Quality Check®

Fairview Hospital
29 Lewis Avenue, Great Barrington, MA
Org ID: 5552

Accreditation Quality Report



The Joint Commission

Version: 3
Date: 4/20/2017



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

- 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.
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- This Measure is not applicable for this organization.
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Footnote Key

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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
Critical Access Hospital	Accredited	1/24/2014	3/3/2017	4/13/2017

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

Critical Access Hospital

Special Quality Awards

2014 Top Performer on Key Quality Measures®
2013 Top Performer on Key Quality Measures®
2012 Top Performer on Key Quality Measures®
2015 Gold Plus Get With The Guidelines - Stroke
2013 Gold Get With The Guidelines - Heart Failure

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Critical Access Hospital	**2014National Patient Safety Goals**	✓	N/A *
Reporting Period: Oct 2015 - Sep 2016	**National Quality Improvement Goals:**		
	Emergency Department	N/D [2]	N/D [2]
	Immunization	N/D [2]	N/D [2]
	Perinatal Care	N/D [2]	N/D [2]
	Tobacco Treatment	N/D [2]	N/D [2]

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

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Locations of Care

* Primary Location

Locations of Care	Available Services
Cardiology Professional Services @ Fairview Hospital 29 Lewis Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)
Center for Wound Care & Hyperbaric Medicine at Fairview Hosp 10 Maple Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)
Fairview Endocrinology & Metabolism DBA: Fairview Endocrinology & Metabolism 27 Lewis Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)
Fairview Hospital * 29 Lewis Avenue Great Barrington, MA 01230	**Services:** • Acute Care • Coronary Care Unit (Inpatient) • CT Scanner (Imaging/Diagnostic Services) • Ear/Nose/Throat Surgery (Surgical Services) • EEG/EKG/EMG Lab (Imaging/Diagnostic Services) • GI or Endoscopy Lab (Imaging/Diagnostic Services) • Gynecological Surgery (Surgical Services) • Labor & Delivery (Inpatient) • Mammography (Imaging/Diagnostic Services) • Medical /Surgical Unit (Inpatient) • Medical ICU (Intensive Care Unit) • Normal Newborn Nursery (Inpatient) • Nuclear Medicine (Imaging/Diagnostic Services) • Orthopedic Surgery (Surgical Services) • Outpatient Clinics (Outpatient) • Post Anesthesia Care Unit (PACU) (Inpatient) • Swing Beds • Teleradiology (Imaging/Diagnostic Services) • Ultrasound (Imaging/Diagnostic Services) • Urology (Surgical Services)
Fairview Hospital Outpatient Physical Therapy Rehabilitation 10 Maple Ave. Great Barrington, MA 01230	**Services:** • Outpatient Clinics (Outpatient)
Fairview Hospital's Aquatic Therapy Program Berkshire South 15 Chrissy Road Great Barrington, MA 01230	**Services:** • Outpatient Clinics (Outpatient)

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Fairview Medical 27 Lewis Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)
Fairview Physical & Sports Therapy 710 Stockbridge Road Suite 2 Lee, MA 01238	**Services:** • Outpatient Clinics (Outpatient)
Orthopaedics and Sports Medicine Fairview Hospital Inc. DBA: Orthopaedics and Sports Medicine 27 Lewis Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)
Urology Services at Fairview Hospital 27 Lewis Ave Great Barrington, MA 01230	**Services:** • Single Specialty Practitioner (Outpatient)

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2014 National Patient Safety Goals

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Critical Access 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	✓
Universal Protocol	Conducting a Pre-Procedure Verification Process	✓
	Marking the Procedure Site	✓
	Performing a Time-Out	✓

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Reporting Period: October 2015 - September 2016

Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations: Nationwide	Statewide
Emergency Department	This category of evidence based measures assesses the time patients remain in the hospital Emergency Department prior to inpatient admission.	N/D [2]	N/D [2]

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations: Nationwide Top 10% Scored at Most:	Nationwide Weighted Median:	Statewide Top 10% Scored at Most:	Statewide 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.	N/D [2] 93.00 minutes 385 eligible Patients	53.00	124.00	82.59	137.14
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.	N/D [2] 266.00 minutes 389 eligible Patients	202.00	311.00	273.88	335.85

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

* This information can also be viewed at www.hospitalcompare.hhs.gov

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Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations: Nationwide	Statewide
Immunization	This evidence-based prevention measure set assesses immunization activity for pneumonia and influenza.	N/D 2	N/D 2

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations: Nationwide Top 10% Scored at Least:	Nationwide Average Rate:	Statewide Top 10% Scored at Least:	Statewide 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 251 eligible Patients	100%	94%	99%	93%

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Measure Area	Explanation	Compared to other Joint Commission Accredited Organizations: Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	N/D 2	N/D 2

Measure	Explanation	Hospital Results	Compared to other Joint Commission Accredited Organizations: Nationwide Top 10% Scored at Least:	Nationwide Average Rate:	Statewide Top 10% Scored at Least:	Statewide 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.	N/D 3 ----	100%	98%	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 11 eligible Patients	0%	2%	0%	2%
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.	88% of 134 eligible Patients	75%	53%	75%	54%

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		Compared to other Joint Commission Accredited Organizations	
Measure Area	Explanation	Nationwide	Statewide
Tobacco Treatment	This category of evidence based measures assesses the overall quality of care provided for tobacco use	N/D 2	N/D 2

			Compared to other Joint Commission Accredited Organizations			
			Nationwide		Statewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Tobacco Use Screening	The number of patients who were asked about tobacco use within the first three days of admission to the hospital.	100% of 265 eligible Patients	100%	98%	100%	98%
Tobacco Use Treatment	The number of patients who use tobacco who actually received counseling or medications to help them stop using tobacco.	47% of 32 eligible Patients	66%	34%	71%	44%
Tobacco Use Treatment at Discharge	The number of patients who use tobacco who accepted counseling and/or medications to help them stop using tobacco after they leave the hospital.	N/D 3 15% of 26 eligible Patients[3]	33%	11%	19%	6%
Tobacco Use Treatment Provided or Offered	The number of patients who use tobacco who were offered or received counseling or medications to help them stop using tobacco. This measure also includes patients who were offered the counseling and/or medications but refused them.	94% of 32 eligible Patients	99%	68%	95%	71%
Tobacco Use Treatment Provided or Offered at Discharge	The number of patients who use tobacco who were offered or accepted counseling or medications to help them stop using tobacco after they leave the hospital. This measure also includes patients who were offered the counseling and/or medications but refused them.	N/D 3 85% of 26 eligible Patients[3]	94%	48%	80%	42%

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