Beyond Certification.

**Re-Certification with Distinction in Person-Centered Care.**

The Distinction for Leadership and Innovation in Person-Centered Care Program extends the recognition pathway for high performing person-centered organizations. The Program offers an opportunity for organizations that have previously earned Gold Certification for Excellence in Person-Centered Care to raise the bar even further and achieve a higher level of recognition. Achievement of Re-Certification with Distinction status requires organizations to maintain their current Gold-level performance while also building on their success to advance the model of person-centered care beyond the standards outlined in the Person-Centered Care Certification Program.

**REQUIREMENTS**

To earn Distinction for Leadership and Innovation in Person-Centered Care, an organization must:

1. Submit a letter of intent to the Planetree Distinction Review Board at least one year (or up to three years) prior to submission of its Re-Certification application describing plans for how the Distinction requirements will be met.
2. Apply for and be awarded Gold-level Re-Certification for Excellence in Person-Centered Care.
3. Accrue a minimum of 75 Distinction points through the application process. There are five Distinction criteria (one within each of the five Certification drivers). In order to accrue 75 points, all applicants must address a total of three criteria. **Applicants will select two criteria from criteria #1-4 to address AND all applicants will need to satisfy criterion #5.**

| **Distinction for Leadership and Innovation in Person-Centered Care Criteria** |
|-----------------|-------------------------------------------------|---|
| DRIVER ONE      | 1. **Deepen Partnerships.** Test a strategy that shifts the dynamic within your organization for how leadership and staff partner with patient and family advisors to improve the healthcare experience. | 15 points |
| DRIVER TWO      | 2. **Mentor.** Engage in an ongoing and systemic partnership with an organization less advanced in their efforts to create a culture of person-centered care. The mentoring activities focus on providing operational guidance and peer-to-peer support that advances the mentee organization’s progress toward person-centered excellence. | 15 points |
| DRIVER THREE    | 3. **Do Good.** Implement an intervention geared toward reducing disparities in health or healthcare that targets a vulnerable, underserved, and/or “hard-to-reach” population. | 15 points |
| DRIVER FOUR     | 4. **Study Impact.** Design and execute a research study to evaluate how implementation of a person-centered approach impacts a measure related to better health, better care, lower costs and/or better culture. | 15 points |
| DRIVER FIVE     | 5. **Share Your Knowledge*.** At least one of the above efforts is presented at a national or international conference and/or published in a national or international publication. | 45 points |

*Required for all applications in order to accrue the required 75 Distinction points*
A more detailed description of requirements for each criterion begins on page 4.

APPLICATION PROCESS

As of 2020, the Distinction application process will be integrated into the re-certification process. Distinction Letters of Intent will be accepted beginning in 2019.

To be eligible for Distinction, an applicant must be a Gold Certified organization submitting its Re-Certification application.

There are 3 steps to the Distinction Application Process:

STEP 1: LETTER OF INTENT

At least one year (or up to three years) prior to its Gold Certification Renewal Date, an organization will submit a Letter of Intent to Apply for Distinction to Planetree’s Distinction Review Board. This Letter of Intent should be emailed to Sara Guastello at sguastello@planetree.org. Letters of intent should be no more than 3 pages and should include the following:

- Identification of which two criteria from criteria #1-4 it will focus over the next 1-3 years (timeframe dependent on when the letter of intent is submitted). Note: All applicants will also be required to satisfy criteria #5, for a total of 3 criteria to be addressed in the application.

- A description of anticipated plans or approaches for how the selected criteria will be addressed through new activities. It is understood that plans may change during the Distinction application period. If an approach radically different from that described in the letter of intent is taken, it is expected the applicant will notify Planetree of the change in direction.

- A statement of any anticipated resource gaps, i.e. what challenges do you foresee in carrying out the plans described. Where possible, Planetree International will seek to connect applicants with needed supports via our network.

- The Letters of Intent will be vetted by the multidisciplinary Distinction Review Board for 1.) breakthrough thinking and 2.) solid plans for implementation and measuring impact. The Review Board includes patient and family partners, researchers and other leading thinkers in person-centered care. This group will review the submitted plans to ensure alignment with the spirit and intent of each criteria. Invited sites will have up to 3 years (until their Certification renewal is due) to complete the work proposed in the letter of intent. This is intended to challenge teams to be more bold in the work they undertake to truly “move the model.”

Recommendation: Given this process and the scope of the Distinction criteria, it is recommended that an organization submit its Letter of Intent to pursue Distinction during Year One of its Gold Certification term.
STEP 2: APPLICATION

The Distinction application will be submitted and scored along with the Re-Certification application at the time of renewal. Applicants will complete their Certification application as usual.

The Distinction criteria all have documentation requirements. Only provide the required documentation for the Distinction criteria your organization will be evaluated against, i.e. those identified in advance via the letter of intent plus Distinction Criteria #5 (required for all Distinction applicants)

Scoring:

To earn Distinction, a site must earn

- A minimum of 144 Certification points (out of a possible 160 points) AND
- 75 Distinction points.

Unlike the Certification criteria, the Distinction criteria are not broken down into measurable elements. Instead, each Distinction criteria has explicit requirements. All the requirements must be met – and validated via the required documentation and lived experience evidence (where applicable) – to earn the points associated with each criterion. No partial credit will be awarded. A Distinction criterion is either satisfied in full or it is not satisfied.

The points earned toward the Distinction criteria do not get applied to the application’s Certification score. Nor do the points earned toward Certification get applied to the Distinction score. Two separate scores will be provided.

STEP 3: VALIDATION

The standard Certification on-site validation visit will be extended for any site pursuing Distinction in order to more fully explore the promising practices submitted in the application.

The cost of the Certification site visit will be adjusted to include this extended site visit.
**DISTINCTION FOR LEADERSHIP AND INNOVATION IN PERSON-CENTERED CARE**

**CRITERIA AND REQUIREMENTS**

**DRIVER 1: Create organizational structures that promote engagement**

**CRITERIA:** Deepen Partnerships. Test a strategy (pre-approved by the Planetree Distinction Oversight Board) that shifts the dynamic within your organization for how leadership and staff partner with patient and family advisors (PFAs) to improve the healthcare experience. *(15 points)*

**INTENT:** To identify promising and scalable practices for bringing the patient/resident/family perspective into ongoing healthcare improvement efforts beyond the minimum requirements for Person-Centered Care Certification.

**EXAMPLES:** Strategies to test could include (but are not limited to):

- Processes for partnering with PFAs to support patients and families at the point of care
- Appointment of PFAs as voting members of the governing body
- Methods for engaging traditionally “hard to reach” populations in PFE work
- Implementing trainings-curricula developed and delivered by PFAs.
- Development of a tool to evaluate the impact of PFA engagement in improvement work.
- Other strategies identified by the applicant.

**REQUIREMENTS:**

1. The strategy being presented is “new,” i.e. it has been conducted since the date of the organization’s most recent Gold-level Person-Centered Care Certification

2. The approach being tested has been co-developed with the involvement of patients/residents/families in order to deepen this spirit and application of partnership in ways that are meaningful to all involved.

3. The approach being tested goes beyond “incremental” innovation. It moves the model of patient and family engagement in healthcare improvement and tests an approach not already well-documented in healthcare literature.

4. The approach has been applied, i.e. it has moved beyond the idea phase and has been “in action” for a minimum of six months.
DOCUMENTATION: A description of the strategy tested (authored at least, in part, by the PFAs involved) which includes discussion of:

- The gap/opportunity being addressed and how it builds upon the organization’s current partnership efforts with PFAs
- Implementation steps
- Challenges and limitations
- Recommendations for other organizations that follow suit

LIVED EXPERIENCE EVIDENCE: Time will be scheduled during the on-site validation visit for discussion with the PFAs involved in the initiative about their experience.
DRIVER 2: Connect values, strategies and action

CRITERIA: Mentor. Engage in an ongoing and systemic partnership with a comparable organization less advanced in their efforts to create a culture of person-centered care (pre-approved by Planetree Distinction Oversight Board). The mentoring activities focus on providing operational guidance and peer-to-peer support that advances the mentee organization’s progress toward person-centered excellence. (15 points)

INTENT: To help other organizations progress more rapidly in their journey toward person-centered excellence.

REQUIREMENTS:

1. An explicit goal for the mentoring partnership has been established.
2. Applicant is able to demonstrate a pattern of regular contact for at least one year during the past three years.
3. There is evidence of impact as a result of the mentoring relationship, e.g. within the mentee organization, a new practice(s) was implemented or improved, a steering team or PFAC was been launched or strengthened, Certification has been achieved, etc.

DOCUMENTATION: A written description of the mentoring relationship and types of support provided, along with evidence of impact of the mentoring relationship, i.e. what has changed within the mentee organization as a result of the support provided by the mentor? Changes documented should be organizational-level changes, not personal improvements at the individual level.

LIVED EXPERIENCE EVIDENCE: A leader from the mentee organization will submit a statement describing the impact of the mentoring relationship.

In addition, a conversation with representatives from both the mentor and mentee organization will be facilitated to explore more fully the structure of the relationship, identify the most high impact mentoring activities and consider opportunities to scale the approach.
DRIVER 3: Implement practices that promote partnership

**CRITERIA:**

Do Good. Implement an intervention (pre-approved by the Planetree Distinction Oversight Board) geared toward reducing disparities in health or healthcare that targets a vulnerable, underserved, and/or “hard-to-reach” population. *(15 points)*

**INTENT:**

To work toward a healthcare system where effective patient and family engagement strategies extend to and work for all.

**REQUIREMENTS:**

1. The intervention being presented is “new,” i.e. it has been conducted since the date of the organization’s most recent Gold-level Person-Centered Care Certification

2. The intervention has been designed to address a need(s) identified via quantitative or qualitative evidence that reveals gaps in care and/or health outcomes that appear to disproportionately affect a specific population.

3. The intervention has been designed with input from individuals who represent the population it is intended to reach/benefit.

4. The impact of the intervention can be expressed in in terms of actual improvements in health outcomes and/or health behaviors or reduction in health disparities.

**DOCUMENTATION:**

A written description of the intervention that includes discussion of:

- The data collected to identify health disparities
- Efforts to access the perspective of the target population to inform design of the intervention
- The intervention design and implementation
- The results of the intervention, expressed in measurable improvements in health outcomes and/or health behaviors or reduction in health disparities
- Unexpected challenges and lessons learned.

**LIVED EXPERIENCE EVIDENCE:**

Time will be scheduled during the on-site validation visit for discussion with the project team about the effort.
DRIVER 4: Know what matters

CRITERIA: Study Impact. Design and execute a research study (pre-approved by Planetree Distinction Oversight Board) to evaluate how implementation of a person-centered approach to care impacts a measure(s) related to better health, better care, lower costs and/or better culture. (15 points)

INTENT: To strengthen the case for adoption of person-centered approaches to care by contributing to the growing evidence base tying these approaches to improved outcomes.

RESOURCE: Patient Engagement in Research Toolkit

REQUIREMENTS:

1. The research is “new,” i.e. it has been conducted since the date of the organization’s most recent Gold-level Person-Centered Care Certification

2. The research question aligns with one of the criteria or measurable elements within the Person-Centered Care Certification performance framework and/or the National Academy of Medicine’s Guiding Framework for Patient and Family Engaged Care.

3. Patients/residents and/or families are meaningfully involved throughout the research process – from topic selection through design and conduct of research to sharing the results or findings.

4. The study has yielded measurable findings.

DOCUMENTATION: A report (either in article or presentation form) that includes the following elements:

- A plain language abstract of the study design and findings
- Description of the study design
- Description of patient/resident/family involvement in the research process
- Analysis and findings
- A plan to disseminate the findings to audiences that would most benefit from accessing the findings, including relevant patient, family, consumer, civic, public and private organizations, healthcare payers, and government groups.

LIVED EXPERIENCE EVIDENCE: The research team will present the study to the site visit validation team and participate in a follow-up discussion on implications, recommendations for future research and next steps.
DRIVER 5: Use evidence to drive improvement

CRITERIA: Share Your Knowledge. At least one of the above efforts is presented at a national or international conference and/or published in a national or international publication (either a peer-reviewed journal, an industry journal or a mainstream publication) (45 points)

INTENT: To build greater receptivity to person-centered care by sharing evidence of viability and outcomes.

REQUIRED DOCUMENTATION: Slide deck(s) and conference program and/or published article(s).

LIVED EXPERIENCE EVIDENCE: N/A

Criteria #5 – Share Your Knowledge – is required for all applications in order to accrue the required 75 Distinction Points.