



Standardization And International Accreditation



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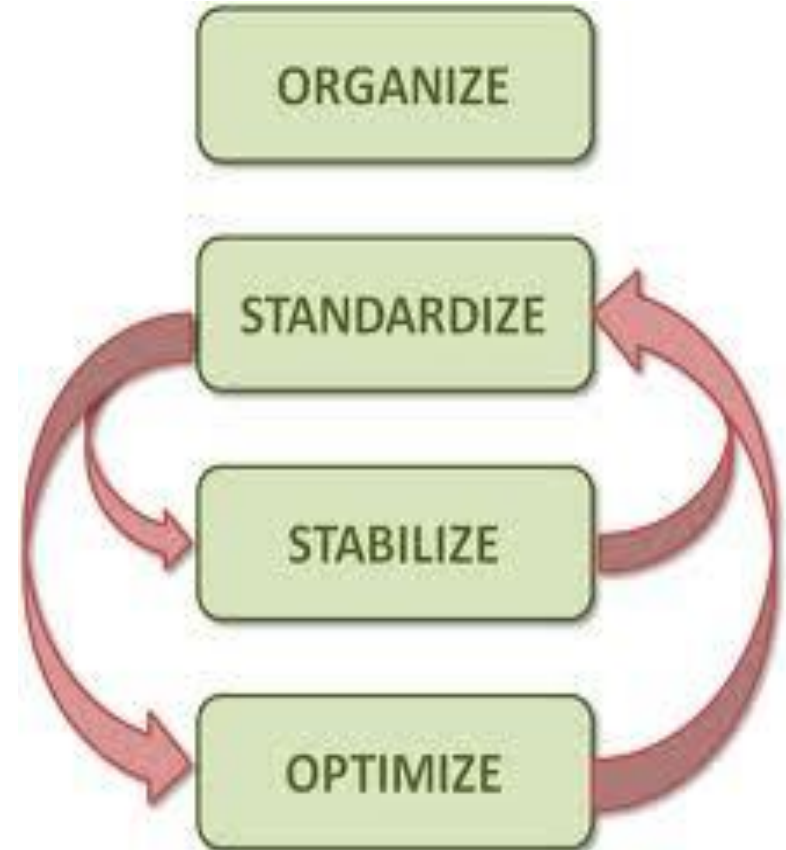
- What is standardization?
- Why standardization?
- How is standardization applied in the medical care field?
- standardization enablers
- Origin of medical care standards
- JC International accreditation:
 - Standards of care requiring medical care standardization
 - Selected citations from JCI hospital manual for illustration
 - JCI required process when selecting, implementing & evaluating guidelines, protocols and/ or pathways
- Difficult questions to answer when practicing standardization



Standardization

What is it?

Standardization is the establishment of **uniform processes** to ensure **consistent output**.





Healthcare Practice Standardization

Healthcare practice standardization ensures **conformity** to widely **recognized**, **acknowledged** and **evidence-based** criteria in the field of healthcare practice





Why Practice Standardization?

Several types of **quality problems** in health care have been documented all over the world with the **variation in services** being the most documented

Concluding

A pattern of wide variation in health care practice and indicating that the **health care practice is not being standardized.**



Variation in Services... A quality Problem

- Underuse of services
- Overuse of services
- Misuse of services
- Disparities in quality



Underuse of Services

Millions of people do not receive necessary care and suffer needless complications that add to costs and reduce productivity.





Underuse of Service/ Study

- A study of Medicare patients who had suffered **heart attacks** found that only 21 percent of eligible patients received beta blockers. The **mortality rate** among patients who **received** beta blockers was **43 percent lower** than it was among **non-recipients**.





Underuse of Service/ Study

- Another AHRQ-funded study examined the use of beta blockers before heart bypass surgery and found that patients who received beta blocker therapy before surgery had lower rates of death and fewer complications both during and after surgery than patients who did not receive this therapy.



Overuse of Services

Each year, millions of Americans receive health care services that are **unnecessary, increase costs**, and may even **endanger** their health. Research has shown that this occurs across all populations.





Overuse of Services/ Analysis

An analysis of hysterectomies performed on women in seven health plans found that one in six operations was inappropriate.





Overuse of Services/ Study

A study examining the use of antibiotics for treating ear infections in children on Medicaid found that expensive antibiotics were used far more often than indicated.





Misuse of Services

Too many Americans are injured during the course of their treatment, and some die prematurely as a result.





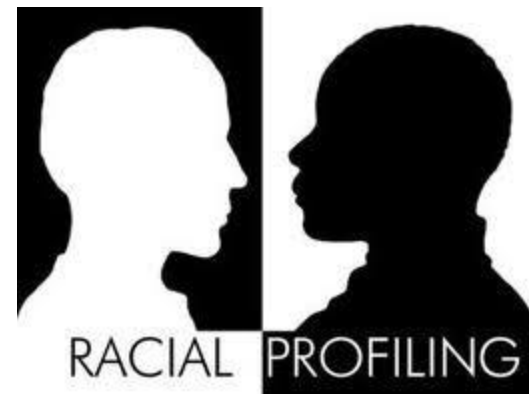
Misuse of Service/ Study

An average of 195,000 people in the USA died due to potentially preventable, in-**hospital medical errors** in each of the years 2000, 2001 and 2002, according to a study of 37 million patient records that was released in August 2004 by HealthGrades, the healthcare quality company.



Disparities in Quality... A quality Problem

Disparities in quality. Although quality problems affect all populations, they may be most marked for members of **ethnic and racial minority populations.**





Disparities in Quality/ Analysis

Researchers at the University of Alabama at Birmingham examined the use of thrombolysis ("clot busters") for patients who had experienced a heart attack and found that while this evidence-based life-saving treatment was underused for all, black Medicare beneficiaries were significantly less likely than whites to receive this treatment.





*Reducing Variation
BY
Standardization*



Medical Care Standardization

How is standardization applied in the medical care field?

In a 1990 report on medical standards of care, the Institute of Medicine (IOM) established a taxonomy of medical standards that remains relevant today.

- Four types of medical standards have been identified and are defined as follows:



Medical Care Standards... Types

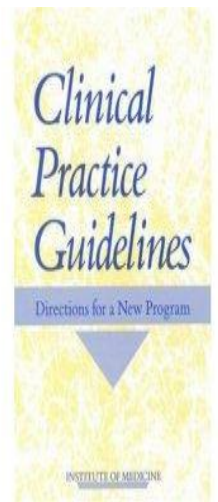
1- Standards of quality

Statements of the minimum acceptable level of performance or results, what constitutes excellent performance or results, and the range in between.



2- Medical (or clinical) practice guidelines

Systematically developed statements to assist practitioners in their decision making in specific clinical settings.

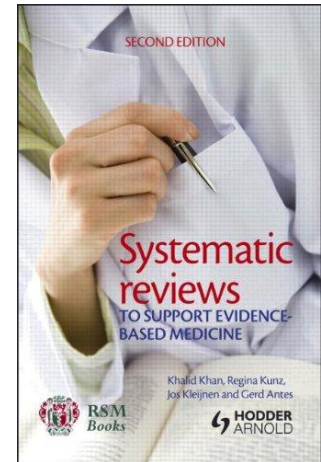




Medical Care Standards... Types

3- *Medical review criteria*

Statements used to assess the appropriateness of specific decisions, services, and outcomes in the delivery of health care.



4- *Performance measures*

Specific measures of a quantitative nature that estimate or monitor compliance with medical quality standards, medical practice guidelines, and medical review criteria by health care professionals.





Standardization Enablers

- ✓ The increasing interest in the **quality of clinical practice**
- ✓ **Medical liability** becoming an important phenomenon
- ✓ The increased adoption of **TQM & CQI principles**
- ✓ The increased adoption of **computerized patient record**
- ✓ The global movement towards the use of **integrated systems & managed care plans** for care delivery
- ✓ **Sponsors of managed care plans and third party payers** relying increasingly on medical standards of care for determining appropriate & cost effective care
- ✓ The currently evolving global **leadership role of AHRQ** in addressing patient safety issues that rely heavily on medical standards for resolution



The Origin of Medical Care Standards

1- Standards From Within:

The Medical Profession & Its Specialties & Societies

Constitutes the major engine for the development of medical standards of care

2- Standards From Without:

Third-Party Payers & Health Services Research

Third party payers:

- Look for standards to reduce unnecessary health care services
- Develop both coverage policy & medical review criteria using medical standards

Health Services Research:

- Played a crucial role in the evolution of medical standards
- Adopted TQM & CQI principles of quality management which strive to reduce variation in outcomes of care through standardization & continuous improvement



*Standardization
&
JCI Accreditation*



1- JCI Standards of Quality & Safety



JCI standard is a statement of the safety and the quality expected

JCI standards define the performance expectations, structures, or functions that must be in place for providing safe, effective and well-managed patient care and healthcare organization.



JCI STANDARDS

Patient-Centered Standards

*Access to Care and
Continuity of Care*

Patient and Family Rights

Assessment of Patients

Care of Patients

*Anesthesia and Surgical
Care*

*Medication Management
and Use*

*Patient and Family
Education*

Health Care Organization and Management Standards

*Quality Improvement and
Patient Safety*

*Prevention and Control of
Infections*

*Governance, Leadership, and
Direction*

*Facility Management and
Safety*

*Staff Qualifications and
Education*

Management of Information

International Patient Safety Goals

IPSG 1: *Identify Patients
Correctly*

IPSG 2: *Improve Effective
Communication*

IPSG 3: *Improve the Safety of
High Alert Medications*

IPSG 4: *Ensure Correct-Site,
Correct-Procedure, Correct-
Patient Surgery*

IPSG 5: *Reduce the Risk of
Health Care-Associated
Infections*

IPSG 6: *Reduce the Risk of
Patient Harm Resulting from
Falls*



Joint Commission International Standards

- Set optimum, achievable expectations
- Focus on the patient
- Stimulates continuous improvement
- Designed to be interpreted/surveyed within the local culture and legal framework





2- JCI Requires Guidelines for Guiding Hospital Clinical Care

Standard GLD. 11.2

Department/ service leaders select and implement clinical practice guidelines, and related clinical pathways, and/ or clinical protocols, to guide clinical care.



Why Does JCI Require Selection & Implementation of Clinical Practice Guidelines?

JCI requires selection & implementation of clinical practice guidelines and the related clinical pathways and protocols to ensure:

- ✓ Standardizing clinical care processes
- ✓ Reducing risks within care processes, particularly those associated with critical decision steps
- ✓ Providing clinical care in a timely, effective manner using available resources efficiently
- ✓ Consistently delivering high-quality care using evidence-based practices



JCI Required Process When Selecting and Implementing CPGs

Intent of GLD. 11.2

CPGs and any related clinical care pathways and clinical protocols relevant to the hospital's patient population and mission are:

- a) Selected from among those applicable to the services and patients of the hospital (mandatory national guidelines are included in this process, if present);
- b) Evaluated for their relevance to identified patient populations;
- c) Adapted when needed to the technology, drugs, and other resources of the hospital or to accepted national professional norms;

....continue



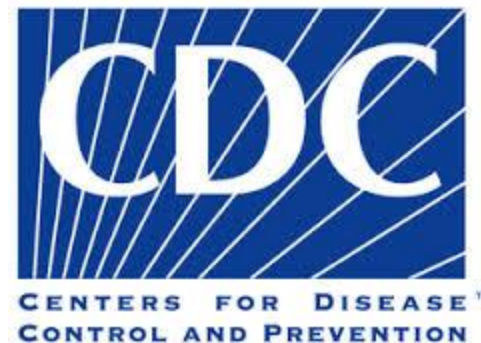
JCI Required Process When Selecting and Implementing CPGs

- d) assessed for their scientific evidence and endorsement by an authoritative source;
- e) formally approved or adopted by the hospital;
- f) implemented and measured for consistent use and effectiveness;
- g) supported by staff trained to apply the guidelines or pathways; and
- h) periodically updated based on changes in the evidence and evaluation of processes and outcomes.



JCI Cites References for Globally Recognized Guidelines

References of various types of guideline are cited in the text of the standard's intent and are listed at the end of the applicable standard chapter.





Examples of guidelines required by JCI

- **Standard IPSG.5**

The hospital **adopts and implements evidence-based hand-hygiene guidelines** to reduce the risk of health care–associated infections.

Illustration References for guidelines given in the intent statement:

Intent of IPSG. 5

..... Internationally acceptable hand-hygiene guidelines are available from the World Health Organization (WHO), the United States Centers for Disease Control and Prevention (US CDC), and various other national and international organizations.

Measurable Elements of AOP.5.6

.....

4. The laboratory **has and follows written guidelines** for evaluation of all reagents to provide for accuracy and precision of results.



Examples of guidelines required by JCI

Measurable Elements of AOP.6.6

.....

3. All supplies are stored and dispensed according to guidelines.

Standard COP.3

The care of high-risk patients and the provision of high-risk services are **guided by professional practice guidelines**, laws, and regulations.

Intent of COP. 3

Policies, guidelines, and procedures for care must be tailored to the particular at-risk patient population or high-risk service to be appropriate and effective in reducing the related risk



3- JCI Requires the use of criteria



Measurable Elements of IPSG.6:

2- The hospital implements a process for the initial and ongoing assessment, reassessment, and intervention of inpatients and outpatients identified as at risk for falls **based on documented criteria.**

Standard ACC.2.3:

Admission to units providing intensive or specialized services is **determined by established criteria.**



3- JCI Requires the use of criteria

Standard ACC.2.3.1

Discharge from units providing intensive or specialized services is **determined by established criteria.**

Measurable Elements of ACC.2.3

- 1** The hospital has **established entry and/or transfer criteria** for admission to intensive and specialized services or units, including research and other programs to meet special patient needs.



3- JCI Requires the use of criteria

Standard COP.8.4

The transplant program uses organ-specific transplant clinical **eligibility, psychological, and social suitability** criteria for transplant candidates.

Measurable Elements of GLD.1

3- The document(s) describes how the governing entity will be evaluated and the **criteria approved for the evaluation process.**

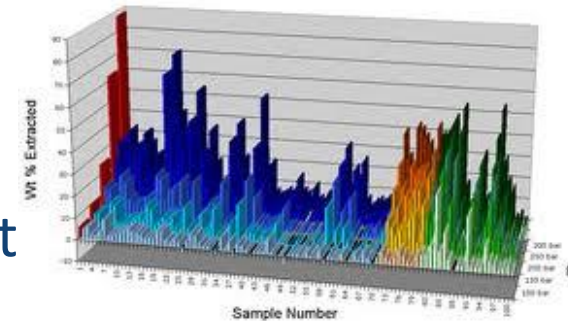


4- JCI Requires Selection of 5 Standardized Performance Measures from Its Library of Measures

JCI Library of Measures (LOM)

Accrediting organizations worldwide like JCI are making decisions based on objective data

JCI requires its accredited organizations to select from a library of already tested, validated measures to begin the process of reducing the variation in what JCI accredited organizations measure and to begin the process of standardizing a set of measures across all JCI accredited organizations.





JCI Library of Measures (LOM)

Standardized Measure Sets:

- ✓ Evidence-based and well-recognized hospital inpatient clinical care measures
- ✓ Each measure set contains multiple process and/or outcome measures



JCI Library of Measures (LOM)

10 Measure Sets

- Acute Myocardial Infarction (AMI)
- Heart Failure (HF)
- Stroke (STK)
- Children's Asthma Care (CAC)
- Hospital-Based Inpatient Psychiatric Service (HBIPS)
- Nursing-Sensitive Care (NSC)
- Perinatal Care (PC)
- Pneumonia (PN)
- Surgical Care Improvement Project (SCIP)
- Venous Thromboembolism (VTE)



Moving from

a paradigm of autonomous professional decision making

to

a paradigm of collective decision making

based on empirically derived standards of care



Difficult Questions & Advices

With this global movement come increasingly difficult questions as medical standards now come from a multitude of sources

- Are the processes used in setting standards open, transparent, and designed in a way to marshal the best information to guide clinical practice? ---- **Use credible, internationally recognized agencies when selecting your standards of care, guidelines, criteria and performance measures**
- Should standards from “within” the profession agree with standards from “without”?---- **Set national committees that includes all parties of standards setting in your country (regulatory body, accrediting body, third party payers & medical professionals) & hold national conferences for reaching a consensus among all**



THANK YOU

QUESTIONS?