

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









Summary of Quality Information

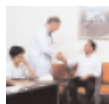
Symbol Key

-  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.

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
 Behavioral Health Care	Accredited	12/9/2009	12/8/2009	12/8/2009
 Hospital	Accredited	9/28/2006	12/10/2009	12/10/2009

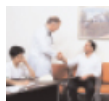
		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Behavioral Health Care	2009 National Patient Safety Goals		 *
Hospital	2006 National Patient Safety Goals		 *



Locations of Care




*** Primary Location**

Locations of Care	Available Services
<p>Crisis Residential Program 1001 Sterigere Street, Bld 45 Norristown, PA 19403</p>	<ul style="list-style-type: none"> Behavioral Health (Residential / Group Homes - Adult)
<p>Montgomery County Emergency Service, Inc * 50 Beech Drive Norristown, PA 19403-5421</p>	<ul style="list-style-type: none"> Behavioral Health (Non 24 Hour Care - Adult) (24-hour Acute Care/Crisis Stabilization - Adult)













2009 National Patient Safety Goals

Symbol Key

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Behavioral Health Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	
Improve the effectiveness of communication among caregivers.	Reading Back Verbal Orders	
	Creating a List of Abbreviations Not to Use	
	Timely Reporting of Critical Tests and Critical Results	
	Managing Hand-Off Communications	
Improve the safety of using medications.	Managing Look Alike, Sound Alike Medications	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
	Sentinel Events Resulting from Infection	
Encourage patients' active involvement in their own care as a patient safety strategy.	Patient and Family Reporting of Safety Concerns	
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	
















2006 National Patient Safety Goals

Symbol Key

-  The organization has met the National Patient Safety Goal.
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Hospital

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 administering medications or blood products; taking blood samples and other specimens for clinical testing, or providing any other treatments or procedures.	
Improve the effectiveness of communication among caregivers.	For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result "read-back" the complete order or test result.	
	Standardize a list of abbreviations, acronyms and symbols that are not to be used throughout the organization.	
	Measure, assess and, if appropriate, take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.	
	Implement a standardized approach to "hand off" communications, including an opportunity to ask and respond to questions.	
Improve the safety of using medications.	Standardize and limit the number of drug concentrations available in the organization.	
	Identify and, at a minimum, annually review a list of look-alike/sound-alike drugs used in the organization, and take action to prevent errors involving the interchange of these drugs.	
	Label all medications, medication containers (e.g., syringes, medicine cups, basins), or other solutions on and off the sterile field in perioperative and other procedural settings.	
Reduce the risk of health care-associated infections.	Comply with current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.	
	Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.	
Accurately and completely reconcile medications across the continuum of care.	Implement a process for obtaining and documenting a complete list of the patient's current medications upon the patient's admission to the organization and with the involvement of the patient. This process includes a comparison of the medications the organization provides to those on the list.	
	A complete list of the patient's medications is communicated to the next provider of service when a patient is referred or transferred to another setting, service, practitioner or level of care within or outside the organization.	
Reduce the risk of patient harm resulting from falls.	Implement a fall reduction program and evaluate the effectiveness of the program.	
Universal Protocol	Beginning July 1, 2004, the Universal Protocol for preventing wrong site, wrong procedure, and wrong person surgery became effective.	