



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

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
Hospital	Accredited	8/20/2016	6/7/2019	6/7/2019

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

Hospital

Other Accredited Programs/Services

- Hospital (Accredited by American College of Surgeons-Commission on Cancer (ACoS-COC))

Special Quality Awards

2013 Top Performer on Key Quality Measures®

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

2015 Silver Plus Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Hospital	2016 National Patient Safety Goals		*
	National Quality Improvement Goals:		
Reporting Period: Jan 2018 - Dec 2018	Emergency Department	²	²
	Immunization	²	²
	Perinatal Care	²	²



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



Locations of Care

* Primary Location

Locations of Care	Available Services
SHG Cardiac Medical Imaging DBA: Cardiac Medical Imaging Services @ Truesdale Clinic 1030 President Avenue Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Center for Women's Health Rehabilitation and Radiology DBA: Radiology Rehabilitation Services 300B-300C Faunce Corner Road Dartmouth, MA 02747	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Centers for Cancer Care DBA: Radiology Imaging Services Center for Cancer Care 206 Mill Road Fairhaven, MA 02719	Services: <ul style="list-style-type: none"> Administration of Blood Product (Outpatient) Administration of High Risk Medications (Outpatient) Outpatient Clinics (Outpatient)
SHG Linden Tree Family Health Center DBA: Linden Tree Laboratory, Rehab, Radiology 2444 East Main Road Portsmouth, RI 02871	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Radiology and Laboratory Services DBA: Healthfirst 387 Quarry Street Suite 104 Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Radiology Services @ Borden Medical 300 Hanover Street, Suite 2B Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Radiology Services DBA: GNB Community Health Center 874 Purchase Street New Bedford, MA 02740	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Radiology Services and Laboratory Patient Service Center DBA: Radiology & Laboratory Patient Service Center @ Rosebrook 100 Rosebrook Way Suite 101 Wareham, MA 02571	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
SHG Rehabilitation and Radiology Services DBA: Rehab and Radio Services @ Truesdale Clinic - Stanley Street 263 Stanley Street Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Rehabilitation Services DBA: Outpatient Rehabilitation Services @ Recovery Road 1 Recovery Road Wareham, MA 02571	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Rehabilitation Services DBA: Rehab Services @ Dartmouth Place- Mashpee Bldg 49 State Road Dartmouth, MA 02747	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Rehabilitation Services DBA: Rehabilitation Services 1565 North Main Street Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
SHG Rehabilitation Services - Wareham YMCA DBA: SHG Rehabilitation Services @ Wareham YMCA 33 Charge Pond Road Wareham, MA 02571	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Southcoast Center for Primary and Specialty Care DBA: Southcoast Radiology and Laboratory Services 208 Mill Road Suite 102, 105, 106 Fairhaven, MA 02719	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Southcoast Health Van DBA: Mobile Services 363 Highland Avenue Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Southcoast Hospital Group, Inc. DBA: Tobey Hospital Site of Southcoast Hospitals Group 43 High Street Wareham, MA 02571	Services: <ul style="list-style-type: none"> CT Scanner (Imaging/Diagnostic Services) EEG/EKG/EMG Lab (Imaging/Diagnostic Services) Gastroenterology (Surgical Services) Gynecological Surgery (Surgical Services) Gynecology (Inpatient) Inpatient Unit (Inpatient) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit (Inpatient) Medical ICU (Intensive Care Unit) Non-Sterile Medication Compounding (Inpatient) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Orthopedic Surgery (Surgical Services) Outpatient Clinics (Outpatient) Plastic Surgery (Surgical Services) Post Anesthesia Care Unit (PACU) (Inpatient) Sterile Medication Compounding (Inpatient) Surgical ICU (Intensive Care Unit) Surgical Unit (Inpatient) Teleradiology (Imaging/Diagnostic Services) Ultrasound (Imaging/Diagnostic Services) Urology (Surgical Services)
Southcoast Hospitals Group Inc. DBA: Southcoast Health Rehabilitation and Breast Center 235 Hanover Street Suite 301 Fall River, MA 02720	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Southcoast Hospitals Group Radiology and Laboratory Services 827 American Legion Highway Westport, MA 02790	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Southcoast Hospitals Group Rehabilitation at the Schwartz Ce 1 Posa Place North Dartmouth, MA 02747	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Southcoast Hospitals Group, Inc DBA: SHG Ambulatory Surgery Center @ Faunce Corner 300D Faunce Corner Road North Dartmouth, MA 02747	Services: <ul style="list-style-type: none"> Ambulatory Surgery Center (Outpatient) Anesthesia (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services	
Southcoast Hospitals Group, Inc. DBA: St. Luke's Hospital Site of Southcoast Hospitals Group 101 Page Street New Bedford, MA 02740	Services: <ul style="list-style-type: none"> • Cardiac Catheterization Lab (Surgical Services) • Coronary Care 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) • Hazardous Medication Compounding (Inpatient) • Hematology/Oncology Unit (Inpatient) • Inpatient Unit (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 Unit (Inpatient) • Neurosurgery (Surgical Services) • Non-Sterile Medication Compounding (Inpatient) • Normal Newborn Nursery (Inpatient) • Nuclear Medicine (Imaging/Diagnostic Services) • Orthopedic Surgery (Surgical Services) • Orthopedic/Spine Unit (Inpatient) • Outpatient Clinics (Outpatient) • Pediatric Unit (Inpatient) • Plastic Surgery (Surgical Services) • Post Anesthesia Care Unit (PACU) (Inpatient) • 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) 	



Locations of Care

* Primary Location

Locations of Care	Available Services
Southcoast Hospitals Group, Inc. * DBA: Charlton Memorial Hospital Site of Southcoast Hospitals Grp 363 Highland Avenue Fall River, MA 02720	Services: <ul style="list-style-type: none"> • Brachytherapy (Imaging/Diagnostic Services) • Cardiac Catheterization Lab (Surgical Services) • Cardiac Surgery (Surgical Services) • Cardiothoracic Surgery (Surgical Services) • Cardiovascular Unit (Inpatient) • Coronary Care 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) • Hazardous Medication Compounding (Inpatient) • Inpatient Unit (Inpatient) • Interventional Radiology (Imaging/Diagnostic Services) • Labor & Delivery (Inpatient) • Magnetic Resonance Imaging (Imaging/Diagnostic Services) • Medical /Surgical Unit (Inpatient) • Medical ICU (Intensive Care Unit) • Neurosurgery (Surgical Services) • Non-Sterile Medication Compounding (Inpatient) • Normal Newborn Nursery (Inpatient) • Nuclear Medicine (Imaging/Diagnostic Services) • Orthopedic Surgery (Surgical Services) • Outpatient Clinics (Outpatient) • Plastic Surgery (Surgical Services) • Post Anesthesia Care Unit (PACU) (Inpatient) • Radiation Oncology (Imaging/Diagnostic Services) • Rehabilitation Unit (Inpatient, 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)
Southcoast Rehabilitation Brain and Spine Clinic DBA: Southcoast Rehabilitation Brain and Spine Clinic 480 Hawthorne Street South Dartmouth, MA 02748	Services: <ul style="list-style-type: none"> • Outpatient Clinics (Outpatient)







2016 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	
Use Alarms Safely	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: January 2018 - December 2018



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.	 2	 2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
			Top 10% Scored at Most:	Weighted Median:	Top 10% Scored at Most:	Weighted 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.	 2 107.00 minutes 809 eligible Patients	56.00	137.00	88.90	162.21
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.	 2 265.00 minutes 810 eligible Patients	207.00	321.00	272.49	364.20



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

* This information can also be viewed at 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: January 2018 - December 2018

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	Average	Statewide	Average
			Top 10% Scored at Least:	Rate:	Top 10% Scored at Least:	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.	 99% of 505 eligible Patients	100%	94%	99%	95%



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

* This information can also be viewed at 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: January 2018 - December 2018

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
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	2	2

Compared to other Joint Commission Accredited Organizations

Measure	Explanation	Hospital Results	Nationwide		Statewide	
			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 16 eligible Patients	100%	98%	100%	98%
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. 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.	 1% of 273 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.	 46% of 447 eligible Patients	73%	52%	75%	53%



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

- * This information can also be viewed at 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."