DBA: White Plains Hospital,
Davis Avenue at East Post Road, White Plains, NY

Org ID: 5902

Accreditation Quality Report





Version: 6 Date: 5/18/2019



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

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Summary of Quality Information

Accreditation Programs	Accreditation Decision	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Hospital	Accredited	9/3/2016	9/2/2016	9/2/2016

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

Advanced Certification	Certification Decision	Effective	Last Full Review Last On-Site		
Programs		Date	Date	Review Date	
Primary Stroke Center	Certification	5/7/2019	4/5/2019	4/5/2019	

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® 2014 ACS National Surgical Quality Improvement Program 2012 Hospital Magnet Award

		Compared to other Joint Commission Accredited Organizations		
		Nationwide	Statewide	
Hospital	2016National Patient Safety Goals	Ø	N/A *	
	National Quality Improvement Goals:			
Reporting Period:	Emergency Department	№ 2	ND 2	
Oct 2017 - Sep 2018	Immunization	№ 2	ND 2	
	Perinatal Care	ND 2	N/D 2	

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

Symbol Key

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Footnote Key

- 1. The Measure or Measure Set was not
- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- 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.
- The Measure results are based on a sample of patients.
- The number of months with Measure data is below the reporting requirement.
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- 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."

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Locations of Care

* Primary Location

Locations of Care

Center for Cancer Care DBA: Center for Cancer Care

2 Longview Avenue White Plains, NY 10601

Available Services

Other Clinics/Practices located at this site:

- Breast Surgery Cancer and Blood Services
- Infusion Center
- Oncology and Hemotology
- Radiation Therapy
- Surgical Oncology • Westchester Thoracic

Org ID: 5902

Services:

- Administration of Blood Product (Outpatient)
- Administration of High Risk Medications (Outpatient)
- Hazardous Medication Compounding (Outpatient)
- High Risk Sterile Medication Compounding (Outpatient)
- Outpatient Clinics (Outpatient)

White Plains Hospital Center

DBA: White Plains Hospital Davis Avenue at East Post Road White Plains, NY 10601

Joint Commission Advanced Certification Programs:

Primary Stroke Center

Other Clinics/Practices located at this site:

· Family Health Center

Services:

- 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
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Orthopedic/Spine Unit (Inpatient)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Sleep Laboratory (Sleep Laboratory)
- Teleradiology
- (Imaging/Diagnostic Services)
- Thoracic Surgery (Surgical Services) Ultrasound
- (Imaging/Diagnostic Services) **Urology (Surgical Services)**
- Vascular Surgery (Surgical Services)

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Locations of Care

Locations of Care	Available Services
White Plains Hospital Center Women's maging Center DBA: Women's Imaging O South Ridge Street Rye Brook, NY 10573	Services: Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
White Plains Hospital Medical and Wellness 99 Business Park Drive Armonk, NY 10504	Other Clinics/Practices located at this site: • Imaging • Urgent Care Services: • Outpatient Clinics (Outpatient)
White Plains Hospital MRI DBA: White Plains Hospital MRI 244 Westchester Avenue White Plains, NY 10601	Services: • Outpatient Clinics (Outpatient)
White Plains Hospital Physicians Associates DBA: WPPA Plastics 12 Greenridge Ave White Plains, NY 10601	Other Clinics/Practices located at this site: • 0 Services: • Single Specialty Practitioner (Outpatient)
White Plains Hospital Physicians Associates DBA: WPPA 170 Maple Ave. White Plains, NY 10601	Other Clinics/Practices located at this site: • WPPA 170 Maple orthopedics • WPPA Colorectal Surgery • WPPA EP Cardiology • WPPA OB/GYN Partners • WPPA Surgical Specialists Services: • Outpatient Clinics (Outpatient)
White Plains Hospital Physicians Associates DBA: WPPA Internal Medicine and Infectious Disease 56 Doyer Avenue White Plains, NY 10601	Services: • Single Specialty Practitioner (Outpatient)
White Plains Physician Associates DBA: WPPA - Yorktown Heights 3379 Crompound Road Yorktown Heights, NY 10598	Services: • Outpatient Clinics (Outpatient)
White Plains Physician Associates DBA: WPPA - Larchmont South 2345 Boston Post Road Larchmont, NY 10538	Services: • Outpatient Clinics (Outpatient)

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Locations of Care

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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.

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Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
	Eliminating Transfusion Errors	Ø
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	Ø
	Reconciling Medication Information	Ø Ø Ø
Use Alarms Safely	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
	Preventing Multi-Drug Resistant Organism Infections	\mathbf{O}
	Preventing Central-Line Associated Blood Stream Infections	8888
	Preventing Surgical Site Infections	Ø
	Preventing Catheter-Associated Urinary Tract Infection	Ø
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	Ø
	Marking the Procedure Site	Ø
	Performing a Time-Out	Ø

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

		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				
		N	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Most:	Weighte d Median:	Top 10% Scored at Most:	Weighte d 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.	122.00 minutes 883 eligible Patients	56.00	136.00	80.04	198.87
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.	316.00 minutes 883 eligible Patients	207.00	320.00	264.73	434.77

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- * This information can also be viewed at www.hospitalcompare.hhs.gov
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Compared to other Joint

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Compared to other Joint **Accredited Organizations**

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			J
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 Nationwide Statewide				
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:		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.	99% of 550 eligible Patients	100%	94%	99%	93%

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National Quality Improvement Goals

Reporting Period: October 2017 - September 2018

Compared to other Joint **Accredited Organizations**

Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	№ 2	№ 2

		Cor	npared to o Accredit	other Joint ed Organiz		on
		N	lationwide			ewide
Measure	Explanation	Hospital Results	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 9 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 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.	4% of 25 eligible Pattents	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.	38% of 305 eligible Patients	73%	51%	62%	38%

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