



Organizations that have achieved  
The Gold Seal of Approval® from  
The Joint Commission®



# Quality Report





# Beth Israel Deaconess Hospital Plymouth

HCO ID: 5603  
275 Sandwich Street  
Plymouth, MA, 02360  
(508) 746-2000  
<http://www.bidplymouth.org/>

## Summary of Quality Information

### Accreditation Programs

#### [View Accreditation History](#)



#### [Home Care](#)

**Accreditation Decision**  
[Accredited](#)

**Effective Date**  
1/11/2019

**Last Full Survey Date**  
1/10/2019

**Last On-Site Survey Date**  
1/10/2019



#### [Hospital](#)

**Accreditation Decision**  
[Accredited](#)

**Effective Date**  
1/12/2019

**Last Full Survey Date**  
1/11/2019

**Last On-Site Survey Date**  
2/20/2019

## Core Certification Programs

### [View Certification History](#)



#### [Joint Replacement - Hip](#)

##### Certification Decision

##### [Certification](#)

##### Effective Date

9/10/2020

##### Last Full Survey Date

8/4/2020

##### Last On-Site Survey Date

8/4/2020



#### [Joint Replacement - Knee](#)

##### Certification Decision

##### [Certification](#)

##### Effective Date

9/10/2020

##### Last Full Survey Date

8/4/2020

##### Last On-Site Survey Date

8/4/2020

## Sites

### **Beth Israel Deaconess HealthCare Pembroke Lab**

295 Old Oak Street  
Pembroke, MA, 02359

#### **Available Services**

- Laboratory Draw Station (Outpatient )

### **Beth Israel Deaconess Hospital-Plymouth**

275 Sandwich Street  
Plymouth, MA, 02360

#### **Available 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 )
- 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 )

### **Certification Programs**

- Joint Replacement - Hip
- Joint Replacement - Knee

### **Beth Israel Deaconess Hospital-Plymouth Imaging at the Park**

45 Resnik Road, Suite 1400, Office 106  
Plymouth, MA, 02360

#### **Available Services**

- Outpatient Clinics (Outpatient )

### **Beth Israel Deaconess Hospital-Plymouth Lab**

41 Resnik Road, 3rd floor  
Plymouth, MA, 02360

#### **Available Services**

- Laboratory Draw Station (Outpatient )

### **Beth Israel Deaconess Hospital-Plymouth Rehabilitation**

Pine Hills, 3 Village Green North, 3rd Flr, Ste 331  
Plymouth, MA, 02360

#### **Available Services**

- Outpatient Clinics (Outpatient )

### **Beth Israel Deaconess Hospital-Plymouth Rehabilitation**

10 Cordage Park Circle, Suite 225  
Plymouth, MA, 02360

#### **Available Services**

- Outpatient Clinics (Outpatient )

### **Beth Israel Deaconess Hospital-Plymouth Sleep Center**

45 Resnik Road  
Plymouth, MA, 02360

#### **Available Services**

- Outpatient Clinics (Outpatient )

### **Cape Lab Drawing Station**

83 Route 130  
Sandwich, MA, 02563

#### **Available Services**

- Laboratory Draw Station (Outpatient )

### **Cranberry Hospice**

36 Cordage Park Circle Suite 326  
Plymouth, MA, 02360

#### **Available Services**

- Hospice Care

### **Duxbury Lab Drawing Station**

95 Tremont Street  
Duxbury, MA, 02331

#### **Available Services**

- Laboratory Draw Station (Outpatient )

### **Industrial Park Lab Drawing Station**

45 Resnik Road, Suite 101  
Plymouth, MA, 02360

#### **Available Services**

- Laboratory Draw Station (Outpatient )

### **Long Pond Lab Drawing Station**

110 Long Pond Road  
Plymouth, MA, 02360

#### **Available Services**

- Laboratory Draw Station (Outpatient )

## Obery Street Drawing Station

46 Obery St  
Plymouth, MA, 02360

### Available Services







- Laboratory Draw Station (Outpatient )

## Cooperative Agreements

**Hospital** - Accredited by [American College of Surgeons-Commission on Cancer \(ACoS-COC\)](#)

## National Patient Safety Goals and National Quality Improvement Goals

### 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

### Measures Footnote Key

1. The measure or measure set was not reported.
2. The measure set does not have an overall result.
3. The number 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.

The Joint Commission only reports measures endorsed by the [National Quality Forum](#).

\* This information can also be viewed at [Hospital Compare](#).

\*\* Indicates per 1000 hours of patient care.

\*\*\* The measure was not in effect for this quarter.

---- Null value or data not displayed.

<b>Hospital</b>	<a href="#">2016 National Patient Safety Goals</a>	Nationwide Comparison:	Statewide Comparison:
<b>Home Care</b>	<a href="#">2019 National Patient Safety Goals</a>	Nationwide Comparison:	Statewide Comparison:
<p>Reporting Period: January 2019 - December 2019</p> <p><a href="#">National Quality Improvement Goals:</a></p>			
	<a href="#">Emergency Department</a>	National Comparison:  2	Statewide Comparison:  2
	<a href="#">Perinatal Care</a>	National Comparison:  2	Statewide Comparison:  2

### [New Changes to Quarterly Measure](#)

#### [Download Quarterly Measure Results](#)

The Joint Commission only reports measures endorsed by the [National Quality Forum](#).

\* State results are not calculated for the National Patient Safety Goals.

### National Quality Improvement Goals:

## Beth Israel Deaconess Hospital Plymouth

HCO ID: 5603  
 275 Sandwich Street  
 Plymouth , MA, 02360

Measure Area	Nationwide	Statewide
Perinatal Care Compared to Other Joint Commission Accredited Organizations	2	2
<a href="#">Read More</a>		

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate	Average Rate	Average Rate
Elective Delivery <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	 3% of 64 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	0%	2%	Average Rate	0% 1%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Jan - Mar 2019**

64

0%

2%

**Apr - Jun 2019**

64

4%

2%

**Jul - Sep 2019**

64

0%

2%

**Oct - Dec 2019**

64

8%

2%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Cesarean Birth <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	⊕ 0% of Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	12%	25%	Average Rate	13% 25%



## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Jan - Mar 2019**

1

1

25%

**Apr - Jun 2019**

1

1

25%

**Jul - Sep 2019**

1

1


25%

**Oct - Dec 2019**

1

1

25%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Exclusive Breast Milk Feeding <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	 59% of 738 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	73%	51%	Average Rate	71% 49%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Jan - Mar 2019**

738

59%

51%

**Apr - Jun 2019**

738

55%

52%

**Jul - Sep 2019**

738

62%


51%

**Oct - Dec 2019**

738

60%

50%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Antenatal Steroids <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	 100% of 6 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	100%	98%	Average Rate	100% 97%

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Jan - Mar 2019**

4

4

98%

**Apr - Jun 2019**

6

100%

99%

**Jul - Sep 2019**

4

4


99%

**Oct - Dec 2019**

1

1

98%

Measure	Hospital Results	Nationwide	Average	Statewide	Average		
		Top 10% Scored at Least	Rate	Top 10% Scored at Least	Rate	Rate	
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	 10 33% of 672 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	17%	32%	Average Rate	20% 34%
<a href="#">Read More</a> <a href="#">See Quarterly Results</a>							

## Quarterly Measure Results

Number of Eligible Patients

Rate

Nationwide Average

**Jan - Mar 2019**

672

26%

32%

**Apr - Jun 2019**

672

38%

31%

**Jul - Sep 2019**

672

28%

32%

**Oct - Dec 2019**

672

38%

32%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate		
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	ND 10 19% of 672 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	6%	13%	Average Rate	6% 12%
<a href="#">Read More</a> <a href="#">See Quarterly Results</a>							

## Quarterly Measure Results

Number of Eligible Patients  
Rate

Nationwide Average

**Jan - Mar 2019**

672

13%

14%

**Apr - Jun 2019**

672

27%

13%

**Jul - Sep 2019**

672

6%

14%

**Oct - Dec 2019**

672

32%

13%

Measure	Hospital Results	Nationwide Top 10% Scored at Least	Average Rate	Statewide Top 10% Scored at Least	Average Rate	Average Rate	
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate <a href="#">Read More</a> <a href="#">See Quarterly Results</a>	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">ND</span> 10 13% of 672 Eligible Patients	Nationwide Statewide	Top 10% Scored at Least	3%	18%	Average Rate	13% 23%



## Quarterly Measure Results

Number of Eligible Patients  
Weighted Median Minutes  
Nationwide Weighted Median Minutes

### Jan - Mar 2019

899  
134.00  
149.03

### Apr - Jun 2019

899  
120.00  
129.15

### Jul - Sep 2019

899  
97.00  
123.92

### Oct - Dec 2019

899  
123.00  
129.12