DBA: Bon Secours-St. Mary's Hospital, 5801 Bremo Road, Richmond, VA

Org ID: 6387

# Accreditation Quality Report





Version: 10 Date: 8/22/2017 DBA: Bon Secours-St. Mary's Hospital, 5801 Bremo 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



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# **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	11/22/2014	11/21/2014	11/21/2014

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

<b>Advanced Certification</b>	<b>Certification Decision</b>	<b>Effective</b>	<b>Last Full Review</b>	v Last On-Site
Programs		Date	Date	<b>Review Date</b>
- C		2000	2000	210 / 10 // 2 000
Advanced Comprehensive Stroke Center	Certification	5/25/2016	4/5/2016	4/5/2016
Advanced Palliative Care	Certification	1/28/2016	1/27/2016	1/27/2016
Heart Failure	Certification	4/21/2016	4/20/2016	4/20/2016
Ventricular Assist Device	Certification	1/27/2016	1/26/2016	1/26/2016
Certified Programs	<b>Certification Decision</b>	<b>Effective</b>	<b>Last Full Review</b>	v Last On-Site
		Date	Date	<b>Review Date</b>
Acute Myocardial Infarction	Certification	4/20/2016	4/19/2016	4/19/2016
Rest of the second of the seco	Certification Certification	4/20/2016 3/22/2016	4/19/2016 3/21/2016	4/19/2016 3/21/2016
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## **Special Quality Awards**

- 2013 Top Performer on Key Quality Measures®
- 2012 Top Performer on Key Quality Measures®
- 2015 Hospital Magnet Award
- 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- 2014 Magnet Award
- 2014 ACS National Surgical Quality Improvement Program
- 2013 Gold Get With The Guidelines Heart Failure
- 2013 Gold Get With The Guidelines Stroke

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Footnote Key

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# **Summary of Quality Information**

		Compared to other Joint Commission Accredite Organizations	
		Nationwide	Statewide
Hospital	2014National Patient Safety Goals	Ø	₩A *
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	<b>№</b> 2	<b>№</b> 2
Jan 2016 - Dec 2016	Immunization	<b>№</b> 2	ND 2
	Perinatal Care	<b>№</b> 2	ND 2
	Stroke Care	<b>№</b> 2	NO 2
	Venous Thromboembolism (VTE)	2	ND 2

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

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# **Locations of Care**

\* Primary Location

2600 East Parham Road Henrico, VA 23228 Bon Secours Patterson

**Avenue Family Practice** 

DBA: Bon Secours
Patterson Avenue Family

9600 Patterson Ave Henrico, VA 23229

Practice

Locations of Care	Available Services
Bon Secours Commonwealth Internal Medicine DBA: Bon Secours Commonwealth Internal Medicine 9220 Forest Hill Ave Suite 1-A Richmond, VA 23235	Services:  • Single Specialty Practitioner (Outpatient)
Bon Secours Parham Road Family Medicine DBA: Bon Secours Parham Road Family Medicine	Services:  • Single Specialty Practitioner (Outpatient)

**Services:** 

• Single Specialty Practitioner (Outpatient)

Other Clinics/Practices located at this site:

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## **Locations of Care**

#### \* Primary Location

### Locations of Care

### Bon Secours-St Mary's Hospital \* DBA: Bon Secours-St

Mary's Hospital 5801 Bremo Road Richmond, VA 23226

#### **Available Services**

#### **Joint Commission Advanced Certification Programs:**

- Advanced Comprehensive Stroke Center
- Advanced Palliative Care
- Heart Failure
- Ventricular Assist Device

#### **Joint Commission Certified Programs:**

- Acute Myocardial Infarction
- Joint Replacement Hip
- Joint Replacement Knee

#### Other Clinics/Practices located at this site:

- Bon Secours Advanced Heart Failure Center
- Cure and Care
- Monument Internal Medicine
- Palliative Medicine
- Patricia C. Lane MBA, SCRN

#### **Services:**

- Behavioral Health (Non 24 Hour Care - Adult)
   (24-hour Acute Care/Crisis Stabilization - Adult)
- 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)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Hematology/Oncology Unit (Inpatient)
- Inpatient Unit (Inpatient)

- Neuro/Spine Unit (Inpatient)
- Neurosurgery (Surgical Services)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- 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)

  Sleep Laboratory (Sleep
- Laboratory)
- Surgical ICU (Intensive Care Unit)
- Surgical Unit (Inpatient)
- Thoracic Surgery (Surgical Services)Ultrasound
- (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

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# **Locations of Care**

Locations of Care	Available Services
	<ul> <li>Interventional Radiology         (Imaging/Diagnostic         Services)</li> <li>Labor &amp; Delivery (Inpatient)</li> <li>Magnetic Resonance         Imaging (Imaging/Diagnostic         Services)</li> <li>Medical /Surgical Unit         (Inpatient)</li> <li>Medical ICU (Intensive Care         Unit)</li> </ul>
Cardiovascular Associates DBA: Cardiovascular Associates 11601 Ironbridge Road Chester, VA 23831	Services:  • Administration of High Risk Medications (Outpatient)  • Single Specialty Practitioner (Outpatient)
Cardiovascular Associates DBA: Cardiovascular Associates 13700 St. Francis Boulevard Midlothian, VA 23114	Services:      Administration of High Risk Medications (Outpatient)     Single Specialty Practitioner (Outpatient)
Cardiovascular Associates of Virginia DBA: Cardiovascular Associates of Virginia 7001 Forest Ave Suite 200 Richmond, VA 23230	Other Clinics/Practices located at this site:
Grove Avenue Imaging Center DBA: Bon Secours Grove Avenue Imaging Center 2201 Grove Avenue Richmond, VA 23220	Services:  • Outpatient Clinics (Outpatient)
Redskins Training Camp Physical Therapy DBA: Redskins Training Camp Physical Therapy 2401 W. Leigh Street Richmond, VA 23220	Services:  • Outpatient Clinics (Outpatient)
St. Mary's Wound Care Center at Reynolds Crossing DBA: St. Mary's Wound Care Center at Reynolds Crossing 6900 Forest Avenue Richmond, VA 23230	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)

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# **2014 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
Use Alarms Safely	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	8888
	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 2016 - December 2016

		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.	<b>1</b> 2	<b>№</b> 2	

		Compared to other Joint Commission Accredited Organizations				n
		N	lationwide		State	wide
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.	133.00 minutes 664 eligible Patients	54.00	126.00	48.24	108.15
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.	278.00 minutes 665 eligible Patients	203.00	313.00	203.33	276.27

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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 2016 - December 2016

		Compared to Comm	o other Joint nission	
		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	<b>⊚</b> <sup>2</sup>	<b>№</b> 2	

		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 593 eligible Patients	100%	94%	100%	96%

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# **National Quality Improvement Goals**

### Reporting Period: January 2016 - December 2016

Measure Area Explanation Nationwide Statewide

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

		Cor	npared to c Accredit	other Joint ed Organiz		on
		1	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	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.	100% of 69 eligible Patients	100%	98%	100%	100%
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 161 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.	65% of 1075 eligible Patients	75%	53%	71%	53%

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# **National Quality Improvement Goals**

### Reporting Period: January 2016 - December 2016

Compared to other Joint Commission

Accredited Organizations

Measure Area

Explanation

Nationwide

Stroke Care

This category of evidence based measures assesses the overall quality of care provided to Stroke (STK) patients.

		Cor	npared to o Accredit	other Joint ed Organiz		n
		N	lationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Thrombolytic Therapy	Acute ischemic stroke patients who receive a medicine that breaks up blood clots (thrombolytic therapy) within 180 minutes of stroke symptom onset. This measure reports how quickly ischemic stroke patients were given a medication that breaks up blood clots (thrombolytic therapy). Breaking up blood clots increases blood flow to the brain. If blood flow is returned to the brain quickly during a stroke, the risk of brain damage and loss of physical function is decreased. The medicine that breaks up clots in the arteries and allows the return of normal blood flow is called thrombolytic therapy or "t-PA". It is important that this medicine be given quickly after an ischemic stroke is diagnosed.	95% of 38 eligible Patients	100%	90%	100%	86%

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# **National Quality Improvement Goals**

### Reporting Period: January 2016 - December 2016

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		Accredited Organizations		
Measure Area	Explanation	Nationwide	Statewide	
Venous Thromboembolism (VTE)	This category of evidence-based measures assesses the overall quality of care related to prevention and treatment of blood clots.	<b>№</b> <sup>2</sup>	<b>№</b> <sup>2</sup>	

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide		wide		
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
VTE Discharge Instructions	Patients with blood clots who were discharged to home, home with home health, home hospice or discharged/transferred to court/law enforcement on a blood thinning medication with written information. This measure reports the percent of patients who went home on warfarin who received instructions about compliance issues, dietary advice, follow-up monitoring and information about the potential for adverse drug reactions/interactions.	100% of 26 eligible Patients	100%	93%	100%	92%

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