

Becoming Comprehensive Cardiac Center (CCC) certified

May 23rd, 2019



**The Joint
Commission®**

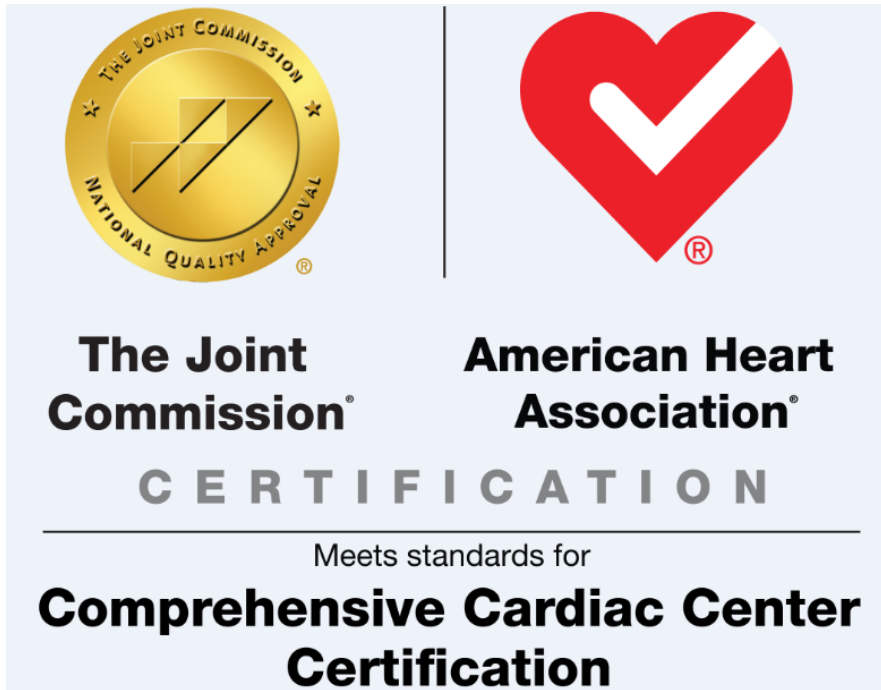


**American Heart
Association®**

CERTIFICATION

Meets standards for

**Comprehensive Cardiac Center
Certification**



The Joint Commission, in collaboration with the American Heart Association, offers a **combined** Comprehensive Cardiac Center Certification, which merges the Joint Commission's Comprehensive Cardiac Center Certification and the AHA's Cardiovascular Center of Excellence accreditation

All revisions to the Comprehensive Cardiac Center Program reflect a collaborative review of existing requirements alongside the latest standards of practice and professional literature

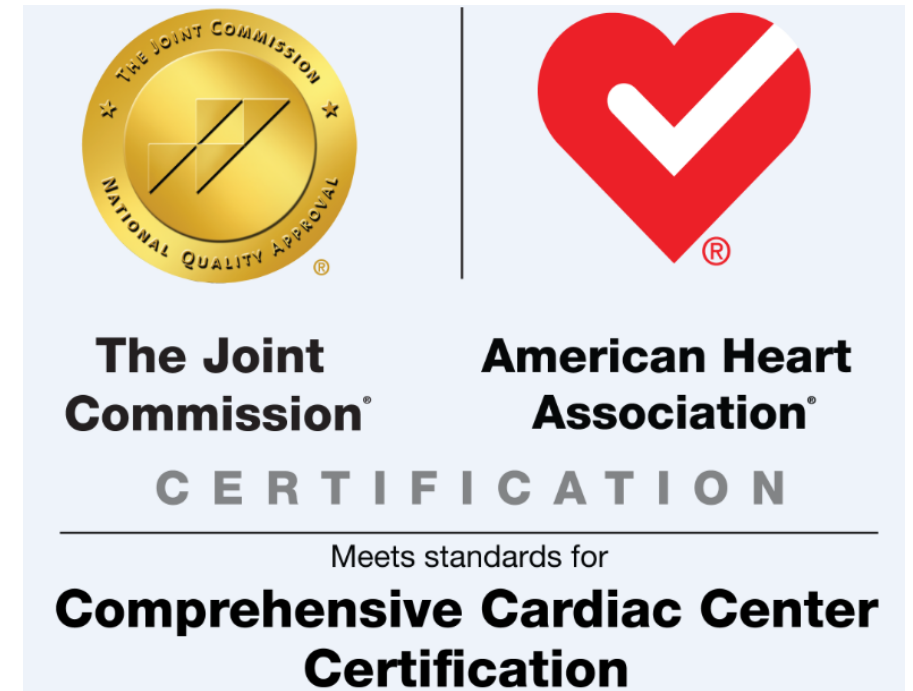
Today's Agenda

- The GOAL is to *enable* hospitals to achieve certification by:
 - Reviewing the value and benefits of the Comprehensive Cardiac Center Certification
 - Hearing about the CCC experience at Sarasota Memorial Hospital
 - Understanding and visualizing key standards and requirements
 - Knowing the steps to applying, and becoming certified
- Question and Answer



Comprehensive Cardiac Center Certification

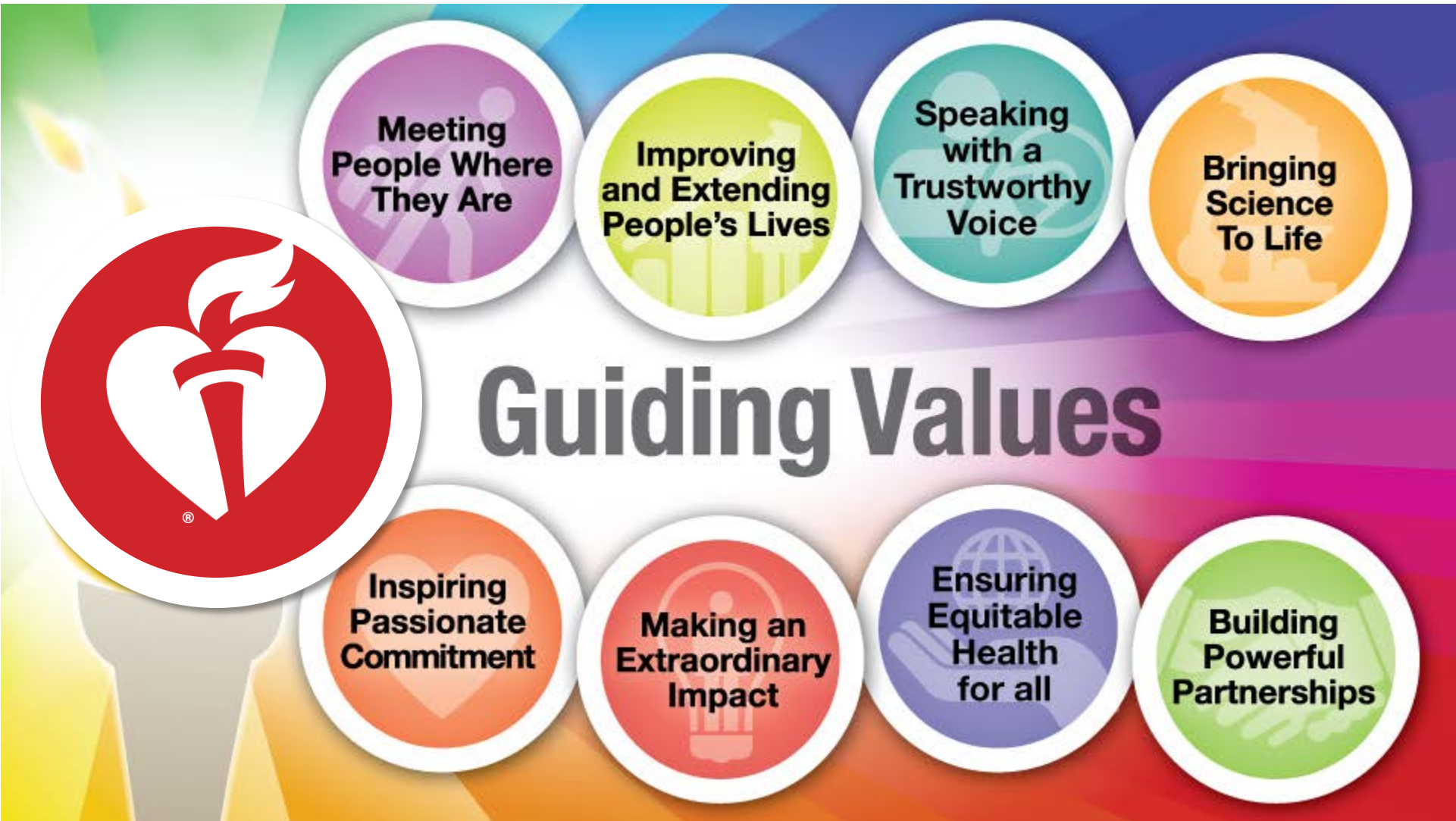
Joyce Wright, BSN, RN
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American Heart Association





Our Mission:

To be a relentless
force for a world of
longer, healthier
lives.



**Meeting
People Where
They Are**

**Improving
and Extending
People's Lives**

**Speaking
with a
Trustworthy
Voice**

**Bringing
Science
To Life**

Guiding Values

**Inspiring
Passionate
Commitment**

**Making an
Extraordinary
Impact**

**Ensuring
Equitable
Health
for all**

**Building
Powerful
Partnerships**

The Joint Commission and The American Heart Association Collaboration

- The collaboration between the AHA and TJC certification programs combines a unique strength in science and evaluation
- Over 15 years of strength in collaboration in stroke and cardiac certification, with nearly 1,400 hospitals certified through AHA/TJC programs
- Translating the latest evidence-based science to the bedside quickly and efficiently helps save more lives and improve patients' quality of life, through standardized, objective, unbiased assessments, while promoting excellence in healthcare

AHA Value-Added Services

- National networking
- Information and best practice sharing
- Collaboration
- Resources
- Mentorship

Online Network

- National provider education and webinars
- Best practices to improve processes, quality, patient care and outcomes
- EMS education

Education

- Patient/Caregiver Education
- Toolbox of patient caregiver resources
- Promotion of self-management

Resources

- Quality Improvement Consultants
- Collaboration on PI plan to improve patient care and outcomes

Consultation

- Promotion of systems of care
- Set public policy
- Develop legislative campaigns
- EMS routing protocols

Advocacy

- National presentation and showcase opportunities
- National promotions
- Marketing and communications toolkit

Recognition

- Certified centers play an active role in setting national agenda, establishing key priorities

Advisory Working Group



The Comprehensive Cardiac Center at Sarasota Memorial

Agnes Kelly, MSN, RN, CCRN, CHFN
Manager of Disease Specific Programs
Sarasota Memorial Hospital



**The Joint
Commission®**



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C E R T I F I C A T I O N

Meets standards for

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Sarasota Memorial Overview

- 839-bed regional medical center
- Largest public health system in Florida
- 123,000 visits at two ER's
- Level II Trauma Center
- Sarasota Memorial is a full-service health system, with specialized expertise in heart, vascular, cancer and neuroscience services, as well as a network of outpatient centers, long-term care and rehabilitation among its many programs.



Benefits and Value of Certification – The *Why*

- Demonstrates commitment to higher standard of care and clinical excellence
- Ability to impact and improve patient outcomes
- Objective measure of care
- Deliver a higher standard of care to our community through evidence based practices
- Provides information to patients about our high standards
- Transformation from volume to value



Engaging Leadership

- Our journey to CCC was nurse driven
- Biweekly meeting with senior leadership
- Expectations of leadership stakeholders
- Achievable certification goals
- Talk in business benefits
- Clear picture of expectations
- Opportunities for collaboration



Achieving Staff Buy-in

- Lay out the vision
- Cardiologist private practice model
- Find champions along the way
- Build awareness with staff that quality is everyone's job and explain how quality is tied to value of the organization and its future
- Communicate often especially regarding education and survey prep
- Invite staff feedback



Collaboration throughout Certification Process

- Cardiac programs tend to work in silos
- Certification Involves bringing all the cardiac stakeholders to table
- Opportunity to collaborate with all of the cardiac sub specialties
- Learn and share quality improvement and best practices across cardiac service line
- Strengthens communication with everyone involved including community partners



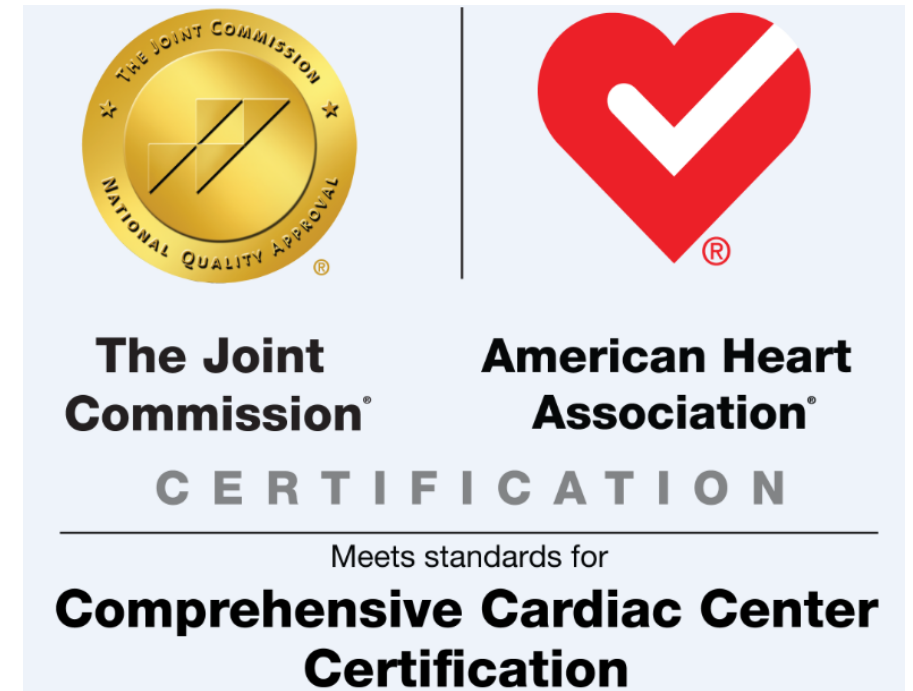
Impact of Certification

- Builds the structure required for a systematic approach to clinical care
- A collaborative, interdisciplinary team makes a difference
- Achieve more regular and consistent flow of data
- Strengthens community confidence in the quality and safety of care, treatment, and services
- Clinical Advantage
- Competitive Advantage



Comprehensive Cardiac Center – Meeting the Standards

Robin S. Voss, RN, MHA, TNCC-I
Field Director – Disease Specific Care
Division of Survey Management and Support
The Joint Commission



What is CCC Certification?

- The Comprehensive Cardiac Center certification is a 2 year program with The Joint Commission that is offered in collaboration with the American Heart Association, and merges the Joint Commission's Comprehensive Cardiac Center certification and the AHA's Cardiovascular Center of Excellence accreditation.
- Comprehensive Cardiac Center certification touches every point in your continuum of care, so that you can provide world-class service that puts the patient first and can help elevate the performance of your entire organization.



Are there Volume Requirements?

- CABG: 125/year (alone or in combination with other procedures)
- Valve replacement/repair: 50/year (alone or in combination with other procedures)
- PCI: 200/year
- Primary PCI for STEMI: 36/year (includes patients transferred if they didn't receive TNK)

If volumes are not met, participation in a nationally audited registry and demonstration of risk adjusted outcomes that meet or exceed the national average are required



Getting Started

- Complete a Gap analysis of the Standards
 - Who should be involved?
 - Engage the right people!
- What cardiac services are offered currently?
- What are the hurdles?
 - Resources



Look to the Domains

- Acute myocardial infarction (AMI)
- Coronary artery bypass grafting (CABG)
- Cardiac rehabilitation
- Diagnostic cardiac catheterization procedures
- Heart failure
- (ICD) procedures
- Percutaneous coronary intervention (PCI)
- ST-elevation myocardial infarction (STEMI)
- Valve replacement/repair



Domains?

- Look back to the assessment of the services you listed
- Think of Domains as your services.....you already have them!
- Who in the department has responsibility for the service?

Let's start with the Program/Team Charter

- Access your organization's project charter template or create your own using the sample on the next page as a guide. Note: Add or remove items as needed for your project.
- Begin the project charter with the project definition (Remember: 15 Words) and project scope (Remember: Includes/Excludes).
- Meet with key stakeholders to discuss the remaining items and get consensus.
- Ask team members and project sponsor to sign the charter to ensure commitment.
- Use this tool to communicate the team's work to others



Example Team Charter

Internal Team Charter		<project name here>	Project No. <project no. here>
Project Purpose Describe in one (2 sentences at the most) the purpose of the project. Here, state what the project cost and a project deadline date (if applicable)		Key Project Stakeholders <ul style="list-style-type: none"> List here in bullet form all the people who have a stake in the success of the project -- it is usually your client, your main client contact, the Account Manager who sold the job, and your vertical. But it could also be a vendor, corporate, or an organization. 	
Product Objectives <ul style="list-style-type: none"> Describe in bullet form the main objectives of the site. 		Team Principles (these four are standard, but you may develop others!) 1. To keep the Client happy. 2. To work as a Team by being responsible and accountable 3. To create a creative, high quality, valuable Product . 4. To ensure the healthy Finance of the project by always adding value with time spent	
In this section, define your team and their roles & responsibilities. This will vary from project to project; you may have a smaller or larger team and different team requirements.			
Key Team Members	Role	Key Responsibilities	
tbd	Project Lead	Develop team charter; develop project plan; issue agendas and minutes; manage budget & schedule; issue status reports; assist in scheduling internal & external resources, organize team, run status meetings; assist with Functional Spec and other creative documents.	
tbd	Producer	Resource Scheduling; Coordinate script development; assist with Functional Spec. and other creative documents; manage client and product assets; manage Programmer(s), Artist(s), and QA during development.	
tbd	Interactive Designer	Develop navigational flowchart and/or storyboards; develop prototype if required; assist with Functional Spec and possibly other creative documents.;	
tbd	Quality Assurance Analyst	Develop test plan; manage testing process. Keep team abreast of QA considerations and potential problems.	
tbd	Tech Lead	Develop Technical Specification/Requirements; Keep team abreast of technical considerations and potential problems.	
tbd	Lead Media Designer	Develop screen concepts & layouts.	
tbd	Graphic Artist	Execute screen design.	
tbd	Writer	Write all copy for the site.	
tbd	Programmer(s)	Implement Functional & Technical Specifications.	
Key Measurements of Project Success Note whatever is applicable <ul style="list-style-type: none"> Client is overjoyed with final product Client is interested in additional work with us Product is delivered on time & within budget 		Close-out Criteria (the project is done when...) i.e., what project milestones signal when you've done your job? <ul style="list-style-type: none"> The Client has signed off on the Functional Specification The Client has signed off on the Interactive Script The site is live and signed-off on the site 	
		Key Client Expectations Note whatever is applicable <ul style="list-style-type: none"> We will manage the project well The site will be delivered on time The site will be one of high quality 	

<https://www.google.com/searchteamcharter>



How does this help?

- Program Charters :
 - Help define the purpose of the program
 - Defines the team members and responsibility
 - Keeps us in check with measurable goals and objectives

Team charters are active documents



What should we focus on?

- Focus on communication amongst service line members!
- Communication- Yes! Include written communication!
- Always relate communication back to the evidence and standards



Standards for Initial Review

- All standards are required to be compliant but
 - What are the key standards to focus on for an initial review?
- CCCM 1 EP 2:
 - The center's philosophy is aligned with the organization's mission demonstrated by a ***program charter*** defining its overarching mission, goals, scope, organizational structure, authority, and lines of communication.



CCCM 2 EP 3 - The Physician Leader

- The center has a designated physician leader who is accountable for the comprehensive cardiac center. This leader makes certain that the center does the following:
 - Provides integrated, coordinated, patient-centered care
 - Provides early identification of patients' risk levels and provides care at a level that corresponds to the center's capabilities
 - Provides direct care or stabilizes and safely transfers patients who require care beyond the scope of services provided by the organization



CCCM 2 EP3 ctd.

- The center complies with applicable laws and regulation
- The center's executive leaders ensure practitioners are practicing within the scope of their license, certification, training, and current competency
- Ensures patient education and information about comprehensive cardiac care services is made available to patients so they can make informed decisions about their care
- Implements ongoing performance improvement processes that include center specific performance improvement requirements in addition to any required measures



CCCM 2 EP 4 – Who's on the team?

- The center's executive leadership team is structured as follows to manage both the scope of cardiovascular services offered and the center's capabilities:
 - Cardiac center executive
 - Registered nurse leader and/or nurse(s) with training or clinical expertise in cardiovascular care
 - Quality improvement specialist/data manager
 - A qualified cardiothoracic surgeon who has specialized training and is privileged in cardiothoracic surgery



CCCM 2 EP 4 – Who's on the team?

- A qualified physician (doctor of medicine or osteopathy) who has:
 - specialized training in cardiology and is privileged in cardiology
 - specialized training in cardiology and is privileged in interventional cardiology
 - specialized training in cardiology and is privileged in electrophysiology
 - specialized training in emergency medicine and is privileged in emergency medicine



CCCM 4 EP 5 - Emergency Cardiac Services

- The center performs emergency cardiovascular diagnostic, imaging, and interventional/surgical services within an interval of time that meets the needs of the patient and is consistent with current national clinical practice guidelines.

What is the plan? Who knows about the plan and how to implement it?



CCCM 3 EP 8 – Access to Expertise

- The center has internal guidelines regarding consultation with a physician in the required cardiac specialty 24 hours a day, 7 days a week.

Know the Medical Staff By-laws/ Rules and Regulations



CCCM 4 – Evidence Based Guidelines

- The center’s interdisciplinary team members and staff have access to reference materials, including clinical practice guidelines, in either hard copy or electronic format. At a minimum, these include the following:
 - Evidence-based guidelines and reference materials
 - Protocols/care pathways and guidelines for the acute workup, management, and transitions of care for cardiac patients

What happens if evidence changes? What is your process?



CCCM 5 – EMS Collaboration

- What is the organizations involvement with EMS?
- How are you involved in regional decision making

Is it every 6 months?



CCCM 6 - Competency

- Who is caring for the patients?
- What are the credentialing/on-boarding processes for medical staff and HR?
- How do the practitioners show expertise in cardiovascular care?
- What is the plan for on-going education?
- What drills have been completed?
- What did the debriefing show?



CCCM 7 - Who's on call?

- What is the call process at your organization? What departments are on call for cardiology?
- How will this be demonstrated to the reviewers? Call schedules?
- How are changes made? How are arrival time points documented and reviewed for staff and physicians?



CCCM 10 - Community Needs

- The center conducts a community health needs assessment and demonstrates a plan to address the needs of the cardiovascular patient population it serves.
- The center participates in community health and outreach initiatives for assessment of cardiovascular disease prevalence and needs of the community
- The center sponsors at least six community education programs annually that focus on cardiovascular disease prevention



CCCM Chapter - did you notice....

- Number of standards in the chapter
- Number of documents needed to show compliancy
- Focuses on communication in the team/service line/sections, both written and verbal

So what about the quality chapter.....?



CCPI Chapter - Quality

- What is the PI plan for the service line?
- Who can speak to it?
- What is cardiac leaderships involvement?
 - The executive leadership team meets at least quarterly, with an attendance quorum of 50% for each meeting, and each member attends 50% of meetings over the fiscal year.
 - This is the overarching team, not each domain. Each domain usually reports up the quality chain.



CCPI Chapter - Quality

- A nationally audited registry or similar data collection tool is used to monitor data and measure outcomes
- Aggregate monthly data values reported on a quarterly basis for each measure to The Joint Commission via CMIP on the Connect® portal
- 4 months of collected data should be reported to The Joint Commission prior to the on-site review

Looking Forward: Standardized measures *are* being developed, with a goal roll out 1/1/2020



CCPC Chapter - What about the care?

- The most important part, *Evidence-based* care of the patient; the reason we are doing this!
- Similar to DSDF chapter in the disease specific manual
- Focus on cardiovascular care but also comorbid conditions; *Treat the whole patient*
- How are the patient and family involved?



Why Certification?

- **Integration** of Services
- **Promotes achievement** A systematic approach to clinical care
- Promotes a **culture of excellence** across the Service Line
- Reduces variability and improves the quality of patient care
- Creates a **loyal, cohesive clinical team**
- Provides an objective assessment of clinical excellence through the use of registries



Comprehensive Cardiac Center Certification

Can you do it?

Yes you can...

You already are

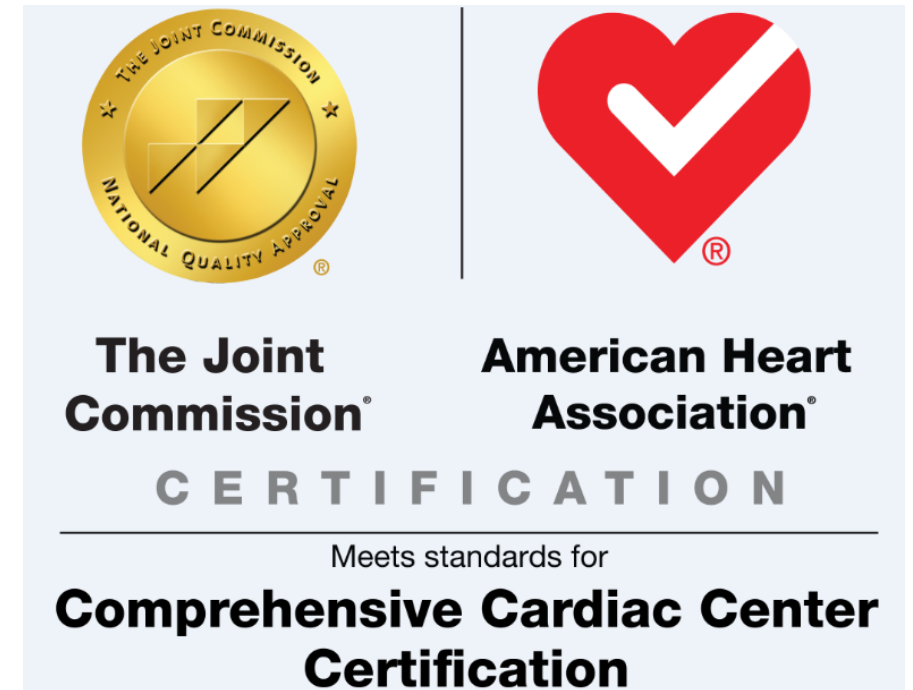


The Steps to Comprehensive Cardiac Center Certification

Zachary George, MBA, CPA

Associate Director of Hospital Certification

The Joint Commission



The Application and Certification Process

Connect with your Associate Director

- Contact us at certification@jointcommission.org

Pre-Application

- Review Standards in E-dition® and analyze gaps
- Identify Clinical Practice Guidelines
- Identify Performance Measures
- Complete Performance Improvement Plan
- Establish a Ready Date (4-6 months after application)

Complete Application on Connect® portal

- No Performance Measure data uploaded

Prepare for Onsite Review

- Use the Review Process Guide on Connect® portal
- Upload most recent 4 months of measure data

Onsite Review

- 2 reviewers, 2 days
- 30 days advance notice



Advertise your Achievement



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Questions?



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