

The Joint Commission DSC Update

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Executive Director

When it comes to using online sites and features, I don't sign up unless I'm sure I will get some benefit. That said, I'd like to introduce you to a new site that is free, fun and quite useful.

It's a [TWikiSite](#), a meeting place to work on common interests. In this case, it is The Joint Commission's [Performance Measurement Network Q&A Forum](#). At this site you can ask questions about performance measures, which is timely because the Primary Stroke Measures are undergoing changes (see article this page). It is easy to search for questions already in the database, even without registering. However, if you want to ask a question, you'll need to sign up. Some things you can do on the site:

- Browse and follow links
- Search for Frequently Asked Questions
- Post a new question
- Change or add to anything you see in a TWiki topic
- Create and organize your personal page by using [TWikiForms](#) and [FormattedSearches](#) to classify pages by subject, status or date

Give it a try. I think you'll find it is worth a look.

Jean Range, R.N., M.S., C.P.H.Q.



Stroke measure updates

Eight performance measures currently used by Joint Commission certified Primary Stroke Centers have been added as a new core measure set for hospitals. "Accredited hospitals will now have the opportunity to include these measures in their core measure activities after October 1, 2009," says Jean Range, executive director, Disease-Specific Care Certification. "However, it is important to note that the Centers for Medicare & Medicaid Services is not requiring collection of stroke measures. It is only a requirement if you are a Joint Commission certified Primary Stroke Center."

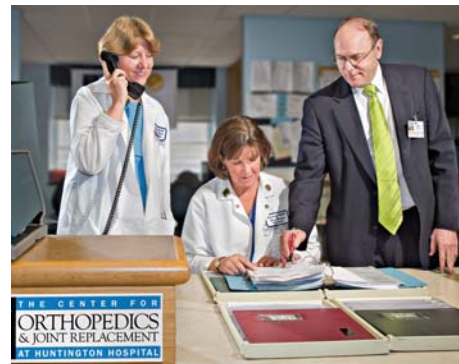
Here is the information certified Primary Stroke Centers need to know:

- Continue data collection and submission for all 10 stroke measures, including STK-7 and STK-9, through December 31, 2009.
- Use the measure specifications detailed in the [Stroke Performance Measurement Implementation Guide, 2nd Edition, Version 2.a](#) during this timeframe.
- Continue to submit stroke data via the Certification Measure Information Process on The Joint Commission extranet no later than 45 days following the end of the calendar quarter. Submission of stroke core measure data is optional.
- Beginning January 1, 2010, implement the stroke specifications as detailed in the [Specifications Manual for National Hospital Quality Measures, Version 3.0a](#).
- STK-7 and STK-9 were not endorsed by the National Quality Forum, are not included in the stroke core measure set, and will be retired January 1, 2010.

If you have questions, see the FAQs on the [Performance Measurement Network Q&A Forum](#), or e-mail questions to <http://manual.jointcommission.org>.

STK-4 alert: On May 28, 2009, the [American Heart Association \(AHA\)/ American Stroke Association \(ASA\)](#) released a new science advisory expanding the timeframe for t-PA administration from three to four-and-a-half hours. As a result of this new clinical guideline, The Joint Commission will consider modifying **STK-4: Thrombolytic Therapy** requirements. However, certified primary stroke centers should continue to collect and submit data for STK-4 using the current measure specifications until revisions are announced. E-mail any questions to <http://manual.jointcommission.org>.

Certification improves ortho programs



Kenney, Gentile, Gurtowski

Huntington Hospital, Huntington, N.Y., has been accredited since 1964, so standards and external reviews were not new to the staff. However, certification of their hip and knee joint replacement programs in March brought them to a whole new level of quality. Three orthopedic team members comment on the benefits of their certification.

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Mosebach joins Disease-Specific Care team

Donise Mosebach, R.N., B.S.N., M.S., C.E.N., has been named the field director for the Disease-Specific Care Certification Program. In this role, she oversees the staff conducting certification reviews. She joined The Joint Commission in 2007 as a general DSC and primary stroke center reviewer, and a hospital accreditation surveyor.



Why did you want to work for The Joint Commission? From my first survey experience as a staff nurse, I knew I wanted to work for The Joint Commission. I respected the mission and the opportunity to make a positive impact on health care quality.

What do you bring to your new position as someone who used to work as a reviewer? My field experience gives me an understanding of the unique challenges and rewards that are encountered as a reviewer and surveyor. The field staff is the face of The Joint Commission, and therefore, play a vital role in accomplishing our goals. My experience at Joint Commission headquarters makes me appreciate the intensive process in place for standards and survey development; giving me an understanding of what it takes to maintain the daily operations of a large, remote work force.

How does certification benefit a DSC program? Certification benefits a DSC program throughout the application and review process. It starts by meeting the standards requirements on a daily basis and complying with the clinical practice guidelines and performance measures. Certification preparation provides the structure to provide high quality patient care. The on-site review process aids the organization in identifying strengths and potential opportunities for improvement. Successful achievement of certification gives programs a marketing edge and allows them to publicize the care they provide.

If you have questions about your DSC review, contact Mosebach at dmosebach@jointcommission.org or call her at (630) 792-5791.

Certification improves care...continued from page 1

Maureen Kenney, R.N., nurse manager, “Certification was the stimulus for developing performance measures to constantly move our program forward. Our patients receive better care because of our certification.”

Wendy Gentile, R.N., B.S.N., C.N.O.R., orthopedic patient care coordinator, “We received certification in March 2009 and almost immediately there was a palpable increase in team pride. Not only for having achieved certification, but more importantly, for validating the staff’s dedication to patients, the hospital and the community.”

James P. Gurtowski, M.D., chief of orthopedics, “When Joint Commission certification became available, we made it a goal for our joint replacement program to attain this recognition. Our team used The Joint Commission’s Disease-Specific Care standards to make a good program even better.”

Organizations may seek Joint Commission disease-specific care certification for virtually any chronic disease or condition. For more information, send an e-mail to dscinfo@jointcommission.org or call (630) 792-5291.

Take note...

Carolinas wins Franklin Award

Carolinas Medical Center, Charlotte, N.C., is the winner of the 2009 Franklin Award of Distinction which recognizes an exceptional hospital/health system case management service. To learn more about the Franklin Award, visit the [ACMA Web site](#).

DSC reviewers needed

The Joint Commission is hiring Disease-Specific Care reviewers for the primary stroke and chronic kidney disease programs. Qualified candidates should review the requirements on the [Careers](#) page.

Hot off the press

Be the first on the block to receive *DSC Update*, the free quarterly newsletter, by signing up [here](#).

Publications

2009 Disease-Specific Care Certification Manual

Order code: DSCC09, \$125

Clinical Improvement Action Guide

Explains how to integrate clinical microsystems and practice-based learning into your organization.

Order code: AG200, \$75

To order books or to register for education programs, go to [Joint Commission Resources](#) or call (877) 223-6866.

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