

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

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
🮯 Home Care	Accredited	6/23/2018	6/22/2018	6/22/2018
📀 Hospital	Accredited	6/23/2018	6/22/2018	7/27/2018

Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS) Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	v Last On-Site Review Date
🥝 Heart Failure	Certification	7/18/2019	5/20/2019	5/20/2019
orimary Stroke Center	Certification	3/5/2019	3/4/2019	3/4/2019
Certified Programs	Certification Decision	Effective	Last Full Review	v Last On-Site
		Date	Date	Review Date
🥝 Joint Replacement - Hip	Certification	2/6/2019	2/5/2019	2/5/2019
🥝 Joint Replacement - Knee	Certification	2/6/2019	2/5/2019	2/5/2019

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® 2013 Gold Plus Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredited Organizations	
		Nationwide Statewid	
Home Care	2018National Patient Safety Goals	Ø	*
Hospital	2018National Patient Safety Goals	Ø	*

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

Symbol Key

0	This organization achieved the best possible results.
	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	This organization's performance is below the target range/value.
	This Measure is not applicable for this organization.
-	Not displayed

Footnote Key

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- 2. The Measure Set does not have an overall result.
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- 4. The measure meets the Privacy Disclosure Threshold rule.
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- 7. The Measure results are based on a sample of patients.
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 Test Measure: a measure being
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Compared to other Joint Commission Accredited



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		Organizations	
		Nationwide	Statewide
	National Quality Improvement Goals:		
Reporting Period:	Emergency Department	(10) ²	2 ²
Oct 2018 - Sep 2019	Immunization	(1) ²	2 ²
	Perinatal Care	(1) ²	1

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Locations of Care

Locations of Care	Available Services
Doylestown Hospital * 595 West State Street Doylestown, PA 18901	 Joint Commission Advanced Certification Programs: Heart Failure Primary Stroke Center Joint Commission Certified Programs: Joint Replacement - Hip Joint Replacement - Knee Other Clinics/Practices located at this site: Doylestown Health Cardiology Services: Cardiac Catheterization Lab (Surgical Services) Cardiac Surgery (Surgical Services) Cardiothoracic Surgery Normal Newborn Nursery (Inpatient) Nuclear Medicine
	 (Surgical Services) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) G or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Inpatient Unit (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Labor & Delivery (Inpatient) Medical /Surgical Unit (Inpatient) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit)



Locations of Care

Locations of Care	Available Services
Doylestown Hospital 847 Easton Road Warrington, PA 18976	Other Clinics/Practices located at this site: • Suite 2200 Radiology Services • Suite 2400 Radiology and Outpatient Lab • Suite 2800 Doylestown Hospital Cardiac Services • Suite L700 Cardiac Rehabilitation Services: • Outpatient Clinics (Outpatient)
Doylestown Hospital 599 West State Street Doylestown, PA 18901	Other Clinics/Practices located at this site: • Suite 101 Sleep Center • Suite 102 Endoscopy Lab • Suite 102 MRI • Suite 302 Vascular Ultrasound • Suite 307 Cancer Services • Outpatient Clinics (Outpatient)
Doylestown Hospital 315 West State Street Doylestown, PA 18901	Services: • Outpatient Clinics (Outpatient)
Doylestown Hospital Home Care / Visiting Nurse 4259 West Swamp Rd., Suite 204, Doylestown, PA 18902 Doylestown, PA 18901	Services: • Home Health Aides • Home Health, Non-Hospice Services • Hospice Care • Medical Social Services



2018 National Patient Safety Goals

Home Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the safety of using medications.	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø

Symbol Key

The organization has met the National Patient Safety Goal.
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 The Goal is not applicable for this organization.



2018 National Patient Safety Goals

Hospital

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

Symbol Key

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595 West State Street, Doylestown, PA



National Quality Improvement Goals

Reporting Period: October 2018 - September 2019

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		Compared to other Joint Commission	
		Accredited C	rganizations
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	O ²

		Compared to other Joint Commission Accredited Organizations				'n
		Nationwide State		ewide		
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d 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.	ND 2 164.00 minutes 894 eligible Patients	55.00	134.00	69.97	130.62
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.	2 340.00 minutes 901 eligible Patients	200.00	344.00	216.84	296.95

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This information can also be viewed at www.hospitalcompare.hhs.gov -- Null value or data not displayed.



National Quality Improvement Goals

Reporting Period: October 2018 - September 2019

		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	0 ²

		Compared to other Joint Commission Accredited Organizations					
		Nationwide Sta			State	ewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	U U	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.	98% of 584 eligible Patients	100%	92%	98%	94%	

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National Quality Improvement Goals

Reporting Period: October 2018 - September 2019

		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				
		Nationwide Statewid				
Measure	Explanation	Hospital Results	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 5 eligible Patients	100%	99%	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 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 38 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.	73% of 321 eligible Patients	73%	51%	62%	46%



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