The Journey to Oncology-Specific Certification

by Karen Munter, MS, and Patti Jamieson-Baker, MSSW, MBA

he Cancer Institute at Alexian Brothers Hospital Network in Illinois embarked on its journey for oncology-specific certification in October of 2005. At that time, a representative from The Joint Commission (then JCAHO) came to our program and shared with us information on The Joint Commission Disease-Specific Care Certification program. We recognized two facts up front. First, diseasespecific certification focused on a standard of care. Second, the model was flexible and could apply to any disease management program.

Certification is awarded for two years with an Intracycle Evaluation Report at the one-year anniversary. To obtain this certification, a program must show compliance with standards, elements of performance, clinical practice guidelines, and performance measurement requirements outlined by The Joint Commission. Programs receive a Certification of Distinction upon a successful onsite review.

When we decided to go for oncology-specific certification, only two other cancer programs in the country had received certification. Our team looked forward to taking on the challenge and to having the opportunity to showcase our oncology program. We were also excited about becoming one of the first hospital networks in the country to apply for up to nine different disease-specific certifications at one time. Our oncology program applied for two certifications, one for each of our cancer programs located at our two acute care hospitals.

Why Disease-Specific Certification?

Although the certification process required an intense commitment of money and resources, cancer-specific certification offered several tangible benefits. For example, we saw this certification as a way to differentiate our cancer program and service line from our marketplace competitors. We also saw the certification process as a means of developing a more cohesive multidisciplinary cancer care team able to work together towards common goals-despite being located at two different facilities. As we worked through the certification process, we reviewed the use of our evidence-based clinical practice guidelines and gathered important benchmarking and outcomes data. The certification process gave us the opportunity to address many questions related to our oncology service line: Are we providing the best care available? Are our patients experiencing a positive outcome?

Getting Started

The key to our success stemmed from assembling a multidisciplinary team of oncology staff from two of our hospitals. This group of about 25 staff members had to work together as a cohesive unit to prepare for separate certification reviews at two facilities. A team leader was responsible for:

- Coordinating all the meetings
- Completing all necessary paperwork
- Acting as a liaison between The Joint Commission and the cancer program
- Motivating the multidisciplinary team during the intense certification process.

The team leader position was a challenging one; the staff member had additional job responsibilities that required attention during the certification process.

The Alexian Brothers and St. Alexius Medical Centers applied for certification in five areas: Oncology, Bariatrics Surgery, Heart Failure, Joint Replacement, and Acute MI. The Alexian Brothers Behavioral Health Hospital applied for certification in four diseases: Major Depression Disorder, Eating Disorders, Self-Injury, and Chemical Dependency. All diseases were awarded certification by January of 2007. Due to the number of diseases applying for certification, a network approach was critical. Our solution: the formation of a working group comprised of team leaders from each discipline. For 12 months, this group met monthly to help each other understand compliance standards, prepare

Key Benefits of Oncology-specific Certification

- 1. The development of a more cohesive multidisciplinary team that can work together towards common goals.
- 2. The opportunity to review how your cancer program uses evidence-based clinical practice guidelines.
- 3. The opportunity to gather important benchmarking and outcomes data related to your cancer service line.
- 4. An avenue for benchmarking your program data and performance measures against standards set by The Joint Commission.
- 5. A vehicle for change, allowing you to streamline and improve your cancer service line.
- 6. A means of demonstrating the high quality of care you provide to your cancer patients
- 7. A tool for marketing your cancer program to patients and referring physicians and for differentiating your cancer program from your marketplace competitors.

for review day, and provide moral support. The group realized early on that support from hospital administration at all locations was imperative. Fortunately, the decision to pursue oncology-specific certification was made at the senior management level, and they backed our efforts from preparation to review day and beyond.

The Process

The entire disease-specific certification process took 14 months, from the initial contact to the review day. This new certification program was a learning experience for our cancer program staff, particularly in the areas of communication, follow-through, and expectations. Although we had many positive experiences, the journey to certification was not without its challenges. Staff at The Joint Commission worked hard to motivate us to keep pursuing the diseasespecific certification.

At the beginning, we had some basic questions about the certification program. Attendance at The Joint Commission's one-day seminar helped answer questions about: 1) mandated standards, 2) definitions in the required guidelines, and 3) implementation of the National Patient Safety Goals.

Securing our review day took some time because our two acute care hospitals were going for certification in five different disease sites. Once the date was set, however, The Joint Commission did a great job of answering our questions on how to prepare for that day. One challenge was that the oncology program had two review days in the same week. The reviews were carried out by two different individuals with unique styles. Staff that worked at both facilities experienced additional stress during this week, but overall our staff found the experience rewarding.

Oncology-specific certification strengthened our relationship with The Joint Commission, and we continue to work effectively as a team to improve the quality and safety of our care.

Currently, we are gearing up for our Intracycle Review, which is completed one year after the certification is awarded. Our team leaders continue to meet monthly, as they have for the past year, to aid each other in preparation. To help in this effort and to ease the pressure on our staff, we have appointed a clinical quality data manager. This person assists the team in collecting data for our indicators at each facility. Every other month, this team meets to review all data and to help each other in the development of action plans as needed. This group reports quarterly to the multidisciplinary certification team. The information is then presented to our governing body, the Cancer

Patient Benefit One Case Study

he Cancer Institute at Alexian Brothers Hospital Network has already seen some marked improvements on diagnostic tools that were implemented due to its oncology-specific certification. For example, literature shows the benefit of having a PET scan for all newly diagnosed non-small cell lung cancer patients. We adopted this evidence-based practice and implemented weekly lung conferences to aid in patient monitoring. Here's how these changes improved one patient's lung cancer diagnosis.

Recently, a female lung cancer patient had a CAT scan, which showed possible cancerous growths. By running a PET scan prior to treatment, we identified scar tissue from a previous injury. This information changed her diagnosis from a potential stage III or IV to stage I or II. Through this one indicator, we can significantly improve the decision-making process for treatment, as well as ensure appropriate staging.



Committee, the quality departments, and then onto the Medical Executive Committee and the Board of Directors at each facility. This process ensures that we are all on the same page and aware of any changes that need to be made within the programs that have received disease-specific certification.

Lessons Learned Along the Way

For programs interested in The Joint Commission oncology-certification program, we offer a few tips.

First, understand the time commitment required. Our cancer program staff worked many additional hours on top of their full-time jobs. And even today, as we prepare for the Intracycle Review, the necessary data collection is additional work for our already busy staff.

Second, if your cancer program is part of a large hospital or health network, consider going for more than one disease-specific certification at a time. The certification process will take longer and be more complex, but we found one of the most positive outcomes in the certification process to be the development of our multidisciplinary working group. This group of professionals worked well together as a team, learned from each other, supported each other, and continues to accomplish common goals today.

Third, use your oncology-specific certification as a constant measure to evaluate your program and care. It can help you identify areas of your program that need adjustments or that can be streamlined. For example, the lack of lymphedema referrals made for breast cancer patients was a process that needed to be addressed. Literature supported the need for this practice, but the referrals were not being made, so we reviewed the current process and made changes, making it easier for a physician to make the referral. We continue to address this situation even today, a constant reminder that evaluation and adjustments to our services need to be done on a regular basis.

Fourth, market your oncology-specific certification to potential patients and community physicians. This certification is a testament to the quality care you provide, as well as your dedication to patient safety.

Finally, understand that communication is a critical element for a successful certification. Clearly identify and communicate your cancer program's goals, objectives, benchmarks, and measurement indicators to:

- Your entire organization
- ✓ Your payers—both public and private
- ✓ Your patients
- ✓ Your community, including potential patients and their family members
- Referring physicians
- External entities, such as The Joint Commission.

Ultimately improved patient outcomes, safety, and satisfaction are what the entire certification process is about. If your program can be successful with those key elements, then the rest of your journey will be easy.

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Alexian Brothers Hospital Network Our Program at-a-Glance

Alexian Brothers Hospital Network in Illinois includes Alexian Brothers Medical Center, St. Alexius Medical Center, Alexian Brothers Behavioral Health Hospital, and Alexian Rehabilitation Hospital. The Cancer Institute at Alexian Brothers Hospital Network has two locations: St. Alexius Medical Center and Alexian Brothers Medical Center. The two cancer programs collectively see approximately 1,800 new cancer cases each year. The program has Comprehensive Community Cancer Center accreditation from the American College of Surgeons Commission on Cancer.





The excitement and pride of being awarded oncologyspecific certification has motivated staff to develop new ideas to support our patients and their families.



Alexian Brothers is proud of its quality improvement program, which monitors screening and treatment processes, patient satisfaction, and quality outcomes.