



# Going for the Gold Seal

## Joint Commission Chest Pain Certification

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# The Joint Commission

*Helping  
Health Care  
Organizations  
Help Patients*



# Today's Objectives

- ▶ Review benefits of achieving Certification
- ▶ Define three core components of Chest Pain Certification
- ▶ Provide resources for obtaining Chest Pain Clinical Practice Guidelines
- ▶ Provide examples of Chest Pain Certification Performance Measures
- ▶ Q & A Session



# Benefits of Certification

- ▶ Builds the structure required for a systematic approach to clinical care
- ▶ Reduces variability and improves the quality of patient care
- ▶ Pushes you to look at yourself more closely
- ▶ Creates a loyal, cohesive clinical team
- ▶ Provides an objective assessment of clinical excellence
- ▶ Differentiates clinical care program in the marketplace
- ▶ Promotes achievement to community



# Certification by the Numbers

▶ **3,198** certified programs

- In all 50 states, DC and Puerto Rico
- 1,355 organizations
- 101 disease programs

▶ Hackensack University Medical Center has **24** certified programs!



# Chest Pain & Related Disease Certifications

- ▶ 33 certified AMI programs
- ▶ 12 certified ACS programs
- ▶ 11 certified Chest Pain programs
  - ~20 more in application/scheduling process
- ▶ For a complete list:

[www.jointcommission.org/certified](http://www.jointcommission.org/certified)



# Accreditation vs. Certification

- ▶ Accreditation Surveys
  - Organization-wide evaluation of care processes and functions
- ▶ Certification Reviews
  - Product or service-specific evaluation of care and outcomes

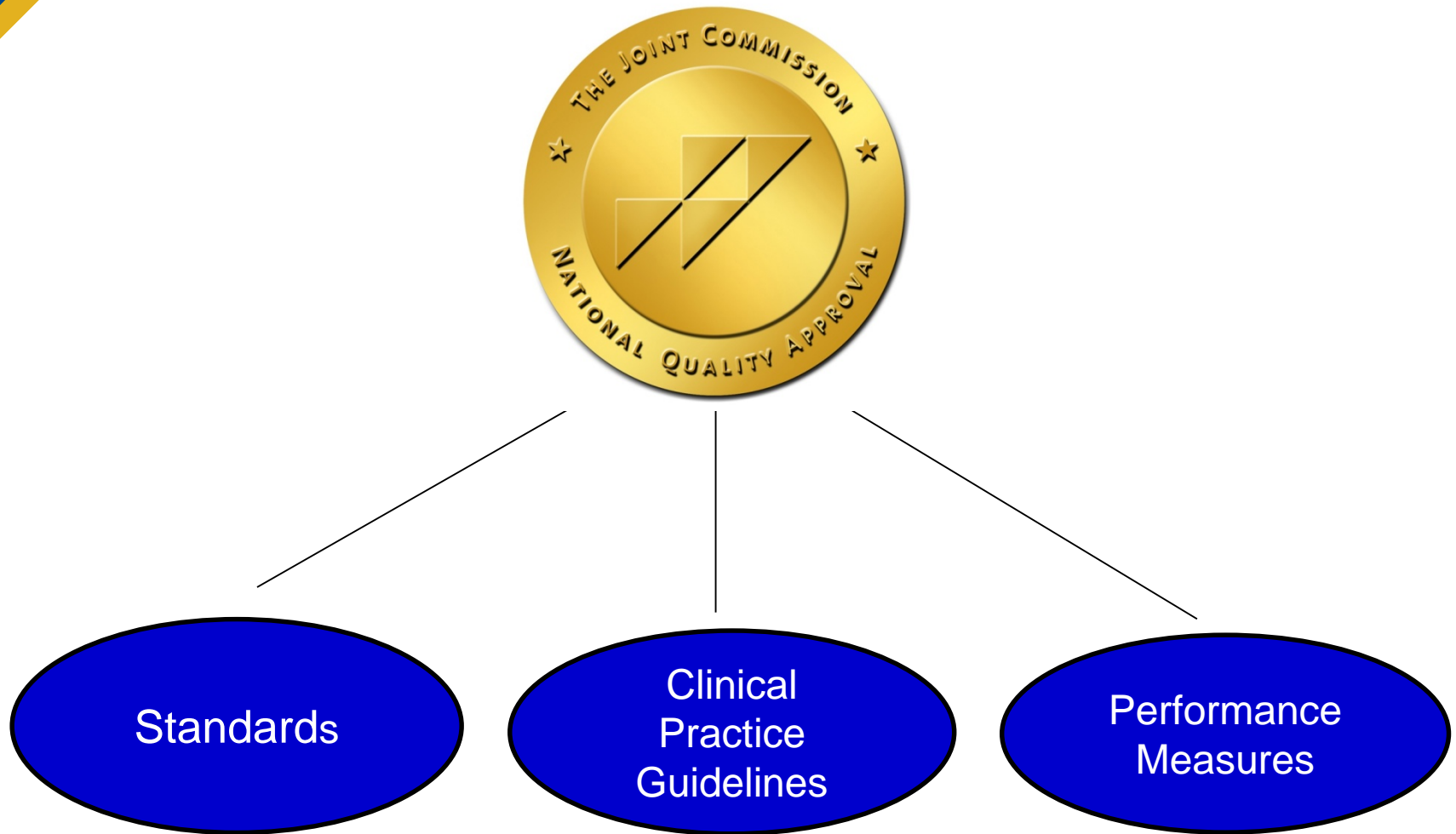


# Certification Eligibility

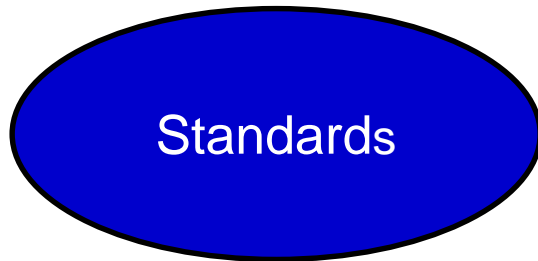
- ▶ Any disease-specific care program that has
  - Formal program structure
  - Standardized method of clinical care delivery based on clinical guidelines/ evidence-based practice
  - Organized approach to performance measurement



# Core Program Components



# Core Program Components



Standards



# Disease-Specific Care Standards

## Program Management

7 standards

## Delivering or Facilitating Clinical Care

6 standards

## Supporting Self-Management

3 standards

## Clinical Information Management

5 standards

## Performance Improvement and Measurement

6 standards


# Core Program Components





# Clinical Practice Guidelines

- ▶ Clinical care based on guidelines/evidence-based practice
- ▶ Review validates:
  - Rationale for selection/modification
  - Implementation of CPGs
  - Monitoring & improving adherence



# Clinical Practice Guidelines: Chest Pain Examples

- ▶ National Institute for Health & Clinical Excellence (NICE)
- ▶ Institute for Clinical System Improvement (ICSI)
- ▶ American College of Cardiology (ACC)
- ▶ American Heart Association (AHA)

# www.guideline.gov

The screenshot shows the homepage of the National Guideline Clearinghouse (NGC). At the top, there is a blue header with the U.S. Department of Health & Human Services logo and the URL www.hhs.gov. Below this is the AHRQ logo and the text "Agency for Healthcare Research and Quality" with the tagline "Advancing Excellence in Health Care" and the URL www.ahrq.gov/. A navigation bar includes links for "National Quality Measures Clearinghouse", "Health Care Innovations Exchange", and "AHRQ Home".

The main content area features a search bar with a "GO" button and links for "Search Tips", "Advanced Search", and "About Search". Below the search bar, it displays "My Recent Searches: atrial fibrillation; alzheimer; depression".

On the left, there is a vertical navigation menu with the following items: Home, Guidelines, Expert Commentaries, Guideline Syntheses, Guideline Matrix, Guideline Resources, Compare Guidelines, FAQ, Submit Guidelines, About, and My NGC.

The main content area is divided into several sections:

- NGC is a public resource for evidence-based clinical practice guidelines.**
- Search the site:** A search bar with a "GO" button and links for "Search Tips", "Advanced Search", and "About Search".
- My Recent Searches:** atrial fibrillation; alzheimer; depression
- New This Week:** February 17, 2014. **New/Updated Guideline Summaries:** ACOG, ASCRS, ASPEN, CPIC, ICSI, NICE, NSGC, SOGC. [View All](#)
- Announcements:** "My NGC" Personalization Feature. You can personalize NGC to accommodate your specific interests and receive alerts on new and updated content. For further information, see the [FAQ](#) page. [More...](#)

On the right side, there is a "Sign In to My NGC" section with a "Sign In" button and a "Forgot your password?" link. Below this is a "New User? Create a free account" link. Further down, there is a "My Recently Viewed Guideline Summaries" section with a list of summaries:

- Guideline for Alzheimer's disease management.
- Depression. The treatment and management of depression in adults.

At the bottom, there are three columns of links:

- Find:** Topic, Organizations, Guideline Index
- Learn:** AHRQ Evidence Reports, Hospital-Acquired Conditions, Mobile Device Resources
- Compare:** Guideline Syntheses, Compare Guidelines



# Performance Measurement Criteria

- ▶ Four process or outcome measures to monitor on an ongoing basis
  - Select existing measures; or
  - Create new measures
- ▶ At least two of the measures must be clinical
- ▶ Up to two measures may be non-clinical: administrative, utilization, financial, patient satisfaction, etc.





# What Makes a Good Performance Measure?

- ▶ Results can be used for improvement
- ▶ Relates to current medical evidence
- ▶ Defined specifications
- ▶ Data collection is consistent and logical



- By Topic
- By Organization
- By Domain
- By National Quality Strategy
- **NQF-Endorsed Measures**
- Measure Initiatives
- Measures in Progress
- Measure Index
- Measure Archive
- Measures Most Viewed
- Related NGC Guidelines

### NQF-Endorsed Measures

The list below identifies measures represented in NQMC that have been endorsed by the [National Quality Forum \(NQF\)](#)—a not-for-profit membership organization created to develop and implement a national strategy for health care quality measurement and reporting. NQF endorses performance measures as national voluntary consensus standards through their [consensus development process](#).

Search within:

Sort results by:  Relevance  Publication date

Filter results by:

1-20 of 442 [Next >](#)

- Abdominal aortic aneurysm (AAA) repair: mortality rate.** 2010 Sep. [NQMC Update Pending]  
NQMC:005532  
Agency for Healthcare Research and Quality - Federal Government Agency [U.S.]. [View all measures by the developer\(s\)](#)
- Abdominal aortic aneurysm (AAA) repair: volume.** 2010 Sep. [NQMC Update Pending] NQMC:005525  
Agency for Healthcare Research and Quality - Federal Government Agency [U.S.]. [View all measures by the developer\(s\)](#)
- Access to referrals: percentage of children who needed referrals and had a problem obtaining them.** 2007 Apr. NQMC:006428  
Child and Adolescent Health Measurement Initiative - Nonprofit Organization; Maternal and Child Health Bureau of the Health Resources and Service Administration - Federal Government Agency [U.S.]; National Center for Health Statistics of the Centers for Disease Control and Prevention - Federal Government Agency [U.S.]. [View all measures by the developer\(s\)](#)



# Performance Measures: Chest Pain Examples

- ▶ Door to EKG
- ▶ Door to balloon
- ▶ Door to transfer time for STEMI
- ▶ Ordered to resulted troponin time
- ▶ Lipid profile prior to discharge or within 30 days of presentation
- ▶ Discharge instructions (cardiac diet, medications, follow up)
- ▶ Patient satisfaction



# Challenges of Certification

- ▶ Consistent implementation of Clinical Practice Guidelines
  - Most frequently cited issue is related to missing or inconsistent CPGs
- ▶ Involvement of all physicians
- ▶ Data collection on performance measures

# Certification Logistics

## Pre

- Gap analysis to standards and guidelines; resolution of any gaps
- Apply 4-6 months before desired review date
- Data Collection (four months at a minimum)

## Visit

- 30 days advance notice of date
- One reviewer for one day

## Post

- Data collection and submission
- Intracycle conference call 12 months after visit
- Apply for recertification

## Visit

- Recertification visit occurs 2 years after initial visit
- To be scheduled within 90 day window around anniversary date
- 7 days advance notice of date



# Why Get Certified?

- ▶ Structure clinical programs of excellence
- ▶ Improve processes of care
- ▶ Culture change: communication, loyalty, teamwork
- ▶ “Toot your horn” to consumers
  - Attract more patients

# Advertise Your Achievement





# Resources

- ▶ Standards Interpretation Group  
[www.jointcommission.org/standards\\_information](http://www.jointcommission.org/standards_information)
- ▶ Performance Measure Online Q&A Forum:  
[manual.jointcommission.org](http://manual.jointcommission.org)
- ▶ Pricing Unit: 630-792-5115
- ▶ Initial applications:  
David Eickemeyer, 630-792-5697  
[deickemeyer@jointcommission.org](mailto:deickemeyer@jointcommission.org)



# Questions?



# Register for our Oct. 19 Webinar

## **PART 2: Disease-Specific Care Certification Most Cited Standards: Reviewers Insight**

- October 19, 2015
- 12:00 p.m. - 1:00 p.m. CT
- 1 CE CREDIT: 1.0 CEU will be offered for Part 2.
- [www.jointcommission.org/DSC](http://www.jointcommission.org/DSC)



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