Certification Review Template Agenda

The Joint Commission **Health Care Equity Certification Agenda**

One Reviewer for One Day

| Time | Activity & Topics | Suggested Organization Participants |
|------------------|--|--|
| 8:00-8:15 a.m. | Opening Conference Introductions Brief review of agenda | Health care equity leader Organization's certification |
| 8:15-9:00 a.m. | Orientation to Health Care Equity Initiatives Topics to be covered include: Organization's goals to improve health care equity Health care equity leadership and support Patient population and community demographics (e.g., age, race, ethnicity, languages spoken) Organization collaboration with patients, families, and caregivers and external organizations to identify patient and community-level needs Process to assess and address health-related social needs Accommodation of patient physical, mental, communication, or cognitive disabilities Organization support for diversity, equity, and inclusion for its staff and leaders Q & A Discussion | contact Organization clinical and administrative leadership Others at organization's discretion |
| 9:00-9:30 a.m. | Reviewer Planning & Protocol Review Session Please have the following information available for the Reviewer Planning Session: A current list of patients Order sets, care plans, as applicable Schedule for interdisciplinary team meetings or rounds on patients See Health Care Equity – Information Request | Organization representative(s) who can facilitate patient selection and tracer activity |
| 9:30 -12:30 p.m. | Individual Tracer Activity Tracer activity occurs where the patients are receiving care, treatment and services. Begins with interactive review of patient record(s) with staff actively working with the patient. Continues with tracing the patient's path, visiting different areas, speaking with team members and other organization staff caring for or encountered by the patient. Review how patients' health-related social needs are assessed and addressed | Organization team members and other staff who have been involved in the patient's care, treatment or services Team members who can facilitate tracer activity including escorting the reviewer through the clinical setting following the |

Disclaimer: Recording or transcribing this review is strictly prohibited, including the recording and transcribing that can occur with video conference applications. Discovery of any recording activities will result in the immediate cessation of the review and denial of certification.

| | Evaluate how the needs of patients with physical, mental, communication, or cognitive disabilities are identified and accommodated Explore how providers communicate with patients in their preferred language for discussing health care. Review the process to identify and address patient incidents or perceptions of discrimination or bias (including a patient grievance/complaint, if received). Includes a patient and family interview if they are willing to participate. At the conclusion of the tracer, the reviewer will communicate to the organization leaders and care providers: Specific observations made Issues that will continue to be explored in other tracer activity Need for additional records to verify standards compliance, confirm procedures, and validate practice Closed record review that may be necessary | course of care for the patient |
|-----------------|--|--|
| 12:30-1:00 p.m. | Reviewer Lunch | |
| 1:00-2:00 p.m. | System Tracer - Data Use Topics to be covered include: Health care equity performance improvement plan Review of community-level data Collection of patient-level data and review for missing/inaccurate information Collection of data from staff and leaders Review of complaint resolution process Experience of patient care measures stratified by sociodemographic characteristics Language interpreter use Three quality and/or safety measures for priority clinical conditions stratified by sociodemographic characteristics (e.g., cardiovascular outcomes, cesarean birth rates for nulliparous women with term, singleton baby in vertex position [NTSV], hospital acquired conditions, pressure injury rates, etc.) Comparison of the race, ethnicity, and languages spoken by staff and leaders to the race, ethnicity, and languages spoken by the community Employee opinion survey/culture of safety survey results stratified by race, ethnicity, and language information | Health care equity leader Administrative and clinical leadership involved in the health care equity performance improvement plan Others at organization's discretion |

Disclaimer: Recording or transcribing this review is strictly prohibited, including the recording and transcribing that can occur with video conference applications. Discovery of any recording activities will result in the immediate cessation of the review and denial of certification.

| 2:00-3:00 p.m. | Education & Competence Assessment This session focuses on staff education and completion of applicable competencies: Rationale for improving health care equity Collection patient sociodemographic data in a sensitive manner Use of language interpreters and auxiliary aids Process to assess the qualifications of language interpreters Process to assess the language proficiency of staff and physicians who communicate in the patient's preferred language for discussing health care | Individuals responsible for the organization's human resources process that supports health care equity Individuals responsible for education and training of staff Individuals responsible for assessing staff competency (e.g., interpreters, staff communicating directly with patients) |
|------------------|--|---|
| 3:00 – 4:00 p.m. | Summary Discussion/Report Preparation This time is reserved for a final discussion prior to the reviewer's report preparation and the exit conference. | Will vary; as requested by the review |
| 4:00-4:30 p.m. | Exit Conference Reviewer presentation of certification observations and requirements for improvement | Organizational leadership Others at the discretion of the organization |

Note: This agenda is a guide and may be modified based on organizational need and reviewer discretion.