

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

5801 Bremo Road, Richmond, VA



Summary of Quality Information

Symbol Key

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.
•	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.
- 9. The measure results are temporarily suppressed pending resubmission of updated data.10. 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.

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

Accreditation Prog	rams Accreditation Decision	Effective Date	Last Full Su Date	rvey Last On-Site Survey Date
🮯 Hospital	Accredited	10/7/2017	10/6/2017	5/16/2019

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	Certification Decision	Effective	Last Full Revie	w Last On-Site
Programs		Date	Date	Review Date
Advanced Comprehensive Stroke Center	Certification	3/14/2018	3/13/2018	9/11/2018
Output Advanced Palliative Care	Certification	5/1/2018	4/30/2018	4/30/2018
🥝 Heart Failure	Certification	5/12/2018	5/11/2018	5/11/2018
🥝 Ventricular Assist Device	Certification	2/22/2018	2/21/2018	2/21/2018
Certified Programs	Certification Decision	Effective	Last Full Revie	w Last On-Site
		Date	Date	Review Date
Acute Myocardial				

-		Date	Date
Acute Myocardial Infarction	Certification	5/11/2018	5/10/2018
🎯 Joint Replacement - Hip	Certification	3/21/2018	3/20/2018
🮯 Joint Replacement - Knee	Certification	3/21/2018	3/20/2018

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

5/10/2018

3/20/2018

3/20/2018



5801 Bremo Road, Richmond, VA



Summary of Quality Information

Symbol Key

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.
	This organization's performance is below the target range/value.
	This Measure is not applicable for this organization.
•••	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.
- The Measure results are based on a sample of patients.
 The number of months with Measure
- data is below the reporting requirement.
- 9. The measure results are temporarily suppressed pending resubmission of updated data.10. 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.

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

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2019National Patient Safety Goals	\bigotimes	*	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	(10) ²	2 ²	
Jan 2018 - Dec 2018	Immunization	(10) ²		
	Perinatal Care	(²	1	

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

5801 Bremo Road, Richmond, VA



Locations of Care

* Primary Location

Bon Secours St. Mary's Hospital of Richmond Inc. * Joint Commission Advanced Certification Programs: 5801 Bremo Road Richmond, VA 23226 Advanced Comprehensive Stroke Center Image: Stroke Center Advanced Palliative Care Image: Stroke Center Heart Failure Image: Stroke Center Heart Failure
Other Clinics/Practices located at this site:• Bon Secours Advanced Heart Failure CenterServices:• Behavioral Health (Non 24 Hour Care - Adult) (24-hour Acute Care/Crisis Stabilization - Adult)• Neuro/Spine ICU (Intensive Care Unit)• Brachytherapy (Imaging/Diagnostic Services)• Neuro/Spine Unit (Inpatient)• Cardiac Catheterization Lab (Surgical Services)• Normal Newborn Nursery (Ingatient)• Cardiac Catheterization Lab (Surgical Services)• Normal Newborn Nursery

© Copyright 2024, The Joint Commission



Locations of Care

5801 Bremo Road, Richmond, VA

Locations of Care	Available Services
	 Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit)
Bon Secours St. Mary's Hospital of Richmond Inc. 9600 Patterson Ave Henrico, VA 23229	Other Clinics/Practices located at this site: • Bon Secours Patterson Ave. Sports Medicine and Physical Ther Services: • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 7001 Forest Ave Suite 200 Richmond, VA 23230	 Services: Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 9220 Forest Hill Ave Suite 1-A Richmond, VA 23235	Services: Outpatient Clinics (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 6900 Forest Avenue, Suite 115 Richmond, VA 23230	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 2401 W. Leigh Street, Suite 110 Richmond, VA 23220	Services: • Outpatient Clinics (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 2201 Grove Avenue Richmond, VA 23220	Services: • Outpatient Clinics (Outpatient)
Bon Secours St. Mary's Hospital of Richmond Inc. 11601 Ironbridge Road Chester, VA 23831	 Services: Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)

5801 Bremo Road, Richmond, VA



Locations of Care

* Primary Location **Available Services** Locations of Care Bon Secours St. Mary's **Hospital of Richmond** Services: Inc. Administration of High Risk Medications (Outpatient) 13700 St. Francis • Single Specialty Practitioner (Outpatient) Boulevard Midlothian, VA 23114 Bon Secours St. Mary's Hospital of Richmond Services: Inc. Outpatient Clinics (Outpatient) 5855 Bremo Road, Suite • Perform Invasive Procedure (Outpatient) 102, MOB North Richmond, VA 23226 Bon Secours St. Mary's Hospital of Richmond Services: Inc. Outpatient Clinics (Outpatient) 7001 Forest Avenue, Suite 2500 Richmond, VA 23230 Bon Secours St. Mary's **Hospital of Richmond** Services: Inc. Outpatient Clinics (Outpatient) 7001 Forest Avenue, Suite 405 Richmond, VA 23230 Bon Secours St. Mary's Hospital of Richmond Services: Inc. Outpatient Clinics (Outpatient) 7001 Forest Avenue, Suite 101 Richmond, VA 23230 Bon Secours St. Mary's **Hospital of Richmond** Services: Inc. Single Specialty Practitioner (Outpatient) DBA: Bon Secours **Richmond ORC** 2521 Brittons Hill Rd, Richmond, VA 23230 Richmond, VA 23230 Bon Secours St. Mary's **Hospital of Richmond** Services: Inc. Administration of Blood Product (Outpatient) DBA: Bon Secours St. Administration of High Risk Medications (Outpatient) • Mary's Short Pump • Anesthesia (Outpatient) **Emergency Center** Perform Invasive Procedure (Outpatient) 12320 West Broad Street Henrico, VA 23233

5801 Bremo Road, Richmond, VA



2019 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 Infections that are difficult to treat	\bigcirc
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ୍ତ୍ର 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	\bigcirc
	Performing a Time-Out	\bigcirc

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."

5801 Bremo Road, Richmond, VA



National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

		Compared to other Joint 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

				other Joint ed Organiz	ations	
		٨	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.	2 188.00 minutes 730 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.	2 343.00 minutes 730 eligible Patients	207.00	321.00	203.43	281.63

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

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

Symbol Key

This organization achieved the best possible results
 This organization's performance is above the target range/value.
 This organization's performance is similar to the target range/value.
 This organization's performance is below the target range/value.
 This organization's performance is below the target range/value.
 Not displayed

Footnote Key

- The Measure or Measure Set was not reported.
- 2. The Measure Set does not have an overall result.
- 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.
- 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.
- **9.** The measure results are temporarily suppressed pending resubmission of updated data.
- 10. 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.

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

5801 Bremo Road, Richmond, VA



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.	⊘ ²	0 ²

		Compared to other Joint Commission Accredited Organizations				
		Nationwide			Statewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	U U	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.	96% of 559 eligible Patients	100%	94%	100%	96%

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

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

-- Null value or data not displayed.

Symbol Key

This organization achieved the best possible results
 This organization's performance is above the target range/value.
 This organization's performance is similar to the target range/value.
 This organization's performance is below the target range/value.
 Not displayed

Footnote Key

- 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.
- 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.
- **9.** 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.
 There were no eligible rationts that me
- 1. There were no eligible patients that met the denominator criteria.

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

ossible results

ot displayed

Ð

 \oslash

-

ND

1.

2.

3.

4.

5.

8.

9.

11

valid.

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.

reported.

overall result.

This organization achieved the best

This organization's performance is

similar to the target range/value. This organization's performance is

above the target range/value. This organization's performance is

below the target range/value.

Footnote Key

The Measure or Measure Set was not

The number of patients is not enough for comparison purposes.

The organization scored above 90% but was below most other organizations. The Measure results are not statistically

The Measure results are based on a

The number of months with Measure data is below the reporting requirement.

The measure results are temporarily suppressed pending resubmission of

There were no eligible patients that met

the denominator criteria.

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

The measure meets the Privacy Disclosure Threshold rule.

The Measure Set does not have an

Bon Secours St. Mary's Hospital of Richmond Inc.

5801 Bremo Road, Richmond, VA



National Quality Improvement Goals

Reporting Period: January 2018 - December 2018

		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.	2	0 ²

	Explanation	Compared to other Joint Commission Accredited Organizations				
Measure		Nationwide Hospital Top 10% Average			Statewide Top 10% Average	
Medsule	Слріанаціон	Results	Scored at Least:	Rate:	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 50 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 172 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.	66% of 1168 eligible Patients	73%	52%	64%	53%



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

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

Null value or data not displayed. ----