

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.

275 Sandwich Street, Plymouth, MA





Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	y Last On-Site Survey Date
🮯 Home Care	Accredited	1/11/2019	4/28/2022	4/28/2022
🎯 Hospital	Accredited	1/12/2019	4/29/2022	6/23/2022

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

Certified Programs	Certification Decision	Effective	Last Full Review	v Last On-Site
		Date	Date	Review Date
🎯 Joint Replacement - Hip	Certification	9/10/2020	6/28/2022	6/28/2022
🮯 Joint Replacement - Knee	Certification	9/10/2020	8/4/2020	8/4/2020

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	2019National Patient Safety Goals	Ø	∞ *		
Hospital	2016National Patient Safety Goals	Ø	*		
	National Quality Improvement Goals:				
Reporting Period: Apr 2020 - Mar 2021	Perinatal Care	1 2	2 °		

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

Symbol Key 1

0	This organization achieved the best possible results.
•	This organization's performance is above the target range/value.
Ø	This organization's performance is similar to the target range/value.
Θ	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.

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Locations of Care

Locations of Care	Available	Services
Primary Location Locations of Care Beth Israel Deaconess Hospital-Plymouth * 275 Sandwich Street Plymouth, MA 02360	Joint Commission Certified Pr Joint Replacement - Hip Joint Replacement - Knee Services: 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) Carlose/Throat Surgery (Surgical Services) Ear/Nose/Throat Surgery (Surgical Services) EEG/EKG/EMG Lab (Imaging/Diagnostic 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) Hematology/Oncology Unit (Inpatient) Labor & Delivery (Inpatient) Magnetic Resonance Imaging (Imaging/Diagnostic Services) Medical /Surgical Unit	
Beth Israel Deaconess Hospital-Plymouth Imaging at the Park 45 Resnik Road, Suite 1400, Office 106 Plymouth, MA 02360	 (Inpatient) Medical ICU (Intensive Care Unit) Services: Outpatient Clinics (Outpatient) 	

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Locations of Care

* Primary Location	
Locations of Care	Available Services
Beth Israel Deaconess Hospital-Plymouth Rehabilitation Pine Hills, 3 Village Green North, 3rd Flr, Ste 331 Plymouth, MA 02360	Services: Outpatient Clinics (Outpatient)
Beth Israel Deaconess Hospital-Plymouth Rehabilitation 10 Cordage Park Circle, Suite 225 Plymouth, MA 02360	Services: Outpatient Clinics (Outpatient)
BID-Plymouth Pre Admission Testing (PAT) 46 Obery Street Plymouth, MA 02360	Services: • Outpatient Clinics (Outpatient)
Cape Lab Drawing Station 83 Route 130 Sandwich, MA 02563	Services: • Laboratory Draw Station (Outpatient)
Cranberry Hospice 36 Cordage Park Circle Suite 326 Plymouth, MA 02360	Services: • Hospice Care
Duxbury Lab Drawing Station 95 Tremont Street Duxbury, MA 02331	Services:Laboratory Draw Station (Outpatient)
Industrial Park Lab Drawing Station 45 Resnik Road, Suite 101 Plymouth, MA 02360	Services: • Laboratory Draw Station (Outpatient)
Long Pond Lab Drawing Station 110 Long Pond Road Plymouth, MA 02360	Services: • Laboratory Draw Station (Outpatient)

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2019 National Patient Safety Goals

Home Care

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

Symbol Key 3

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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2016 National Patient Safety Goals

Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	\bigcirc
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	\bigotimes
	Reconciling Medication Information	Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	\bigcirc
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	\bigotimes
	Preventing Multi-Drug Resistant Organism Infections	\bigotimes
	Preventing Central-Line Associated Blood Stream Infections	<u>ତ</u> ତ୍ର ତ
	Preventing Surgical Site Infections	\bigcirc
	Preventing Catheter-Associated Urinary Tract Infection	\bigcirc
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	\bigotimes
	Marking the Procedure Site	\bigcirc
	Performing a Time-Out	\bigotimes

Symbol Key 3

The organization has met the National Patient Safety Goal.
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National Quality Improvement Goals

J J					
This organization achieved the best possible results		Reporting I	Period: April 2020 - March 2021		
This organization's performance is above the target range/value.					
This organization's performance is similar to the target range/value.					o other Joint
This organization's performance is below the target range/value.)rganizations
Not displayed	Μ	easure Area	Explanation	Nationwide	Statewide
	P	erinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	2	○ ²

			Compared to other Joint Commission Accredited Organizations				
		N	ationwide	eu Organiz		ewide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Averag 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%	18%	25%	
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 59 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.	62% of 824 eligible Patients	71%	50%	73%	47%	
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1109% of 721 eligible Patients	212%	1780%	1030%	1974%	
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.	2912% of 721 eligible Patients	1508%	3084%	2137%	33669	

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.

Symbol Key 2
 This organization achiev/ possible results
 This organization' above the targe'
 This organi similar t/ This

Footnote Key

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National Quality Improvement Goals

Reporting Period: April 2020 - March 2021

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For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

				Compared to other Joint Commission			
Measure Area Explanation					edited Org	anizations Statewide	2
Perinatal Care	Explanation Nationwide Statewide This category of evidenced based measures assesses the care of mothers and newborns. Image: Care of mothers and newborns. Image: Care of mothers and newborns.					5	
			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:
Unexpected Complicat Term Newborns per 10 livebirths - Severe Rate	00	The severe rate equals the number of patients with severe complications.	1803% of 721 eligible Patients	501%	1303%	744%	1392%



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