

# 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.



## **Summary of Quality Information**

a		Key
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O V II	11001	

0	This organization achieved the best possible results.
Ð	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below the target range/value.
•	This Measure is not applicable for this organization.
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Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🎯 Hospital	Accredited	3/9/2019	3/8/2019	3/6/2020
olimitation and the second sec	Accredited	10/19/2019	10/18/2019	10/18/2019

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

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
Primary Stroke Center	Certification	4/23/2021	4/22/2021	4/22/2021
Certified Programs	<b>Certification Decision</b>	Effective Date	Last Full Review Date	A Last On-Site Review Date
🥝 Joint Replacement - Hip	Certification	3/31/2021	3/30/2021	3/30/2021
🥝 Joint Replacement - Knee	Certification	3/31/2021	3/30/2021	3/30/2021
Joint Replacement - Shoulder	Certification	10/18/2019	10/17/2019	10/17/2019
🥝 Spinal Fusion	Certification	4/17/2021	4/16/2021	4/16/2021
Stroke Rehabilitation	Certification	4/2/2021	4/1/2021	4/1/2021

#### **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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		Compared to other Joint Commission Accredited Organizations		
		Nationwide Statewide		
Hospital	2020National Patient Safety Goals	Ø	<b>™</b> *	
	National Quality Improvement Goals:			
Reporting Period: Jan 2020 - Dec 2020	Perinatal Care	@ <sup>2</sup>	2 °	
Laboratory	2019National Patient Safety Goals	$\bigotimes$	*	

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



## **Locations of Care**

#### \* Primary Location

Locations of Care	Available Services
Hanover Emergency Department 9275 Chamberlayne Road Mechanicsville, VA 23116	Services: • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Anesthesia (Outpatient) • General Laboratory Tests

\* Primary Location

1602 Skipwith Road, Richmond, VA



## **Locations of Care**

#### Available Services Locations of Care **Henrico Doctors'** Joint Commission Advanced Certification Programs: Hospital \* • Primary Stroke Center 1602 Skipwith Road Richmond, VA 23229 **Joint Commission Certified Programs:** Spinal Fusion **Other Clinics/Practices located at this site:** Henrico Doctor's Surgery Center Sarah Cannon Cancer Institute Services: • Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) ٠ • Dialysis Unit (Inpatient) • Ear/Nose/Throat Surgery (Surgical Services) • EEG/EKG/EMG Lab Services) (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)
- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical
- Non-Sterile Medication Compounding (Inpatient)
- 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
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sterile Medication Compounding (Inpatient)
- 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)



## **Locations of Care**

#### \* Primary Location

Locations of Care	Available	e Services
Parham Doctors'	Joint Commission Advanced	Certification Programs:
	Joint Commission Advanced Primary Stroke Center Joint Commission Certified Joint Replacement - Hip Joint Replacement - Knee Joint Replacement - Shoulder Spinal Fusion Stroke Rehabilitation Other Clinics/Practices locat Center for Emotional Growth A Services: Addiction Services/Adult) (Non-detox - Adult) Behavioral Health (Day Programs - Adult) (Partial Hospitalization - 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	Certification Programs: Programs: Adult Partial Program • Neurosurgery (Surgical Services) • Non-Sterile Medication Compounding (Inpatient) • 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) • Sterile Medication Compounding (Inpatient) • Surgical ICU (Intensive Care Unit)
	<ul> <li>(Partial Hospitalization - Adult)</li> <li>Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization - Adult) (Non-detox - Adult)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> </ul>	<ul> <li>Orthopedic Surgery (Surgical Services)</li> <li>Orthopedic/Spine Unit (Inpatient)</li> <li>Outpatient Clinics (Outpatient)</li> <li>Peer Support (Non 24 Hour Care)</li> <li>Plastic Surgery (Surgical Services)</li> <li>Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization)</li> </ul>
	(Imaging/Diagnostic Services) • Gastroenterology (Surgical Services)	<ul><li>Laboratory)</li><li>Sterile Medication Compounding (Inpatient)</li><li>Surgical ICU (Intensive Care</li></ul>
	<ul> <li>(Imaging/Diagnostic Services)</li> <li>Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>Medical /Surgical Unit (Inpatient)</li> </ul>	



## **Locations of Care**

Locations of Care	Available Services
Primary Location Locations of Care	<ul> <li>Medical ICU (Intensive Care Unit)</li> <li>Neuro/Spine Unit (Inpatient)</li> <li>Joint Commission Advanced Certification Programs:</li> <li>Primary Stroke Center</li> <li>Services:         <ul> <li>Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)</li> <li>CT Scanner (Imaging/Diagnostic Services)</li> <li>Ear/Nose/Throat Surgery (Surgical Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> </ul> </li> <li>Medical ICU (Intensive Care Unit)</li> <li>Medical ICU (Intensive Care Unit)</li> <li>Non-Sterile Medication Compounding (Inpatient)</li> <li>Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>Orthopedic Surgery (Surgical Services)</li> <li>Outpatient Clinics (Outpatient Plastic Surgery (Surgical Services)</li> </ul>
	(Surgical Services)Services)• EEG/EKG/EMG Lab (Imaging/Diagnostic• Outpatient Clinics (Outpatient)• Plastic Surgery (Surgical)



## **2020 National Patient Safety Goals**

## Hospital

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
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	$\bigcirc$
	Reconciling Medication Information	Ō
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
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	$\bigcirc$
	Performing a Time-Out	$\bigotimes$

## Symbol Key

The organization has met the National Patient Safety Goal. The organization has not met the e 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."

Symbol Key

possible results

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sample of patients.

updated data. 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.

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The Measure Set does not have an

1602 Skipwith Road, Richmond, VA



## **National Quality Improvement Goals**

#### Reporting Period: January 2020 - December 2020

		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.	<b>™</b> <sup>2</sup>	<b>0</b> <sup>2</sup>

		Compared to other Joint Commission Accredited Organizations				on
		Nationwide Statewide				wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
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.	<b>(</b>	16%	25%	18%	27%
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 72 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.	47% of 421 eligible Patients	71%	51%	68%	52%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1684% of 3324 eligible Patients	2%	18%	6%	18%
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.	2527% of 3324 eligible Patients	15%	31%	17%	30%



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This information can also be viewed at www.hospitalcompare.hhs.gov

Null value or data not displayed.



## **National Quality Improvement Goals**

### Reporting Period: January 2020 - December 2020

			Compared to other Joint Commission Accredited Organizations			
Measure Area	Explanation		Nationwi	de	Statewide	е
	nis category of evidenced based measures as are of mothers and newborns.	sesses the		2	<b>™</b> <sup>2</sup>	
			Compared to other Joint Commission Accredited Organizations			
		Ν	Nationwide Statewide			
Measure	Explanation	Hospital Results	Top 10% Scored at Least:		Top 10% Scored at Least:	Avera Rat
Unexpected Complications Term Newborns per 1000 livebirths - Severe Rate	in The severe rate equals the number of patients with severe complications.	842% of	5%	13%	5%	129

3324 eligible



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## **2019 National Patient Safety Goals**

## 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

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