The Joint Commission

- National Accrediting Body since 1951
  - Independent, private sector, not-for-profit
  - Accreditation is voluntary, onsite & data driven
- Accredit majority of hospitals (and all DoD/VHA)
- > 20 K accredited HCOs and Programs
- Major international presence
- Education, publishing and consulting arms
- Center for Transforming Healthcare (Solutions)
- Twelve programs recognized by government
Influenza Vaccination for Licensed Independent Practitioners and Staff

Revised Standard IC.02.04.01.

- Strengthened the requirements for critical access hospitals, hospitals, and long term care, effective on July 1, 2012
- Applies to all accreditation program/setting, effective on July 1, 2013
- Aligns with recommendations in the HHS Action Plan
  - Field review April 5 - May 17, 2011.
  - Board approval on September 21, 2011.
Goals is for Standard IC.02.04.01

Organizations to:

– Establish an influenza vaccination program for staff and licensed independent practitioners.
– Set incremental goals for meeting the 90% target in 2020.
– Measure and improve influenza vaccination rates for staff and licensed independent practitioners.
Rationale for Standard IC.02.04.01

- **HHS Action Plan to Prevent Healthcare-Associated Infections:** “Influenza transmission to patients by healthcare personnel (HCP) is well documented. ……Vaccination remains the single most effective preventive measure available against influenza and can prevent many illnesses, deaths, and losses in productivity.”

- Professional/scientific organizations recommend the influenza vaccination for all staff in healthcare including:
  - APIC, CDC, IDSA, NFID, SHEA

- Science clearly supports influenza vaccination for healthcare personnel
Specific Elements of Performance (EPs) that Relate to Measurement

**EP 5.** The hospital sets incremental influenza vaccination goals, consistent with achieving the 90% rate established in the national influenza initiatives for 2020.

**EP 6.** The organization has a written description of the methodology used to determine influenza vaccination rates. (See IC.02.04.01, EP 1)

- Note: The National Quality Forum (NQF) Measure Submission and Evaluation Worksheet 5.0 provides recommendations for the numerator and denominator on the performance measure for NQF #0431 INFLUENZA VACCINATION COVERAGE AMONG HEALTHCARE PERSONNEL.

  - [http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=68275](http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=68275)
The Joint Commission recommends that organizations use the Centers for Disease Control and Prevention (CDC) and the National Quality Forum (NQF) performance measure to calculate the influenza vaccination rate for staff and licensed independent practitioners.

- The most researched methodology for calculating the influenza vaccination rate for healthcare personnel available.
- Clearly delineates numerator and denominator.
- The CDC reported to The Joint Commission that the measure can be used in all healthcare settings even though it was not tested in all healthcare settings.
The CDC/NQF measure, however, does not include all contracted staff.

- CDC reported that the data are very difficult to obtain.
- Inaccurate and unreliable data could inadvertently alter the influenza vaccination rate.
- Altered influenza vaccination rate could impact some organizations financially in the future because of required reporting.
Standard IC.02.04.01

EP 6 - The Joint Commission’s Position:

- The influenza vaccination is to be offered to all contracted staff even though not all are to be included in the measurement rate.

- The Joint Commission recommends that influenza vaccination rates for contracted staff be tracked separately by the organization.
Standard IC.02.04.01

EP 7. The hospital evaluates the reasons given by staff and licensed independent practitioners for declining the influenza vaccination. This evaluation occurs at least annually.

EP 9. The hospital provides influenza vaccination rate data to key stakeholders which may include leaders, licensed independent practitioners, nursing staff, and other staff at least annually.
Challenges

- Some environments where standards are not yet in effect, such as home care, are reporting difficulties with having the funds to pay for influenza vaccination.

- Contracted workers: TJC brought this issue up to the CDC and provided them with a list of contracted workers.
  - Influenza vaccination rate will not be accurate if contracted workers are not incorporate in.
Challenges Continued

- Confusion about Standard IC.02.04.01, mandating the influenza vaccination for licensed independent practitioners and staff.

- Standard IC.02.04.01 does not mandate influenza vaccination for licensed independent practitioners and staff as a condition of Joint Commission accreditation.
Joint Commission Resources Challenge

- Challenge organizations to achieve 75, 85, or 95% flu vaccination rate among healthcare workers
- Award bronze, silver, and gold recognition awards
- Participating groups earned 80% vaccination average in 2010-2011 season
- Best practices, blog, other resources on JCR website.
Next steps

- HAI Portal: Many free items available on influenza
  http://www.jointcommission.org/hai.asp

- Next steps: full implementation of all accredited organizations in July 2013