

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

Accreditation Programs	Accreditation Decision	Effective	Last Full Surve	y Last On-Site
		Date	Date	Survey Date
🥝 Behavioral Health Care	Accredited	2/28/2017	2/27/2017	2/27/2017
🥝 Hospital	Accredited	3/4/2017	3/3/2017	11/29/2017

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

Certification programs recognized by the Centers for Medicare and Medicaid Services (CMS) Ventricular Assist Device

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	A Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	6/8/2016	6/7/2016	6/7/2016
olumbdo Ventricular Assist Device	Certification	5/4/2016	5/3/2016	5/3/2016

Other Accredited Programs/Services

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

Special Quality Awards

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide		
Behavioral Health Care	2017National Patient Safety Goals	Ø	[*]	
Hospital	2017National Patient Safety Goals	Ø	()) *	

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

Symbol Key

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Ð	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Э	This organization's performance is below the target range/value.
•	This Measure is not applicable for this organization.
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Footnote Key

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- 2. The Measure Set does not have an overall result.
- **3.** The number of patients is not enough for comparison purposes.
- 4. The measure meets the Privacy Disclosure Threshold rule.
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- **11.** There were no eligible patients that met the denominator criteria.





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tion's performance is get range/value.			Nationwide	Statewide	
tion's performance is		National Quality Improvement Goals:			
target range/value. tion's performance is get range/value.	Reporting Period:	Emergency Department	1	(m) ²	
e is not applicable for this	Apr 2016 - Mar 2017	Immunization		2 ²	
1		Perinatal Care	NO ²		

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DBA: MedStar Washington Hospital Center, 110 Irving St, NW, Washington, DC



Locations of Care

Locations of Care	Available Services
Burn Clinic DBA: Burn Clinic 110 Irving St. NW, 3B55 Washington, DC 20010	Services:Single Specialty Practitioner (Outpatient)
Center for Breast Health DBA: Center for Breast Health 106 Irving Street, NW Washington Washington, DC 20010	Services: Outpatient Clinics (Outpatient)
CENTER FOR VASCULAR CARE & VASCULAR SURGERY DBA: CENTER FOR VASCULAR CARE & VASCULAR SURGERY 106 Irving Street NW POB 3600 Washington, DC 20010	Services: Single Specialty Practitioner (Outpatient)
Dermatology-Chevy Chase DBA: Dermatology-Chevy Chase 5530 Wisconsin Ave, Suite 730, Chevy Chase, MD 20815	 Services: Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)
Family Health Center Resident/Fellow Practice DBA: Family Health Center Resident/Fellow Practice 110 Irving St. NW, 1A50 Washington, DC 20010	 Services: Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Single Specialty Practitioner (Outpatient)
Hearing and Speech DBA: Hearing and Speech 110 Irving St. NW, GA102, Washington, DC Washington, DC 20010	Services: Single Specialty Practitioner (Outpatient)
Infusion Washington Cancer Institute DBA: Infusion Washington Cancer Institute 106 Irving St. NW Washington, DC 20010	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)



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Locations of Care

* Primary Location Locations of Care Available Services Medical Oncology/Hematology Washington Cancer Services: • Single Specialty Practitioner (Outpatient) Institute DBA: Medical Oncology/Hematology Washington Cancer Institute 110 Irving St. NW. 2nd Floor WCI Washington, DC 20010 **Medicine Subspecialty Practice** Services: DBA: Medicine • Administration of High Risk Medications (Outpatient) Subspecialty Practice 110 Irving St. NW, 1A50B Washington, DC 20010 • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)



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Locations of Care

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Locations of Care
AddStar Washington Hospital Center * DBA: MedStar Washington Hospital Center 110 Irving St NW Washington, DC 20010



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Locations of Care

* Primary Location Available Services Locations of Care **MWHC Orthopedic** Surgery DBA: MWHC Orthopedic Services: Administration of High Risk Medications (Outpatient) Surgery • Perform Invasive Procedure (Outpatient) 106 Irving St., NW POB Single Specialty Practitioner (Outpatient) North 5000 Washington, DC 20010 **MWHC Psychiatry/OP Behaviorial Health** Services: Services Addiction Care/Adult) DBA: MWHC (Non-detox - Adult) Psychiatry/OP Behaviorial Behavioral Health (Day Programs - Adult) Health Services (Non 24 Hour Care - Adult) 216 Michigan Avenue, NE (Partial - Adult) 2nd floor • Case Management (Non 24 Hour Care - Adult) Washington, DC 20017 Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial - Adult) (Non-detox - Adult) Community Integration (Non 24 Hour Care) Neurosurgery **DBA:** Neurosurgery Services: 110 Irving St. NW, G019 • Single Specialty Practitioner (Outpatient) Washington, DC 20010 **Oncology Specialty** Center Washington Services: Cancer Institute; • Perform Invasive Procedure (Outpatient) DBA: Oncology Specialty Single Specialty Practitioner (Outpatient) Center Washington Cancer Institute; 110 Irving St. NW Washington, DC 20010 **Oncology/Radiation** Oncology Services: DBA: Oncology/Radiation Single Specialty Practitioner (Outpatient) Oncology 110 Irving St. NW, ground floor Washington, DC 20010 **Oral and Maxillofacial** Surgery/Orthodontics Services: DBA: Oral and Anesthesia (Outpatient) Maxillofacial • Perform Invasive Procedure (Outpatient) Surgery/Orthodontics Single Specialty Practitioner (Outpatient) 110 Irving St. NW, GA 144 Washington, DC 20010 **Otolaryngology Head &** Neck Surgery Services: DBA: Otolaryngology Perform Invasive Procedure (Outpatient) Head & Neck Surgery Single Specialty Practitioner (Outpatient) 110 Irving Street, GA4 Washington, DC 20010



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Locations of Care

* Primary Location **Available Services** Locations of Care Otolaryngology, Head & Services: **Neck Surgery** DBA: Otolaryngology, • Outpatient Clinics (Outpatient) Head & Neck Surgery • Perform Invasive Procedure (Outpatient) 106 Irving Street 410 Washington, DC 20010 **Physicians Office Building Radiology** Services: DBA: Physicians Office Single Specialty Practitioner (Outpatient) Building Radiology 106 Irving Street, NW Washington Washington, DC 20010 Surgical Ambulatory **Care Center** Services: DBA: Surgical • Perform Invasive Procedure (Outpatient) Ambulatory Care Center Single Specialty Practitioner (Outpatient) 110 Irving St. NW, GA48 Washington, DC 20010 Vascular Lab DBA: Vascular Lab Services: 106 Irving Street NW POB • Single Specialty Practitioner (Outpatient) North 3150 Washington, DC 20010 Washington Hospital **Center Eye Center** Services: DBA: Washington Single Specialty Practitioner (Outpatient) Hospital Center Eye Center 110 Irving St. NW, 1A1 Washington, DC 20010 WIS - National Center for Advance Pelvic Services: Surgery • Perform Invasive Procedure (Outpatient) DBA: WIS - National • Single Specialty Practitioner (Outpatient) Center for Advance Pelvic Surgery 106 Irving St NW, Suite 405 Washington, DC 20010 Women's & Infants Services Ob/Gyn Clinic Services: DBA: Women's & Infants • Perform Invasive Procedure (Outpatient) Services Ob/Gyn Clinic • Single Specialty Practitioner (Outpatient) 110 Irving St. NW, GAE3 Washington, DC 20010

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2017 National Patient Safety Goals

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

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.

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2017 National Patient Safety Goals

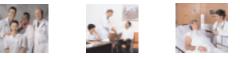
Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigcirc
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	\bigcirc
	Reconciling Medication Information	\bigcirc
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	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ
	Preventing Surgical Site Infections	\bigcirc
	Preventing Catheter-Associated Urinary Tract Infection	\bigcirc
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	\bigcirc
	Marking the Procedure Site	\bigotimes
	Performing a Time-Out	\bigcirc

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National Quality Improvement Goals

the best	Reporting P	eriod: April 2016 - March 2017		
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ance is			Accredited C	rganizations
	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.	○ ²	○ ²

				other Joint ed Organiz		
Measure	Explanation	Hospital Results	Top 10% Scored	Weighte d Median:	Top 10% Scored	wide 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.	222.00 minutes 255 eligible Patients	55.00	129.00	3	3
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.	573.00 minutes 267 eligible Patients	205.00	316.00	3	3

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

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National Quality Improvement Goals

Reporting Per	riod: April 2016 - March 2017		
		Compared to Comm	
		Accredited C	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				n
		Nationwide			Statewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average 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 510 eligible Patients	100%	94%	3	³

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

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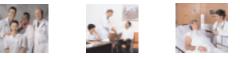
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MedStar Washington Hospital Center

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National Quality Improvement Goals

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This organization's performance is below the target range/value.			Accredited Organizations		
Not displayed	Measure Area	Explanation	Nationwide	Statewide	
	Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	⊘ ²	™ ²	
Esstrate Ver					

		Compared to other Joint Commission Accredited Organizations				n
Measure	Explanation	Nationwide Hospital Top 10% Results Scored		Average Rate:	Top 10% Scored	ewide 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.	97% of 34 eligible Patients	at Least: 100%	98%	at Least:	3
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 81 eligible Patients	0%	2%	3	3
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 363 eligible Patients	74%	53%	<u></u> 3	3



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