

# The Joint Commission Cardiac Advanced Certification Program Concept Comparison

PROGRAM CONCEPT	CCC	PHAC	AHAR	ACHF
<b>Program-Specific Eligibility*</b>	<ul style="list-style-type: none"> <li>Participants in a nationally audited registry or similar data collection tool for the following domains: AMI, cardiac rehabilitation, CABG, diagnostic cardiac catheterization procedures, heart failure, ICD, PCI, and valve replacement/repair.</li> </ul>	<ul style="list-style-type: none"> <li>On-site 24/7 primary PCI coverage for STEMI patients.</li> <li>Interventional cardiologists who perform primary PCI for STEMI, perform a minimum of 50 PCI procedures and 11 primary PCI procedures a year to maintain competency (procedures performed at other hospitals can be included in the total).</li> <li>Participants in American Heart Association's "Get With the Guidelines® - Coronary Artery Disease" program</li> <li>Hospital is designated as a smoke-free campus</li> </ul>	<ul style="list-style-type: none"> <li>Participants in the American Heart Association's "Get With the Guidelines® - Coronary Artery Disease" program</li> <li>Hospital is designated as a smoke-free campus</li> </ul>	<ul style="list-style-type: none"> <li>Established inpatient heart failure clinical treatment program.</li> <li>Ambulatory care services</li> <li>Participants in the "Get With the Guidelines® - Heart Failure" program</li> </ul>
<b>Hospital Volume Requirements</b>				
<b>CABG</b>	125/annually	N/A	N/A	N/A
<b>Valve Replacement/Repair</b>	50/annually	N/A	N/A	N/A
<b>PCI</b>	200/annually	150/consecutive rolling 4 quarters	N/A	N/A
<b>Primary PCI</b>	36/annually	36/consecutive rolling 4 quarters	N/A	N/A
<b>Leadership</b>	Designated physician leader	A designated medical director and a designated STEMI coordinator	A designated medical director and a designated STEMI coordinator	Leader(s) with knowledge and experience in caring for this patient population
<b>Emergency Medical Services (EMS) Collaboration</b>	Regional initiatives to improve systems of care for high-risk, time-sensitive cardiovascular conditions	Feedback to EMS agencies and interfacility transport agencies within 24–48 hours of patient arrival	Feedback to EMS agencies and interfacility transport agencies within 24–48 hours of patient arrival	N/A
<b>Diagnostic Testing Capability</b>	Diagnostic cardiac catheterization procedures, cardiac stress tests including emergency cardiovascular diagnostic, imaging, and interventional/surgical services	Acquisition of a 12-lead ECG within 10 minutes of arrival	Acquisition of a 12-lead ECG within 10 minutes of arrival	Advanced cardiac imaging (such as cardiac MRI), chest X-ray, 2-D echo with doppler, ECG, laboratory tests
<b>Cardiac Catheterization Laboratory</b>	Available 24/7	Available 24/7	Cath lab with limited hours, if applicable to hospital	N/A

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<b>Physician/Staff Accessibility</b>	Call schedule for physicians with expertise in cardiac critical care, coronary interventions, advanced heart failure care, cardiac imaging, arrhythmia management, and cardiothoracic surgery who provide coverage 24 hours a day, 7 days a week	<ul style="list-style-type: none"> <li>• Single-activation STEMI alert/call system</li> <li>• On-call schedule for 24/7 catheterization laboratory staff and interventional cardiologist coverage</li> <li>• Catheterization laboratory staff and interventional cardiologist arrival on site within 30 minutes of STEMI activation</li> </ul>	<ul style="list-style-type: none"> <li>• Single-activation STEMI alert/call system</li> <li>• The provision of staff and practitioners needed to deliver or facilitate the delivery of care, treatment and services</li> </ul>	N/A
<b>Scope of Care, Treatment, and Services</b>	<ul style="list-style-type: none"> <li>• Cardiovascular risk factor identification and cardiac disease prevention</li> <li>• Management, triage, and risk stratification of emergent cardiovascular conditions, ischemic heart disease, dysrhythmias, cardiac valve disease, heart failure, cardiac arrest</li> <li>• Provide direct care, or stabilizing and transferring patients who require care beyond the scope of services</li> <li>• Provide consultation, referral, and transfer arrangements</li> <li>• Planning for discharge, follow up, and transitions of care</li> </ul>	<ul style="list-style-type: none"> <li>• Triage, diagnosis, and treatment of STEMI patients</li> <li>• Primary percutaneous coronary intervention (PPCI)</li> <li>• IV fibrinolytics</li> <li>• Simultaneous STEMI patient presentation</li> <li>• Emergency Adverse Weather Contingency Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Triage, diagnosis, and treatment of STEMI patients</li> <li>• Primary percutaneous coronary intervention (PPCI), if applicable</li> <li>• IV fibrinolytics</li> </ul>	<ul style="list-style-type: none"> <li>• Heart failure services include preserved ejection fraction (HFpEF) and reduced ejection fraction (HFrEF)</li> <li>• Inpatient and outpatient services, including transitional care; outpatient heart failure services; cardiac pulmonary exercise; device implantation; access to a ventricular assist device (VAD); genetic services; referral to transplant services</li> </ul>
<b>Transfer Protocols</b>	<ul style="list-style-type: none"> <li>• Process for receiving transfers from other facilities, circumstances for not accepting transferred patients, and transfers to another facility for services outside the organization's scope of care</li> </ul>	<ul style="list-style-type: none"> <li>• Process for receiving transfers</li> <li>• For sites without on-site surgery, formal agreement(s) with facility(ies) that does provide surgery on-site and the associated transfer plan/protocol</li> </ul>	<ul style="list-style-type: none"> <li>• Process for transfer to the most appropriate receiving center, including primary transport provider and back-up transport provider</li> </ul>	N/A

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<b>Staff Education Requirements</b>	Cardiovascular disease education: <ul style="list-style-type: none"> <li>• Cardiac care or cardiovascular critical care unit RNs – 8 hours/year</li> <li>• Adult medical ED RNs – 2 hours/year</li> <li>• Other emergency department staff members –2 hours/year</li> </ul>	<ul style="list-style-type: none"> <li>• Specific to STEMI recognition, identification, and treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Specific to STEMI recognition, identification, and treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who coordinate the care of individuals with heart failure have the education, experience, and knowledge to perform this function</li> </ul>
<b>Provision of Educational Opportunities</b>	Leadership in regional initiatives to develop and continuously improve systems of care for high-risk, time-sensitive cardiovascular conditions	Multidisciplinary training and education events for emergency medical service professionals, including 911 and interfacility transport	Multidisciplinary training and education events for emergency medical service professionals, including 911 and interfacility transport	Practitioner continuing education or certification related to heart failure
<b>Community Education</b>	Sponsors at least six community education programs annually on cardiovascular disease prevention	Outreach plan for educating the community on heart attack care	Outreach plan for educating the community on heart attack care	Annual heart failure public education activities, regular support group meetings, self-management heart failure education for patients and families
<b>Performance Measures</b>	Standardized measures	Standardized measures	Standardized measures	Standardized measures
<b>Guidelines</b>	Current national guidelines	ACCF/AHA/SCAI 2013 Update on Clinical Competencies Statement on Coronary Artery Interventional Procedures  Development of Systems of Care for STEMI Patients: The Primary PCI Hospital Perspective, 2007	ACCF/AHA/SCAI 2013 Update on Clinical Competencies Statement on Coronary Artery Interventional Procedures  2013 ACCF/AHA Guideline for the Management of STEMI	Current American College of Cardiology/American Heart Association heart failure guidelines
<b>Review</b>	Two reviewers, two days	One reviewer, one day	One reviewer, one day	One reviewer, one day

\*Program candidates must be in the United States, operated by the U.S. government, or operated under a charter of the U.S. Congress

\*Program-specific eligibility for these cardiac programs include the use of a standardized method of delivering care centered on evidence-based guidelines for cardiac care

\*General Disease-Specific Certification eligibility requirements apply

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