

The Joint Commission DSC Update

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Executive Director

Two momentous events occurred recently that I'm eager to tell you about. First, [The Joint Commission Center for Transforming Healthcare](#) launched in September with the aim of addressing health care's most critical safety and quality problems.

"Transforming" is an essential part of the name because one of the goals of the Center is to provide knowledge and practices that will transform health care into a high-reliability industry, with safety rates comparable to air travel or nuclear energy (see article on this page).

Second, The Joint Commission has refreshed its mission statement and added a vision statement (see article page 2). The revised mission statement emphasizes the twin aims of:

- Thorough evaluation against Joint Commission standards.
- Effective motivation of organizations to use the results of that evaluation to drive improvement.

The new vision statement is stated as a vision for the health care industry, not just The Joint Commission enterprise. If you have any thoughts about these new developments, please send them to me at jrange@jointcommission.org.

Jean Range, R.N., M.S., CPHQ



New DSC eligibility requirement

Effective immediately, organizations seeking Disease-Specific Care Certification must be accredited by The Joint Commission in order to qualify for the certification review.

"The change was made to meet public expectations that a Joint Commission-certified DSC program also meets applicable Joint Commission accreditation standards," says Jean Range, executive director, Disease-Specific Care Certification. "Exceptions to the policy apply to those organizations that are not eligible for accreditation of any kind by The Joint Commission."

Organizations that currently have DSC certified programs and are eligible for Joint Commission accreditation, but are not accredited by The Joint Commission, will have one certification cycle (a period of two years) to become Joint Commission accredited. If, after two years, the organization does not become Joint Commission accredited, the DSC program will no longer be eligible for Joint Commission certification. For more information, contact your account executive at (630) 792-3007.

No change to t-PA measure

No change will be made to the t-PA administration measure for stroke (STK-4: Thrombolytic Therapy) based on the advice of The Joint Commission's Disease-Specific Care [Stroke Performance Measure Advisory Panel](#), which convened in August.

The panel discussed possible changes to the stroke measure due to a May 28, 2009 [science advisory](#) issued by the American Heart Association/American Stroke Association, which expanded the timeframe for t-PA administration from three to four-and-one-half hours. The panel recommended that no changes be made to the measure because the Food and Drug Administration has not approved the expanded timeframe.

"In the meantime, the American Stroke Association's [Get With The Guidelines](#)SM-Stroke program will collect data on several different timeframes," says Jean Range, executive director, DSC Certification. "The Stroke Advisory Panel will reconvene in early 2010 to review the GWTG data and to see if the FDA has approved any changes to the prescribing guidelines for t-PA."

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Center for Transforming Healthcare

The Joint Commission launched the [Center for Transforming Healthcare](#) on September 10 with the aim of addressing health care's most critical safety and quality problems.

The Center's first initiative is tackling hand washing failures which are among the top 10 causes of death in the U.S. The next project will target breakdowns in hand-off communications. Future projects will focus on improving other aspects of infection control, mix-ups in patient identification and medication errors. The Joint Commission will share information about the proven solutions with accredited health care organizations nationwide to prevent bad outcomes that touch thousands of Americans each year.

New DSC team ready to serve you

Dedicated certification account executives are ready to provide you the personalized customer service your disease-specific care program deserves. This summer, The Joint Commission realigned its largest division — Accreditation and Certification Operations — into program-specific teams to better support the unique needs of each customer. “We now have a team of account executives specifically for certification who provide support on a variety of topics, from CMIP to the intracycle review,” says Chad Larson, M.B.A., who was recently named the team manager for Disease-Specific Care and Health Care Staffing Certification.



Chad Larson, Fred Ewing, Jana Elb, Leslie Pedrak, Carole DeWilkins

According to Larson, the realignment signals a renewed focus on customer needs. “Everyone who works with disease-specific care customers — whether account executives or individuals from the Standards Interpretation Group — is located in the same area. Being in the same physical location allows for a cross-pollination of ideas and solutions for our customers.

“The upshot will be better customer service. We’re excited about these changes and hope this realignment ultimately helps our customers reach their goal to provide safe, high quality care for their patients,” Larson adds. If you have questions, contact him at clarson@jointcommission.org or (630) 792-5830.

No change to t-PA measure...continued from page 1

“As a reminder, performance measure rates do not currently affect your certification status,” notes Range. “So, if patients receive IV t-PA beyond the three-hour window it will not affect your certification decision at this time (see FAQs below for more details).”

FAQs

What is a good measure rate?

During a certification review, performance measurement standards (PM.1-PM.6) are scored. Measure rates are not scored, whether reported as 50 or 100 percent. It’s more important to know your rate and to keep improving it; and to review the outlier cases.

If a patient arrives within two hours, but is treated with IV t-PA outside of the three-hour window, will this jeopardize our certification status?

No. Although this case may produce a slightly lower rate for your hospital, measure rates are not scored (see previous question). This information is good to know, however. You should be striving to administer t-PA as soon as possible to all eligible patients because “time is brain.”

Where can I get more information?

To ask questions about the performance measure requirements, please go to the [Performance Measurement Network Q&A Forum](#). Or [register](#) for the free audio conference on October 28, from noon to 1 p.m., C.T.

Take note...

Publication

New! 2010 Disease-Specific Care Certification Manual

Order code: DSCC10, \$175

To order, go to the [JCR Web site](#) or call (877) 223-6866.

Refreshed mission, new vision statement

The Joint Commission has updated its mission and vision statements to more accurately reflect the business, purpose and values of The Joint Commission.

Mission:

To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

Vision:

All people always experience the safest, highest quality, best-value health care across all settings.

Free audio conference on PSC requirements

Join us for a free audio conference to discuss requirements for Primary Stroke Centers on Oct. 28, noon to 1 p.m., C.T. Register [here](#).

Hot off the press

Be the first on the block to receive [DSC Update](#), the free quarterly newsletter. It’s easy to [sign up](#).

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