

# Accreditation Quality Report





Quality Check®



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

DBA: Northern Regional Hospital,

830 Rockford Street, Mount Airy, NC



# **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.
- 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.
- The organization scored above 90% but was below most other organizations.
   The Measure results are not statistically
- 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.
   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<br>Date | Last Full Survey<br>Date | Last On-Site<br>Survey Date |
|------------------------|------------------------|-------------------|--------------------------|-----------------------------|
| 🮯 Hospital             | Accredited             | 2/22/2020         | 2/21/2020                | 2/21/2020                   |
| olimitation Laboratory | Accredited             | 7/27/2019         | 7/26/2019                | 7/26/2019                   |

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

Hospital

| <b>Advanced Certification</b> | <b>Certification Decision</b> | Effective  | Last Full Review Last On-Site |                    |  |
|-------------------------------|-------------------------------|------------|-------------------------------|--------------------|--|
| Programs                      |                               | Date       | Date                          | <b>Review Date</b> |  |
| 🥝 Primary Stroke Center       | Certification                 | 12/10/2019 | 12/9/2019                     | 12/9/2019          |  |

#### **Special Quality Awards**

2014 Top Performer on Key Quality Measures® 2013 Top Performer on Key Quality Measures®

|                        |                                     | Compared to other Joint Commission Accredited<br>Organizations |                        |  |
|------------------------|-------------------------------------|--|------------------------|--|
|                        |                                     | Nationwide   | Statewide              |  |
| Hospital               | National Quality Improvement Goals: |  |                        |  |
| Reporting<br>Period:   | Emergency Department                | 2 <sup>2</sup>   | <b>NO</b> <sup>2</sup> |  |
| Oct 2018 -<br>Sep 2019 | Perinatal Care                      | <b>()</b> <sup>2</sup>   | 2 <sup>2</sup>         |  |
| Laboratory             | 2019National Patient Safety Goals   | Ø  | <b>∞</b> *             |  |

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





# **Locations of Care**

#### \* Primary Location Locations of Care **Available Services Northern Hospital District of Surry County** Services: DBA: Northern Pediatrics General Laboratory Tests 100 North Pointe • Outpatient Clinics (Outpatient) Boulevard Mount Airy, NC 27030 **Northern Hospital** Joint Commission Advanced Certification Programs: **District of Surry** Primary Stroke Center County DBA: Northern Regional **Other Clinics/Practices located at this site:** Hospital Northern Cardiac Rehabilitation 830 Rockford Street Mount Airy, NC 27030 Services: • CT Scanner Non-Sterile Medication (Imaging/Diagnostic Compounding (Inpatient) Services) Normal Newborn Nursery • Ear/Nose/Throat Surgery (Inpatient) (Surgical Services) Nuclear Medicine EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Ophthalmology (Surgical (Imaging/Diagnostic Services) Services) Orthopedic Surgery (Surgical Gastroenterology (Surgical Services) Services) General Laboratory Tests • Outpatient Clinics (Outpatient) • GI or Endoscopy Lab Positron Emission Tomography • (Imaging/Diagnostic (PET) (Imaging/Diagnostic Services) Services) • Gynecological Surgery Post Anesthesia Care Unit (Surgical Services) (PACU) (Inpatient) • Gynecology (Inpatient) Sterile Medication Hazardous Medication Compounding (Inpatient) Compounding (Inpatient) Swing Beds Inpatient Unit (Inpatient) Teleradiology Labor & Delivery (Inpatient) (Imaging/Diagnostic Services) Toxicology Magnetic Resonance Imaging (Imaging/Diagnostic Ultrasound • Services) (Imaging/Diagnostic Services) Medical /Surgical Unit • Urology (Surgical Services) (Inpatient) Medical ICU (Intensive Care Unit) Northern Hospital **District of Surry County** Services: DBA: Northern Urology • General Laboratory Tests 423 S. South Street, Suite Outpatient Clinics (Outpatient) 101 Perform Invasive Procedure (Outpatient) Mount Airy, NC 27030 Northern Hospital **District of Surry County** Services: DBA: Northern Obstetrics • General Laboratory Tests & Gynecology • Outpatient Clinics (Outpatient) 510 S. South Street Perform Invasive Procedure (Outpatient) Mount Airy, NC 27030

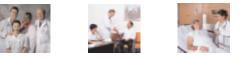




# **Locations of Care**

| Locations of Care  | Available Services   |
|--|--|
| Northern Hospital<br>District of Surry County<br>DBA: Northern Rehab<br>314 S. South Street, Suite<br>100<br>Mount Airy, NC 27030              | Other Clinics/Practices located at this site: <ul> <li>Northern</li> </ul> <li>Services: <ul> <li>Outpatient Clinics (Outpatient)</li> </ul> </li> |
| Northern Hospital<br>District of Surry County<br>DBA: Northern<br>Cardiology<br>708 S South Street, Suite<br>200<br>Mount Airy, NC 27030       | Services:<br>• General Laboratory Tests<br>• Outpatient Clinics (Outpatient)   |
| Northern Hospital<br>District of Surry County<br>DBA: Northern Pain<br>Management<br>110 Dutchman's Court<br>Elkin, NC 28621                   | Services:<br>• General Laboratory Tests<br>• Outpatient Clinics (Outpatient)<br>• Perform Invasive Procedure (Outpatient)<br>• Toxicology          |
| Northern Hospital<br>District of Surry County<br>DBA: Northern Pain<br>Management<br>708 S. South Street, Suite<br>400<br>Mount Airy, NC 27030 | Services:<br>• Outpatient Clinics (Outpatient)   |
| Northern Hospital<br>District of Surry County<br>DBA: Northern<br>Gastroenterology<br>708 S South Street, Suite<br>100<br>Mount Airy, NC 27030 | Services:<br>• General Laboratory Tests<br>• Outpatient Clinics (Outpatient)   |
| Northern Hospital<br>District of Surry County<br>DBA: Northern Family<br>Medicine<br>280 N Pointe Blvd<br>Mount Airy, NC 27030                 | Services:<br>• General Laboratory Tests<br>• Outpatient Clinics (Outpatient)<br>• Perform Invasive Procedure (Outpatient)                          |
| Northern Hospital<br>District of Surry County<br>DBA: Northern<br>Orthopaedics<br>314 S. South Street, Suite<br>100<br>Mount Airy, NC 27030    | Services:<br>• Outpatient Clinics (Outpatient)   |
| Northern Hospital<br>District of Surry County<br>DBA: Northern General<br>Surgery<br>708 S South Street, Suite<br>100<br>Mount Airy, NC 27030  | Services:<br>• Outpatient Clinics (Outpatient)<br>• Perform Invasive Procedure (Outpatient)  |

DBA: Northern Regional Hospital, 830 Rockford Street, Mount Airy, NC



# **National Quality Improvement Goals**

#### Reporting Period: October 2018 - September 2019

|                         |   | Compared to other Joint<br>Commission |                |
|-------------------------|---|---------------------------------------|----------------|
|                         |   | Accredited C                          | Organizations  |
| Measure Area            | Explanation   | Nationwide                            | Statewide      |
| Emergency<br>Department | This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission. | @ <sup>2</sup>                        | @ <sup>2</sup> |

|  |   | Compared to other Joint Commission<br>Accredited Organizations |                               |                         |                               |                         |
|--|---|--|-------------------------------|-------------------------|-------------------------------|-------------------------|
|  |   | Ν  | lationwide                    |                         | State                         | wide                    |
| Measure  | Explanation   | Hospital<br>Results  | Top 10%<br>Scored<br>at Most: | Weighte<br>d<br>Median: | Top 10%<br>Scored<br>at Most: | Weighte<br>d<br>Median: |
| Admit Decision Time to ED<br>Departure Time for Admitted<br>Patients | The amount of time (in minutes) it<br>takes from the time the physician<br>decides to admit a patient into the<br>hospital from the Emergency<br>Department until the patient actually<br>leaves the ED to go to the inpatient<br>unit. | VOD <sup>2</sup><br>106.00 minutes<br>743 eligible<br>Patients | 55.00                         | 134.00                  | 53.77                         | 128.95                  |

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

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

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

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### Northern Hospital District of Surry County

DBA: Northern Regional Hospital,

830 Rockford Street, Mount Airy, NC



# **National Quality Improvement Goals**

#### Reporting Period: October 2018 - September 2019

|                |  | Compared to other Joint<br>Commission<br>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>™</b> <sup>2</sup> |

|                               |  | Compared to other Joint Commission<br>Accredited Organizations |                                |                  |   |                          |
|-------------------------------|--|--|--------------------------------|------------------|---|--------------------------|
| Measure                       | Explanation  | N<br>Hospital<br>Results                                       | Top 10%<br>Scored<br>at Least: | Average<br>Rate: | State<br>Top 10%<br>Scored<br>at Least: | wide<br>Average<br>Rate: |
| Antenatal Steroids            | This measure reports the overall<br>number of mothers who were at risk<br>of preterm delivery at 24-32 weeks<br>gestation receiving antenatal steroids<br>prior to delivering preterm newborns.<br>Antenatal steroids are steroids given<br>before birth.  | <b>№</b> <sup>4</sup>  | 100%                           | 99%              | 100%                                    | 99%                      |
| Elective Delivery             | This measure reports the overall<br>number of mothers who had elective<br>vaginal deliveries or elective<br>cesarean sections at equal to and<br>greater than 37 weeks gestation to<br>less than 39 weeks gestation. An<br>elective delivery is the delivery of a<br>newborn(s) when the mother was not<br>in active labor or presented with<br>spontaneous ruptured membranes<br>prior to medical induction and/or<br>cesarean section. | 0% of<br>32 eligible<br>Patients                               | 0%                             | 2%               | 0%                                      | 1%                       |
| Exclusive Breast Milk Feeding | This measure reports the overall<br>number of newborns who are<br>exclusively breast milk fed during the<br>newborns entire hospitalization.<br>Exclusive breast milk feeding is when<br>a newborn receives only breast milk<br>and no other liquids or solids except<br>for drops or syrups consisting of<br>vitamins, minerals, or medicines.  | O<br>37% of<br>289 eligible<br>Patients                        | 73%                            | 51%              | 68%                                     | 46%                      |



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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<br>communication among<br>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.
 The organization has not met the National Patient Safety Goal.
 The Goal is not applicable for this organization.

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