Effective Nov. 15: Updates to Emergency Management standards

In response to the Centers for Medicare & Medicaid Services’ (CMS) final rule on emergency preparedness in September 2016, The Joint Commission updated its Emergency Management (EM) standards. Initially communicated in the Sept. 13 issue of Joint Commission Online, the standards revisions are now available. The most significant changes are to the home health settings with 39 new or revised elements of performance (EPs), then ambulatory health care with 29. Hospitals and critical access hospitals each have 21 new requirements.

The Joint Commission will begin surveying to the updated EM requirements as of the rule’s Nov. 15, 2017, implementation date. These updated requirements will apply to accredited deemed hospitals, critical access hospitals, home health agencies, hospices and ambulatory surgical centers, as well as rural health clinics and federally qualified health centers.

New EPs have been created to address key areas in preparedness and response, including the following:
- Continuity of operations and succession plans
- Documentation of collaboration with local, tribal, regional, state and federal EM officials
- Contact information on volunteers and tribal groups
- Annual training of all new/existing staff, contractors and volunteers
- Integrated health care systems

Hospitals and critical access hospitals have an additional emergency and standby power system requirement, and hospitals have an additional requirement for transplant services.

The final rule aims to establish national emergency preparedness requirements that are designed to aid health care organizations in properly planning for natural and human-caused disasters, while also coordinating with federal, state, tribal, regional and local emergency preparedness systems. It also is intended to help prepare providers and suppliers to meet the needs of patients, residents, clients and communities during emergency events and throughout recovery.

View the prepublication standards for:
- Ambulatory Health Care
- Critical Access Hospital
- Hospital
- Home Care
Coming Jan. 1, 2018: New Accreditation, Certification reports to be more user-friendly

In response to customer feedback, The Joint Commission is redesigning its Accreditation and Certification reports to be more user-friendly. The new survey report format will be used for all surveys that are conducted after Jan. 1, 2018.

The report will highlight the most relevant information about surveys and reviews, outcomes, and required follow-ups. Additional requests being included in the updated reports are:

- Removing unnecessary white space
- Removing repetitive text
- Prioritizing and grouping findings by severity
- Highlighting Centers for Medicare and Medicaid Services’ (CMS) Condition-Level and Standard-Level Findings
- Offering report sorting and filtering

The Joint Commission worked with customer advisory groups, field staff and Central Office staff to prepare the revised survey format. A PDF of the Accreditation report will be posted to organizations’ extranet. It is presented in landscape orientation and uses tables to succinctly deliver key information. Additionally, there also will be a downloadable Excel file of the report. (Contact: Kay Kruse, kkruse@jointcommission.org)

Patient safety

November JQPS: Examine ways to improve care transitions between hospitals, SNFs

After hospitalization for acute medical illness, one in four Medicare patients is discharged to a skilled nursing facility (SNF). These care transitions are often marked by disruptions in care and poor communication. A new study in the November issue of *The Joint Commission Journal on Quality and Patient Safety* (JQPS) examines hospital and SNF perspectives on these patient care transitions.

In the study — “Care Transitions Between Hospitals and Skilled Nursing Facilities: Perspectives of Sending and Receiving Providers,” reported by Meredith Campbell Britton, LMSW, research associate, and Sarwat Chaudhry, MD, principal investigator, Yale Center for Healthcare Innovation, Redesign and Learning (CHIRAL), New Haven, Connecticut — qualitative interviews were conducted with 25 hospital providers and 16 SNF providers at three facilities regarding patient transfers and experiences with unplanned hospital readmissions.

The participants cited challenges with:

- Managing increased patient care complexity
- Identifying an optimal care setting
- Managing rising financial pressures
- Overcoming barriers to effective communication

They also identified issues that separate hospital and SNF providers, including SNFs’ reduced physician presence, lower nurse-to-patient ratios, and limited access to pharmacy and equipment services. Future interventions, the authors note, “should focus on enhancing communication between clinicians, promoting provider understanding of post-acute care and developing strategic opportunities to align facilities.”

Open access is available for this article.

Also featured in the November 2017 issue are:

- “Examining Racial and Ethnic Differences in Nursing Home Quality”
- “Time for Nursing Homes to Recognize and Address Disparities in Care”
- “Use of Unit-Based Interventions to Improve the Quality of Care for Hospitalized Medical Patients: A National Survey”
- “Root Cause Analysis of ICU Adverse Events in the Veterans Health Administration”
• “Implementing the Comprehensive Unit-Based Safety Program (CUSP) to Improve Patient Safety in an Academic Primary Care Practice”
• “Using Fault Trees to Advance Understanding of Diagnostic Errors”
• “A Scalable Program for Customized Patient Education Videos”
• “A Novel Process Audit for Standardized Perioperative Handoff Protocols”

For more information, visit The Joint Commission Journal on Quality and Patient Safety website. Also, JQPS is now on LinkedIn. Follow the page to stay up-to-date on the latest data, research, trends and viewpoints on patient safety and quality.

Resources

Webinar replay: Better understand hand-off communication processes
Joint Commission staff recently asked webinar participants, “Do You Really Understand Your Hand-off Communication Processes?” This follow-up webinar to Sentinel Event Alert 58: Inadequate hand-off communication, featured a panel of Joint Commission patient safety professionals, including a sentinel event specialist, a human factors engineer, a senior field surveyor, and a Center for Transforming Healthcare black belt. The panel dove deep into a case study to examine what really causes hand-off communication errors. Listen to this replay and learn from these Joint Commission professionals.

For those unable to attend the day of the webinar, there is still a chance to learn how to:
• Identify flaws or inconsistencies in current hand-off communication processes.
• Address and fix hand-off process deficiencies.
• Conduct constructive conversations among departments about hand-off processes.

View the webinar replay and the presentation slides.

Webinar replay: Learn about 2017-2018 ORYX Reporting Requirements, eCQM Direct Submission
A webinar replay for "Pioneers in Quality™: Joint Commission 2017-2018 ORYX Reporting Requirements and eCQM Direct Submission" has been posted to The Joint Commission’s website.

For those who were unable to attend, there is still an opportunity to learn how to:
• Understand modifications to 2017 ORYX performance measurement reporting requirements, along with 2018 reporting requirements.
• Better understand the direct submission process and technical requirements.
• Discuss The Joint Commission’s strategy and future vision for receiving data directly from hospitals.

View the webinar replay and the slide presentation.

New Take 5 podcast focuses on hand-off communication tools, strategies

Hand-offs are a necessary part of patient care and cannot be avoided, so the Joint Commission Center for Transforming Healthcare created a Targeted Solutions Tool® and a project to help health care professionals perform hand-offs better.

Klaus Nether, executive director of high reliability product delivery for the Center, discusses those tools and strategies. Listen. [7:54]
Up in the blogosphere with The Joint Commission

- *Leading Hospital Improvement* — *Medical Staff Essentials: Clarifying Medical Staff Standards*: The Joint Commission’s Medical Staff (MS) standards describe the medical staff’s roles and responsibilities in detail. Understanding and applying those standards, however, has always been challenging, writes Lisa Abel, content development manager, Joint Commission Resources.

- *@ Home with The Joint Commission* — *Community-Based Palliative Care Certification Reduces Readmissions*: Today’s palliative care is more individualized and goal-oriented than ever before, but there is still a gap when it comes to receiving care outside hospital settings. All too often, palliative care is seamless in the in-patient setting but becomes disjointed when the patient moves home, writes Irina Mitzner, RN, vice president of clinical operations and nurse executive for Northwell Health.

### Joint Commission Resources

**JCR newsletters moving to all-digital format in 2018**

Attention subscribers to *Perspectives*, *The Source* and *Environment of Care News*: Starting in 2018, all these publications will be moving to an all-digital format. Readers can now get this content in a timelier, convenient way.

*The Joint Commission Journal on Quality and Patient Safety* will not be affected by this change, as it is published by Elsevier and will continue in both print and digital formats.

With digital access, readers will have access to their favorite Joint Commission Resources (JCR) newsletters 24/7. New issue notifications will be sent out by email, and subscribers will have easy access to archives dating back five years. Digital subscription options are available for single users, institutions, and health care systems.

All accredited and certified organizations will continue to receive complimentary single-user access to *Perspectives* via their Joint Commission Connect extranet site.

[Learn more](#).

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