

Accreditation Quality Report





Version: 14 Date: 8/23/2021 7101 Jahnke Road, Richmond, VA

Org ID: 124600

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.



Symbol Key

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rganization. Not displayed

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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 and Human Services	Accredited	4/21/2021	4/20/2021	4/20/2021
Hospital	Accredited	6/24/2017	4/23/2021	7/1/2021
Laboratory	Accredited	5/24/2019	5/23/2019	5/23/2019

Hospital

			Date	Dute	bul vey Date
(Behavioral Health Care and Human Services	Accredited	4/21/2021	4/20/2021	4/20/2021
	Hospital	Accredited	6/24/2017	4/23/2021	7/1/2021
	Laboratory	Accredited	5/24/2019	5/23/2019	5/23/2019
1	Accreditation programs i	recognized by the Centers fo	or Medicare a	and Medicaid Serv	vices (CMS)
	Pathology and Clinical Laborato	ory			

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Review Date
Advanced Total Hip and Total Knee Replacement	Certification	11/13/2019	7/7/2021	7/7/2021
Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Acute Myocardial Infarction	Certification	11/13/2019	11/12/2019	11/12/2019
Brain Tumor	Certification	7/24/2021	7/23/2021	7/23/2021
Joint Replacement - Hip	Certification	2/9/2018	7/8/2021	7/8/2021
O Joint Replacement - Knee	Certification	2/10/2018	7/8/2021	7/8/2021
Stroke Rehabilitation	Certification	5/29/2021	5/28/2021	5/28/2021

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

Footnote Key

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- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 4. 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.
- The Measure results are based on a sample of patients.
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- 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- 11. 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."

7101 Jahnke Road, Richmond, VA Org ID: 124600







Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Behavioral Health Care and Human Services	2021National Patient Safety Goals	Ø	*	
Hospital	2017National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	ND 2	ND ²	
Jan 2019 - Dec 2019	Perinatal Care	ND 2	ND 2	
Laboratory	2019National 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

Locations of Care

Chippenham Hospital -A Campus of CJW Medical Center 3 7101 Jahnke Road Richmond, VA 23225

Available Services

Joint Commission Advanced Certification Programs:

• Advanced Total Hip and Total Knee Replacement

Joint Commission Certified Programs:

· Acute Myocardial Infarction

Other Clinics/Practices located at this site:

- Occupational Health
- Ortho Virginia
- Ortho Virginia
- Physical Therapy / Occupational Therapy Wound Care
- 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)
- Chemical Dependency (24-hour Acute Care/Crisis Stabilization - Adult) (Detox/Non-detox - Adult)
- 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)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)

- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- · Neurosurgery (Surgical Services)
- Non-Sterile Medication Compounding (Inpatient)
- 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)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services)

Ultrasound

- (Imaging/Diagnostic Services) Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

7101 Jahnke Road, Richmond, VA Org ID: 124600







Locations of Care

*	Primary	Location

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Locations of Care	Available Services
	 Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services)
CJW Occupational Health 7153 Jahnke Rd. Richmond, VA 23225	Services: • General Laboratory Tests • Single Specialty Practitioner (Outpatient)
CJW Pain Management Clinic 1011 Johnston-Willis Drive suite 230 Richmond, VA 23235	Services: • General Laboratory Tests • Single Specialty Practitioner (Outpatient)
Comprehensive Outpatient Therapies 1011 Johnston-Willis Drive, Suite 250 Richmond, VA 23235	Services: • Single Specialty Practitioner (Outpatient)
HCA VA Sports Medicine 1115 Boulders Parkway Suite 110 Richmond, VA 23225	Services: • Outpatient Clinics (Outpatient)
Johnston Willis Advanced Imaging Center 1011 Johnston Willis Drive Richmond, VA 23235	Services: • General Laboratory Tests

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
- 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)
- Hazardous Medication Compounding (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)
- 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)
- Sterile Medication Compounding (Inpatient)
- Surgical Unit (Inpatient)
- Teleradiology (Imaging/Diagnostic Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

7101 Jahnke Road, Richmond, VA Org ID: 124600







Locations of Care

*	Primary	Location
	r i iiiiai v	Location

Locations of Care	Available Services
Johnston-Willis Hospital Perinatal Center 1011 Johnston Willis Dr. Suite 100 North Chesterfield, VA 23235	Services: • General Laboratory Tests
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)
The Perinatal Centers DBA: The Perinatal Centers 300A Temple Lake Drive, Suite 4 Colonial Heights, VA 23834	Services:
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 Hospitalization - 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







2021 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 and Human Services

Safety Goals	Safety Goals Organizations Should	
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







2017 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 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 Multi-Drug Resistant Organism Infections	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

7101 Jahnke Road, Richmond, VA Org ID: 124600



Measure Area

Emergency

Department





National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

	Commission					
	Accredited Organizations					
	Nationwide	Statewide				
е	№ ²	№ 2				

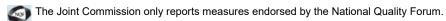
Compared to other Joint

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
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.	121.00 minutes 1078 eligible Patients	55.00	133.00	50.42	104.00

Explanation

This category of evidence based measures assesses the

time patients remain in the hospital Emergency Department prior to inpatient admission.



* This information can also be viewed at www.hospitalcompare.hhs.gov
 Null value or data not displayed.

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7101 Jahnke Road, Richmond, VA Org ID: 124600







National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area Explanation Nationwide Statewide

Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

			Compared to other Joint Commission Accredited Organizations				
			Nationwide Statewide				
	Measure	Explanation	Hospital Results		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.	95% of 19 eligible Patients	100%	98%	100%	100%
	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.	38% of 214 eligible Patients	12%	25%	14%	26%
	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 74 eligible Patients	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.	40% of 403 eligible Patients	73%	51%	62%	52%
	Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	2332.00 minutes 2058 eligible				

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7101 Jahnke Road, Richmond, VA Org ID: 124600







National Quality Improvement Goals

Reporting Period: January 2019 - December 2019

Measure Area Explanation Nationwide Statewide

Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		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 expected to do well and routinely go home with the mother.	3449.00 minutes 2058 eligible Patients				
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1117.00 minutes 2058 eligible Patients				

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7101 Jahnke Road, Richmond, VA Org ID: 124600







2019 National Patient Safety Goals

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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	