The Joint Commission recently approved its new Comprehensive Cardiac Center Advanced Certification program for accredited hospitals. Program requirements become effective January 1, 2017.

The Comprehensive Cardiac Center program is designed to help Joint Commission–accredited hospitals establish the structures, processes, and culture that can lead to sustained levels of effective clinical performance and patient outcomes across cardiac specialties and the care continuum. The optional certification program will help organizations demonstrate excellence in delivering comprehensive cardiac care through compliance with consensus-based standards, effective integration of evidence-based clinical practice guidelines, an organized approach to performance measurement and improvement, and achievement and/or maintenance of required Advanced Disease-Specific Care certification requirements.

The hospital’s/cardiac center’s scope of care, treatment, and services will include, at a minimum, management of the following domains:

- Ischemic heart disease, through medical and interventional/surgical care, including acute coronary syndrome treatments, percutaneous coronary interventions, and coronary bypass graft surgery
- Cardiac valve disease, including valve replacement/repair procedures
- Arrhythmias, including electrophysiology services and outpatient device clinic
- Advanced heart failure, including outpatient services
- Cardiac arrest, including prevention of in-hospital arrests, resuscitation, and targeted temperature management for cardiac arrest
- Cardiac rehabilitation of patients, as indicated, either on site or by referral
- Cardiovascular risk factor identification and cardiac disease prevention

In accordance with The Joint Commission’s standards development process, the certification program was developed.
with feedback from an advisory panel of multidisciplinary clinical experts, a national field review, and pilot surveys to assess the current state of comprehensive cardiac centers and the operational challenges involved in addressing the multiple domains of cardiac patient care and services across the continuum of care.

Requirements for the Comprehensive Cardiac Center Advanced Certification are available on The Joint Commission website at http://www.jointcommission.org/standards_information/prepublication_standards.aspx. The requirements will also be published in the January 1 E-dition® release.

Questions about this certification may be directed to Kathleen Mika, MSN, RN, associate director, Department of Standards and Survey Methods, The Joint Commission, at kmika@jointcommission.org or Patrick Phelan, interim executive director, Certification, The Joint Commission, at certification@jointcommission.org.

FSA Temporarily Offline for Standards Update and Tool Enhancements

Starting December 30, 2016, at 5:00 p.m. central time (CT), the Focused Standards Assessment (FSA) tool on the Intra-cycle Monitoring (ICM) Profile will be offline for the January 2017 standards update. The tool will resume January 9, 2017, at 8:00 a.m. CT. An extension date will be applied for accredited organizations with a scheduled ICM submission due date between January 1st and January 9th to allow additional time to review any changes made to standards displayed in the open FSA tool. The extension due date will be set to Monday, January 23, 2017.

FSA Tool Enhancements

Another reason that the FSA tool will be offline is to allow for enhancements that will support the transition to the Survey Analysis for Evaluating Risk™ (SAFER™) matrix, thus ensuring consistency across all Joint Commission systems. The SAFER matrix will replace The Joint Commission’s current scoring methodology effective January 1, 2017 (see October 2016 Perspectives). The following updates to the tool will be ready on January 9, 2017, when the tool is back online.

**Standards/EPs Tab.** The Standards/EPs Tab will feature several changes:
- Removal of the “SC” (which stands for Scoring Category), “Tier,” and “MOS” columns from the Standard Details Page
- Removal of “Partial Compliance” from the EP Scores drop-down menu
- Addition of two new fields—“Likelihood to Harm” and “Scope.” These fields will be displayed only if an element of performance (EP) is scored as not compliant. Furthermore, please note that if an organization scores an EP as not compliant, designating the likelihood to harm and scope is optional.

**Plan of Action (POA) Tab.** The POA Tab will feature the following changes:
- The “POA Compliant By Date” field will be set to 60 days.
- The “Evaluation Method and Measure of Success” field will be retitled to “How Will Compliance be Sustained?”

**Scoring Summary Tab.** The “MOS” column on this tab will be renamed as the “SAFER” column. If the likelihood and scope are defined on the Standard Details Page, a green check mark will appear in the SAFER column.

**Reports and SAFER Matrix Tabs.** FSA reports will be modified to accommodate the new changes. One SAFER matrix for each accreditation program will be available, and organizations will be able to populate the matrix based on the scoring of standards/EPs on the Standard Details Page.

Questions about the FSA tool and the upcoming enhancements may be directed to your organization’s designated Account Executive.

Survey Process Change: Evaluating ILSMs (continued)

ILSM action in addition to the measures in EPs 2–14. EP 15 states: If the hospital’s policy allows the use of other ILSMs not addressed in EPs 2–14, the other ILSMs used are documented in the “other” section of the hospital’s Survey-Related Plan for Improvement (SPFI) within the Statement of Conditions” (SOC”). The January 2017 Perspectives will address the entire Standard LS.01.02.01. Questions may be directed to Jim Kendig and Tim Markijohn, field directors, Life Safety, The Joint Commission, at jkendig@jointcommission.org and tmarkijohn@jointcommission.org.