications.	Remove concentrated electrolytes (including, but not limited to, potassium chloride, potassium phosphate, sodium chloride >0.9%) from patient care units.	
	Standardize and limit the number of drug concentrations available in the organization.	
Eliminate wrong-site, wrong-patient, wrong procedure surgery.	Create and use a pre-operative verification process, such as a checklist, to confirm that appropriate documents (e.g., medical records, imaging studies) are available	
	Implement a process to mark the surgical site and involve the patient in the marking process	
Improve the safety of using infusion pumps.	Ensure free-flow protection on all general-use and patient controlled pain medication (PCA) intravenous infusion pumps used in the organization	
Improve the effectiveness of clinical alarm systems.	Implement regular preventive maintenance and testing of alarm systems	
	Assure that alarms are activated with appropriate settings and are sufficiently audible with respect to distances and competing noise within the unit.	

¹Organizations Cannot Score Better than "Similar to the Performance of Most Accredited Organizations"

KEY



This Organization's Performance is Similar to the Performance of Most JCAHO Accredited Organizations



This Organization's Performance is Below the Performance of Most JCAHO Accredited Organizations



No Data is Available for this Measure

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National Quality Improvement Goals Condition: **Heart Attack**

Reporting Period: July 2003 - June 2004

Compared to other JCAHO
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Quality	Explanation	National Results	State Results
Heart Attack Care	This category of evidence based measures assesses the overall quality of care provided to Heart Attack (AMI) patients.		

		Compared to other JCAHO Accredited Hospitals				
		National Results		State Results		
Treatment	Explanation	Hospital Results	Top 10% Scored at Least:	Top 50% Scored at Least:	Top 10% Scored at Least:	Top 50% Scored at Least:
<i>Aspirin at Arrival</i>	This indicator addresses aspirin administration anytime over 24 hours prior to arrival and 24 hours after arrival at the hospital. Aspirin has been proven to be beneficial as it increases blood flow to the heart.	* 91% of 112 Patients	100%	96%	100%	96%
<i>Aspirin at Discharge</i>	This indicator addresses aspirin administration at the time of discharge from the hospital. Aspirin has been proven to be very beneficial as it increases blood flow to the heart.	 96% of 112 Patients	100%	94%	100%	93%
<i>ACEI prescribed to those patients most likely to benefit.</i>	This indicator addresses the administration of enzyme inhibitors at discharge to those who would most likely benefit. This medication improves blood flow to the heart.	 85% of 144 Patients	100%	80%	100%	82%
<i>Beta Blocker prescribed at arrival</i>	This indicator addresses the administration of beta blocker drugs at arrival to reduce heart damage and complications.	 96% of 84 Patients	100%	89%	100%	90%
<i>Beta Blocker prescribed at discharge</i>	This indicator addresses the administration of beta blocker drugs at discharge to reduce heart damage and complications.	 97% of 84 Patients	100%	90%	100%	91%

* This organization achieved a 90% or higher compliance rate on this measure. However, because of the overall high level of compliance by all organizations, its performance was below most organizations.

(Click *italics* for more detail)

KEY

- This Organization Achieved the Best Possible Results
- This Organization's Performance is Above the Performance of Most JCAHO Accredited Organizations
- This Organization's Performance is Similar to the Performance of Most JCAHO Accredited Organizations
- This Organization's Performance is Below the Performance of Most JCAHO Accredited Organizations
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- How are National Goal Results Calculated?

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Patient Perception of Care Survey Results¹

Reporting Period: Jan 2003 - Dec 2003



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- How are National Goal Results Calculated?

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Compared to other JCAHO
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Condition	Explanation	National Results	State Results
Patient Perception of Care	The overall experience of care measure based on information provided by the Patient Perception of Care Survey.		

Compared to other JCAHO
Accredited Hospitals

Patient Perception of Care Categories	Category Description	National Results	State Results
	<i>Categories of results are to be determined by the Hospital Voluntary Reporting Initiative.</i>		<i>Depiction of results to be determined by the Hospital Voluntary Reporting Initiative.</i>

¹ Data provided by the 2004 Patient Perception of Care Instrument.
(Click *[italics](#)* for more detail)

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