



Preparing for a Successful Joint Commission Health Equity Accreditation & Certification Survey

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Health Equity Lead

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The IPRO QIN-QIO

The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO) in contract with the Centers for Medicare & Medicaid Services (CMS)
- 12 regional CMS QIN-QIOs nationally

IPRO:

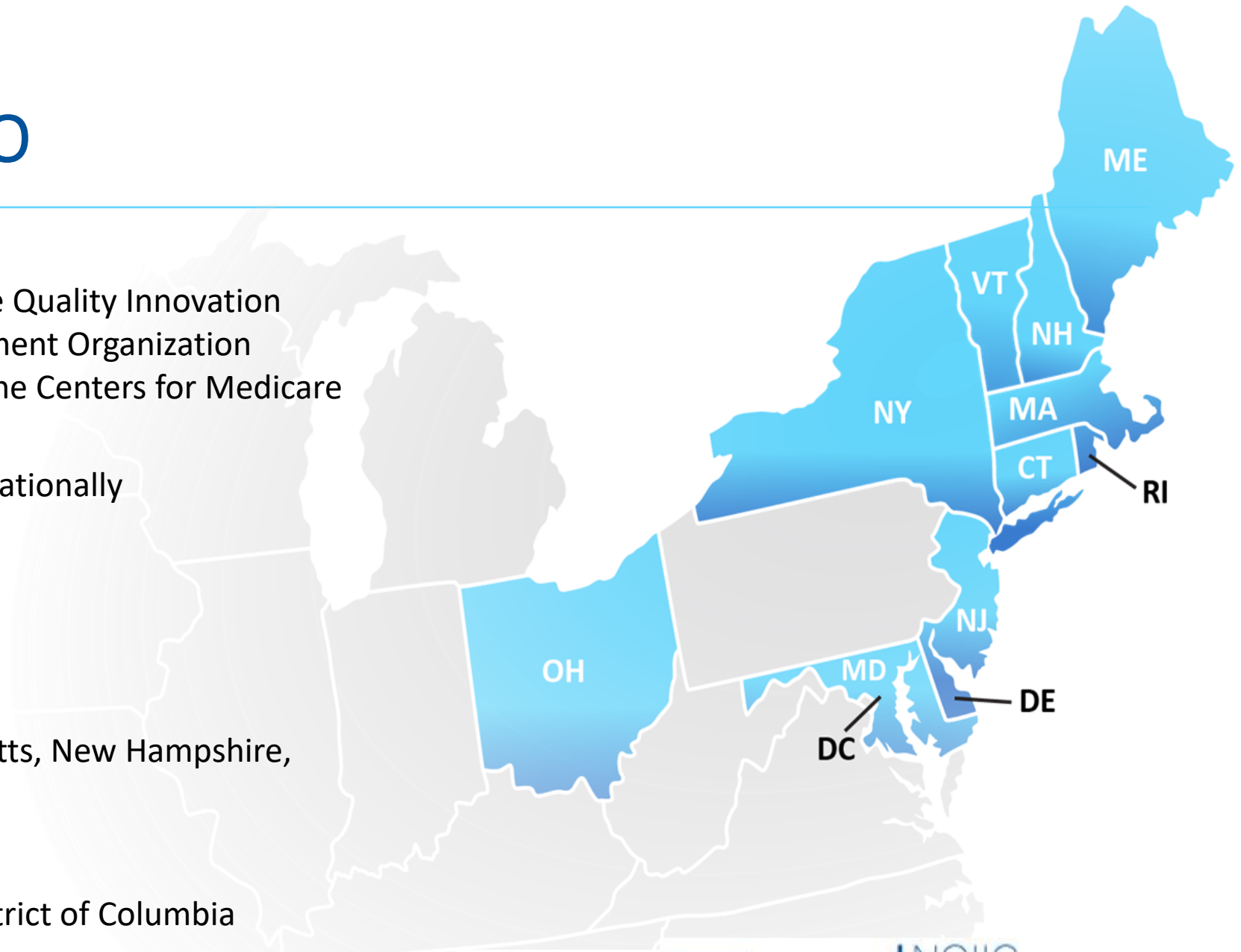
New York, New Jersey, and Ohio

Healthcentric Advisors:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:

Maryland, Delaware, and the District of Columbia



Working to ensure high-quality, safe healthcare for
20% of the nation's Medicare FFS beneficiaries



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The IPRO HQIC

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- A federally funded Medicare Hospital Quality Improvement Contractor (HQIC) in 12 states
- IPRO collaborates with several organizations to reach hospitals.

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■ Healthcentric Advisors

■ Kentucky Hospital Association

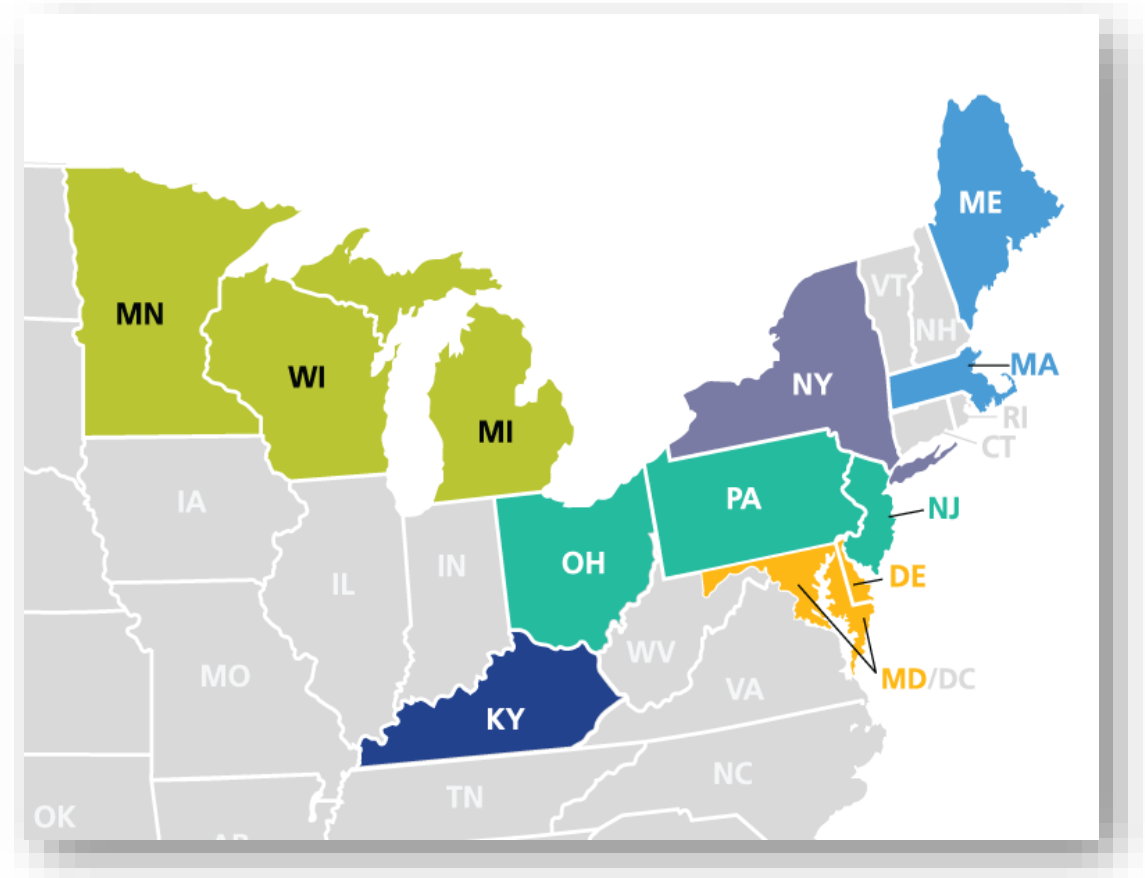
■ Qlarant

■ Q3 Health Innovation Partners

■ Superior Health Quality Alliance

American Institutes for Research (AIR)

QSource Health Equity Subject Matter Experts



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Objectives

- Gain an understanding of the differences between the Joint Commission:
 - health equity standards and accreditation process;
 - Health Equity Certification requirements and review process.
- Learn tactics and tips for a more successful accreditation process and/or review process.
- Get answers to questions about these programs.
- Learn about resources.



Today's Guest Speaker

Christina L. Cordero, Ph.D., MPH

**Senior Project Director, Healthcare Standards Development
Division of Healthcare Quality Evaluation and Improvement**

Christina Cordero is a Senior Project Director, Healthcare Standards Development in the Division of Healthcare Quality Evaluation and Improvement at The Joint Commission.

Dr. Cordero leads standards development projects for new accreditation and certification requirements and survey processes across multiple settings and programs. She serves as a subject matter expert for several topics, including health care equity, antibiotic stewardship, and telehealth.

Prior to joining The Joint Commission, she conducted basic science and public health research at Northwestern University's Feinberg School of Medicine.



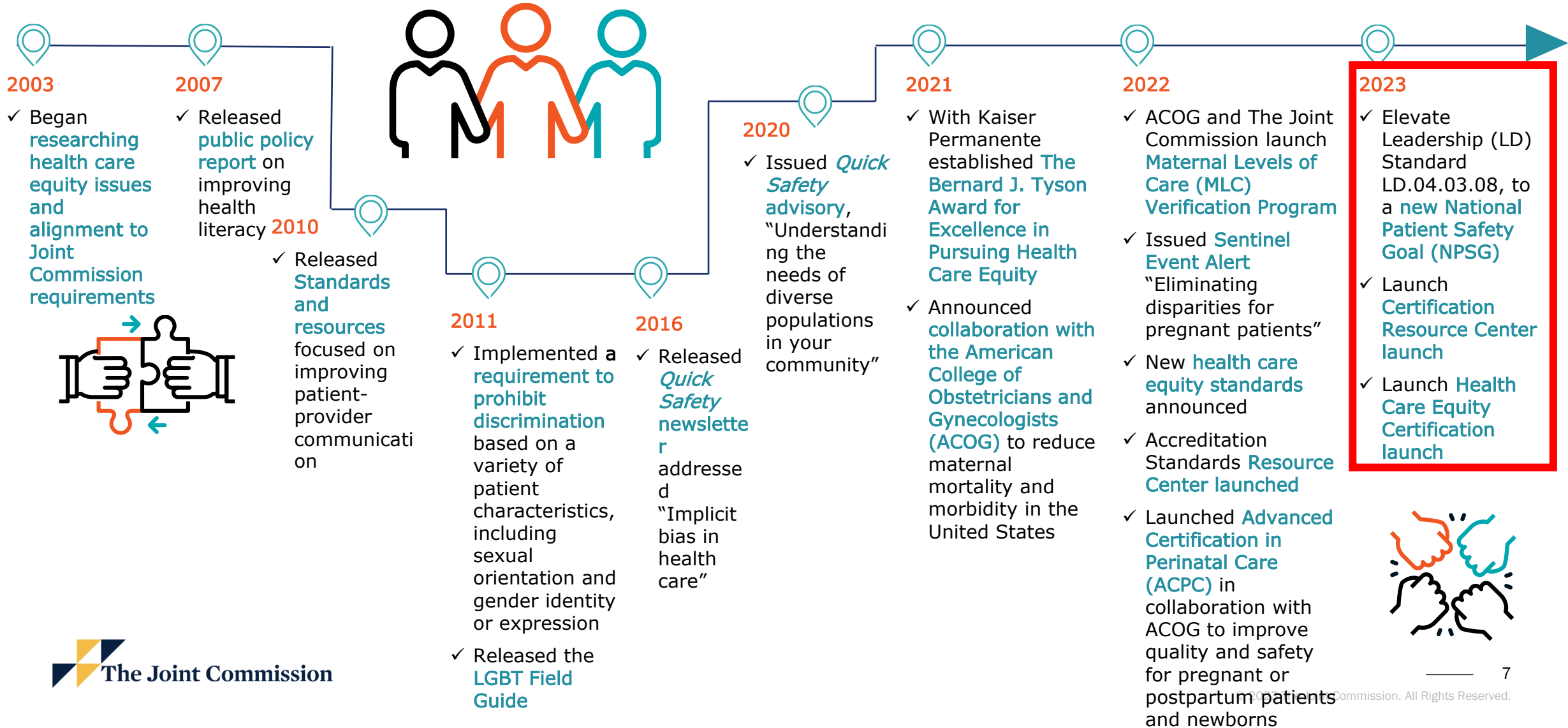
Improving Health Care Equity: Accreditation and Certification Requirements and Resources

Christina L. Cordero, PhD, MPH

Senior Project Director, Healthcare Standards Development
Division of Healthcare Quality Evaluation and Improvement

December 14, 2023

Our Journey to Advance Equity



New National Patient Safety Goal

- NPSG.16.01.01 to improve health care equity
 - 6 EP requirements (promoted from Leadership chapter)
 - Resources in Resource Center
- Applicable to HAP, CAH, selected services in AHC/BHC
- Release Timeline:
 - Prepublication requirements (Jan 2023)
 - Implementation (July 2023)



New NPSG.16.01.01

NPSG.16.01.01: Improving health care equity for the hospital's patients is a quality and safety priority.

Commitment, vision, creativity, and sustained effort at all levels (including the C-suite and the Board)

Established leaders and standardized structures and processes in place to improve health care equity

Efforts should be fully integrated with existing quality improvement activities within the organization

Designate a Leader (EP 1)

The hospital designates an individual(s) to lead activities to improve health care equity for the hospital's patients.

Intent and Implementation Strategies:

- Establishes clear lines of accountability
- Identify an individual that will have responsibilities for activities to improve health care equity (one or multiple individuals).
- How are health care equity initiatives coordinated across the hospital?

Assess Health-Related Social Needs (EP 2)

The hospital assesses the patient's health-related social needs and provides information about community resources and support services.

Intent and Implementation Strategies:

- Flexibility to determine which patients to assess for HRSNs, which HRSNs to assess, and which resources to provide to address HRSNs
- Focus on a representative sample or collect data from all patients
- How are the patient's health-related social needs being assessed?
- How are patients connected with resources and support services in the community?

Identify Health Care Disparities (EP 3)

The hospital identifies health care disparities in its patient population by stratifying quality and safety data using the sociodemographic characteristics of the hospital's patients.

Intent and Implementation Strategies:

- Organizations choose which measures to stratify and which sociodemographic characteristics to use for stratification:
 - Focus on high-risk topics or select measures that affect all patients
 - Examples of sociodemographic characteristics in Notes
- How did you select which quality and safety data to analyze?
- Which characteristics did you include in the stratification analysis?

Develop an Action Plan (EP 4)

The hospital develops a written action plan that describes how it will improve health care equity by addressing at least one of the health care disparities identified in its patient population.

Intent and Implementation Strategies:

- Focus on reducing one health care disparity – how did you prioritize?



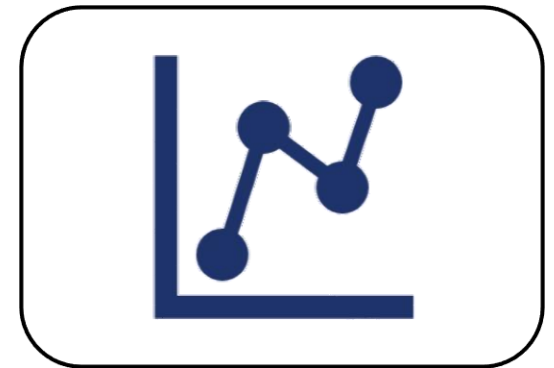
Specific population(s)
of focus



Organization's
improvement goal



Strategies and
resources to
achieve the goal



Process to monitor
and report progress

Make Improvements (EP 5)

The hospital acts when it does not achieve or sustain the goal(s) in its action plan to improve health care equity.

Intent and Implementation Strategies:

- Assess progress and evaluate whether efforts to improve health care equity are successful
- How did you identify opportunities to revise the action plan or provide additional resources to achieve your organization’s goal(s)?
 - Review stratified quality and safety metrics to track progress
 - Collect feedback from patients about new services or interventions
 - Evaluate staff training and education needs

Keep Stakeholders Informed (EP 6)

At least annually, the hospital informs key stakeholders, including leaders, licensed practitioners, and staff, about its progress to improve health care equity.

Intent and Implementation Strategies:

- Important to receive updates about the challenges and successes of the organization's efforts to improve care for all patients
- How are leaders and staff made aware of the organization's initiatives to improve health care equity?
 - Examples: Presentations (quarterly meetings, town hall, staff meetings), newsletters, progress boards, intranet page

Accreditation Standards Resource Center

<https://www.jointcommission.org/our-priorities/health-care-equity/standards-and-resource-center/>

Focused Resources to Support Standards Compliance



Make Health Care Equity a Leader-Driven Priority



Assess Health-Related Social



Use Data to Identify Disparities Across Patient Groups



Monitor Health Care Equity



Evidence-based Interventions



Snapshots

Brief synopses of approaches used by other organizations.



Soundbites

Brief videos of organizations' lessons learned.



Strategies

Links to resources such as toolkits, templates, and guides.

New Advanced Certification Program

Voluntary program for hospitals, separate from accreditation

Recognizes organizations that go beyond the accreditation requirements and strive for excellence in health care equity

Certification requirements build upon on long-standing and recently released health care equity accreditation requirements

Resource center to help implement requirements

2-year certification award (1-day onsite review)

Certification Chapters



Leadership

- Strategic priority
- Board involvement



Collaboration

- Engage patients
- Engage community organizations



Data Collection

- Community
- Patients
- Staff



Provision of Care

- Workforce diversity
- Staff training
- Communication
- Disabilities
- Health-related social needs



Performance Improvement

- Improve services
- Improve staff diversity, equity, and inclusion

Data Collection: **Community**

The organization reviews data about the community it serves to identify opportunities to improve health care equity.

- Review data about the sociodemographic characteristics and health-related social needs of the individuals in its community
 - May review data from a community health needs assessment or other data sources, such as government datasets or state or local health departments.

Data Collection: Patients

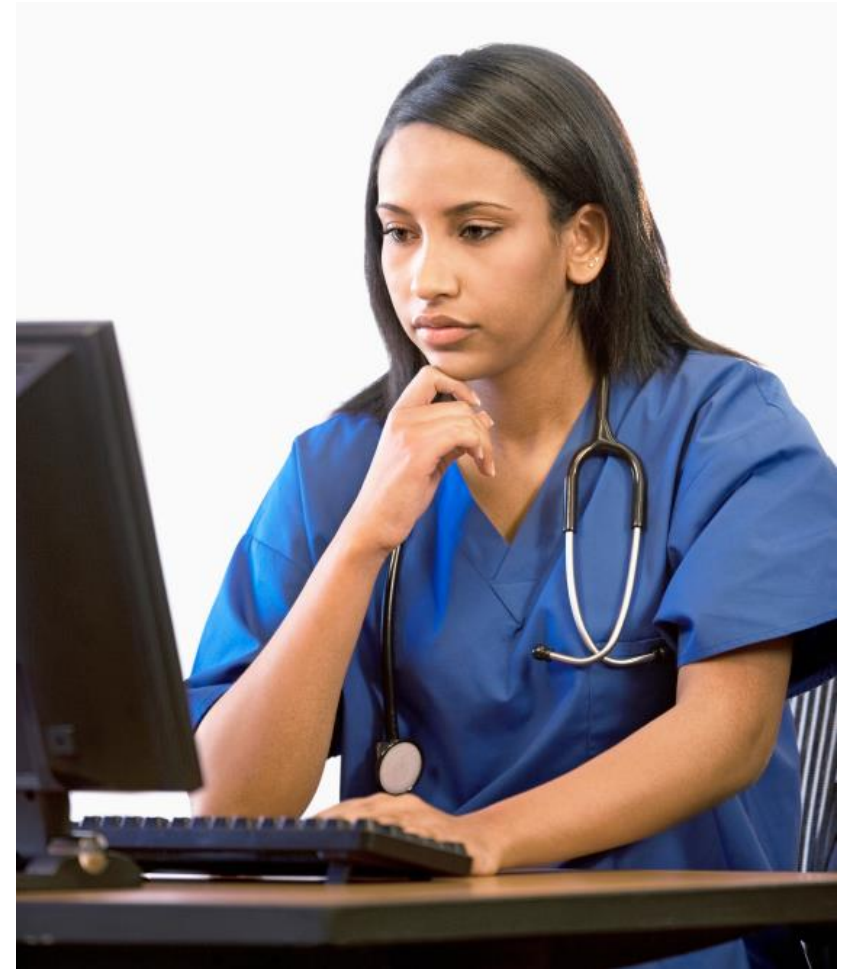
The organization collects self-reported patient data to identify opportunities to improve health care equity.

- Race and ethnicity
- Preferred language and need for a language interpreter
- Health-related social needs
- Physical, mental, communication, or cognitive disabilities that require accommodation and the accommodation needed
- Incidents and perceptions of discrimination and bias experienced by patients

Data Collection: Staff

The organization collects self-reported data from its staff and leaders it identify opportunities to improve health care equity.

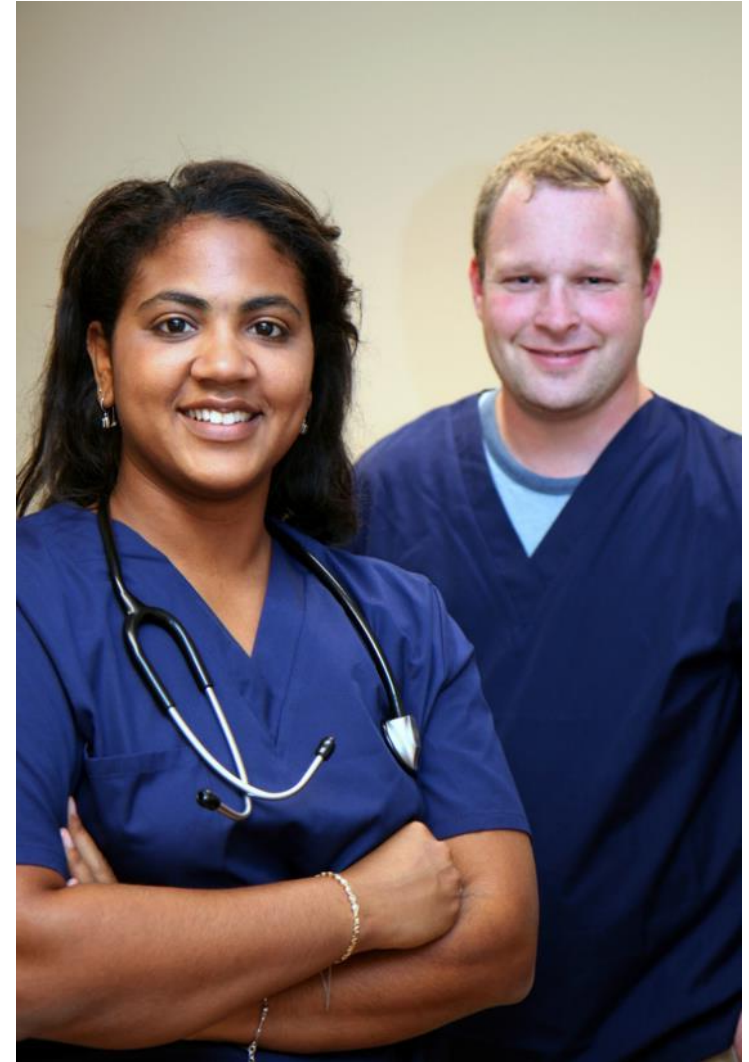
- Race and ethnicity information
- Languages spoken
- Incidents and perceptions of discrimination and bias experienced by its staff and leaders



Provision of Care: **Staff Training**

The organization provides staff with the education and training necessary to provide equitable care

- Rationale for improving health care equity
- Collection of patient-level data
- Communication with patients and families
 - Accessing and working with interpreters
 - Using auxiliary aids



Provision of Care: **HRSNs**

The organization addresses the HRSNs of its patients.

- Review the patient’s HRSNs to determine whether modifications to the plan for care are necessary
- Collaborate with community and social service organizations to address the HRSNs of its patients



Performance Improvement: **Services**

At least annually, the organization analyzes its data to identify opportunities to improve the provision of equitable care.

- Review the sociodemographic data of its patients for missing or inaccurate information
- Review data from its complaint resolution process
- Stratify experience of care measures
- Monitor the use of language interpreters
- Stratify at least 3 quality and/or safety measures for priority clinical conditions
 - Examples will be available in the resource center, can also use any other measures identified in the health care equity strategic plan

Performance Improvement: Staff

The organization identifies opportunities to improve its efforts to address diversity, equity, and inclusion for staff and leaders.

- Compare the race, ethnicity, and the languages spoken by its staff and leaders to the race, ethnicity, and the languages spoken by its community
- Stratify culture of safety data or employee opinion surveys using the race, ethnicity, and language information for its staff and leaders

Certification Resource Center

<https://www.jointcommission.org/our-priorities/health-care-equity/certification-resource-center/>

Focused Resources to Support Standards Compliance



Leadership



Collaboration



Data Collection



Provision of Care



Strategies

Links to resources such as toolkits, templates, and guides.



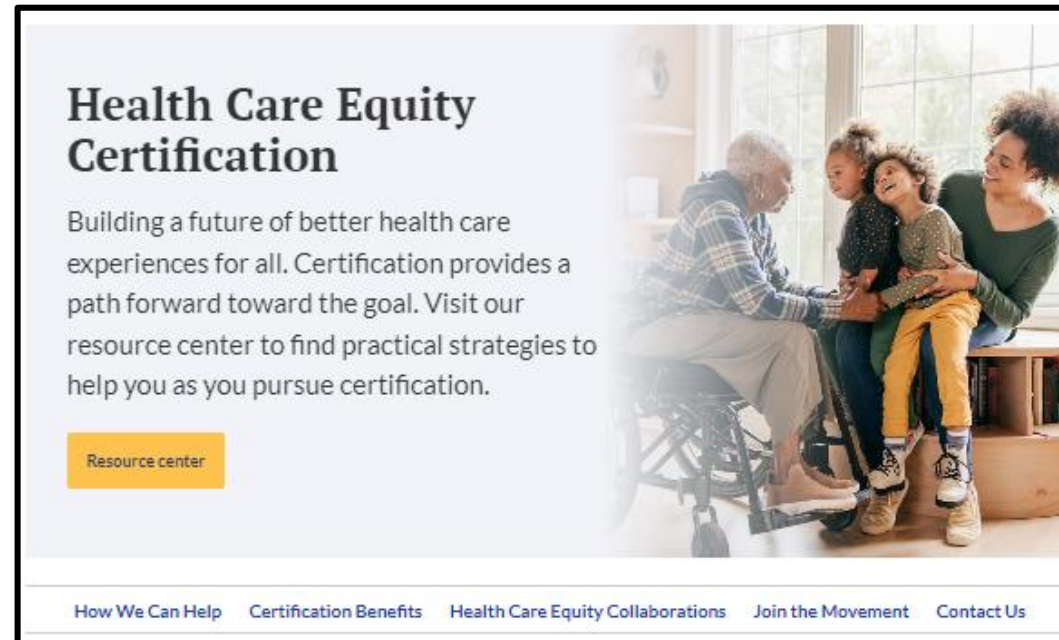
Spotlights

Brief written synopses and videos of successful initiatives and practices implemented by other organizations.

For More Information

Certification program website

<https://www.jointcommission.org/what-we-offer/certification/certifications-by-setting/hospital-certifications/health-care-equity-certification/>



On Demand webinar recording

<https://register.gotowebinar.com/recording/7420957350596289537>

Questions?

For more information, please contact the Department of Standards and Survey Methods (DSSM) using the form located at

<https://dssminquiries.jointcommission.org>

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Q&A



Please use the chat feature to ask questions or share comments.



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Thank You

Thank you for your continued partnership and commitment to health equity.



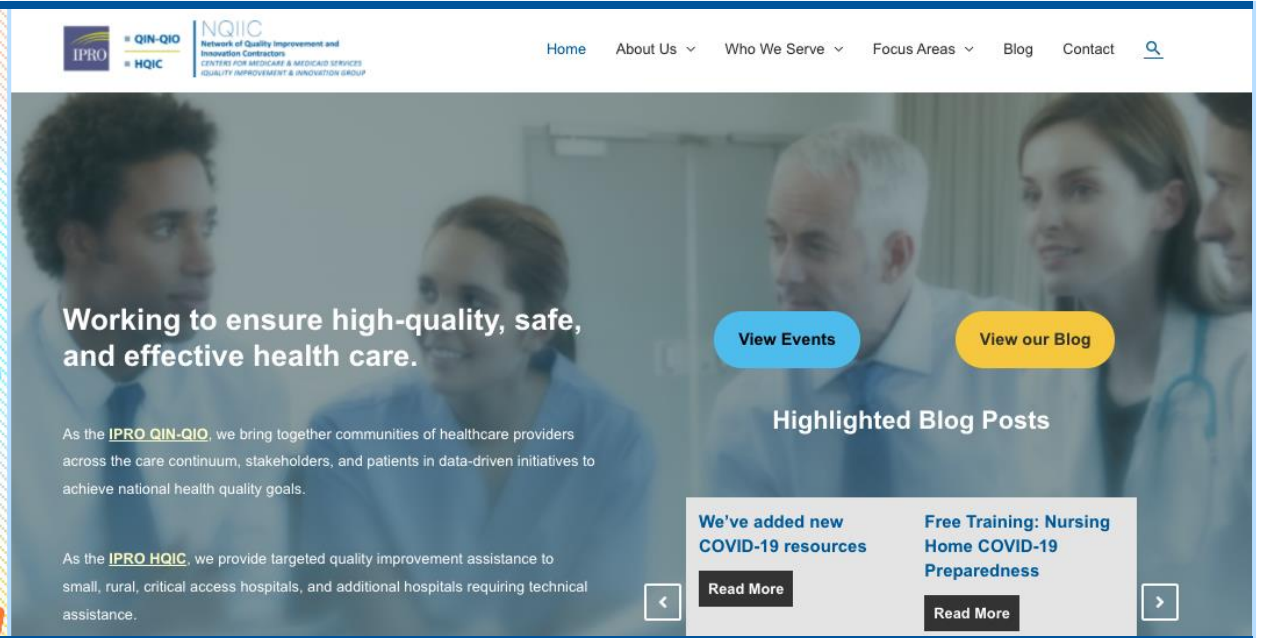
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