

# Health Care Equity Certification Program Overview

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# Today's Objectives

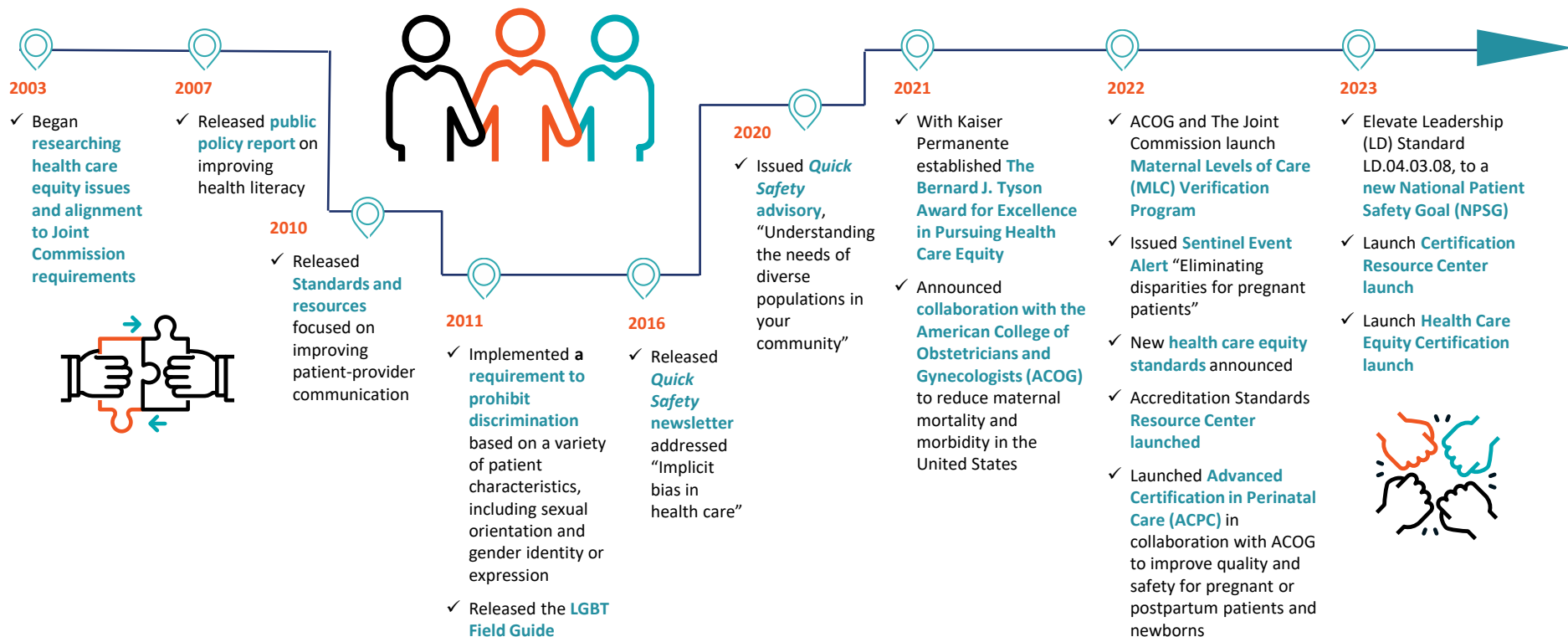
- Review of current and past health care equity initiatives
- Introduction to Health Care Equity Certification
  - Certification program requirements
  - Eligibility requirements and next steps
- Question and answer

Transforming health  
care into a safer,  
better and caring  
system for everyone  
through  
accreditation,  
certification and  
evaluation.

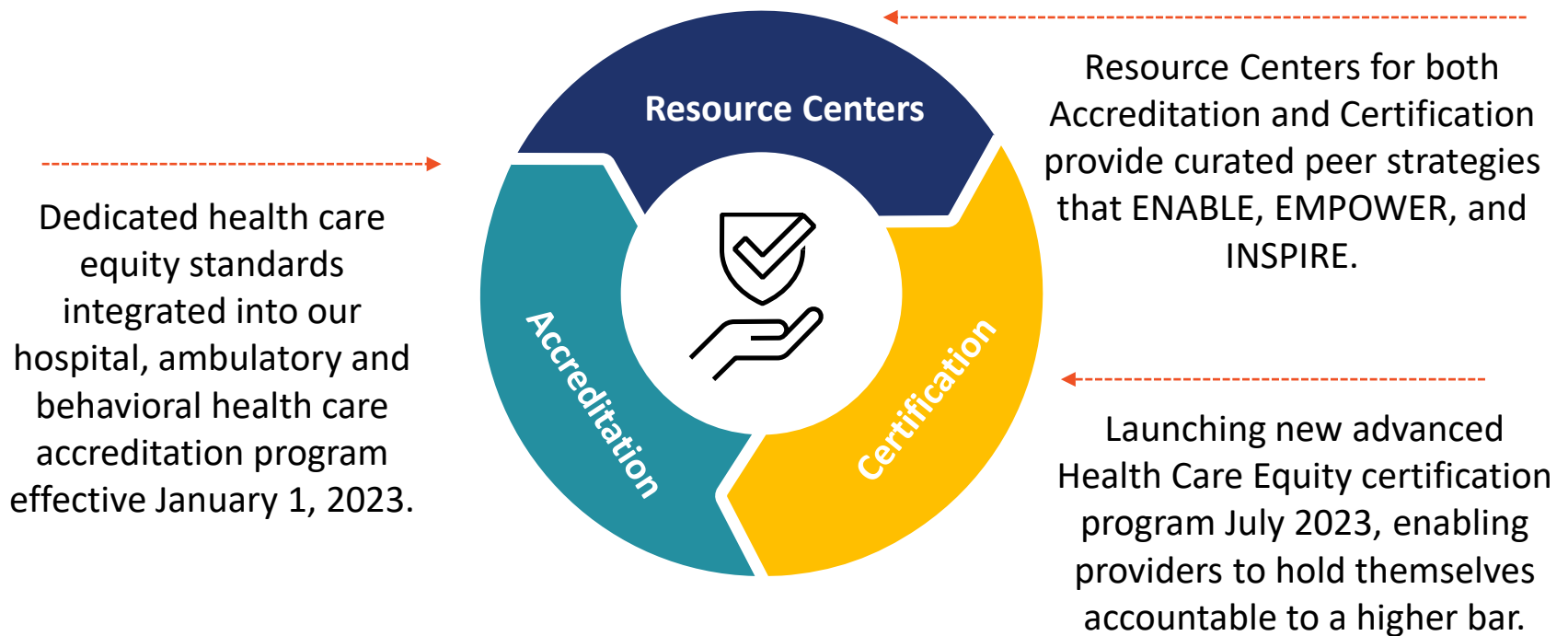


# Our Journey to Advance Equity

Our vision is that all people always experience safe, high-quality health care



# Advancing Health Care Equity



# Program Requirements & Resources

# Health Care Equity is a Quality and Safety Priority

- Health care equity is a quality-of-care problem.
- Needs a similar approach to other patient safety priorities:
  - Understand the root causes
  - Address with targeted interventions

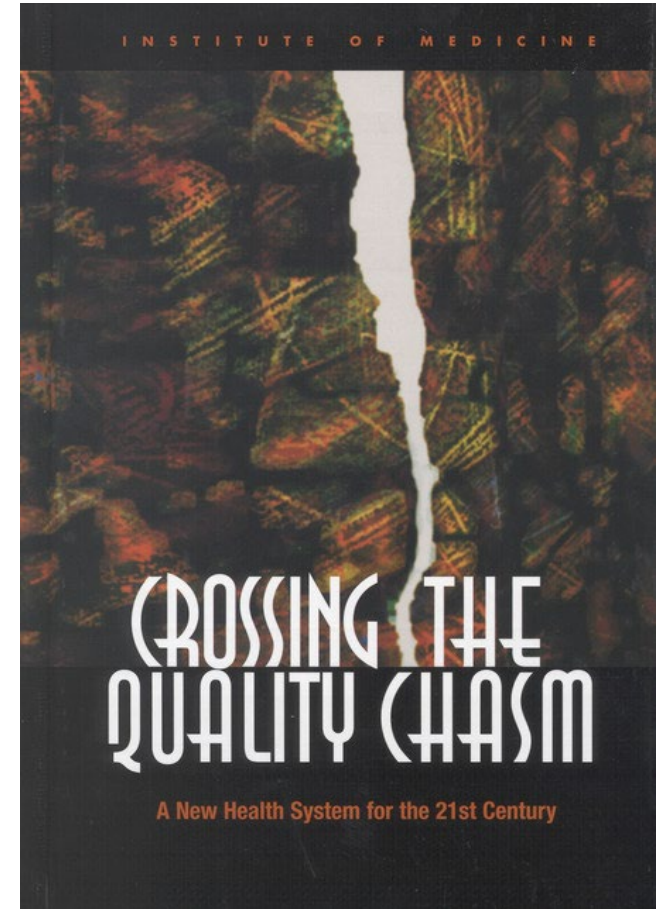


# Equity as Quality Domain

## 6 Domains of Quality:

- Safety
- Effectiveness
- Patient-Centeredness
- Timeliness
- Efficiency
- **Equity**

Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.





# Long-standing Joint Commission Standards



- Collect race and ethnicity data
- Collect preferred language data
- Right to effective communication
- Provision of language services
- Qualifications for language interpreters
- Informed consent
- Patient participation in care
- Patient education meets patient needs
- Access to a support individual
- Ensure care that is free from discrimination



# Educational Health Care Equity Efforts



Research Study: *Hospitals, Language, and Culture: A Snapshot of the Nation*

Public Policy White Paper: *What Did the Doctor Say?:” Improving Health Literacy to Protect Patient Safety*

Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care: A Roadmap for Hospitals

Health Equity and Meeting the Needs of the Lesbian, Gay, Bisexual, and Transgender (LGBT) Community



# New Accreditation Requirements (LD.04.03.08)

- Applicable to HAP, CAH, selected services in AHC/BHC
- Implementation (January 2023)
- Will move to NPSG.16.01.01 (July 2023), same intent, customer resources



## Designate a leader (EP 1)

- Primary role or part of broader responsibilities



## Assess health-related social needs (EP 2)

- Organizations choose which needs to assess, which patients



## Stratify quality and safety data (EP 3)

- Organizations choose which measures, sociodemographic characteristics



## Create an action plan (EP 4)

- Adjust when the action plan does not achieve or sustain the goal (EP 5)



## Keep stakeholders informed (EP 6)

- At least annually, update internal stakeholders

# 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



LD.04.03.08, EP 1

Assess Health-Related Social  
Needs



LD.04.03.08, EP 2

Use Data to Identify Disparities  
Across Patient Groups

LE

Prioritize, Plan and Take  
Action



LD.04.03.08, EP 4

Monitor Health Care Equity  
Progress



LD.04.03.08, EP 5

Inform S

LE

Evidence-Based  
Interventions



Specific clinical topics



### 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 Health Care Equity Certification Program



- Recognize organizations that go beyond the basic accreditation requirements and strive for excellence
- Voluntary program for hospitals, separate from accreditation
- Focus on health care equity
- Certification requirements build upon on long-standing and recently released health care equity accreditation requirements
- Plan to accept applications in July 2023

# Certification Domains



## Leadership

- Strategic priority
- Board involvement



## Collaboration

- Engage patients
- Engage community organizations



## Data Collection

- Community
- Patients
- Staff



## Provision of Care

- Workforce diversity
- Staff training
- Patient-provider communication
- Patients with disabilities
- Health-related social needs



## Performance Improvement

- Improve services (experience of care, quality metrics)
- Improve staff diversity, equity, and inclusion

## **Health care equity is a strategic priority for the organization.**

- Describes in its strategic plan its goals for reducing health care disparities and providing equitable care to all patients.
- The board reviews and approves the organization's strategic plan to address health care equity.
- The organization allocates financial resources to achieve and sustain its goals to reduce health care disparities and provide equitable care, treatment, and services.

# Collaborations

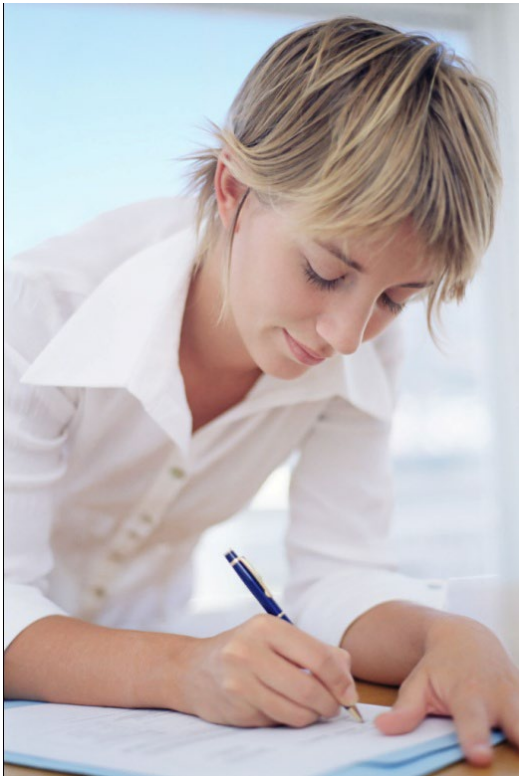
**The organization collaborates with patients, families, caregivers, and community organizations to support health care equity.**

- The organization collaborates with patients, families, and caregivers to identify patient-level needs to address
- The organization collaborates with community organizations to identify community-level needs to address





# Data Collection



## Three Areas

- Community – patients served or surrounding area
- Patient – self-reported from as many patients as possible
- Staff and Leaders – self-reported

# Data Collection: Community

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

- The organization reviews 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 (Race, Ethnicity, Language)

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

- The medical record contains the patient's race and ethnicity.
  - May expand ethnicity categories
- The medical record contains the patient's preferred language and need for a language interpreter.
  - Document use of interpreter or if patient receives care from staff qualified to communicate in the patient's language

# Data Collection: Patients (HRSN)

The medical record contains information about the patient's health-related social needs. At a minimum, this includes:

- Difficulty paying for prescriptions or medical bills
- Food insecurity
- Housing instability
- Interpersonal safety
- Transportation needs
- Utility difficulties



# Data Collection: Patients (Disabilities)

The medical record contains information about the patient's physical, mental, communication, or cognitive disabilities that require accommodation and the accommodation needed.

- Collect information at every admission or confirm information documented from a prior admission has not changed



# Data Collection: Patients (Discrimination and Bias)

The organization identifies incidents and perceptions of discrimination and bias experienced by patients.

- Data may be collected via patient surveys (for example, experience of care surveys), the organization's complaint resolution process, patient and family advisory committee, or focus groups.

# Data Collection: Staff

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

- The organization collects self-reported race and ethnicity information from its staff and leaders to understand the diversity of the organization.
- The organization collects information about the languages spoken by its staff and leaders to identify opportunities to provide language-concordant care.
- The organization identifies incidents and perceptions of discrimination and bias experienced by its staff and leaders.

# Provision of Care

## Five Areas

- Workforce diversity
- Staff training
- Patient-provider communication
- Patients with disabilities
- Health-related social needs





**The organization supports diversity, equity, and inclusion for its staff and leaders.**

- The organization prohibits discrimination against its staff and leaders
- The organization's policies and procedures address the recruitment and retention of staff and leaders that reflect the diversity of the community and patient population.
- The organization has a process to address 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

- Staff receive education about the organization’s rationale for improving health care equity.
  - Organizations determine which topics to include in educational materials (i.e., the relationship between health-related social needs and health care disparities, the history of structural racism in health care, or the role of implicit bias in care delivery)

# Provision of Care: Staff Training (2)



- Staff that collect data directly from patients receive training about sensitively obtaining information about race and ethnicity, preferred language, health-related social needs, disabilities
- Staff that communicate with patients and families receive training about:
  - Accessing and communicating through an interpreter
  - Using auxiliary aids to meet the needs of patients with communication disabilities

# Provision of Care: Patient-Provider Communication



## **The organization communicates effectively with patients and families.**

- The organization has a process to assess the qualifications of its language interpreters.
  - External organization or internal process (language proficiency assessment, and review training, education, experience)
- The organization has a process to assess the language proficiency of staff who communicate in the patient's preferred language.
- The organization identifies the patient's health literacy needs and provides educational material in a manner the patient and family understand.

# Provision of Care: Patients with Disabilities



**The organization accommodates the needs of patients with physical, mental, communication, or cognitive disabilities.**

- The organization provides care, treatment, and services in a manner that accommodates the needs of patients with physical, mental, or cognitive disabilities.
- Examples include removing physical barriers or providing accessible equipment, providing additional time for health care discussions, or presenting written information in alternative formats.

# Provision of Care: Patients with Disabilities (2)

- The organization provides auxiliary aids or services to address the needs of patients and families with communication disabilities.
- The organization has a process to address the written communication needs of patients that have low vision.



# Provision of Care: HRSNs

**The organization addresses the HRSNs of its patients.**

- The organization reviews the patient's HRSNs to determine whether modifications to the plan for care are necessary.
- The organization collaborates 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, treatment, and services.**

- The organization reviews the sociodemographic data of its patients for missing or inaccurate information in improve its data collection process.
- The organization reviews data from its complaint resolution process
- The organization stratifies its experience of care measures by the sociodemographic characteristics available
- The organization monitors its use of language interpreters to identify the need to develop or expand its language access services.



# Performance Improvement: Services (2)



The organization stratifies at least 3 quality and/or safety measures for priority clinical conditions by the sociodemographic characteristics of its patients to identify and address health care disparities.

- A list of examples of priority clinical conditions and measures will be available in the Certification Resource Center on the website.
- Organizations can also use any other measures they have identified as priorities in their 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.**

- The organization compares the race, ethnicity, and the languages spoken by its staff and leaders to the race, ethnicity, and the languages spoken by its community to identify opportunities to increase diversity and racial, ethnic, and language concordance.
- The organization stratifies data from its culture of safety data or employee opinion surveys using the race, ethnicity, and language information for its staff and leaders to identify concerns and opportunities to improve equity and inclusion.

# For More Information



<https://www.jointcommission.org/our-priorities/health-care-equity/health-care-equity-prepublication/>

## Health Care Equity Certification

### Introducing a New Certification

Like you, we believe all people deserve access to safe, quality care.

While systemic inequities exist in the quality and safety of the patient care experience — including gaps in interpreting services and access to telehealth — we believe there is a path forward.

This new, voluntary certification program provides the structure to guide your organization's journey to achieving health care equity. It demonstrates an organization's commitment to advancing its efforts to achieve health care equity.

The advanced certification program requirements build upon the Joint Commission's long-standing accreditation standards supporting health care equity and the recently released requirements to reduce health care disparities.

### Request the Pre-Publication Standards

The pre-publication standards are now available by request. Please complete the following form and a member of our team will be in touch.

\* FIRST NAME:

\* LAST NAME:

\* TITLE:

- Certification Resource Center (April 2023)
- Applications open (July 2023)

# Eligibility Criteria & Next Steps

# Eligibility Criteria



1. The hospital is located in the US, operated by US government, or operated under charter of US Congress
2. A Joint Commission accredited hospital or a hospital compliant with applicable federal laws, including Medicare Conditions of Participation
3. The hospital collects data (as indicated in the performance improvement chapter) to improve the provision of equitable care, treatment and services
  - Four months of data must be available at the time of onsite review (for recertification reviews 24 months of data will be required)
4. Hospitals with multiple sites under the same Medicare provider number (CCN) may choose to apply for certification for each individual site or all sites
  - For each site to be certified, they must be able to independently meet all requirements for Health Care Equity Certification
  - Certification will be awarded at the site level

# Steps to Becoming Certified



## Contact The Joint Commission

- Email [certification@jointcommission.org](mailto:certification@jointcommission.org)
- [Review program requirements](#)
- Work with dedicated Joint Commission staff to prepare



## Preparation

- Assess compliance and potential gaps to program requirements
- Review readiness resources
- Prepare for onsite review using Review Process Guide
- Determine ready date for certification review
- Complete a [pre-application](#) to become certified



## Onsite Review

- 30 days advance notice
- Overview of health equity initiatives, patient tracer activity, data use session, education & competence assessment, medical staff credentialing & privileging session



# Educational Session on Health Care Equity Certification

Join us for a virtual deep dive into the new Health Care Equity Certification program. This new certification program provides a framework to guide your organizations journey to achieving health equity.

**Save the date!**  
**Tuesday, May 23, 2023**  
**9:00 – 11:00 AM CT on Zoom**

*Agenda and registration will be available soon.*



General Inquiries: [certification@jointcommission.org](mailto:certification@jointcommission.org)

Standards Inquiries: <https://dssminquiries.jointcommission.org>



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