



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



Summary of Quality Information

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 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 Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	10/7/2017	10/6/2017	8/22/2018

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 Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
Advanced Comprehensive Stroke Center	Certification	3/14/2018	3/13/2018	9/11/2018
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 Date	Last Full Review Date	Last On-Site Review Date
Acute Myocardial Infarction	Certification	5/11/2018	5/10/2018	5/10/2018
Joint Replacement - Hip	Certification	3/21/2018	3/20/2018	3/20/2018
Joint Replacement - Knee	Certification	3/21/2018	3/20/2018	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



Summary of Quality Information

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 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."

Hospital

2018 National Patient Safety Goals

National Quality Improvement Goals:

Reporting Period:
Oct 2017 -
Sep 2018

Emergency Department

Immunization

Perinatal Care

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



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



Locations of Care

* Primary Location

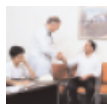
Locations of Care	Available Services
Bon Secours Associated Internists 7001 Forest Avenue, Suite 405 Richmond, VA 23230	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours Commonwealth Internal Medicine 9220 Forest Hill Ave Suite 1-A Richmond, VA 23235	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours Monument Internal Medicine 5855 Bremo Road, Suite 102, MOB North Richmond, VA 23226	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Bon Secours Palliative Medicine 5855 Bremo Rd., Suite 403, MOB North Richmond, VA 23226	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Noah's Children: St. Mary's Hospital Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours Patterson Avenue Family Practice 9600 Patterson Ave Henrico, VA 23229	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Bon Secours Patterson Ave. Sports Medicine and Physical Ther Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Bon Secours Physical Therapy Washington Redskins Training Ce 2401 W. Leigh Street, Suite 110 Richmond, VA 23220	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours Richmond-Off-site Reprocessing Center (ORC) DBA: Bon Secours Richmond ORC 2521 Brittons Hill Rd, Richmond, VA 23230 Richmond, VA 23230	Services: <ul style="list-style-type: none"> Single Specialty Practitioner (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Bon Secours St. Mary's Hospital * 5801 Bremono Road Richmond, VA 23226	<p>Joint Commission Advanced Certification Programs:</p> <ul style="list-style-type: none"> Advanced Comprehensive Stroke Center Advanced Palliative Care Heart Failure Ventricular Assist Device <p>Joint Commission Certified Programs:</p> <ul style="list-style-type: none"> Acute Myocardial Infarction Joint Replacement - Hip Joint Replacement - Knee <p>Other Clinics/Practices located at this site:</p> <ul style="list-style-type: none"> Bon Secours Advanced Heart Failure Center Patricia C. Lane MBA, SCRNI <p>Services:</p> <ul style="list-style-type: none"> 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) Chemical Dependency (24-hour Acute Care/Crisis Stabilization - Adult) (Detox - Adult) 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) Hazardous Medication Compounding (Inpatient) Hematology/Oncology Unit (Inpatient) Neuro/Spine ICU (Intensive Care Unit) Neuro/Spine Unit (Inpatient) Neurosurgery (Surgical Services) Non-Sterile Medication Compounding (Inpatient) 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) Sterile Medication Compounding (Inpatient) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Thoracic Surgery (Surgical Services) Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services)



Locations of Care

* Primary Location

Locations of Care	Available Services
	<ul style="list-style-type: none"> Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit) Vascular Surgery (Surgical Services)
Bon Secours St. Mary's Short Pump Emergency Center DBA: Bon Secours St. Mary's Short Pump Emergency Center 12320 West Broad Street Henrico, VA 23233	Services: <ul style="list-style-type: none"> Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Perform Invasive Procedure (Outpatient)
Bon Secours St. Mary's Hospital Cardiopulmonary Rehabilitati 7001 Forest Avenue, Suite 101 Richmond, VA 23230	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours St. Mary's Imaging at Grove Avenue 2201 Grove Avenue Richmond, VA 23220	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Bon Secours West End Internal Medicine 7001 Forest Avenue, Suite 2500 Richmond, VA 23230	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Cardiovascular Associates of Virginia 11601 Ironbridge Road Chester, VA 23831	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)
Cardiovascular Associates of Virginia 13700 St. Francis Boulevard Midlothian, VA 23114	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)
Cardiovascular Associates of Virginia 7001 Forest Ave Suite 200 Richmond, VA 23230	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Single Specialty Practitioner (Outpatient)



Locations of Care




* Primary Location

Locations of Care	Available Services
St. Mary's Wound Care Center at Reynolds Crossing 6900 Forest Avenue, Suite 115 Richmond, VA 23230	Services: <ul style="list-style-type: none"> • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)



















2018 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	
	Eliminating Transfusion Errors	
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	
Improve the safety of using medications.	Labeling Medications	
	Reducing Harm from Anticoagulation Therapy	
	Reconciling Medication Information	
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
	Preventing Multi-Drug Resistant Organism Infections	
	Preventing Central-Line Associated Blood Stream Infections	
	Preventing Surgical Site Infections	
	Preventing Catheter-Associated Urinary Tract Infection	
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	
Universal Protocol	Conducting a Pre-Procedure Verification Process	
	Marking the Procedure Site	
	Performing a Time-Out	



National Quality Improvement Goals

Reporting Period: October 2017 - September 2018



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

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.

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

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Most:	Weighted Median:	Top 10% Scored at Most:	Weighted 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.	 ² 186.00 minutes 730 eligible Patients	56.00	136.00	52.82	103.74
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.	 ² 345.00 minutes 730 eligible Patients	207.00	320.00	202.77	281.83



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.






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



National Quality Improvement Goals

Reporting Period: October 2017 - September 2018



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

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.

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	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation					
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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 570 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.

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



National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

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

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.

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	2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Hospital Results	Nationwide		Statewide	
			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 57 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. 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.	 1% of 168 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 1179 eligible Patients	73%	51%	65%	54%



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.

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