



[Skip to main content](#)

Organizations that have achieved  
The Gold Seal of Approval® from  
The Joint Commission®



# Quality Report





# Alaska Regional Hospital

HCO ID: 10207  
2801 DeBarr Road  
Anchorage, AK, 99508  
(907) 264-1713  
[www.alaskaregional.com](http://www.alaskaregional.com)

## Summary of Quality Information

### Accreditation Programs

#### [View Accreditation History](#)

	<b>Accreditation Decision</b>	<b>Effective Date</b>	<b>Last Full Survey Date</b>	<b>Last On-Site Survey Date</b>
	<b>Hospital</b> <a href="#">Accredited</a>	7/15/2022	7/14/2022	7/14/2022

## Core Certification Programs

### [View Certification History](#)



#### [Joint Replacement - Hip](#)

##### Certification Decision

##### [Certification](#)

##### Effective Date

12/10/2021

##### Last Full Survey Date

12/9/2021

##### Last On-Site Survey Date

12/9/2021



#### [Joint Replacement - Knee](#)

##### Certification Decision

##### [Certification](#)

##### Effective Date

12/10/2021

##### Last Full Survey Date

12/9/2021

##### Last On-Site Survey Date

12/9/2021



#### [Spine Surgery](#)

##### Certification Decision

##### [Certification](#)

##### Effective Date

12/11/2021

##### Last Full Survey Date

12/10/2021

##### Last On-Site Survey Date

12/10/2021

## Sites

### Alaska Regional Hospital

2801 DeBarr Road  
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#### Available Services

- Brachytherapy (Imaging/Diagnostic Services )
- Cardiac Catheterization Lab (Surgical Services )

- Cardiac Surgery (Surgical Services )
- Cardiothoracic Surgery (Surgical Services )
- Cardiovascular Unit (Inpatient )
- CT Scanner (Imaging/Diagnostic Services )
- Dialysis Unit (Inpatient )
- 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 )
- Interventional Radiology (Inpatient )
- Interventional Radiology (Imaging/Diagnostic Services )
- Labor & Delivery (Inpatient )
- Magnetic Resonance Imaging (Imaging/Diagnostic Services )
- Medical /Surgical Unit (Inpatient )
- Medical ICU (Intensive Care Unit )
- Neuro/Spine ICU (Intensive Care Unit )
- 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 )
- Pediatric Unit (Inpatient )
- Plastic Surgery (Surgical Services )
- Post Anesthesia Care Unit (PACU) (Inpatient )
- Rehabilitation Unit (Inpatient )
- Rehabilitation Unit (24-hour Acute Care/Crisis Stabilization )
- Sterile Medication Compounding (Inpatient )
- Surgical ICU (Intensive Care Unit )
- Surgical Unit (Inpatient )
- Teleradiology (Imaging/Diagnostic Services )
- Thoracic Surgery (Surgical Services )
- Ultrasound (Imaging/Diagnostic Services )
- Urology (Surgical Services )
- Vascular Surgery (Surgical Services )

## Certification Programs

- Joint Replacement - Hip
- Joint Replacement - Knee
- Spine Surgery

## Cooperative Agreements

**Hospital** - Accredited by [American College of Surgeons-Commission on Cancer \(ACoS-COC\)](#)

# National Patient Safety Goals and National Quality Improvement Goals

## Symbol Key

- This organization achieved the best possible results
- This organization's performance is better than the target range/value
- This organization's performance is similar to the target range/value
- This organization's performance is worse than the target range/value
- This measure is not applicable for this organization
- Not displayed

## Measures Footnote Key

1. The measure or measure set was not reported.
2. The measure set does not have an overall result.
3. The number 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.

\* This information can also be viewed at [Hospital Compare](#).

\*\* Indicates per 1000 hours of patient care.

\*\*\* The measure was not in effect for this quarter.

---- Null value or data not displayed.

Hospital	<a href="#">2022 National Patient Safety Goals</a>	Nationwide Comparison:	Statewide Comparison:
	<p>Reporting Period: April 2020 - March 2021</p> <p><a href="#">National Quality Improvement Goals:</a></p> <p><a href="#">Perinatal Care</a></p>	<p>Nationwide Comparison: </p> <p>2</p>	<p>Statewide Comparison:  2</p>

## [New Changes to Quarterly Measure](#)

### [Download Quarterly Measure Results](#)

\* State results are not calculated for the National Patient Safety Goals.

## National Quality Improvement Goals:

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Measure Area	Nationwide	Statewide
Perinatal Care Compared to Other Joint Commission Accredited Organizations	2	2
<a href="#">Read More</a>		

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate	Average Rate	Average Rate
Elective Delivery <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	0% of 49 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	0%	2%	Average Rate	0% 3%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Apr - Jun 2020**

49

0%

2%

**Jul - Sep 2020**

49

0%

2%

**Oct - Dec 2020**

49

0%

2%

**Jan - Mar 2021**

49

0%

3%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Cesarean Birth <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	⊕ 0% of Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	16%	25%	Average Rate	9% 18%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Apr - Jun 2020**

1

1

25%

**Jul - Sep 2020**

1

1

25%

**Oct - Dec 2020**

1

1

26%

**Jan - Mar 2021**

1

1

25%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Exclusive Breast Milk Feeding <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	✔ 60% of 421 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	71%	50%	Average Rate	87% 67%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Apr - Jun 2020**

421

61%

53%

**Jul - Sep 2020**

421

63%

50%

**Oct - Dec 2020**

421

55%

49%

**Jan - Mar 2021**

421

62%

49%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate	Average Rate	10% 15%
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	⊕ 17% of 403 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	5%	13%	Average Rate	10% 15%



## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Apr - Jun 2020**

403

30%

13%

**Jul - Sep 2020**

403

11%

13%

**Oct - Dec 2020**

403

8%

13%

**Jan - Mar 2021**

403

22%

13%