Going for the Gold Seal
Joint Commission Rehabilitation Certifications

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The Joint Commission
The Joint Commission

Helping Health Care Organizations Help Patients
Today’s Objectives

- Review benefits of achieving Certification
- Define three core components of Rehabilitation Certification
- Provide resources for obtaining Rehabilitation Certification Clinical Practice Guidelines
- Provide examples of Rehabilitation Certification Performance Measures
- Q & A Session
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
- Provides an objective assessment of clinical excellence
- Differentiates clinical care program in the marketplace
- Promotes achievement to community
Certification by the Numbers

3,198 certified programs
- In all 50 states, DC and Puerto Rico
- 1,355 organizations
- 101 disease programs
Rehabilitation Certifications Programs

- 300+ Rehabilitation Certification Programs
- 157 Stroke Rehabilitation Certifications
- For a complete list: www.jointcommission.org/certified
Examples of DSC Programs:

Rehab

- Orthopedic Rehab
- Pulmonary Rehab
- Cardiac Rehab
- Hip Fracture Rehab
- Amputee Rehab
- Brain Injury Rehab
- Spinal Cord Injury Rehab
- Parkinson’s Disease
- Stroke Rehab
- Oncology Rehab
- Multiple Sclerosis
Certification Eligibility

Any disease-specific care program that has

- Formal program structure
- Standardized method of clinical care delivery based on clinical guidelines/evidence-based practice
- Organized approach to performance measurement
Certification Logistics

Pre
- Gap analysis to standards and guidelines; resolution of any gaps
- Apply 4-6 months before desired review date
- Data Collection (four months at a minimum)

Visit
- 30 days advance notice of date
- One reviewer for one day

Post
- Data collection and submission
- Intracycle conference call 12 months after visit
- Apply for recertification

Visit
- Recertification visit occurs 2 years after initial visit
- To be scheduled within 90 day window around anniversary date
- 7 days advance notice of date
Core Program Components

- Standards
- Clinical Practice Guidelines
- Performance Measures
Core Program Components

Standards
Disease-Specific Care Standards

- 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
Core Program Components

Clinical Practice Guidelines
Clinical Practice Guidelines

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

- American Heart Association (AHA)
- Agency for Healthcare Research and Quality
## Putting Clinical Practice Guidelines (CPGs) into Practice

<table>
<thead>
<tr>
<th>Evidence / CPG</th>
<th>Your Program’s Existing Policies/Procedures</th>
<th>Gaps</th>
<th>Person Overseeing Change / Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interventions are based on the type of post-stroke incontinence</td>
<td>Generic bladder protocol</td>
<td>Expand bladder protocol to include stress, functional and neurogenic bladder problems with interventions for each</td>
<td>Director of Nurses and Medical Director – March 2017</td>
</tr>
<tr>
<td>Depression screening done as early as possible upon rehabilitation</td>
<td>No real validated tool used consistently by program</td>
<td>Explore and select tool and team member who will complete screening tool</td>
<td>Program Champion and Case manager - March 2017</td>
</tr>
</tbody>
</table>
Performance Measurement Criteria

- Four process or outcome measures to monitor on an ongoing basis
  - Select existing measures; or
  - Create new measures
- At least two of the measures must be clinical
- Up to two measures may be non-clinical: administrative, utilization, financial, patient satisfaction, etc.
What Makes a Good Performance Measure?

- Results can be used for improvement
- Relates to current medical evidence
- Defined specifications
- Data collection is consistent and logical
Performance Measures: Examples

- Patient satisfaction
- Depression Screening
- Stroke Education
- Acute Care Transfers
- Discharge to Community
Challenges of Certification

- Consistent implementation of Clinical Practice Guidelines
  - Most frequently cited issue is related to missing or inconsistent CPGs
- Involvement of all physicians
- Data collection on performance measures
Standards Interpretation Group

- Able to submit questions online for follow up and clarification
- Can request a telephone or email response
- Responses are not tied in any way to your review or certification
- Strongly encourage you to use this group of experts
Review Process Guide

Walks you through the entire process from preparation to onsite review to follow up

Your account executive is your guide, do not hesitate to contact them!
Helpful Hints from Organizations
Robbin Butler, Director of Therapy Operations
Robin Wherry, Director of Quality and Risk

TJC Disease-Specific Care Certification in Stroke Rehabilitation
2012 – present

Morgantown, West Virginia

March 2017
Values/Benefits of TJC Disease-Specific Stroke Rehabilitation Certification

- Consultative Process
- Sharing Ideas and Concepts
- Continuous Improvement
- Patient/Family and Staff Confidence
- Relationships with Academic and Healthcare Referring Centers
- Research and Clinical Application of Guidelines
Values/Benefits of SWOT Analysis

- Identify Strengths, Weaknesses, Opportunities, Threats
- Able to identify both internal and external influences
- Use as a precursor to any type of initiative or new policy by developing a full awareness of all factors involved in any decision
- Front line staff involvement and connection to Performance Improvement, Medical Executive and Governing Body committees
### SAMPLE SWOT

<table>
<thead>
<tr>
<th>STRENGTHS</th>
<th>WEAKNESSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients discharged to Community</td>
<td>Adherence to bowel and bladder protocol</td>
</tr>
<tr>
<td>Staff training, education and competency programs</td>
<td>Missed opportunities in FIM Scoring</td>
</tr>
<tr>
<td>And so on</td>
<td>...</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OPPORTUNITIES</th>
<th>THREATS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase Patient/Family Training Sessions</td>
<td>High acute-care readmission rate</td>
</tr>
<tr>
<td>Community Re-Entry Opportunities</td>
<td>Lack of Family/Caregiver Support or Assistance</td>
</tr>
<tr>
<td>And so on</td>
<td>...</td>
</tr>
</tbody>
</table>
HealthSouth
Rehabilitation Hospital

Brian Nunn, CEO
Dana Browder, Director of Quality and Risk

TJC Disease-Specific Care Certification in Stroke Rehabilitation
2012 – present
Florence, South Carolina
March 2017
Values/Benefits of TJC Disease-Specific Stroke Rehabilitation Certification

- Consultative Process
- Sharing Ideas and Concepts
- Continuous Improvement
- Patient/Family Awareness and Education
- Staff Competence
- Relationships with Academic and Healthcare Referring Centers; Commitment to public awareness, education, and health
- Research and Clinical Application of Guidelines
- Industry and public recognition of expertise in stroke rehabilitation
Successful Preparation for Stroke Certification

- Interdisciplinary team participation
  - Physician
  - Stroke Coordinator
  - Clinical Support Team Members

- Performance measures; Review SWOT analysis

- Clinical practice guidelines

- Develop Policy and Procedures

- Development of hospital specific mission, philosophy and goals for the program

- Hospital wide campaign
Advertise Your Achievement
Resources

- Standards Interpretation Group
  www.jointcommission.org/standards_information

- Performance Measure Online Q&A Forum:
  manual.jointcommission.org

- Pricing Unit: 630-792-5115

- Initial applications:

  - Francine Topps, 630-792-5058
    ftopps@jointcommission.org
Questions?
Sample CMIP Indicators

**Stroke**
- Discharge to community
- FIM Gain
- Bowel & Bladder
- Education
- Falls
- Support Group attendance
- Acute care transfers
- Depression screening
- Family meeting held

**Brain Injury**
- Falls
- Behavior Management Plan
- Community Outing
- Patient/Family Education
- Psychology / Neuropsych Consult
- Cognitive FIM Items
- BI Program involvement in community
Sample CMIP Indicators

- Spinal Cord Injury
  - Leisure Assessment
  - Bowel & Bladder
  - Transfers
  - Weight Shifting
  - Skin Inspection
  - Education
  - SCI Program involvement in community
  - Family training done at least twice

- Hip Fracture
  - Nutrition Consult completed
  - Pre-Albunin level
  - Pain Management
  - Dressing: Lower Body
  - Falls
  - Prepared to function at home
  - Discharge to Community
  - Cognitive Screening
Sample CMIP Indicators

**Pulmonary**
- Use of O2
- Knowledge test / Education
- Pre/Post Nebulizer Documentation
- 6 minute walk
- 2 minute walk
- Readmissions / ED visits
- Self Care FIM Items
- Quality of Life survey

**Other Common Indicators**
- Correct DSC order set used for program
- Bladder scan done / Documented per protocol
- Patient involved in setting goal setting
- Patient response / Evaluation of education documented
- Discharge to Community
- Acute Care Transfers
- FIM Gain
- Satisfaction
Sample CMIP Indicators

Amputee
- Limb residual
- Pain Management
- Edema Management
- Wound / Skin Management
- Amputee Mobility Predictor (AMP)
- Education
- Diabetes education, if applicable

Parkinson's
- Medication Log
- Falls
- Activity Log / Diary
- Eating FIM Item
- Transfers
- Locomotion
- Timed Up and Go (TUG) Test
Sample CMIP Indicators

**Orthopedic**
- Hip precautions, if applicable
- Discharge to Community
- Education
- Weight Bearing Status maintained
- Berg Balance Test
- DVT prophylaxis
- Locomotion
- Transfers

**Oncology**
- Overnight stay in ADL apartment prior to D/C
- Home evaluation completed prior to D/C
- Individual FIM Items
- Anxiety and Fatigue
- Psych consult
- Complications
- Community resources
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