

Accreditation Quality Report





Version: 8 Date: 5/2/2018 7101 Jahnke Road, Richmond, VA



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



Symbol Key

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Behavioral Health Care	Accredited	6/24/2017	6/23/2017	6/23/2017
Hospital	Accredited	6/24/2017	6/23/2017	8/7/2017
Laboratory	Accredited	5/12/2017	5/11/2017	5/11/2017

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

Pathology and Clinical Laboratory

Hospital

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

Certified Programs	Certification Decision	Effective Date	Last Full Revie Date	ew Last On-Site Review Date
Acute Myocardial Infarction	Certification	12/7/2017	12/6/2017	12/6/2017
Asthma, Pediatrics	Certification	4/16/2018	3/27/2018	3/27/2018
Brain Tumor	Certification	3/29/2018	3/28/2018	3/28/2018
oint Replacement - Hip	Certification	2/9/2018	2/8/2018	2/8/2018
O Joint Replacement - Knee	Certification	2/10/2018	2/9/2018	2/9/2018
Stroke Rehabilitation	Certification	10/24/2016	8/29/2016	8/29/2016

Other Accredited Programs/Services

• Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

Special Quality Awards

2014 Top Performer on Key Quality Measures®

2013 Top Performer on Key Quality Measures®

2012 Top Performer on Key Quality Measures®

2015 ACS National Surgical Quality Improvement Program

7101 Jahnke Road, Richmond, VA Org ID: 124600







Summary of Quality Information

		Compared to other Joint	Commission Accredited	
		Organizations		
		Nationwide	Statewide	
Behavioral Health Care	2017National Patient Safety Goals	Ø	*	
Hospital	2017National Patient Safety Goals	Ø	™ *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	№ ²	ND 2	
Oct 2016 - Sep 2017	Immunization	© ²	ND 2	
	Perinatal Care	2	2	
Laboratory	2017National Patient Safety Goals	Ø	N/A *	

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





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7101 Jahnke Road, Richmond, VA Org ID: 124600







Locations of Care

* Primary Location

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	Locations of Care	Available Services
•	Boulders Park PT 1115 Boulders Parkway Suite 110 Richmond, VA 23225	Services: • Outpatient Clinics (Outpatient)

7101 Jahnke Road, Richmond, VA Org ID: 124600







Locations of Care

* Primary Location

Locations of Care

Chippenham Hospital -A Campus of CJW Medical Center * 7101 Jahnke Road Richmond, VA 23225

Available Services

Joint Commission Certified Programs:

- Acute Myocardial Infarction
- Asthma, Pediatrics
- Joint Replacement Hip
- Joint Replacement Knee

Other Clinics/Practices located at this site:

- Dialysis
- Occupational Health
- The Perinatal Centers
- Wound Healing Clinic

Services:

- Behavioral Health (24-hour Acute Care/Crisis Stabilization -Adult/Child/Youth)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Community Integration (Non 24 Hour Care)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Family Support (Non 24 Hour Care)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (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)
- Neurosurgery (Surgical Services)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Peer Support (Non 24 Hour Care)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Toxicology
- Ultrasound
 Use a rice of Disc.
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

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Locations of Care	Available Services
Chippenham Swift Creek Emergency Room DBA: Chippenham Swift Creek Emergency Room 14720 Hancock Village St Chesterfield, VA 23832	Services: Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) General Laboratory Tests Perform Invasive Procedure (Outpatient)
Comprehensive Outpatient Therapies 10710 Midlothian Tnpk, Suite 127 Richmond, VA 23235	Services: • Single Specialty Practitioner (Outpatient)

7101 Jahnke Road, Richmond, VA Org ID: 124600







Locations of Care

* Primary Location

Locations of Care

Johnston Willis Hospital
- A Campus of CJW
Medical Center
1401 Johnston-Willis

Drive

Richmond, VA 23235

Available Services

Joint Commission Certified Programs:

- · Acute Myocardial Infarction
- Brain Tumor
- Joint Replacement Hip
- Joint Replacement Knee
- Stroke Rehabilitation

Other Clinics/Practices located at this site:

- Gamma Knife
- Infusion Center
- Occupational Health
- Pain Management
- Physical Medicine and Rehabilitation Clinic
- Radiation Oncology
- The Perinatal Centers

Services:

- Brachytherapy (Imaging/Diagnostic Services)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- General Laboratory Tests
- 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)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Toxicology
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

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Locations of Care	Available Services
Levinson Coumadin Clinic DBA: Levinson Coumadin Clinic 7101 Jahnke Road, Levinson Suite 500 Richmond, VA 23225	Services:
The Perinatal Centers DBA: The Perinatal Centers 300A Temple Lake Drive, Suite 4 Colonial Heights, VA 23834	Services: • Single Specialty Practitioner (Outpatient)
Tucker Wellness&Recovery Center a Dept of CJW Medical Center 500 Hioaks Rd Suite A Richmond, VA 23225	Services: Behavioral Health (Day Programs - Adult/Child/Youth) (Partial - Adult/Child/Youth) Community Integration (Non 24 Hour Care) Family Support (Non 24 Hour Care) Peer Support (Non 24 Hour Care)

7101 Jahnke Road, Richmond, VA Org ID: 124600







2017 National Patient Safety Goals

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."

Behavioral Health Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two 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
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	Ø

7101 Jahnke Road, Richmond, VA Org ID: 124600







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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 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 Multi-Drug Resistant Organism Infections	Ø
	Preventing Central-Line Associated Blood Stream Infections	Ø
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	0000
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

7101 Jahnke Road, Richmond, VA Org ID: 124600







National Quality Improvement Goals

Reporting Period: October 2016 - September 2017

		Commission		
		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.	N 2	№ 2	

		Compared to other Joint Commission Accredited Organizations				n
		N	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d 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.	95.00 minutes 809 eligible Patients	55.00	131.00	49.01	106.46
Median Time from ED Arrival to ED Departure for Admitted ED Patients	The amount of time (in minutes) from the time the patient arrives in the Emergency Department until the patient is admitted as an inpatient into the hospital.	268.00 minutes 809 eligible Patients	205.00	317.00	203.35	280.60

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- * This information can also be viewed at www.hospitalcompare.hhs.gov
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7101 Jahnke Road, Richmond, VA Org ID: 124600







National Quality Improvement Goals

Reporting Period: October 2016 - September 2017

		Commission		
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	№ 2	№ 2	

		Compared to other Joint Commission Accredited Organizations				
Measure	Explanation	Hospital	Vationwide Top 10%	Average	Top 10%	ewide Average
	·	Results	Scored at Least:	Rate:	Scored at Least:	Rate:
Influenza Immunization	This prevention measure addresses acute care hospitalized inpatients age 6 months and older who were screened for seasonal influenza immunization status and were vaccinated prior to discharge if indicated.	99% of 700 eligible Patients	100%	94%	100%	95%

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7101 Jahnke Road, Richmond, VA Org ID: 124600







National Quality Improvement Goals

Reporting Period: October 2016 - September 2017

Compared to other Joint

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

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		Compared to other Joint Commission Accredited Organizations			on	
		Nationwide Statewide			ewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average 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 18 eligible Patients	100%	98%	100%	99%
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 88 eligible Patlents	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.	46% of 407 eligible Patients	74%	52%	65%	53%

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7101 Jahnke Road, Richmond, VA Org ID: 124600







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Laboratory

Safety Goals	Organizations Should	Implemented	
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø	
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø	
Reduce the risk of health care-associated infections	Meeting Hand Hygiene Guidelines	Ø	