

Accreditation Quality Report





1602 Skipwith 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 1602 Skipwith Road, Richmond, VA Org ID: 6379







Summary of Quality Information

Accreditation Programs Accreditation Decision Effective Last Full Survey Last On-Site Date **Date Survey Date** Accredited 3/9/2019 3/8/2019 3/8/2019 Mospital Accredited 11/3/2017 11/2/2017 11/2/2017 Laboratory

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."

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Perinatal Care Certification	Certification	4/28/2018	4/27/2018	4/27/2018
Primary Stroke Center	Certification	7/20/2018	7/19/2018	7/19/2018
Certified Programs	Certification Decision	Effective	Last Full Review	Last On-Site
		Date	Date	Review Date
O Joint Replacement - Hip	Certification	5/31/2018	5/30/2018	5/30/2018
Joint Replacement - Knee	Certification	5/31/2018	5/30/2018	5/30/2018
Joint Replacement - Shoulder	Certification	10/26/2017	10/25/2017	10/25/2017
Prematurity	Certification	9/8/2018	9/7/2018	9/7/2018
Sepsis	Certification	7/26/2017	7/27/2017	7/27/2017
Spinal Fusion	Certification	6/2/2018	6/1/2018	6/1/2018
Stroke Rehabilitation	Certification	10/2/2018	8/10/2018	8/10/2018

Other Accredited Programs/Services

- Hospital (Accredited by UHMS Clinical Hyperbaric Facility Level 2)
- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))
- Laboratory (Accredited by American Society for Histocompatibility and Immunogenetics (ASHI))

Special Quality Awards

2014 Top Performer on Key Quality Measures®

2013 Top Performer on Key Quality Measures®

2012 Top Performer on Key Quality Measures®

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Summary of Quality Information

		Compared to other Joint Commission Accredited Organizations			
		Nationwide Statewide			
Hospital	2019National Patient Safety Goals	Ø	N/A *		
	National Quality Improvement Goals:				
Reporting Period:	Emergency Department	№ 2	ND ²		
Jan 2018 - Dec 2018	Immunization	№ 2	ND ²		
	Perinatal Care	ND 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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Locations of Care

*	Primary	/ Location
	rillialy	Location

Locations of Care	Available Services				
Hanover Emergency Department 9275 Chamberlayne Road Mechanicsville, VA 23116	Services:				
Henrico Doctor's Hospital: The Perinatal Center 8239 Meadowbridge Road Suite C Mechanicsville, VA 23116	Services: • General Laboratory Tests				
Henrico Doctor's Surgery Center 7611 Forest Avenue Suite 400 Richmond, VA 23229	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Ambulatory Surgery Center (Outpatient) • Anesthesia (Outpatient) • General Laboratory Tests • Perform Invasive Procedure (Outpatient)				

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Locations of Care

* Primary Location

Locations of Care

Henrico Doctors' Hospital * 1602 Skinwith Rose

1602 Skipwith Road Richmond, VA 23229

Available Services

Joint Commission Advanced Certification Programs:

- Perinatal Care Certification
- · Primary Stroke Center

Joint Commission Certified Programs:

- Prematurity
- Sepsis
- Spinal Fusion

Services:

- Brachytherapy (Imaging/Diagnostic Services)
- Cardiac Catheterization Lab (Surgical Services)
- Cardiac Surgery (Surgical Services)
- Cardiothoracic Surgery (Surgical Services)
- Cardiovascular Unit (Inpatient)
- Coronary Care Unit (Inpatient)
- CT Scanner (Imaging/Diagnostic Services)
- Dialysis Unit (Inpatient)
- Ear/Nose/Throat Surgery (Surgical Services)
 Total Control
- 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)
- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Transplant Surgery (Surgical Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

* Primary Location

Locations of Care
Parham Ambulatory
Surgery Center
7640 E. Parham Road

Henrico, VA 23229

Available Services

Services:

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Ambulatory Surgery Center (Outpatient)
- Anesthesia (Outpatient)
- General Laboratory Tests
- Perform Invasive Procedure (Outpatient)

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Locations of Care

* Primary Location

Locations of Care

Parham Doctors'
Hospital - A Campus of
Henrico Doctors' Hsp.
7700 East Parham Road
Richmond, VA 23294

Available Services

Joint Commission Advanced Certification Programs:

• Primary Stroke Center

Joint Commission Certified Programs:

- Joint Replacement Hip
- Joint Replacement Knee
- Joint Replacement Shoulder
- Sepsis
- Spinal Fusion
- Stroke Rehabilitation

Other Clinics/Practices located at this site:

· Center for Emotional Growth Adult Partial Program

Services:

- Addiction Care/Adult) (Non-detox - Adult)
- Behavioral Health (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult)
- Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial - Adult) (Non-detox - Adult)
- 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)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Neuro/Spine Unit (Inpatient)

- Neurosurgery (Surgical Services)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Peer Support (Non 24 Hour Care)
- Plastic Surgery (Surgical Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)
- Sleep Laboratory (Sleep Laboratory)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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Locations of Care

12720 Tuckahoe Creek

Henrico, VA 23238

Court

* Primary Location **Available Services** Locations of Care **Retreat Doctors' Joint Commission Advanced Certification Programs:** Hospital - A Campus of • Primary Stroke Center **Henrico Doctors' Hsp** 2621 Grove Avenue **Joint Commission Certified Programs:** Richmond, VA 23220 • Sepsis **Services:** • Behavioral Health (24-hour • Medical ICU (Intensive Care Acute Care/Crisis Unit) Stabilization - Adult) • Nuclear Medicine (Imaging/Diagnostic Services) CT Scanner (Imaging/Diagnostic • Orthopedic Surgery (Surgical Services) Services) Ear/Nose/Throat Surgery Outpatient Clinics (Outpatient) (Surgical Services) • Plastic Surgery (Surgical EEG/EKG/EMG Lab Services) • Post Anesthesia Care Unit (Imaging/Diagnostic (PACU) (Inpatient) Services) Gastroenterology (Surgical Surgical ICU (Intensive Care Services) Unit) General Laboratory Tests • Thoracic Surgery (Surgical GI or Endoscopy Lab Services) Ultrasound (Imaging/Diagnostic Services) (Imaging/Diagnostic Services) Gynecological Surgery Urology (Surgical Services) (Surgical Services) Vascular Surgery (Surgical Inpatient Unit (Inpatient) Services) Interventional Radiology (Imaging/Diagnostic Services) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Sarah Cannon Cancer Institute at Henrico **Services: Doctors' Hospital** • Administration of Blood Product (Outpatient) 7607 Forest Avenue Administration of High Risk Medications (Outpatient) Henrico, VA 23229 • Anesthesia (Outpatient) Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient) West Creek Emergency Center **Services:**

• Administration of Blood Product (Outpatient)

 Anesthesia (Outpatient) • General Laboratory Tests

• Administration of High Risk Medications (Outpatient)

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2019 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."

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 Infections that are difficult to treat	Ø
	Preventing Central-Line Associated Blood Stream Infections	8 8 8 8 8 8
	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

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

		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.	№ ²	№ ²

		Compared to other Joint Commission Accredited Organizations Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored	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.	70.00 minutes 825 eligible Patients	56.00	137.00	49.29	104.40
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.	227.00 minutes 825 eligible Patients	207.00	321.00	203.43	281.63

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- This information can also be viewed at www.hospitalcompare.hhs.gov
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National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Compared to other Joint Commission
Accredited Organizations

Measure Area Explanation Nationwide Statewide

Immunization This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.

		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:
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 696 eligible Patients	100%	94%	100%	96%

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Compared to other Joint







National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

Accredited Organizations Measure Area Statewide Explanation Nationwide Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Col	mpared to d			on
			Accredit Nationwide	ed Organiz		ewide
Measure	Explanation	Hospital		Average	Top 10%	
	, ,	Results	Scored at Least:	Rate:	Scored at Least:	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 26 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 94 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.	60% of 428 eligible Patients	73%	52%	64%	53%



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2017 National Patient Safety Goals

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 - The organization has not met the National Patient Safety Goal.
- The Goal is not applicable for this organization.

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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