



# Comprehensive Cardiac Center Certification Review Process Guide

2024



# **Comprehensive Cardiac Center Certification**

## **Review Process Guide**

## **What's New in 2024**

New or revised content for 2024 is identified by underlined text in the activities noted below.

### Changes effective January 1, 2024

Minor edits only.

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## Comprehensive Cardiac Center Certification **Organization Review Preparation**

The purpose of this activity guide is to inform organizations about how to prepare for the Comprehensive Cardiac Center on-site certification review, including:

- x Identifying ways in which the organization can facilitate the on-site review process
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established for the program) and any other identifying information that will assist the reviewer in locating the guidelines being implemented by the program (see also page 12). An example of a CMIP entry would include:

2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines

3. Performance improvement plan
4. Data collection process and mandatory performance measures

On intracycle and re-certification reviews, the reviewer should verify that the program has a process in place to ensure that the program is up-to-date and that the program is in compliance with the requirements of the accreditation standards.

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- o Heart failure, including outpatient services
  - o Cardiac rehabilitation Phase 2/Phase 3 (either on site or by referral)
- x Order sets, clinical pathways, patient care plans, protocols, etc., that are used to implement selected clinical practice guidelines
- x Education material for the center's patients
- x Center's schedule for interdisciplinary team meetings or rounds on patients
- x Center minutes and attendance records for team meetings

Following is a list of items referenced in the standards and elements of performance that reviewers **MAY REQUEST** to see during the refererBdT3udingr - dxccsnnc

- x The reviewer will want to move throughout the facility or offices during Tracer Activity, talking with staff and observing the day-to-day operations of the organization along the way. The reviewer will rely on organization staff to find locations where discussions can take place that allow confidentiality and privacy to be maintained and that will minimize disruption to the area being visited.
- x Your on-site review agenda template similar to the one presented later in this guide, will be posted to your Joint Commission Connect extranet site. The review agenda presents a suggested order of activities and timeframes for each. Discuss with the reviewer any changes to the agenda that may be needed at any time during the on-site visit.

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## Questions about S



# Comprehensive Cardiac Center Certification

## Comprehensive Cardiac Center Certification

# Performance Measures

The Joint Commission includes standardized sets of performance measures for the Comprehensive Cardiac Center certification. These performance measures have precisely defined specifications, standardized data definitions, and standardized data collection protocols.

Programs seeking certification and recertification are required to collect Joint Commission Comprehensive Cardiac Center standardized performance measure data and analyze the data internally for use in performance improvement activities. Additionally, Comprehensive Cardiac Centers collect, analyze, and take action to improve performance in all areas of cardiovascular services, including responses to unusual events. Centers also utilize data collected from patient experience for performance improvement activities.

Comprehensive Cardiac Center Certification  
**Opening Conference and Orientation to Center**

This session combines two activities into one 75-

- x Center community health needs assessment, plan to address population health needs related to cardiovascular disease, and examples of community education and outreach
- x Center leadership, responsibilities and accountabilities
- x Interdisciplinary team composition and responsibilities
- x Other personnel and support services
- x Backup systems and plans
- x Center and organization integration, interaction and collaboration
- x Diversity, equity, and inclusion efforts
- x Communication and collaboration within the center and with patients and families
- x Communication between the center and other providers within the organization and externally, specifically, within Systems of Care (pre-hospital providers, referring hospitals, and post-acute providers)
- x Center and program team member selection qualifications, orientation, training, ongoing education and support
- x Organization staff orientation, training and education relative to the center
- x Clinical practice guidelines or evidence-based practices being followed by the center
- x Methods for evaluating and improving the program

**Session will conclude with (15-30 minutes):**

- x Agenda review with discussion of any needed changes
- x Objectives of the review
- x Overview of the SAFER™ portion of the Summary of Certification Review Findings Report
- x Dialogue about what the reviewers can do to help make this a meaningful review for the Center
- x Questions and answers about the on-site review process.



- o Coronary microvascular disorders, INOCA, MINOCA, SCAD
- o Interventional and diagnostic cath procedures
- o Rhythm disturbances
- o EP procedures
- o Valve repairs/replacements
- o Cardiac surgery
- o Vascular surgery
- o Diagnostic testing, such as echo, CCTA, CMR, and stress testing
- o Cardiac Rehab Phase 1, 2 and/or Phase 3

x

- o Cardiothoracic surgeon
- o Cardiac Interventionalist
- o Emergency medicine physician
- o Electrophysiologist

## Comprehensive Cardiac Center Certification

### **Individual Tracer Activity**

The individual tracer activity is a review method used to evaluate an organization's provision of care, treatment and services using the patient's experience as the guide. During an individual tracer the reviewer(s) will:

- x Follow a patient's course of care, treatment or service through the center, including



- x Observe a portion of interdisciplinary team rounds and/or patient care conferences and review documentation of these activities.
- x Look at procedures or other documents, as needed to verify processes or to further answer questions that still exist after staff discussions.

The tracer can lead the reviewer back to the starting care and service area. UJJ-3.567ae andher568 -1.4a. 10

## Comprehensive Cardiac Center Certification

# Education and Competence Assessment Process

The purpose of this activity is to discuss how the center meets the need for qualified and competent staff.

### Organization Participants

Individuals attending this session should be prepared to explain the Cardiac Center's approach to education and competence assessment. Consider the following participants:

- x Center administrative and clinical leaders
- x Organization representatives responsible for human resources processes
- x Individuals with authorized access to, and familiar with the format of files
- x Others at the discretion of the organization

### Materials Needed for this Activity

The reviewer will select up to ten specific staff members whose personnel files they would like to review, unless more are called for based on interdisciplinary team composition. It is likely the staff selected will include, as applicable:

- f* Cardiac imaging/diagnostics
- f* Cardiac surgery staff
- f* Interventional technician
- f* Interventional nurse
- f* Cardiac Rehab staff member
- f* Intensive care nurse
- f* Telemetry nurse
- f* Respiratory therapist
- f* Pharmacist
- f* Case management or social work

**Note:** The reviewers will select these files based on the individuals encountered during tracer activity, that is, those caring for or who cared for the patients being traced. Please let the reviewer know in advance of this activity how much time will be needed to gather files for review.

### Education and Competence Assessment Process Activity Description

During the session, the reviewer and Center representatives will discuss:

- x The job descriptions, roles, and responsibilities for interdisciplinary team members.
- x How the Center provides education and maintains competence for staff.
- x How the Center determines program-specific education requirements and the methods used for assessing and maintaining competence.
- x Participate in a facilitated review of selected files for:
  - f* Relevant education, experience and training
  - f* Current licensure and certifications
  - f* Program-specific orientation
  - f* Program-specific initial and ongoing education and training
  - f* Most recent performance evaluation

# Comprehensive Cardiac Center Certification

## Comprehensive Cardiac Center Certification System Tracer- Data Use

This session is focused on the center's use of data in improving safety and quality of care for their patients. The reviewer and the organization will:

- x Identify strengths and opportunities in the organization's use of data, areas for improvement, and any actions taken or planned to improve performance.
- x Identify specific data use issues requiring further exploration as part of subsequent review activities.

### Organization Participants

- x Center administrative and clinical leaders
- x Interdisciplinary team members involved in quality and performance improvement
- x Others at the discretion of the organization

### Materials Needed for this Activity

- x Cardiac center's performance improvement plan
- x Performance measure data reports for the **Mandatory Comprehensive Cardiac Center Certification Performance Measures** ) 0 7 m l D 1 7 o a 4 l ( i c a t

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## Comprehensive Cardiac Center Certification **Summary Discussion**

This session will be utilized for a final discussion prior to the reviewers' report preparation and the Exit Conference.

### **Organization Participants**

Center leaders, Center's Joint Commission contact, and others at the discretion of the Center.

### **Materials Needed for this Activity**

If there are any unresolved issues, evidence may be reviewed at this time

### **Preparation for Summary Discussion**

None required

### **Summary Discussion Description**

Topics that may be discussed include:

- x Any issues not yet resolved (IOUs)
- x The identified requirements for improvement (RFIs)
- x Sharing best practices to inspire quality improvement and/or outcomes
- x Educative activities of value to the center (i.e., knowledge sharing related to the CPGs or the late scientific breakthroughs)
- x Did we meet the goals of the team today?
- x What made the review meaningful to the team?

## Comprehensive Cardiac Center Certification **Team Meeting & Planning Session**

This activity only takes place on multi-day certification on-site visits. Reviewers use this session to debrief on the day's observations and plan for upcoming review activities.

Before leaving the organization, reviewers will return organization documents to the center's review coordinator or liaison. If reviewers have not ret

## Comprehensive Cardiac Center Certification

### Daily Briefing

Reviewers will use this time to provide organization representatives with a brief summary of review activities of the previous day, relay observations, and note examples of strengths and possible vulnerabilities in performance.

#### Duration

15 minutes

#### Participants

- x Center administrative and clinical leaders
- x Others at the discretion of the organization

#### Overview

Reviewers will:

- x Briefly summarize review activities completed on the previous day. Discuss at a high-level some of the patterns and trends they are seeing
- x Ask the center representatives to clarify or help them understand what they have been hearing and observing
- x Answer questions and clarify comments when requested
- x Review the agenda for the day
- x Make necessary adjustments to plans based on center needs or the need for more intensive assessment
- x Confirm logistics for the day, sites that will be visited, transportation arrangements, and meeting times and locations for any group activities

Reviewers may ask to extend the Daily Briefing if necessary. However, they will be considerate of staff time. They will **not** make all center representatives stay for a discussion that is specific to a small group of individuals.



## Comprehensive Cardiac Center Certification **Report Preparation**

The reviewers use this time to compile, analyze and organize the data collected throughout the review into a preliminary report reflecting the center's compliance with standards. 25  
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## Comprehensive Cardiac Center Certification **Center Exit Conference**

The Center Exit Conference is the final on-site activity when the organization receives a preliminary report of findings from the reviewers. In addition, reviewers will

- x Present the the Summary of Certification Review Findings report, including the new SAFER™ matrix feature

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Time	Activity & Topics	Suggested Organization Participants
10:30 – 12:30 p.m.	<p>care, treatment, and services provided by the Center</p> <ul style="list-style-type: none"> <li>x Schedule for interdisciplinary team meetings or rounds on patients</li> </ul> <p>Plans will also be made for tracing patients in outpatient clinics and cardiac rehabilitation locations.</p>	
	<p><b>Individual Tracer Activity</b></p> <p>Each reviewer will conduct tracers separately.</p> <p>Tracer activities may include:</p> <ul style="list-style-type: none"> <li>x Tours of patient care areas such as: ED, medical/surgical or critical care units, surgical services (OR), PACU, interventional and diagnostic cath. labs, EP labs, cardiac rehabilitation, ultrasound, radiology, laboratory, and/or pharmacy services.</li> <li>x Interviews with both staff and patients.</li> <li>x Interactive, patient record-based tracers with team members or organization sta</li> </ul>	





Time	Activity & Topics	Suggested Organization Participants
3:00 - 4:00 p.m.	<b>Reviewer Report Preparation</b>	None

4:00 - 4:30 p.m.

**Center Exit Conference**

x Review observations and any

## Comprehensive Cardiac Center Certification **Intra-cycle Review Process**

All organizations participating in the certification process are required to collect, report, and monitor their performance relative to standardized and non-standardized measures on an ongoing basis. The Certification Measure Information Process (CMIP) tool assists certified organizations with the data collection, reporting and monitoring requirements associated with performance measures. The CMIP tool is available on your organization's secure extranet site, The Joint Commission Connect. The Performance Measure (PM) Data Report portion of the CMIP tool is available for all certification programs to perform an annual analysis of their performance relative to each performance measure.

A mid-point (intra-cycle) evaluation of the performance measurement activities and standards compliance will be conducted via conference call with a Joint Commission reviewer.

### **Prior to the Intra-cycle Event**

Your organization will receive an automated email to the primary certification contact and the CEO approximately 90 days in advance of the anniversary date of your last certification review. You will have 30 days to enter any missing monthly data points for any of the performance measures, complete the performance measure (PM) data report for each measure, and review your performance improvement plan for any updates. Once everything has been entered or updated, please use the submission checklist section of the CMIP tool to formally submit the CMIP tool to The Joint Commission for the intra-cycle event. If the tool is not submitted on time, your organization will receive an email reminder to submit the tool or risk having your certification decision changed.

### **Intra-cycle Evaluation Logistics**

This call will take place as close as possible to the one year mid-point of the current two year certification cycle. The call will be completed by a Joint Commission reviewer who will contact the person identified in the "Intra-cycle Conference Call Contact Information" section of the CMIP tool for a time that is convenient to both parties involved. Participation in the intra-cycle conference call is mandatory for the Comprehensive Cardiac Center certification.

### **Organization Participants**

- x Staff involved in data collection and analysis
- x Program leaders that implement performance improvement plans

### **Overview of evsea**



There are no negative outcomes to the intra-cycle event, unless the reviewer identifies that your organization has not actively engaged in performance measurement and improvement activities since the time of the most recently completed initial or recertification review.



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