



When a new CEO came to this community hospital in Central New York, it had not been Joint Commission accredited in five years. The previous administration considered Joint Commission accreditation to be an expense rather than an investment. The new CEO described the culture of the hospital as fragmented, demoralized, and unfocused. The hospital began a dramatic turnaround led by the CEO and several of their key internal stakeholders.

Opportunities

Faced with the task of changing not only the hospital's culture, but also the level of quality and safety it provided its community, the CEO made an important ideological shift in the hospital's focus. "Investments in quality and patient safety are really investments in your financial performance,"

explained the CEO. The Vice President of Quality Management realized she needed help and support from a reliable standards expert in order to maintain positive growth.

Solutions

The hospital worked with Joint Commission Resources (JCR) and had a JCR Continuous Service Readiness® (CSR®) consultant visiting the hospital every other month at the beginning of their partnership. During each visit, different parts of the organization received miniature mock surveys, which involved tracers, staff interviews, and chart audits. The consultant then reported back on her findings and offered solutions to any shortcomings. These miniature mock surveys formed the foundation for improved and sustainable patient safety and quality processes. As a result of the hospital's hard work, the hospital achieved Joint Commission accreditation. In order to sustain their quality and safety transformation, the hospital maintains a close working relationship with their JCR consultant. "We didn't want to wait for a three year survey if there were changes in the field today," said the CEO. If the Vice President of Quality Management or other key internal stakeholders are concerned about an area of the hospital, or are planning a new initiative, they turn to their JCR consultant for advice and guidance. When executing a new process or program, the hospital waits for a few weeks or months after implementation, and then invites their JCR consultant to come onsite for a review. Overall, the hospital brings in their JCR consultant approximately once a quarter to review new and current policies, and to review any changes in Joint Commission requirements.

Outcomes

This close, cooperative, and educational partnership between the hospital and JCR has led to numerous positive outcomes. Staff and physicians now regularly use best practices to mitigate mistakes. This ideology has also led to a reduction in patient complaints and readmissions. The Vice President of Quality Management believes that the reduction in readmissions, hospital-acquired conditions, and complaints are the results of "providing evidence-based care to patients, based on CMS and Joint Commission standards." Overall, the staff culture at the hospital is more positive and confident. At the executive level, the C-suite has come to see their JCR consultant as a valuable asset to maintaining, and improving upon, the hospital's dramatic turnaround.

The use of Joint Commission Resources consultative technical or advisory services is not necessary to obtain a Joint Commission Accreditation award, nor does it influence the granting of such awards.

**Committed
to Quality**



CEO

"JCR's mission and vision are aligned with those of us in the field. That's a rarity today, and when you find it you embrace it, you encompass it, and you're just so thankful. We're a better organization after every consultation."

Vice President of Quality Management

"Joint Commission Resources consulting is a wonderful resource. The knowledge base is unbelievable, and having that extra set of eyes helping you to assess problem areas is invaluable."