Conflict of Interest

We hereby certify that, to the best of our knowledge, no aspect of our current personal or professional situation might reasonably be expected to affect significantly our views on the subject on which we are presenting except that we both work for TJC.
Objectives

- Define the three core components of Sepsis Certification
- Learn how to begin the process towards achieving Sepsis Certification
- Highlight the benefits of Sepsis Certification
- Listen to a first hand experience of the Sepsis Certification journey
Key Program Components

- Standards
- Clinical Practice Guidelines
- Performance Measures
Disease Specific Care Standards

- Certification Participation Requirements
  - 15 Requirements
- 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
Clinical Practice Guidelines

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

- Program Team selects/defines four (4) performance measures to positively impact the quality of patient care:
  - Two clinical process or outcome (minimum)
  - Others may be non-clinical
  - Resource: http://qualitymeasures.ahrq.gov/
  - Use for PI plan

- Four (4) months data for initial on-site review

- Monitor data monthly, report data quarterly
Where to Start

- Contact your Business Development representative
  - certification@jointcommission.org

- Review the standards in the *Disease-Specific Care Certification Manual*.
  - Free 90 day trial of standards available

- Conduct a gap analysis of current state versus the expectations of the standards.

- Develop preparation action plans from the results of the gap analysis and mock review and determine your certification timeline.
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
- Promotes a culture of excellence across the organization
- Provides an objective assessment of clinical excellence
- Promotes achievement to your marketplace
Tips for Success with Disease Specific Certification

Angela Craig APN, MS, CCNS
Sepsis Facilitator at Cookeville Regional Medical Center
First Hospital in TN to become Sepsis Disease Specific Certified Hospital
Steps Toward Survey

- Identify an area of excellence
- See if your team is up for a challenge
- Discuss with Administration
- Physician and leadership buy in
Preparation Help

- Manual – Standards for Disease-Specific Care Certification
  - Gap Analysis – Number 1 most important step
Preparation Help

- Gap Analysis
  - Where you look at each element and see what the standards are and how you will need to reach that standard
  - Then divide up the work among the team – don’t try to be the hero and do it all. Team is better (Together Each Achieve More)
  - Notebook I developed had tabs to show we met all the criteria needed to pass this certification
  - Policies, Supporting Documents, etc

- Deciding on a measure to report to the Joint Commission
  - Choose items that are realistic
  - Do not get too carried away with these
  - Try to pick one that will make a difference in the life of your patient
Preparation Help

Requirements for improvement – meetings

- You will want to have these every 2 weeks to 1 month to prepare
- You will have monthly data to prepare and input into the Joint Commission Data base
- The data base is very easy to navigate 😊
Preparation Help

Do NOT feel like you have to be perfect to go into this process (you do want to feel confident and prepared)
Preparation Help

- Manual – Standards for Disease-Specific Care Certification
  - Gap Analysis – Number 1 most important step
- Joint Commission Connect
  - Thejointcommission.org
  - Log in to Connect

Sepsis Certification and Benefits
October 25th, 2017
Preparation Help

Coach from The Joint Commission

- Give guidance
- Help explain any elements of performance that you are unsure about or do not understand
- They are a phone call away 😊
## Sepsis Certification and Benefits

March 8, 2017

(Putnam Room and Admin B)

1 Day with 1 Reviewer; HCO: 7821

Note: Please refer to the Organization Review Preparation section of the Disease Specific Care Review Process Guide for materials that the reviewer needs for the Planning Session.

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Organization Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 – 8:30 a.m.</td>
<td>Opening Conference and Orientation to Program</td>
<td>Linda Crawford, Angela Craig, Betty Ealey Buffy Key, Marnie Rogers, Chevelle Johnson, Stephanie Etter, Paul Korth, Steve Ramey, Scott Williams, Dr. Pierce Alexander, Dr. Sullivan Smith</td>
</tr>
<tr>
<td>8:30 – 9:00 a.m.</td>
<td></td>
<td>(PUTNAM ROOM)</td>
</tr>
<tr>
<td>9:00 – 9:30 a.m.</td>
<td>Reviewer Planning Session</td>
<td>Angela Craig, Buffy Key, Chevelle Johnson, Program Representatives</td>
</tr>
<tr>
<td>9:30 – 10:00 a.m.</td>
<td>Individual Tracer Activity</td>
<td></td>
</tr>
<tr>
<td>10:00 – 10:30 a.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:30 – 11:00 a.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:00 – 11:30 a.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:30 – 12:00 p.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:00 – 12:30 p.m.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12:30 – 1:00 p.m.</td>
<td>Reviewer Lunch</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(PUTNAM ROOM)</td>
<td>LUNCH WILL BE PROVIDED FOR THE REVIEWER AND CRMC STAFF</td>
</tr>
<tr>
<td>1:00 – 1:30 p.m.</td>
<td>System Tracer – Data Use</td>
<td>Angela Craig, Betty Ealy, Buffy Key, Chevelle Johnson, Marnie Rogers, Stephanie Etter</td>
</tr>
<tr>
<td>1:30 – 2:00 p.m.</td>
<td></td>
<td>(PUTNAM ROOM)</td>
</tr>
<tr>
<td>2:00 – 2:30 p.m.</td>
<td>Competence Assessment/Credentialing Process</td>
<td>Betty Ealy, Craig King, Christy Kinnard, Stephanie Etter, Marnie Rogers, Angela Craig</td>
</tr>
<tr>
<td>2:30 – 3:00 p.m.</td>
<td></td>
<td>(PUTNAM ROOM)</td>
</tr>
<tr>
<td>3:00 – 3:30 p.m.</td>
<td>Issue Resolution &amp; Reviewer Report Preparation</td>
<td></td>
</tr>
<tr>
<td>3:30 – 4:00 p.m.</td>
<td></td>
<td>(PUTNAM ROOM)</td>
</tr>
<tr>
<td>4:00 – 4:30 p.m.</td>
<td>Program Exit Conference</td>
<td>Sepsis Team, Linda Crawford, Angela Craig, Betty Ealey Buffy Key, Marnie Rogers, Chevelle Johnson, Stephanie Etter, Paul Korth, Steve Ramey, Scott Williams, Dr. Pierce Alexander, Dr. Sullivan Smith</td>
</tr>
<tr>
<td>4:30 – 5:00 p.m.</td>
<td></td>
<td>(PUTNAM ROOM)</td>
</tr>
</tbody>
</table>
Day of Review Feedback

Feedback from Certification Day with the Joint Commission Surveyor
March 3rd, 2015

Education – need to educate throughout their hospitalization
  – Need to know what they do and do not understand
  – Based on pts understanding – will translate into how they care for themselves
  – Did we teach them so they understood?
  – We need to engage the patient/family in teaching maybe have “teach back” methods – asking the patient to tell us what we just taught them
  – Phone education needs to be documented – nurses do this all the time and do not get credit by documenting it
  – Need to show how we are engaging pt and family in their healthcare
  – Hard to see the disease process and knowing if the patients/families understood
  – Could we have a pre-printed tab for the nurses? One that makes documentation easier
  – Give them a sepsis brochure? Do we want to do this?
  – Is family asking appropriate questions?
Day of Review Feedback

Would like to see a breakdown based on cultural beliefs – many people act a certain way due to their culture

We need to know our program patients
- What is their education?
- What is their 30 day re-admission rate?
- What is their ethnicity?
- What is their educational level?
- What is their LOS?
- What is the cause of readmission

Patient Satisfaction
- Suggested Voice of the Customer: Bring in previous patient and ask what they liked and did not like about their care, getting feedback from an actual person
- Suggested changing our satisfaction survey – felt it was very “HCAPY”
- Can ask 3-5 questions prior to discharge if there was 1 thing we could do to make our program better what would it be?
Day of Review Feedback

- Care Plans – OPPORTUNITY!!!
  - Need to change the care plan up
  - Should not just be septic shock
  - Be specific about what we teach them – SIRS criteria and the continuum of sepsis ➔ severe sepsis ➔ septic shock

- Community Education needs to occur
  - Suggested educating the nursing homes, assisted living, etc.
  - Need to set this up

- Communication with all disciplines
  - All disciplines need to write notes so everyone understands the “story”
Day of Review

- **Staff Readiness – tips to help with this**
  - Ask them questions – give out chocolate😊
  - Have staff on the team so they are more confident and can speak to the process better
  - Give out “cheat sheet” of education points
  - Share data with the staff and have it in a place where they can refer to it if they do not remember what the numbers are

- **It is Normal to have some follow up work afterward**
  - Do NOT feel like a failure
  - Do what they ask in the time frame they need
Benefits in Achieving Certification

- Better patient outcomes lower mortality
- Nurses feel more confidence
- More accountability I feel for doing the right thing
- More community faith in us as a hospital
Challenges/Barriers

How you got the C-Suite behind this
- Direct communication with them – Report to CNO initially no
- Opportunity – re-addressed it

Bringing providers on board
- Standards of care
- Report Cards
Promotion/Community Outreach

Education

- Community Fairs
- EMS talks
- News paper article regarding certification
- The Buzz – internal hospital education
- Orientation house-wide and with Nursing orientation
- September Sepsis Awareness
Sepsis September Events

WORLD SEPSIS DAY
SEPTEMBER 13, 2017

Every few seconds someone dies of sepsis.
Sepsis: Prevent it. Spot it. Treat it - beat it.

— Join us for Popcorn —
2 - 4 p.m. • Wednesday, Sept. 13
Employee Dining Room

— Night Shift —
We will deliver cookies to your floor.

There will be a drawing for a give-away.
Sign up at the popcorn stand or during the cookie delivery.

Keep up the good work!
Our Survival Rate for Severe Sepsis and Septic Shock
for July 2017 was 85.9% - Let’s keep working to increase this!

September 13:
World Sepsis Day, more information?
Visit us: www.world-sepsis-day.org

The Joint Commission
Certification
Disease-Specific Care

Sepsis Certification and Benefits
October 25th, 2017
Questions?
For questions that have not been answered during this webinar, please reach out to your Business Development team at certification@jointcommission.org or call (630) 792-5291
Joint Commission Disclaimer

These slides are current as of 10/25/17. The Joint Commission reserves the right to change the content of the information, as appropriate.

These slides are only meant to be cue points, which were expounded upon verbally by the original presenter and are not meant to be comprehensive statements of standards interpretation or represent all the content of the presentation. Thus, care should be exercised in interpreting Joint Commission requirements based solely on the content of these slides.

These slides are copyrighted and may not be further used, shared or distributed without permission of the original presenter or The Joint Commission.