



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
Behavioral Health Care	Accredited	4/13/2017	4/12/2017	4/12/2017
Home Care	Accredited	4/15/2017	4/14/2017	4/14/2017
Hospital	Accredited	4/15/2017	4/14/2017	5/31/2017

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

Hospital

Advanced Certification Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
---------------------------------	------------------------	----------------	-----------------------	--------------------------

Primary Stroke Center	Certification	7/1/2016	6/30/2016	6/30/2016
-----------------------	---------------	----------	-----------	-----------

Certified Programs	Certification Decision	Effective Date	Last Full Review Date	Last On-Site Review Date
--------------------	------------------------	----------------	-----------------------	--------------------------

Joint Replacement - Hip	Certification	6/9/2016	5/15/2018	5/15/2018
Joint Replacement - Knee	Certification	5/16/2018	5/15/2018	5/15/2018

Other Accredited Programs/Services

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

Special Quality Awards

- 2014 Top Performer on Key Quality Measures®
- 2012 Top Performer on Key Quality Measures®
- 2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- 2014 Hospital Magnet Award
- 2012 ACS National Surgical Quality Improvement Program
- 2012 Gold Get With The Guidelines - Heart Failure

Behavioral
Health
Care

2017 National Patient Safety Goals

Compared to other Joint Commission Accredited Organizations

Nationwide

Statewide



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



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."

		Compared to other Joint Commission Accredited Organizations	
		Nationwide	Statewide
Home Care	2017 National Patient Safety Goals		 *
Hospital	2017 National Patient Safety Goals		 *
National Quality Improvement Goals:			
Reporting Period:	Emergency Department	 ²	 ²
Oct 2016 - Sep 2017	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
Center for Behavioral Health DBA: Adult Outpatient Services 21 Pleasant Street Middletown, Ct. Middletown, CT 06457	Services: Behavioral Health (Non 24 Hour Care - Adult)
Center for Behavioral Health Day Treatment Program DBA: Behavioral Health Day Treatment 33 Pleasant Street Middletown, CT 06457	Services: Behavioral Health (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial - Adult)
Center for Behavioral Health Family Advocacy Program DBA: outpatient behavioral 51 Broad Street Middletown, CT 06457	Services: - Behavioral Health (Non 24 Hour Care - Child/Youth) - In-Home Behavioral Health Services (Non 24 Hour Care - Child/Youth)
Center for Behavioral Health Outpatient DBA: OutPatient Center for Behavioral Health 103 South Main Street Middletown, CT 06457	Services: Behavioral Health (Non 24 Hour Care - Adult)



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital * DBA: General Acute 28 Crescent Street Middletown, CT 06457	Joint Commission Advanced Certification Programs: - Primary Stroke Center Joint Commission Certified Programs: - Joint Replacement - Hip - Joint Replacement - Knee Other Clinics/Practices located at this site: - Outpatient Laboratory Services, Outpatient Radiology Service - Outpatient Physical Therapy Services: - Cardiac Catheterization Lab (Surgical Services) - 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) - 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) - Plastic Surgery (Surgical Services) - Positron Emission Tomography (PET) (Imaging/Diagnostic Services) - Post Anesthesia Care Unit (PACU) (Inpatient) - Radiation Oncology (Imaging/Diagnostic Services) - Sleep Laboratory (Sleep Laboratory) - 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)
Middlesex Hospital Behavioral Health, Old Saybrook 154 Main Street, Old Saybrook Old Saybrook, CT 06475	Services: Behavioral Health (Non 24 Hour Care - Adult)



Middlesex Hospital

DBA: General Acute Care Hospital,
28 Crescent Street, Middletown, CT

Org ID: 5673



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital Family Medicine 90 South Main Street Middletown, CT 06457	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Family Medicine 42 East High Street East Hampton, CT 06424	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Family Medicine DBA: Family Medicine 13 High Street Portland, CT 06480	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Homecare 5 Pequot Park Road Suite 204 Westbrook, CT 06498	Services: - Home Health Aides - Home Health, Non-Hospice Services - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Homecare 770 Saybrook Road Middletown, CT 06457	Services: - Home Health Aides - Home Health, Non-Hospice Services - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Homecare Hospice Program DBA: Hospice Unit and Hospice Homecare 28 Crescent Street Middletown, CT 06457	Services: - Home Health Aides - Home Health, Non-Hospice Services - Hospice Care - Medical Social Services - Occupational Therapy - Physical Therapy - Skilled Nursing Services - Speech Language Pathology
Middlesex Hospital Outpatient Center DBA: Outpatient Tests and Treatments, South Campus 534 Saybrook Road Middletown, CT 06457	Other Clinics/Practices located at this site: - Outpatient Laboratory Services, Outpatient Radiology Service - Outpatient Physical Therapy, Outpatient Radiation Therapy Services: - Administration of High Risk Medications (Outpatient) - Anesthesia (Outpatient) - Outpatient Clinics (Outpatient) - Perform Invasive Procedure (Outpatient)
Middlesex Hospital Physical Rehabilitation in Madison DBA: Outpatient Physical Rehabilitation 1347 Boston Post Road, Madison Madison, CT 06443	Services: Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Middlesex Hospital Physical Rehabilitation, North Campus DBA: Physical Rehabilitation 512 Saybrook Road, Lower Level Middletown, CT 06457	Services: Outpatient Clinics (Outpatient)
Middlesex Hospital Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498	Other Clinics/Practices located at this site: - Emergency Department - Outpatient Cancer Center - Outpatient Laboratory Services, Outpatient Radiology Service Services: - Administration of Blood Product (Outpatient) - Administration of High Risk Medications (Outpatient) - Anesthesia (Outpatient) - Outpatient Clinics (Outpatient)
Middlesex Medical Center Marlborough 12 Jones Hollow Road Marlborough, CT 06447	Other Clinics/Practices located at this site: - Emergency Department - Outpatient Laboratory Services, Outpatient Radiology Service Services: - Administration of High Risk Medications (Outpatient) - Anesthesia (Outpatient) - Outpatient Clinics (Outpatient)
Middlesex MultiSpecialty Group DBA: Outpatient Physician offices see speciality below 80 South Main Street Middletown, CT 06457	Other Clinics/Practices located at this site: - Pulmonology, Infection Disease, Neuro, Endocrine offices (4) Services: - Administration of High Risk Medications (Outpatient) - Outpatient Clinics (Outpatient)
Middlesex Surgical Center 530 Saybrook Road Middletown, CT 06457	Services: - Administration of Blood Product (Outpatient) - Administration of High Risk Medications (Outpatient) - Ambulatory Surgery Center (Outpatient) - Anesthesia (Outpatient) - Perform Invasive Procedure (Outpatient)
Physical Rehabilitation Center of Old Saybrook DBA: Physical Rehabilitation Center 1687 Boston Post Road Old Saybrook, CT 06475	Services: Outpatient Clinics (Outpatient)
Rehabilitation Services and Hand Therapy 6 Independence Drive Suite 1 Marlborough, CT 06447	Services: Outpatient Clinics (Outpatient)



Locations of Care

* Primary Location

Locations of Care	Available Services
Rehabilitation Services and Hand Therapy 192 Westbrook Road Essex, CT 06426	Services: • Outpatient Clinics (Outpatient)



2017 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."

Behavioral Health Care

Safety Goals	Organizations Should	Implemented
Improve the accuracy of the identification of individuals served.	Use of Two Identifiers	
Improve the safety of using medications.	Reconciling Medication Information	
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	
The organization identifies safety risks inherent in the population of the individuals it serves.	Identifying Individuals at Risk for Suicide	



2017 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."

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	



2017 National Patient Safety Goals

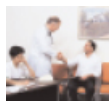
Symbol Key

-  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	
Reduce the harm associated with clinical alarm systems.	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 2016 - September 2017

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.	2 155.00 minutes 560 eligible Patients	55.00	131.00	102.09	168.46
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.	2 358.00 minutes 560 eligible Patients	205.00	317.00	270.94	353.77



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: October 2016 - September 2017

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 Top 10% Scored at Least:	Average Rate:	Statewide Top 10% Scored at Least:	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.	 96% of 560 eligible Patients	100%	94%	98%	94%



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: October 2016 - September 2017

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	Compared to other Joint Commission Accredited Organizations				
		Hospital Results	Nationwide Top 10% Scored at Least:	Average Rate:	Statewide 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.	4 ----	100%	98%	100%	100%
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 76 eligible Patients	0%	2%	0%	3%
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.	 69% of 962 eligible Patients	74%	52%	66%	52%



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."