

Accreditation Quality Report





Version: 1 Date: 1/22/2023 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

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	9/28/2019	1/20/2023	1/20/2023

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

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Site		
Programs		Date	Date	Review Date	
Primary Stroke Center	Certification	7/8/2021	7/7/2021	7/7/2021	

Special Quality Awards

2012 Top Performer on Key Quality Measures®2015 ACS National Surgical Quality Improvement Program2014 Hospital Magnet Award

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2019National Patient Safety Goals	Ø	WA *	
	National Quality Improvement Goals:			
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	(10) 2	© ²	

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

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

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- 3. The number of patients is not enough for comparison purposes.
- 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.

 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.

 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."









Locations of Care

* Primary Location	
Locations of Care	Available Services
Mid Coast Hospital * 123 Medical Center Drive Brunswick, ME 04011	Joint Commission Advanced Certification Programs: Primary Stroke Center Services: Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult) Cardiac Catheterization Lab (Surgical Services) Community Integration (Non 24 Hour Care) CT Scanner (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Family Support (Non 24 Hour Care) Gastroenterology (Surgical Services) Gi or Endoscopy Lab (Imaging/Diagnostic Services) Gi or Endoscopy Lab (Imaging/Diagnostic Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Hazardous Medication Compounding (Inpatient) Inpatient Unit (Inpatient) Interventional Radiology (Imaging/Diagnostic Services) Labor & Delivery (Inpatient)
Mid Coast Hospital - Medical Office Building One 121 Medical Center Drive Brunswick, ME 04011	Services: Administration of High Risk Medications (Outpatient) Anesthesia (Outpatient) Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mid Coast Hospital 81 Medical Center 81 Medical Center Drive Brunswick, ME 04011	Services:



MaineHealth DBA: Mid Coast Hospital, 123 Medical Center Drive, Brunswick, ME







Locations of Care

Locations of Care	Available Services
Mid Coast Hospital Addiction Resource Center- Damariscotta DBA: Mid Coast Hospital Addiction Resource Center 20 Bristol Road Damariscotta, ME 04543	Services: • Behavioral Health (Non 24 Hour Care - Adult) • Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization - Adult) (Non-detox - Adult)
Mid Coast Hospital Outpatient Behavioral Health 66 Baribeau Drive Brunswick, ME 04011	Services: • Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization - Adult) • Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization - Adult) (Non-detox - Adult)
Mid Coast Hospital Rehabilitation 329 Bath Road Brunswick, ME 04011	Services: • Outpatient Clinics (Outpatient)
Mid Coast Medical Group Ophthalmology-Bath 130 Center Street Bath, ME 04530	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Mid Coast Medical Group Ophthalmology-Brunswi ck 8 Mason Street Brunswick, ME 04011	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)
Mid Coast Medical Group Orthopedics 430 Bath Road Brunswick, ME 04011	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mid Coast Medical Group Primary Care and Walk-In Clinic Brunswick Station, 22 Station Avenue Brunswick, ME 04011	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mid Coast Medical Group Sports Medicine at Bowdoin College DBA: Mid Coast Medical Group Sports Medicine 27 Watson Drive room #120 Brunswick, ME 04011	Services: • Perform Invasive Procedure (Outpatient) • Single Specialty Practitioner (Outpatient)



MaineHealth DBA: Mid Coast Hospital, 123 Medical Center Drive, Brunswick, ME







Locations of Care

* Primary Location	
Locations of Care	Available Services
Mid Coast Medical Group- Bath 108 Centre Street Bath, ME 04530	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mid Coast Medical Group- Topsham One Wellness Way Topsham, ME 04086	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
Mid Coast Orthopedic Therapy Center at Bowdoin College DBA: Mid Coast Orthopedic Therapy Center at Bowdoin College 35 Watson Dr Brunswick, ME 04011	Services: • Outpatient Clinics (Outpatient)
Mid Coast Therapy Center @ Maine Pines Racquet & Fitness 120 Harpswell Road Brunswick, ME 04011	Services: • Outpatient Clinics (Outpatient)
Mid Coast Therapy Center-The Highlands Cadigan Lodge, 30 Governor's Way Topsham, ME 04086	Services: • Outpatient Clinics (Outpatient)
Parkview Medical Center Campus 329 Maine Street Brunswick, ME 04011	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)









2019 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.

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
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	Ø
	Reconciling Medication Information	8
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 Infections that are difficult to treat	Ø
	Preventing Central-Line Associated Blood Stream Infections	0000
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

Compared to other Joint







National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Measure Area Explanation Nationwide Statewide

Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Соі	mpared to c	other Joint ed Organiz		on
		N	Nationwide	cu Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	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.	⊕	16%	25%	19%	26%
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 23 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.	72% of 302 eligible Pattents	71%	50%	74%	64%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1718% of 291 eligible Patients	212%	1780%	544%	1778%
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.	6872% of 291 eligible Patients	1508%	3084%	2333%	3671%

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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

Compared to other Joint Commission Accredited Organizations

		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				n
		N	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	5154% of 291 eligible Patients	501%	1303%	686%	1893%

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