



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

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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.
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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	1/11/2019	1/10/2019	1/10/2019
 Hospital	Accredited	1/12/2019	1/11/2019	2/20/2019

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 Gold Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	2019 National Patient Safety Goals		 *
Hospital	2016 National Patient Safety Goals		 *
National Quality Improvement Goals:			
Reporting Period: Oct 2018 - Sep 2019	Emergency Department	 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
Beth Israel Deaconess HealthCare Pembroke Lab 295 Old Oak Street Pembroke, MA 02359	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Beth Israel Deaconess Hospital-Plymouth * 275 Sandwich Street Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult) Brachytherapy (Imaging/Diagnostic Services) Cardiac Catheterization Lab (Surgical Services) Cardiovascular Unit (Inpatient) Coronary Care Unit (Inpatient) CT Scanner (Imaging/Diagnostic Services) 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) 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) Neurosurgery (Surgical Services) Normal Newborn Nursery (Inpatient) Nuclear Medicine (Imaging/Diagnostic Services) Ophthalmology (Surgical Services) Orthopedic Surgery (Surgical Services) Orthopedic/Spine Unit (Inpatient) Outpatient Clinics (Outpatient) Plastic Surgery (Surgical Services) Positron Emission Tomography (PET) (Imaging/Diagnostic Services) Post Anesthesia Care Unit (PACU) (Inpatient) Radiation Oncology (Imaging/Diagnostic Services) 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)
Beth Israel Deaconess Hospital-Plymouth Imaging at the Park 45 Resnik Road, Suite 1400, Office 106 Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Beth Israel Deaconess Hospital-Plymouth Lab 41 Resnik Road, 3rd floor Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Beth Israel Deaconess Hospital-Plymouth Rehabilitation Pine Hills, 3 Village Green North, 3rd Flr, Ste 331 Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Beth Israel Deaconess Hospital-Plymouth Rehabilitation 10 Cordage Park Circle, Suite 225 Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Beth Israel Deaconess Hospital-Plymouth Sleep Center 45 Resnik Road Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Outpatient Clinics (Outpatient)
Cape Lab Drawing Station 83 Route 130 Sandwich, MA 02563	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Cranberry Hospice 36 Cordage Park Circle Suite 326 Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Hospice Care
Duxbury Lab Drawing Station 95 Tremont Street Duxbury, MA 02331	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Industrial Park Lab Drawing Station 45 Resnik Road, Suite 101 Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Long Pond Lab Drawing Station 110 Long Pond Road Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)
Obery Street Drawing Station 46 Obery St Plymouth, MA 02360	Services: <ul style="list-style-type: none"> Laboratory Draw Station (Outpatient)



2019 National Patient Safety Goals

Symbol Key

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

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	

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2016 National Patient Safety Goals

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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: October 2018 - September 2019



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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	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.	 ² 116.00 minutes 892 eligible Patients	55.00	134.00	83.31	160.54



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

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National Quality Improvement Goals

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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	Compared to other Joint Commission Accredited Organizations			
			Nationwide	Average Rate:	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.	 100% of 6 eligible Patients	100%	99%	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.	 3% of 60 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.	 60% of 731 eligible Patients	73%	51%	76%	50%



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