Symphony Post Acute Network’s chief learning officer, Michelle Stuercke RN, shares how achieving Joint Commission accreditation and Post-Acute Care specialty certification has had a positive impact on their member facilities’ ability to build and maintain relationships with referral partners, while also improving patient safety and quality of care through improved processes.

**What has the Post-Acute Care Certification done to foster relationships between you and your referral sources?**

Since all of the hospitals our Member Facilities’ work with have Joint Commission accreditation, this achievement allows them to talk about quality, sentinel events and continuation of care using the same framework. For example, when discussing an issue with medication reconciliation, both levels of care can conduct a root cause analysis and share what was found using the same terms. Instead of focusing on people, the organizations can focus on process to ensure ongoing safety. Certification, in addition to accreditation, has made our medical directors feel more comfortable with the competencies of staff in the buildings. When we can demonstrate the same credentialing process and standards that are at the hospital, physicians are more comfortable discussing quality concerns with their peers because there is a commonality in the framework.

**In regard to patient safety, what impact has the achievement had on hospitalization rates?**

Communication between care providers is the key to preventing errors and leading to an unnecessary return to the hospital. Medication reconciliation and hand off between levels of care have been where we’ve seen the greatest impact. With Post-Acute Certification, Our Member Facilities’ feel empowered to insist on a comprehensive hand off from the hospital. The hospitals are seeing that this communication increases satisfaction among the patients and decreases their potential for return to the hospital. Also, the physician is required to see the resident within 48 hours of admission. The previous lack of a physician visit had been one of the main reasons for hospitalization. With the buy-in from our physicians getting in to see the residents they feel much more comfortable in managing changes of condition in house.

Questions?

630.792.5070
NCC@jointcommission.org
How has the achievement helped you meet your overall census goals?

By achieving Post-Acute Certification from The Joint Commission our Member Facilities are not only able to tell people we are a quality-focused post-acute provider, but they have proof with their certification. Hospital discharge planners and potential residents know that a facility has gone above the current standards and has verification of the services provided. This certification has also helped facilities acquire managed care contracts which helped them achieve census goals.

In your opinion, what is the primary difference between the state survey process and the Joint Commission process?

The Joint Commission process is about just that, process. If something doesn't go as planned what do you do about it and how are you going to ensure quality going forward? It is about ensuring ongoing quality improvement and root cause analysis when things go wrong. Credit is given for having processes in place, but there is also very collaborative discussion with the surveyors regarding best practice and helping give ideas when a standard is not met.

In contrast, the CMS process exudes more of a "gotcha" mentality. The CMS surveyors are not permitted to consult nor share best practices, which leads to frustration when a facility does not understand how they did not meet the standard.

Share your top one or two tips that helped your Member Facilities prepare for Joint Commission accreditation?

First, get buy-in from everyone from administration to line staff. A successful Joint Commission survey cannot happen with the input of one or two staff; nor can it happen with only administration. Staff at all levels of the organization need to be involved and participate in the process. At the beginning of your journey, hold all staff meetings to talk about the organization’s goals and how they can assist. As the journey develops, continually share with staff what you are working on and how they’re contributing to meet the standards. This is great to do at staff meetings or via story boards in the break room. Once you have accomplished your goal, make sure to celebrate with all your staff.

Second, review the standards and see where you are most vulnerable. As obvious as that sounds, make sure you focus on where you are weakest and put those systems in place. While you may not have perfection in all areas, it is important to get your processes in order so you can show your intent to meet the standards.