



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

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	11/23/2022	7/23/2021	11/22/2022

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	3/12/2022	3/11/2022	3/11/2022
Ventricular Assist Device	Certification	10/16/2021	10/15/2021	10/15/2021

Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
--------------------	------------------------	----------------	-----------------------	--------------------------

Acute Myocardial Infarction	Certification	10/14/2021	10/13/2021	10/13/2021
Chest Pain	Certification	10/12/2021	10/11/2021	10/11/2021
Heart Failure	Certification	10/13/2021	10/12/2021	10/12/2021
Joint Replacement - Hip	Certification	5/8/2021	5/7/2021	5/7/2021
Joint Replacement - Knee	Certification	5/8/2021	5/7/2021	5/7/2021
Osteoporosis	Certification	7/11/2022	5/20/2022	5/20/2022

Other Accredited Programs/Services

- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

Special Quality Awards

- 2014 Top Performer on Key Quality Measures®
- 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- 2014 Gold Plus Get With The Guidelines - Stroke
- 2012 ACS National Surgical Quality Improvement Program
- 2010 Silver - The Medal of Honor for Organ Donation



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

2022 National Patient Safety Goals

National Quality Improvement Goals:

Reporting Period:
Apr 2020 -
Mar 2021

Emergency Department

Perinatal Care

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



²



²



²



²



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



Locations of Care

* Primary Location

Locations of Care	Available Services
Dermatology Surgery - Country Club 4618 Country Club Road Winston Salem, NC 27104	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> General Dermatology NCBH Outpatient Clinic Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Dialysis Access Group - Miller 120 Miller Street Winston Salem, NC 27103	Services: <ul style="list-style-type: none"> Anesthesia (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Downtown Health Plaza 1200 N Martin Luther King Jr., Drive Winston Salem, NC 27101	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Adult Medicine-Downtown Health Plaza Care Plus Dermatology-Downtown Health Plaza Neurology-Downtown Health Plaza Obstetrics and Gynecology-Downtown Health Plaza Pediatrics-Downtown Health Plaza Renal-Downtown Health Plaza Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Urgent Care (Outpatient)
Hematology and Oncology - Elkin 401 Eldon Parks Dr. Elkin, NC 28621	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Hazardous Medication Compounding (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Hematology and Oncology - Lexington 107 West Medical Park Drive Suite 101 Lexington, NC 27292	Services: <ul style="list-style-type: none"> Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Hazardous Medication Compounding (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Hematology and Oncology - Mt. Airy 450 Price Street Mount Airy, NC 27030	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Hazardous Medication Compounding (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Medical Plaza Clemmons NCBH Clinics 2311 Lewisville-Clemmons Road Clemmons, NC 27012	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> • Allergy, Asthma and Immunology-Clemmons • Brenner Children's Specialty Services-Clemmons • Cancer Survivorship • Hematology and Oncology-Clemmons • Rheumatology Services: <ul style="list-style-type: none"> • Administration of Blood Product (Outpatient) • Administration of High Risk Medications (Outpatient) • Hazardous Medication Compounding (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Medical Plaza Clemmons of NCBH Clinics 2341 Lewisville-Clemmons Road Clemmons, NC 27012	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> • Breast Care Services-Clemmons • Cancer Survivorship • ENT/Head and Neck Surgery-Clemmons • Obstetrics and Gynecology-Clemmons • Spine Center-Clemmons • Vein Services-Clemmons Services: <ul style="list-style-type: none"> • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Medical Plaza Country Club 4610 Country Club Road Winston Salem, NC 27104	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> • Cardiology • Diabetes and Endocrinology Center - Adult • Diabetes Center - Pediatrics Services: <ul style="list-style-type: none"> • Administration of High Risk Medications (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)
Medical Plaza-Miller 131 Miller Street Winston Salem, NC 27103	Joint Commission Certified Programs: <ul style="list-style-type: none"> • Osteoporosis Other Clinics/Practices located at this site: <ul style="list-style-type: none"> • Endocrinology • ENT/Head and Neck Surgery - Comp Rehab • Family Medicine-Sports Medicine • General Neurology • Neuropsychology • Orthopaedics - Multispecialty Clinic Medical Plaza Miller • Physical Medicine & Rehabilitation • Physical Medicine and Rehab • Plastic Surgery • Rheumatology Services: <ul style="list-style-type: none"> • Anesthesia (Outpatient) • Outpatient Clinics (Outpatient) • Perform Invasive Procedure (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
North Carolina Baptist Hospital * Medical Center Boulevard Winston Salem, NC 27157	<p>Joint Commission Advanced Certification Programs:</p> <ul style="list-style-type: none"> Advanced Comprehensive Stroke Center Ventricular Assist Device <p>Joint Commission Certified Programs:</p> <ul style="list-style-type: none"> Acute Myocardial Infarction Chest Pain Heart Failure Joint Replacement - Hip Joint Replacement - Knee <p>Other Clinics/Practices located at this site:</p> <ul style="list-style-type: none"> 3rd Floor CC - Cardiology, Pulmonary Medicine, Rad Onc 9th Floor JT Neuropsychology and Neurology Abdominal Organ Transplant Apheresis Bone Marrow Transplant Outpatient Clinic Brenner Children's Hospital, Pediatric Otolaryngology (ENT) Cancer Survivorship Clinic 2 CC Device Diagnostic Neurology - Main Floor RT Eye Center - Janeway General Neurology 4JT Geriatrics Clinic Hematology Oncology Clinic and Neuropsychology 3CC Internal Medicine Multispecialty Clinics - 7JT Interventional Radiology Clinic Lactation & OB Care Clinic - MC AW Main Floor Neurology Pediatrics Neurosurgery 4JT Pediatric Hem/Onc, Neurosurgery, Neuropsychology Pediatric Specialties - BCH 7th Floor Preoperative Assessment Clinic Radiation Oncology 1st Floor CC Surgery Multispecialty Clinics 5JT Surgical Oncology - CT, Ortho, Endocrinology, General, GYN, Wound Care and Hyperbaric Chamber <p>Services:</p> <ul style="list-style-type: none"> Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult/Child/Youth) Brachytherapy (Imaging/Diagnostic Services) Burn Unit (Inpatient) Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery (Surgical Services) Cardiovascular Unit (Inpatient) Community Integration (Non 24 Hour Care) Coronary Care 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) Nuclear Pharmacy (Inpatient) Ophthalmology (Surgical Services) Orthopedic Surgery (Surgical Services) Orthopedic/Spine Unit (Inpatient) Outpatient Clinics (Outpatient) Pediatric Unit (Inpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
	<ul style="list-style-type: none"> CT Scanner (Imaging/Diagnostic Services) Dialysis Unit (Inpatient) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Family Support (Non 24 Hour Care) Gastroenterology (Surgical Services) 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) Medical ICU (Intensive Care Unit) Plastic Surgery (Surgical Services) Positron Emission Tomography (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient) Radiation Oncology (Imaging/Diagnostic Services) Rehabilitation Unit (Inpatient, 24-hour Acute Care/Crisis Stabilization) Sterile Medication Compounding (Inpatient) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Thoracic Surgery (Surgical Services) Transplant Surgery (Surgical Services) Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services) Vascular Surgery (Surgical Services)
Pain Services - Brookstown 605 Cotton Street Winston Salem, NC 27101	Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Perform Invasive Procedure (Outpatient) Urgent Care (Outpatient)
Stratford Executive Park 500 Shepherd St. Suites 200, 201, 300 Winston Salem, NC 27103	Other Clinics/Practices located at this site: <ul style="list-style-type: none"> Comprehensive Fetal Care Center Gastroenterology, Rheumatology, Neurology - Shepherd Street General Surgery Obstetrics & Gynecology Pediatric Neonatology Pediatric Urology Sleep clinic Services: <ul style="list-style-type: none"> Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)



Locations of Care




* Primary Location

Locations of Care	Available Services
Winston East Pediatrics of Baptist Hospital 2295 E. 14th Street Winston Salem, NC 27101	Services: <ul style="list-style-type: none">• Outpatient Clinics (Outpatient)



2022 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	
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	
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: April 2020 - March 2021

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	Weighted	Statewide	Weighted
			Top 10% Scored at Most:	Median:	Top 10% Scored at Most:	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.	² 151 minutes 650 eligible Patients	49	159	---- ³	---- ³
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.	² 368 minutes 652 eligible Patients	202	382	---- ³	---- ³



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: April 2020 - March 2021

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	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	Average Rate:
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	8	16%	25%	17%	23%
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 175 eligible Patients	0%	2%	0%	2%
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.	 29% of 2117 eligible Patients	71%	50%	64%	44%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	 3439% of 1890 eligible Patients	212%	1780%	389%	1662%
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	 4603% of 1890 eligible Patients	1508%	3084%	1681%	2848%



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: April 2020 - March 2021

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	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average Rate:	Statewide	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	 1164% of 1890 eligible Patients	Top 10% Scored at Least:	1303%	Top 10% Scored at Least:	1186%



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."