

# Joint Commission Accreditation

## Community Based Palliative Care Certification

Presented by:

Kathy Clark, MSN, RN

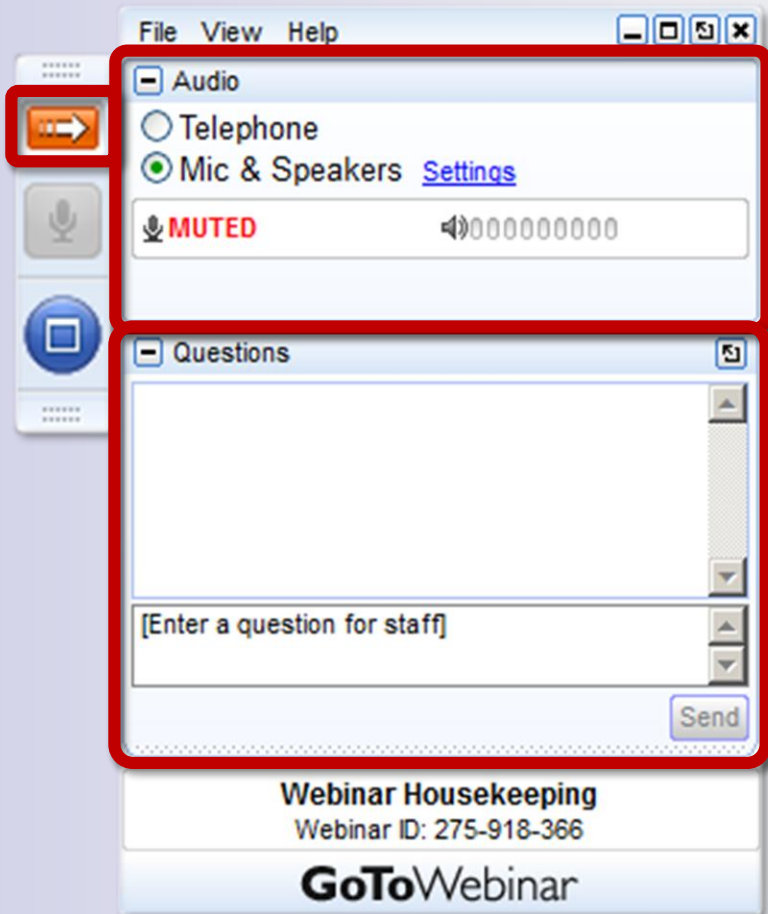
Associate Project Director Specialist, DSSM

and

Julia S. Finken, BSN, MBA, CPHQ, CSSBB

Associate Director, Business Development

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# Objectives

- Define important tenants of Community Based Palliative Care Services
- Outline key milestones in the development of the Joint Commission Community Based Palliative Care Certification program.
- List critical Community Based Palliative Care Certification Standards
- State important lessons learned during the Community Based Palliative Care Certification pilot surveys
- Highlight the key elements of the Community Based Palliative Care Certification survey process

# Background

- Growth of Palliative Care Services
- TJC Advanced Palliative Care Certification Program
- Inception of Community Based Palliative Care Certification Program

# Development Process

- Call to action
- Industry survey
- Discussions with key industry stakeholders
- Focus group calls with Palliative Care service providers
- Learning visits to accredited Home Care organizations that are providing Palliative Care in the community
- Technical Advisory Panel (TAP) input
- Development of proposed CBPC Certification Standards
- TJC approval process
- Field Review survey of proposed standards (feedback from Home Care customers and TAP)
- Pilot testing of survey process

# Eligibility Requirements

## Home Health and/or Hospice organizations that elect to apply for CBPC Certification must meet the following:

- All General Eligibility Requirements currently in the Home Care manual (ACC chapter)
- All new CBPC Eligibility Requirements
- For more on eligibility:  
<http://www.jointcommission.org/community-based-palliative-care-certification-option-july-1-2016/>

# Eligibility Requirements (cont'd.)

## **New: A Home Health or Hospice Agency qualifies for Home Care Community Based Palliative Care Certification under the following conditions:**

- Org is TJC Home Care accredited (HH and/or Hospice)
- Able to provide CBPC services 24/7 as needed
- Had 5 CBPC patients/last 12 months; 3 active on survey
- CBPC services provided in patient's residence
- Org utilizes clinical practice guidelines to provide CBPC services



# Examples of Eligible Organizations

- HH and/or Hospice org seeking initial accreditation may also include CBPC Certification in their initial survey
  - HH and/or Hospice org may include CBPC Certification in their triennial survey
  - HH and/or Hospice accredited org may choose to schedule a CBPC Certification Extension survey prior to their next triennial survey
- (Accredited orgs may be deemed or non-deemed status)

# CBPC Certification Standards

## **Chapters in the Home Care manual with CBPC Certification standards:**

Accreditation Participation Requirements (APR)

Human Resources (HR)

Information Management (IM)

Leadership (LD)

Provision of Care (PC)

Performance Improvement (PI)

Record of Care (RC)

Rights and Responsibilities (RI)

# Human Resources - IDT



**HR.01.02.07, EP10** For organizations that elect The Joint Commission Community-Based Palliative Care Certification option: The program's core interdisciplinary team is comprised of the following:

- Physician(s) (doctor of medicine or osteopathy) who has specialized training in palliative care and/or hospice care; clinical experience in palliative medicine and/or hospice care; or is board-certified or board-eligible for certification in Hospice and Palliative Medicine

- Registered nurse(s) or advanced practice nurse(s) who has training in palliative care and/or hospice care; clinical experience in hospice or palliative care; or one who has, or is eligible for, palliative care certification

- Chaplain(s) who has training in palliative care and/or hospice care; experience in hospice or palliative care; or one who has or is eligible for board certification; or, a spiritual care professional(s)\* who has training in palliative care and/or hospice care or experience in hospice or palliative care

Note: The program may choose to have a full- or part-time chaplain or spiritual care provider on staff; they may utilize a chaplain from another program within the organization, such as the hospital or hospice; or, they may utilize chaplains and/or spiritual care providers from other organizations in the local community, including parish nurses. The patient also has the right to involve his or her personal spiritual care provider (such as a pastor, priest, rabbi, or religious leader) rather than the program's chaplain.

# Human Resources - IDT (cont'd)



## HR.01.02.07, EP10 (cont'd)

- Social worker(s) who has training in palliative care and/or hospice care; experience in hospice or palliative care; or one who has, or is eligible for, palliative care certification

Note: The program may choose to have a full- or part-time social worker on staff; they may utilize a social worker from another program within the organization, such as the hospital or hospice; or, they may utilize social workers from other organizations in the community if they are available.

Footnote \*: Spiritual care professionals are recognized as specialists who provide spiritual counseling. Source: Dahlin, C., editor, *The National Consensus Project for Quality Palliative Care Clinical Practice Guidelines for Quality Palliative Care*, 3rd edition, 2013, p. 26.

# Critical Standards/EPs for CBPC



- HR.01.02.01, EP27-29** Staff with PC education/experience
- HR.01.02.07, EP12** IDT responsibilities in writing
- HR.01.02.07, EP24** Staff orientation - content for PC
- HR.01.06.01, EP27** Competency in providing PC
- LD.04.03.03, EP34** Process to refer patients to hospice
- LD.04.04.01, EP27** Written PI plan
- LD.04.04.09, EP7** Use of CPGs
- PC.01.01.01, EP49** Process to identify CBPC patients
- PC.01.02.01, EPs46-52** Initial assessments by IDT members
- RI.01.05.01, EP23** Advance care planning discussions

# Learning Visits and Pilot Surveys: Lessons Learned

- Learning visits: One large independent hospice and palliative care organization and one hospital-based home health organization that provided CBPC services
- Pilot tested CBPC standards at 2 organizations (one independent hospice organization and one independent HH and Hospice organization, both of which provide CBPC services)
- Main lesson learned?

# Preparing for Certification

Organizations that decide to pursue CBPC Certification can do so in one of two ways:

- Complete the e-App to add CBPC at the time of your next on-site survey (one day will be added to the on-site survey)
- Complete the e-App for a one-day extension survey to be done between accreditation surveys

Home Care surveyors with experience/education in palliative care will be assigned to these surveys

# Survey Process: What Will it Look Like?

## **On-site survey for a HH and/or Hospice organization that choose the CBPC Certification option:**

- Agenda will be similar to current agenda, and surveyor(s) will evaluate all services throughout the survey (no specific day for surveying CBPC, unless this is done as an extension survey)
- Orientation to the organization will include time for the organization to explain their CBPC program/services
- All services (including CBPC) will be addressed in specific sessions, including Leadership, Emergency Management, Environment of Care, Infection Control, Medication Management; the Data System Tracer will allow time for the organization to present Performance Improvement data and information for each service (including CBPC)
- Session re: Credentialing of LIPs will be added to the Competency session
- Time will be allotted to meet with the IDT members
- Time will be allotted for CBPC patient tracers



# Resources

## **Clinical Practice Guidelines:**

Dahlin, C., editor, The National Consensus Project for Quality Palliative Care Clinical Practice Guidelines for Quality Palliative Care, 3rd edition, 2013

National Hospice and Palliative Care Organization (NHPCO), Standards of Practice for Pediatric Palliative Care and Hospice, 2010

## **Article:**

Leff, B., Carlson, C., Saliba, D., Ritchie, C. The invisible homebound: Setting quality of care standards for home-based primary and palliative care. Health Affairs 2015, 34 (1), p. 21-29.

## **Professional Organizations:**

American Academy of Hospice and Palliative Medicine (AAHPM) [www.aahpm.org](http://www.aahpm.org)

Center to Advance Palliative Care (CAPC) [www.capc.org](http://www.capc.org)

Hospice and Palliative Nurses Association (HPNA) [www.hpna.org](http://www.hpna.org)

National Hospice and Palliative Care Organization (NHPCO) [www.nhpc.org](http://www.nhpc.org)

# Home Care Team Contacts

## Joint Commission Home Care Program

Help Desk: 630-792-5070 or [homecare@jointcommission.org](mailto:homecare@jointcommission.org)

[www.jointcommission.org/accreditation/home\\_care.aspx](http://www.jointcommission.org/accreditation/home_care.aspx)



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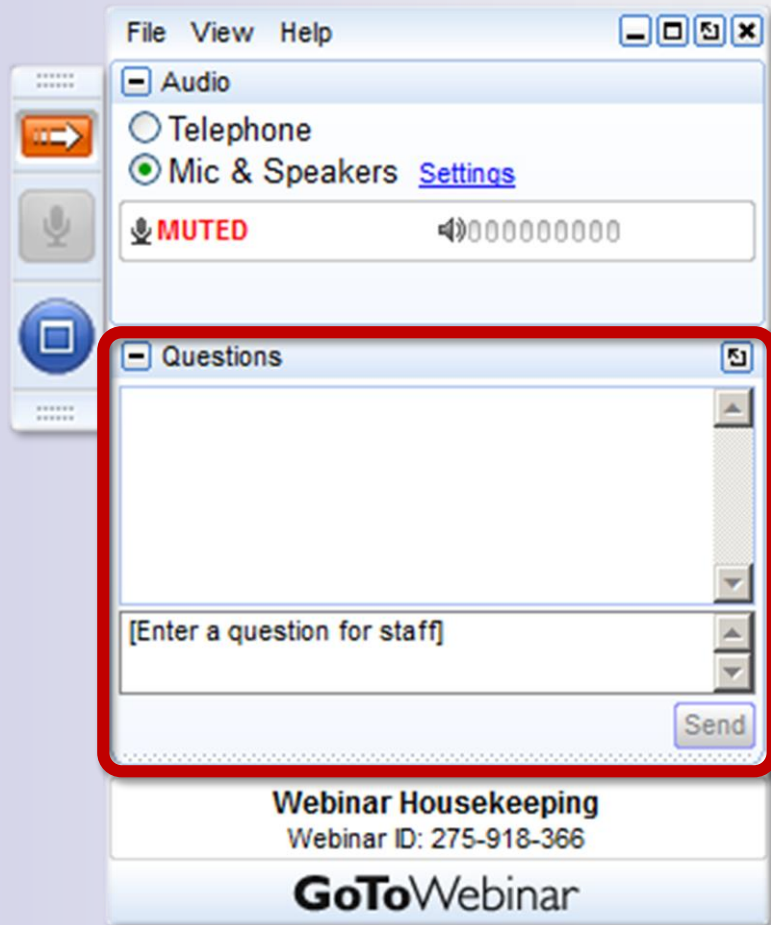
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# Time for Your Questions!



# Submitting Your Questions

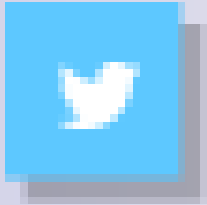


## Attendee Participation

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The Joint Commission's Home Care Program

<https://www.linkedin.com/company/home-care-accreditation---the-joint-commission>



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April 21<sup>st</sup> – Improving Patient Perception of Care

April 28<sup>th</sup> – Community-based Palliative Care Certification

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