



The Journey to Achieving Disease-Specific Care Certification

October 11, 2018

What will you Learn with this webinar?

Benefits for preparing for and achieving Disease-Specific Care (DSC) Certification

Define the three core requirements for achieving DSC certification

Identify three behavioral health programs available for certification

Identify two resources available through The Joint Commission for support with DSC certification

Steps taken by one organization for why to pursue and achieve certification

Why DSC Certification?

Improves Quality of Care by reducing variation of care

Requires a systematic approach to clinical care

Creates and maintains a loyal, cohesive clinical team

Assists in being prepared for The Joint Commission

Facilitates Marketing

What's Different about DCS Certification?

Reviews are service-based, focused on quality, safety, and outcomes of improving clinical care

Eligibility criteria

Voluntary—not an add-on to accreditation

- Accreditation, in accreditation eligible organizations, is a pre-requisite to certification
- Inpatient or outpatient setting
- Adult and Pediatric programs
- Separate and distinct decision and award

2-year cycle

Required 12-month intracycle event

Separate cadre of reviewers

Behavioral Health Programs available for DSC Certification

Anxiety

Attention Deficit Hyperactivity Disorder

Bipolar Disorder

Chemical Dependency

Dementia

Depression

Eating Disorders

Geriatric Delirium

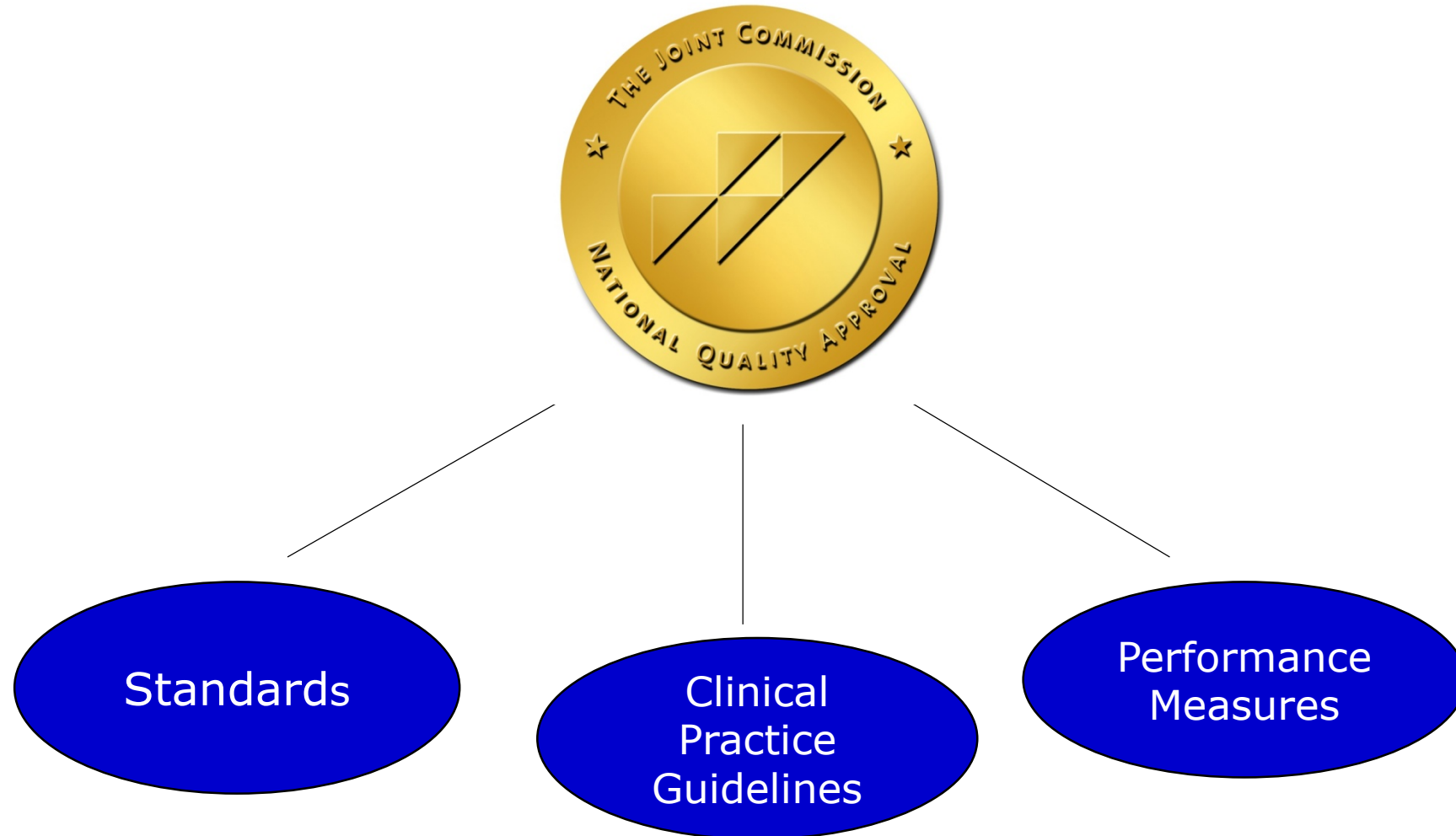
Neuroscience Based Psychiatric Services

Self-Injury

Trauma-informed Care

Violence Prevention

Key Requirements for DSC Certification



Disease-Specific Care Standards



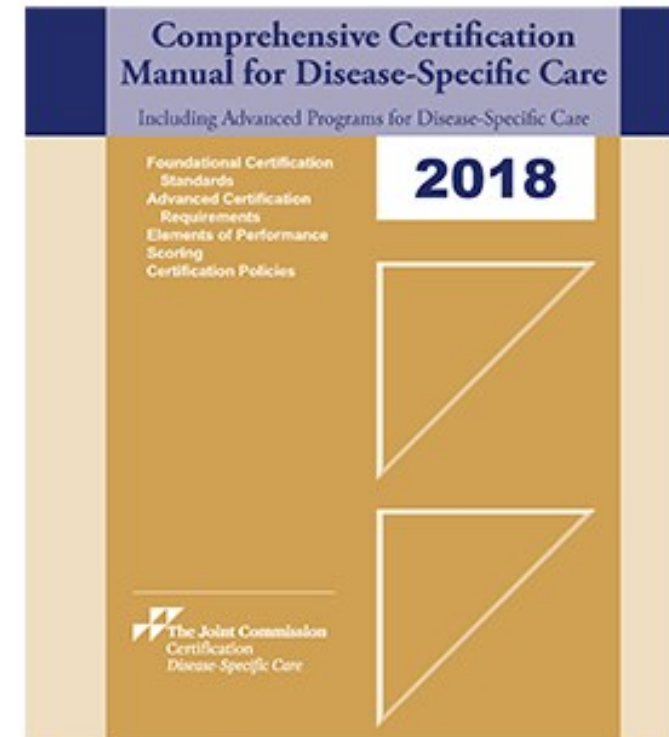
How can I access DSC standards?

If hospital has DSC certified program:

- Ask Joint Commission liaison at hospital for access to standards on secure Joint Commission Extranet
- Ask Joint Commission liaison or coordinator of certified program to print copy of standards

If hospital not certified:

- 90-day free trial of E-dition of DSC standards
- Purchase hard or E-dition copy of 2019 *Comprehensive Certification Manual for Disease-Specific Care*



<http://www.jointcommission.org>

Clinical Practice Guidelines (CPGs)

Published, current, and evidenced-based Standards of Care/ Guidelines for Care

- Published document that is use to develop the ordersets/ care paths/ policies/ protocols

Demonstrate discussion and adoption by team

Online resources:

- National organizations

Performance Measurement

Non-Standardized/self-defined: Stage I measures:

- Four (4) measures with at least two (2) clinical in nature (process or outcome). Others can be financial, utilization or patient satisfaction
- Four (4) months of data at the time of the onsite review

Resources:

- Gap analysis
- Other organizations with DSC certification
- Associate Director at The Joint Commission
- AHRQ webpage

Gap Analysis

Where are the gaps in the program?

Self-assessment against the standards and the CPGs

Was the CPG modified? What support is there for the modification?

Are the ordersets/ policies/ protocols/ care paths being followed as written?

Has education about the CPGs been done?

Results can be use to develop:

- Timeline for application submission
- Performance Measures

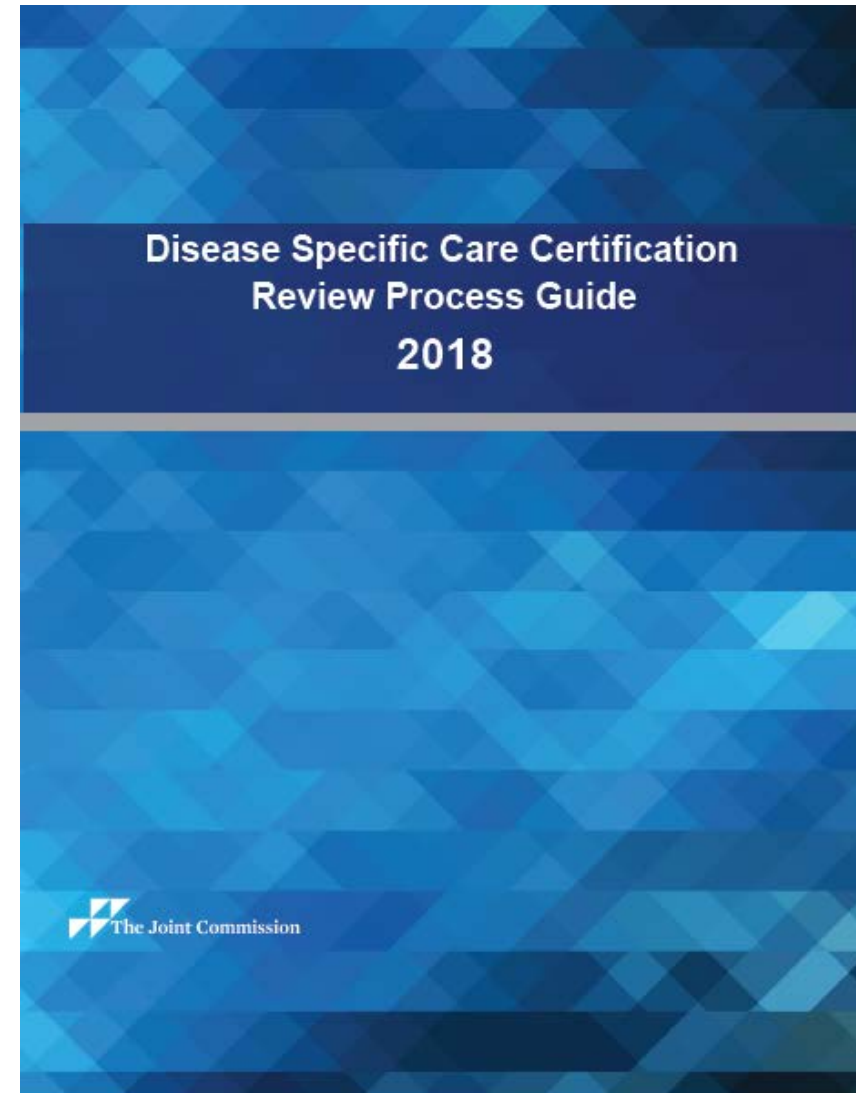
Preparing for Onsite Review

Review Process Guide

Mock review

Observe review at your hospital or
another hospital

Conference call with Associate Director/
Account Executive



The On-Site Review/ Evaluation

Activities:

- Program overview
- Patient tracers
- System tracer on data use
- Competency assessment and credentialing
- Closing conference

Engaging practitioners and patients

Educative

Resources

- Joint Commission Associate Director
- Account Executive for DSC certification at The Joint Commission
- CSR representative from Joint Commission Resources
- Joint Commission Resources – consulting division
- AMP with Tracer tool
- DSC standards manual – edition or hard copy
- Review Process Guide
- Webpages for specific programs



TriStar Centennial Parthenon Pavilion: TJC Disease Specific Certification (DSC) Process

Katie Liveoak, PharmD, BCPP
Clinical Pharmacy Specialist, Psychiatry





Overview

- Introductions
- Orientation to our program(s)
- Overview of our DSC process
- Questions and answers about our review



TriStar Centennial Medical Center

Exceptional Clinical Quality \ Unparalleled Patient Service \ Financial Outperformance

TriStar  **Centennial**
MEDICAL CENTER

TriStar  **Health**

1



Culture:

Mission & Connect to Purpose

Above all else, we are committed to the care and improvement of human life.

"I LOVE WORKING HERE BECAUSE I WAS A PATIENT HERE ONCE, AND WITH GOD'S GRACE AND THE EXCELLENT CARE OF CENTENNIAL'S DOCTORS, NURSES AND STAFF I'M ALIVE, GIVING ME THE OPPORTUNITY TO GIVE BACK TO THOSE FOLKS WHO ARE FACING HEALTH ISSUES."

David R. - Patient Transport



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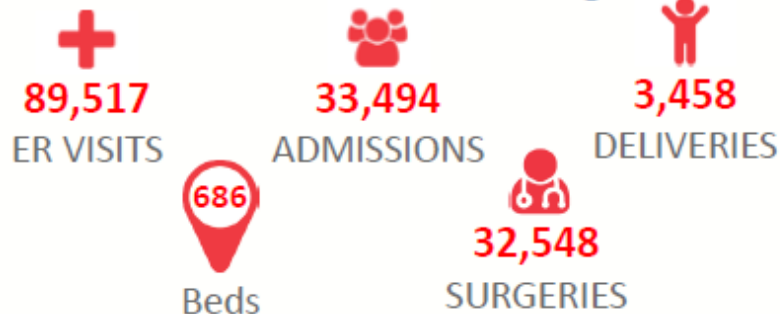
TriStar Health



Hospital Overview:

Who we are

- 1,644 Physicians + APPs
- 3,096 Employees
- 43 Acre Campus
 - 7 Hospitals
 - 1 Freestanding Emergency Department (Spring Hill)
 - 1 Ambulatory Surgery Center
 - 1 Freestanding Imaging Center
 - 10 Medical Office Buildings



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 **The Children's Hospital**
at TriStar Centennial

TriStar Centennial
PARTHENON PAVILION

TriStar Centennial
WOMEN'S HOSPITAL

TriStar Sarah Cannon
CANCER CENTER

TriStar Centennial
HEART & VASCULAR

TriStar Ashland City
MEDICAL CENTER

TriStar Centennial
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TriStar Health

Quality:

Commitment to Excellence



The Society
of Thoracic
Surgeons



- **The Joint Commission Accreditation**
 - Certified Primary Stroke Center
 - Certified Spine Surgery Program
 - Gold Seal of Approval for Total Hip & Knee Replacement
- **Commission on Cancer Accreditation**
- **Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery**
- **Accredited Chest Pain Center with PCI by the Society of Chest Pain Centers**
- **Sleep Center Accreditation by the American Academy of Sleep Medicine**
- **Blue Distinction Center for Cardiac Care**

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TriStar Health

TriStar Centennial



Behavioral Health

- TriStar Centennial Parthenon Pavilion
 - 132-beds
 - Founded in 1971; first and oldest behavioral health hospital in middle Tennessee
- Our Services
 - Senior Inpatient
 - Adult Inpatient
 - Dual Diagnosis Inpatient
 - Medical Detoxification
 - Electroconvulsive Therapy (ECT)
 - Treatment Mall Programming
 - TJC Best Practice
 - Intensive Outpatient Program (IOP)
 - Partial Hospitalization Program (PHP)





Current Certifications

- Dementia
 - Existed
 - Applied for certification
- Violence Prevention
 - Collaboration with TJC
 - Creation of DSC



Dementia Highlights

- GEMS Program
- HATO Protocol
- Dysphagia Protocol/Group
- Outcome Rating Scales
- Patient Family Advisory Committee
- Recovery Team/Planning
- Treatment Mall
- Exercise Physiologist
- Environment of Care Changes
- Clinical Nurse Leaders (CNL)



Violence Prevention Highlights

- Broset Violence Checklist
- CPI Nonviolent Crisis Intervention
- Behavioral Emergency Response Team (BERT)
- Providing Care to a Patient in Crisis training
- Debriefings
- Escalation Algorithm
- Treatment Review Committee
- Clinical Nurse Leaders (CNL)
- Patient Unit Assignments
- Physical Environment

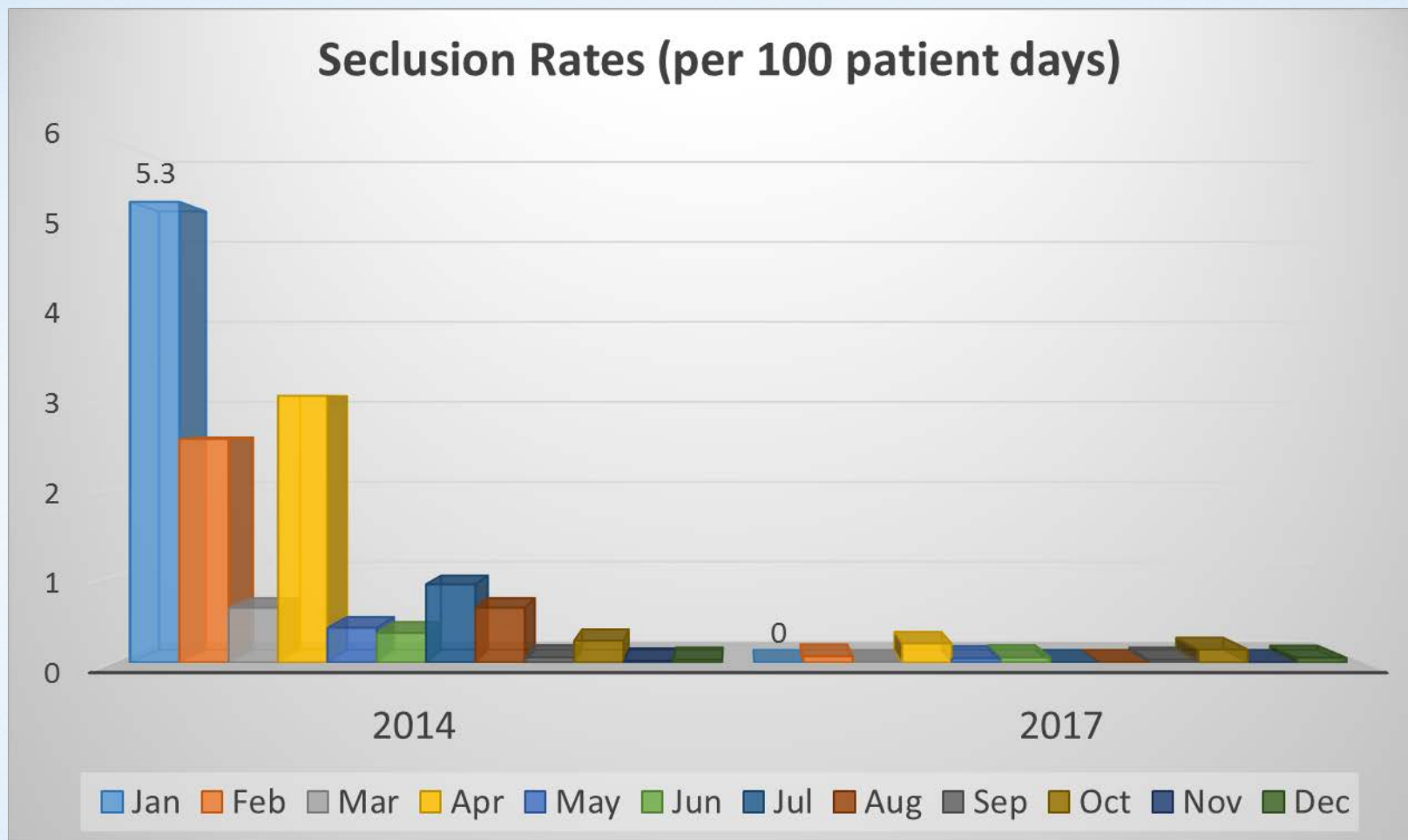


Background/Timeline

- Focus on seclusion reduction began in 4th quarter 2013
- Goal of 10% reduction by 2014
- Violence reduction/prevention efforts implemented in early 2014
 - Subcommittee developed
 - Protocols implemented
 - Extensive staff education provided
 - Process change/culture shift



Seclusion Reduction Efforts



PI Goal is 0.1



Violence Prevention Program

- Multi-disciplinary subcommittee developed and program implemented seclusion reduction efforts
- Developed “Assessment and Management of Violent Patients”
- Admission: Violence Prevention May 2014 - May 2018

Cases	Admit Year					
Admit Month	2014	2015	2016	2017	2018	Grand Total
Jan	-	372	330	236	292	1,230
Feb	-	308	305	224	264	1,101
Mar	-	376	285	311	291	1,263
Apr	-	340	303	300	278	1,221
May	218	323	296	289	306	1,432
Jun	365	316	246	289	-	1,216
Jul	373	341	293	302	-	1,309
Aug	371	351	317	334	-	1,373
Sep	342	330	295	294	-	1,261
Oct	364	335	250	302	-	1,251
Nov	329	291	266	304	-	1,190
Dec	332	305	265	260	-	1,162
Grand Total	2,694	3,988	3,451	3,445	1,431	15,009



Strengths

- Administrative vision
- Demographics
- Physician support
- Highly engaged team
- Community support
- Quality measures
- Advocacy/Fundraising



TJC DSC PROCESS



Initial Decision Making

- Improvements and best practice identified
- Processes
 - Safety of care
 - Efficacy of care
- Validation and celebration of staff's efforts



Proposal to Administration

- Competitive advantage
- Cultivating best practices
- Initial and ongoing performance improvement
- Alignment with mission statement



DSC Critical Components

- Mission statement
- Highly engaged team
 - Multi-disciplinary
 - Physician support
 - Administration involvement
- Scope of services
- Well defined goals
- New policies/protocols
- Performance improvement measures
- Perception of care (POC) data
- Clinical practice guidelines (CPG)



Onsite Review Preparation

- Review TJC DSC Certification Review Process Guide
- Gap analysis to CPG and TJC DSC standards
- Utilize TJC DSC support for questions/concerns
- “Items required for reviewer planning session”
- One day versus multi-day review
- Create detailed onsite schedule
 - Reserve meeting spaces
 - Invite all stakeholders
- Opening conference PowerPoint
- Staff involvement and coaching



Onsite Review Process

- Opening conference
- Reviewer planning session - provide patient list
- Assign 1-2 staff to guide reviewer(s) during chart review and tour
- Tracer activity - staff and patients
- System tracer/data use
- Competence assessment/credentialing
- Issue resolution/report
- Exit conference
- Collaborative and positive experience



Lessons Learned

- Continued improvement processes
- Appropriate performance improvement measures
- Organized approach
- Binder
- Capture POC data
- Structured meeting minutes - TJC template



Benefits of Certification

- Validates quality within:
 - Facility
 - HCA Behavioral Health Services
 - Community
- Celebration of staff
- Success of non-traditional staff
- Continued performance improvement

Thank You!

Above all else,
we are committed
to the care and
improvement
of human life.



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Questions?

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