## **Medical News**

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## JCAHO Deadline for Indicator Measurements

On February 18, 1997, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) announced a deadline for beginning the use of outcomes and other performance measures in the accreditation process. For the first time, accredited organizations will be required to collect performance-measurement data related to the outcomes of patient care and to submit those data to JCAHO on a continuous basis. This initiative, called ORYX: The Next Evolution in Accreditation, will include 60 acceptable performance-measurement systems that were reviewed and approved by JCAHO's Council on Performance Measurement last fall.

ORYX will establish the critical link between accreditation and the outcomes of patient care by requiring health-care organizations to begin collecting and using performance data and to transmit these data to JCAHO. Initially, hospitals and long-term-care facilities will be required to participate. A parallel group of requirements is being developed for integrated delivery networks, health plans, and provider-sponsored organizations. In the future, ORYX will be expanded to include home care, ambulatory care, and laboratory accreditation programs.

Through ORYX, JCAHO will use measurement data to monitor the performance of accredited organizations on a continuous basis. In addition, JCAHO has said it will allow organizations to compare their performance with that of other peer organizations.

Many hospitals and long-term-care organizations already have engaged in performance-measurement activities. To assist organizations in preparing for the ORYX requirements, JCAHO is developing a special insert for the accreditation manual that will profile each of the 60 currently available performance-measurement systems and provide guidance on the selection of a system that best meets the individual organization's needs. A new accreditation manual chapter on the requirements have been prepared, and plans were made for distribution in March 1997. Performance-measurement systems include systems that measure performance in clinical, satisfaction, health status, administration, and financial categories.

By December 31, 1997, each accredited hospital and long-term–care organization *must* choose a performance-measurement system that best meets their needs. In addition, by this same date, each organization also must select two clinical performance indicators from its measurement system that relate to at least 20% of its patient population and inform JCAHO of its system and indicator selection. Hospitals and long-term–care organizations will be *required* to begin submitting data to JCAHO no later than the first quarter of 1999. Thereafter, data are expected to be submit-

ted on a quarterly basis. It is expected that, over the next several years, JCAHO will expand the scope of measurement expected and will phase in incremental requirements. For example, current plans anticipate that accredited hospitals and long-term-care organizations will be required to select two additional measures, for a total of four, by the end of 1998. Together, the four clinical measures should address at least 40% of the patient population.

To accommodate hospitals engaged in performance-measurement activities at levels well beyond ORYX requirements, JCAHO will offer a voluntary accelerated option. ORYX Plus, initially offered only to hospitals, will involve use of a common set of acute-care measures, with data being part of a national comparative database. Participating hospitals also will be required to commit to future public disclosure of performance data and information. To participate, hospitals must choose at least 10 of 25 identified measures, and special recognition will be given to all participating hospitals.

Tom Granatir, Director of Quality Initiatives at the American Hospital Association, said, "This is a small but important first step towards the creation of an accreditation process that will be based on results."

The CDC National Nosocomial Infections Surveillance (NNIS) System is not currently on the list of indicators. Dr Robert Gaynes, Chief of Nosocomial Infections Surveillance Activities in the CDC's Hospital Infections Program said, "The CDC's NNIS System is among the 71 systems initially reviewed and approved by the JCAHO's Council on Performance Measurement. However, the NNIS System presently is not one of the 60 systems that are under contract with the JCAHO. For participation by the NNIS System in the JCAHO's Performance Measurement System, the CDC would need to revise the contract sent by the JCAHO, in order to be consistent with federal law, Section 308(d) of the Public Health Service Act and CDC policy." Dr. Gaynes explained that Section 308(d) of the Public Health Service Act states that "the identity of NNIS hospitals remains confidential." The CDC's Office of General Counsel currently is reviewing the contract.

For more information on JCAHO's new performance-measurement requirements, please telephone 630-792-5085, or visit their home page at http://www.jcaho.org.

FROM: Joint Commission on Accreditation of Healthcare Organizations. Press release: ORYX: The Next Evolution in Accreditation. Oakbrook, IL: JCAHO; February 18, 1977.

## OSHA Mandates Reporting of Illness and Injury Data

The Occupational Safety and Health Administration (OSHA) issued a final rule in the February 11, 1997, *Federal Register*, that amends the Occupational Injury and Illness