



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, 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 the key area of 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.

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

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."

Accreditation Decision		Decision Effective Date	
Accredited		August 01, 2008	
Accredited Programs		Last Full Survey Date	Last On-Site Survey Date
Medicare/Medicaid Certification-Based Long Term Care		7/6/2011	7/6/2011
Medicare/Medicaid Certification-Based Long Term Care	2008National Patient Safety Goals	Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
			*



Locations of Care




* Primary Location

Locations of Care	Available Services
Radius HealthCare Center at Danvers * 56 Liberty Street Danvers, MA 01923	<ul style="list-style-type: none">• Dementia Care• Long Term Care• Rehabilitation Services• Skilled Nursing Care


















2008 National Patient Safety Goals

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Medicare/Medicaid Certification-Based Long Term Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of resident identification.	Use at least two resident identifiers when providing care, treatment or services.	
	Prior to the start of any surgical or invasive procedure, conduct a final verification process, (such as a "time out,") to confirm the correct resident, procedure and site, using active—not passive—communication techniques.	
Improve the effectiveness of communication among caregivers.	For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the information record and "read-back" the complete order or test result.	
	Standardize a list of abbreviations, acronyms, symbols, and dose designations that are not to be used throughout the organization.	
	Measure and assess, and if appropriate, take action to improve the timeliness of reporting, and the timeliness of receipt by the responsible licensed caregiver, of critical test results and values.	
	Implement a standardized approach to "hand off" communications, including an opportunity to ask and respond to questions.	
Improve the safety of using medications.	Identify and, at a minimum, annually review a list of look-alike/sound-alike drugs used by the organization, and take action to prevent errors involving the interchange of these drugs.	
	Reduce the likelihood of patient harm associated with the use of anticoagulation therapy.	
Reduce the risk of health care-associated infections.	Comply with current World Health Organization (WHO) Hand Hygiene Guidelines or Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.	
	Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.	
Accurately and completely reconcile medications across the continuum of care.	There is a process for comparing the resident's current medications with those ordered for the resident while under the care of the organization.	
	A complete list of the resident's medications is communicated to the next provider of service when a resident is referred or transferred to another setting, service, practitioner or level of care within or outside the organization. The complete list of medications is also provided to the resident on discharge from the facility.	
Reduce the risk of resident harm resulting from falls.	Implement a fall reduction program including an evaluation of the effectiveness of the program.	
Reduce the risk of influenza and pneumococcal disease in institutionalized older adults.	Develop and implement a protocol for administration and documentation of the flu vaccine.	
	Develop and implement a protocol for administration and documentation of the pneumococcus vaccine.	





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Medicare/Medicaid Certification-Based Long Term Care

Safety Goals	Organizations Should	Implemented
	Develop and implement a protocol to identify new cases of influenza and to manage an outbreak.	
Encourage residents' active involvement in their own care as a resident safety strategy.	Define and communicate the means for residents and their families to report concerns about safety and encourage them to do so.	
Prevent health care-associated pressure ulcers (decubitus ulcers).	Assess and periodically reassess each resident's risk for developing a pressure ulcer (decubitus ulcer) and take action to address any identified risks.	