



# 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](mailto: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

- 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 |
|------------------------|------------------------|----------------|-----------------------|--------------------------|
| Home Care              | Accredited             | 2/9/2018       | 2/8/2018              | 2/8/2018                 |
| Hospital               | Accredited             | 2/10/2018      | 2/9/2018              | 2/9/2018                 |

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

Hospital

| Certified Programs           | Certification Decision | Effective Date | Last Full Review Date | Last On-Site Review Date |
|------------------------------|------------------------|----------------|-----------------------|--------------------------|
| Joint Replacement - Hip      | Certification          | 4/15/2016      | 3/27/2018             | 3/27/2018                |
| Joint Replacement - Knee     | Certification          | 4/15/2016      | 3/27/2018             | 3/27/2018                |
| Joint Replacement - Shoulder | Certification          | 3/29/2018      | 3/28/2018             | 3/28/2018                |

### Special Quality Awards

2012 Top Performer on Key Quality Measures®

|  |   | Compared to other Joint Commission Accredited Organizations |              |
|--|---|---|--------------|
|  |   | Nationwide  | Statewide    |
| Home Care                                  | <b>2018 National Patient Safety Goals</b> |   | *            |
| Hospital                                   | <b>2018 National Patient Safety Goals</b> |   | *            |
| <b>National Quality Improvement Goals:</b> |   |   |              |
| Reporting Period:                          | Emergency Department                      | <sup>2</sup>  | <sup>2</sup> |
| Oct 2016 - Sep 2017                        | Immunization                              | <sup>2</sup>  | <sup>2</sup> |



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



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services   |
|---|--|
| <b>FHF Prompt Care</b><br>120 Cypress Edge Drive,<br>Suite 102<br>Palm Coast, FL 32164                                | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Florida Hospital Flagler - Parkway Medical Plaza</b><br>120 Cypress Edge Dr.,<br>Suite 101<br>Palm Coast, FL 32164 | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>   |
| <b>Florida Hospital Home Health</b><br>1061 Medical Center<br>Drive, Suite 112<br>Orange City, FL 32763               |  |
| <b>Florida Hospital Home Health</b><br>770 W Granada Blvd.,<br>Suite 319<br>Ormond Beach, FL 32174                    | <b>Services:</b> <ul style="list-style-type: none"> <li>Home Health Aides</li> <li>Home Health, Non-Hospice Services</li> <li>Medical Social Services</li> <li>Occupational Therapy</li> <li>Physical Therapy</li> <li>Skilled Nursing Services</li> <li>Speech Language Pathology</li> </ul>            |
| <b>Florida Hospital Orthopedics and Sports Medicine</b><br>21 Hospital Drive, Suite 110<br>Palm Coast, FL 32164       | <b>Other Clinics/Practices located at this site:</b> <ul style="list-style-type: none"> <li>Corey Rosenbaum, DO</li> <li>David Gay, MD</li> <li>Dennis Alter, MD</li> <li>Jeffrey Keen, MD</li> </ul> <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul> |



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services  |
|---|---|
| <b>Memorial Hospital Flagler Inc. *</b><br>DBA: Florida Hospital Flagler<br>60 Memorial Medical Parkway<br>Palm Coast, FL 32164         | <b>Joint Commission Certified Programs:</b> <ul style="list-style-type: none"> <li>• Joint Replacement - Hip</li> <li>• Joint Replacement - Knee</li> <li>• Joint Replacement - Shoulder</li> </ul><br><b>Services:</b> <ul style="list-style-type: none"> <li>• Cardiac Catheterization Lab (Surgical Services)</li> <li>• CT Scanner (Imaging/Diagnostic Services)</li> <li>• EEG/EKG/EMG Lab (Imaging/Diagnostic Services)</li> <li>• Gastroenterology (Surgical Services)</li> <li>• GI or Endoscopy Lab (Imaging/Diagnostic Services)</li> <li>• Gynecological Surgery (Surgical Services)</li> <li>• Inpatient Unit (Inpatient)</li> <li>• Interventional Radiology (Imaging/Diagnostic Services)</li> <li>• Magnetic Resonance Imaging (Imaging/Diagnostic Services)</li> <li>• Medical /Surgical Unit (Inpatient)</li> <li>• Medical ICU (Intensive Care Unit)</li> <li>• Nuclear Medicine (Imaging/Diagnostic Services)</li> <li>• Orthopedic Surgery (Surgical Services)</li> <li>• Outpatient Clinics (Outpatient)</li> <li>• Plastic Surgery (Surgical Services)</li> <li>• Positron Emission Tomography (PET) (Imaging/Diagnostic Services)</li> <li>• Post Anesthesia Care Unit (PACU) (Inpatient)</li> <li>• Radiation Oncology (Imaging/Diagnostic Services)</li> <li>• Surgical ICU (Intensive Care Unit)</li> <li>• Teleradiology (Imaging/Diagnostic Services)</li> <li>• Thoracic Surgery (Surgical Services)</li> <li>• Ultrasound (Imaging/Diagnostic Services)</li> <li>• Urology (Surgical Services)</li> <li>• Vascular Surgery (Surgical Services)</li> </ul> |
| <b>Memorial Hospital Flagler, Inc.</b><br>DBA: Stuart F. Meyer HospiceHouse<br>150 Memorial Medical Parkway<br>Palm Coast, FL 32164     | <b>Services:</b> <ul style="list-style-type: none"> <li>• Hospice Care</li> </ul>   |
| <b>Memorial Hospital Flagler, Inc.</b><br>DBA: Florida Hospital HospiceCare<br>770 W. Granada Blvd, Suite 304<br>Ormond Beach, FL 32174 | <b>Services:</b> <ul style="list-style-type: none"> <li>• Hospice Care</li> </ul>   |



# Memorial Hospital Flagler, Inc.

DBA: Florida Hospital Flagler,  
60 Memorial Medical Parkway, Palm Coast, FL

Org ID: 466350



## Locations of Care

### \* Primary Location

| Locations of Care   | Available Services  |
|---|---|
| <b>Memorial Hospital Flagler, Inc.</b><br>DBA: Florida Hospital Flagler Town Center Surgery<br>21 Hospital Drive, Suite 220<br>Palm Coast, FL 32164 | <b>Services:</b> <ul style="list-style-type: none"> <li>Administration of Blood Product (Outpatient)</li> <li>Administration of High Risk Medications (Outpatient)</li> <li>Ambulatory Surgery Center (Outpatient)</li> <li>Anesthesia (Outpatient)</li> <li>Perform Invasive Procedure (Outpatient)</li> </ul> |
| <b>Memorial Hospital Flagler, Inc.</b><br>DBA: Florida Hospital HospiceCare<br>301 Memorial Medical Parkway<br>Ormond Beach, FL 32174               | <b>Services:</b> <ul style="list-style-type: none"> <li>Hospice Care</li> </ul>   |
| <b>Memorial Hospital Flagler, Inc.</b><br>DBA: Florida Hospital HospiceCare<br>1055 Saxon Blvd.<br>Orange City, FL 32763                            | <b>Services:</b> <ul style="list-style-type: none"> <li>Hospice Care</li> </ul>   |
| <b>PT Solutions of St. Augustine</b><br>1000 South Plantation Island Drive, Suite 2B<br>Saint Augustine, FL 32080                                   | <b>Services:</b> <ul style="list-style-type: none"> <li>Outpatient Clinics (Outpatient)</li> </ul>  |
| <b>Women's Imaging Center</b><br>120 Cypress Edge Drive; Suite 120<br>Palm Coast, FL 32164  | <b>Services:</b> <ul style="list-style-type: none"> <li>Single Specialty Practitioner (Outpatient)</li> </ul>   |








## 2018 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."

### Home Care

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





## 2018 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                             |    |
|  | Eliminating Transfusion Errors                             |    |
| 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                            |   |
|  | Preventing Multi-Drug Resistant Organism Infections        |  |
|  | Preventing Central-Line Associated Blood Stream Infections |  |
|  | Preventing Surgical Site Infections                        |  |
|  | Preventing Catheter-Associated Urinary Tract Infection     |  |
| 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: October 2016 - September 2017

### 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. | <sup>2</sup> | <sup>2</sup> |

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. | <sup>2</sup><br>95.00 minutes<br>1120 eligible Patients  | 55.00   | 131.00   | 67.96                   | 132.97   |
| 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.  | <sup>2</sup><br>291.00 minutes<br>1121 eligible Patients | 205.00  | 317.00   | 227.61                  | 306.48   |



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

\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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: October 2016 - September 2017

### 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 |
|--------------|--|------------|-----------|
| Immunization | This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza. | 2          | 2         |

Compared to other Joint Commission  
Accredited Organizations

| Measure                | Explanation   |  |  |                  |   |                  |
|------------------------|---|--|--|------------------|---|------------------|
|                        |   | Hospital Results                           | Nationwide<br>Top 10%<br>Scored<br>at Least: | Average<br>Rate: | Statewide<br>Top 10%<br>Scored<br>at Least: | Average<br>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. | <br><br>99% of<br>603 eligible<br>Patients | 100%   | 94%              | 100%  | 97%              |



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

\* This information can also be viewed at [www.hospitalcompare.hhs.gov](http://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."