

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

n	1 1	Key
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y		ILCy

0	This organization achieved the best possible results.
•	This organization's performance is better than the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is worse than the target range/value.
	This Measure is not applicable for this organization.
NO	Not displayed

Footnote Key

- 1. The Measure or Measure Set was not reported.
- 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.
- 5. The organization scored above 90% but was below most other organizations.
- 6. The Measure results are not statistically valid.
- 7. The Measure results are based on a sample of patients.
- 8. The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
 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.
- **12.** The measure rate is within optimal range.

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

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Surve Date	y Last On-Site Survey Date
🎯 Hospital	Accredited	7/2/2022	7/1/2022	7/1/2022
olimitation Laboratory	Accredited	10/5/2023	10/4/2023	10/4/2023

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	11/11/2022	11/10/2022	11/10/2022
Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
🥝 Joint Replacement - Hip	Certification	7/9/2022	7/8/2022	7/8/2022
🥝 Joint Replacement - Knee	Certification	7/9/2022	7/8/2022	7/8/2022
Joint Replacement - Shoulder	Certification	12/4/2021	12/3/2021	12/3/2021
🥝 Spinal Fusion	Certification	2/9/2023	2/8/2023	2/8/2023
Stroke Rehabilitation	Certification	9/14/2022	9/13/2022	9/13/2022

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))

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Hospital	2022National Patient Safety Goals	Ø	*
	National Quality Improvement Goals:		
Reporting Period: Jan 2021 - Dec 2021	Perinatal Care		(1) ²



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		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Laboratory	2023National Patient Safety Goals	Ø	∞ *



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)



Locations of Care

* Primary Location Locations of Care **Henrico Doctors'** Joint Commission Advanced Certification Programs: Hospital *

1602 Skipwith Road Richmond, VA 23229

• Primary Stroke Center **Joint Commission Certified Programs:**

Available Services

Other Clinics/Practices located at this site:

- Henrico Doctor's Surgery Center
- Sarah Cannon Cancer Institute

Services:

Spinal Fusion

- 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)
- 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)
- 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)
- 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)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)
- Toxicology
- Transplant Surgery (Surgical • Services)
- Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)



Locations of Care

* Primary Location

Parham Doctors' Hospital - A Campus of Henrico Doctors' Hsp.Joint Commission Advanced • Primary Stroke Center7700 East Parham Road Diskneyd VA 02004Joint Commission Certified	le Services
Henrico Doctors' Hsp. 7700 East Parham Road	d Certification Programs:
Richmond, VA 23294 Joint Replacement - Hip Joint Replacement - Knee Joint Replacement - Shoulder Spinal Fusion Other Clinics/Practices loca Center for Emotional Growth Services: Addiction Services/Adult) (Non-detox - Adult) Behavioral Health (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization - Adult) Chemical Dependency (Day Programs - Adult) (24-hour Acute Care/Crisis Stabilization - Adult) (Partial Hospitalization - Adult) CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Castroenterology (Surgical Services) General Laboratory Tests G I or Endoscopy Lab (Imaging/Diagnostic Services)	d Certification Programs: Programs: ated at this site:



Locations of Care

Locations of Care	Available Services
	 Medical ICU (Intensive Care Unit) Neuro/Spine Unit (Inpatient)
Retreat Doctors' Hospital - A Campus of Henrico Doctors' Hsp 2621 Grove Avenue Richmond, VA 23220	 Joint Commission Advanced Certification Programs: Primary Stroke Center Staviitzion - Adulth (24-hour Acute Care/Crisis Stabilization - Adult) Chemical Dependency (24-hour Acute Care/Crisis Stabilization - Adult) (Non-detox - Adult) CT Scanner (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) General Laboratory Tests G1 or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Hazardous Medication Compounding (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient)



2022 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	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
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."

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1602 Skipwith Road, Richmond, VA



National Quality Improvement Goals

Reporting Pe	riod: January 2021 - December 2021					
			Compared to other Joint Commission Accredited Organizations			
Measure Area	Explanation		Nationwi	de	Statewid	е
Perinatal Care	This category of evidenced based measures assest care of mothers and newborns.	sses the	(2	™ 2	
		Compared to other Joint Commission Accredited Organizations				
		Nationwide Sta		State	ewide	
Measure		lospital	Тор	Average		Average

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Rate: Results Perform Rate: Perform er er Threshol Threshol d d. Cesarean Birth This measure reports the number of first-time moms with a full-term, \oplus 12 12 26% 27% single baby in a head-down position who delivered the baby by cesarean section. This measure reports the overall **Elective Delivery** number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to \bigcirc less than 39 weeks gestation. An 2% 0% 1% 0% elective delivery is the delivery of a 1% of newborn(s) when the mother was not 84 eligible Patients in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section. Exclusive Breast Milk Feeding This measure reports the overall number of newborns who are exclusively breast milk fed during the \bigcirc newborns entire hospitalization. 71% 49% 67% 51% Exclusive breast milk feeding is when 50% of a newborn receives only breast milk 462 eligible Patients and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines. Unexpected Complications in The severe rate equals the number \oplus Term Newborns per 1000 of patients with severe complications. 5 13 6 11 livebirths - Severe Rate 8 per 1000

* This information can also be viewed at https://hospitalcompare.io/

---- Null value or data not displayed.



2023 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

Symbol Key

The organization has met the National Patient Safety Goal.
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