

The Role of Joint Commission Certification in Helping to Build a Palliative Care Program



“Some providers did not have a solid definition of palliative care. Working with accreditation agencies, like The Joint Commission, helped define palliative care, as well as the standards for a high-quality provider, through use of the certification.”

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When Blue Shield of California saw a need to address not just advanced care planning but more over a comprehensive patient and family-centered care which prioritizes quality of life, they turned to palliative care. Through palliative care, symptoms of serious illness, physical, intellectual, emotional, social, and spiritual needs are addressed. And in addressing these needs the experience of the patient and family are significantly improved. Blue Shield of California also wanted to take this service one step further and ask providers who were delivering this service to go beyond the level of a self-defined palliative care.

Because palliative care is not a defined level of care, service or plan benefit, there were challenges in defining the service. This is where Joint Commission Community-Based Palliative Care (CBPC) certification plays a role.

Joint Commission Community-Based Palliative Care (CBPC) certification, the first of its kind in the industry, recognizes the provision of palliative care by an interdisciplinary care team that ensures the patient remains safely and comfortably in his or her residence. Palliative care comprises specialized home care services for patients with serious illness, with a goal to improve the patient’s quality of life by relieving the symptoms, pain, and stress of the illness. This certification includes standards for a wide range of care aspects including leadership, patient care, human resources as well as resident rights. For Latona-Ugbeme, “the standards help hold providers accountable to an expressed definition of palliative care and improve the shared understanding of quality between the plan and the provider.”

Joint Commission CBPC certification requires organizations to measure a minimum of four performance measures with a minimum of two of the four measures, being clinical. The organization must also collect performance measure data, analyze the data internally with control charts, or other appropriate applicable performance improvement tools. Joint Commission standards then require organizations to show monthly data points which are to be used in performance improvement activities. “Joint Commission standards allow organizations the flexibility to select the measures they feel would be the most beneficial to evaluate,” said Gary Bachrach, Executive Director, Business Development, Joint Commission Home Care Services, which includes palliative care.

In addition to performance measures the palliative care standards require patients have an initial assessment to include assessment of pain, clinical aspects of care, function, psychosocial, psychological needs as well as cultural, religious and spiritual needs. Where available, The Joint Commission recommends organizations use a standardized scale for these measurements.

Other benefits for health plans, when using a palliative care certification, is that the evaluation of quality by an accrediting organization can reduce the administrative burden to the plan. In this way the palliative care certification functions as a proxy for quality and can also replace the need for a survey from the health plan. The Joint Commission performs these surveys on-site, and during the COVID-19 period, has also adopted a virtual survey process to minimize the health risks and improve the safety of both surveyors as well as the staff of the surveyed organization. With these functions performed by the accrediting organization, it can save the health plan valuable time and allow the health plan to redirect resources.

As for developing a health plan requirement for palliative care certification, the key is engagement with the providers. Establishing timelines with ample lead time before the requirement goes into effect gives organizations the opportunity to select their accrediting organization as well as time to prepare to successfully meet the requirements. Education is also paramount. The Joint Commission partnered with Blue Shield of California and hosted in-person workshops and on-demand content to help providers bridge gaps in knowledge about Blue Shield of California's palliative care program and CBPC certification. The Joint Commission also made tools and resources available to assist with the application and survey preparation processes.

This type of provider engagement paid off. Early in 2019 only 28% of Blue Shield of California's providers were palliative care certified. That number increased by 47%, with 75% of the contracted providers achieving certification or starting the process to certification with a completion goal by the January 1, 2020 date. Blue Shield of California defined "starting the process" as submission of an application for certification to one of the accreditation organizations and has a payment receipt.

Using an accrediting organization's certification program, like The Joint Commission's CBPC certification, has helped to define the service, standards of care and coordinate a more defined palliative care program to Blue Shield of California members.

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For more information about this program, please contact Kimberly Clawson, Senior Associate Director of Payor Relations at The Joint Commission, kclawson@jointcommission.org or Abisola Latona-Ugbeme, Program Manager, Advanced Illness & Palliative Care Healthcare Quality & Affordability, Blue Shield of California, Abisola.Latona-Ugbeme@blueshieldca.com.

Blue Shield of California is an independent member of the Blue Shield Association. The Joint Commission is independent of Blue Shield of California.