

Accreditation 101

HFAP ACCREDITATION FOR THE ASC

Accreditation

- Ensures
 - Quality
 - Education
 - Compliance with the CMS Conditions of Participations for the ASC

Accreditation 101

- CMS payments
- Requirements for other insurance company reimbursements

Accreditation 101

- How does HFAP Accreditation work
 - Survey process
 - Facility preparation for the Survey

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- ASC Survey is a two day process
- Two Surveyors
 - Physician Team Leader
 - RN
- Initial Survey is announced
- Subsequent Surveys are unannounced
 - Three year cycle

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- HFAP Survey Manual for the ASC
 - 13 Chapters

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Chapter 1	Governing Body
Chapter 2	Administration
Chapter 3	Surgical Service
Chapter 4	Quality
Chapter 5	Environment
Chapter 6	Medical Staff
Chapter 7	Nursing Service
Chapter 8	Medical Record Service/HIM
Chapter 9	Pharmaceutical Services
Chapter 10	Laboratory and Radiology
Chapter 11	Patient Rights
Chapter 12	Infection Control
Chapter 13	Patient Admission, Assessment and Discharge

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• Other Reviews/Requirements

Infection Control Worksheet
Patient Interviews
Human Resource File Review
Medical Record Reviews—Open and Closed Charts
Medical Staff Credential File Review

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• Survey Review Categories

Chapter	Title	Responsible Team Member
1	Governing Body	Physician
2	Administration	Physician
3	Surgical Services	Physician
4	Quality	Nurse
5	Environment	Physician
6	Medical Staff	Physician
7	Nursing Services	Nurse
8	Medical Records	Physician/Nurse

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Chapter	Title	Responsible Team Member
9	Pharmacy	Nurse
10	Lab and X-Ray	Physician
11	Patient Rights	Nurse
12	Infection Control	Nurse
13	Admission, Assessment and Discharge	Nurse

Sample ASC Survey Agenda

DAY 1	
TIME	EVENT
8:00 – 8:30 AM	Introduction and review of agenda
8:30 – Noon	Nurse: Facility Tour including waiting area, patient changing areas, surgical suite and PACU. Review Pharmacy and complete Infection Control Surveyor Worksheet Team Captain: Observation of patient procedure from registration through discharge
Noon – 12:30 P.M.	Lunch
2:30 – 3:00 P.M.	Review of Documentation with CEO and Clinical Director: Team Captain: Governing Body Bylaws & meeting minutes, Medical Staff Bylaws & meeting minutes, Contractual Agreements, Accounting corporate compliance, Credentialing Nurse: Copy of Transfer Agreement, Patient Rights, Infection Control, Plan of Care, Nursing, Professional Staff, Risk Management, Human Resources, QA/PI
4:00 – 4:00 PM	Review Human Resource Files and Credentialing files

Sample ASC Survey Agenda

DAY 2	
TIME	EVENT
8:00 – 10:00 AM	Team Captain or Nurse: Medical Records Review. Average Monthly Census: 40 Total Number of Records to be Reviewed: 20
8:00-10:00 AM	Team Captain or Nurse: Physical Environment Review to include Lab & Radiology
10:00 – 11:00 AM	Complete details of survey and prepare final report
11:00 – Noon	Review survey findings with CEO and Clinical Director (Optional) Exit Conference

Survey Day 1

- We follow a patient in the ASC from Registration to Discharge
 - This includes being in the OR while the case is being done
 - Permission from patient and surgeon

Survey Day 1

- The patient following includes all aspects of the patient experience at the ASC
 - Registration
 - Advanced Directives
 - Patient Rights
 - Consents
 - Beginning of patient identification

Patient Following

- Pre-op
 - Preparation of the patient
 - Patient identification
 - Site marking if appropriate
 - Laterality is involved in the case
 - Includes spinal levels
 - Surgeon participation
 - Patient participation
 - Family participation if patient is unable to contribute

Patient Following

- Pre-op—continued
- Pre-op anesthesia eval and history
 - Anesthesia interviews
 - Consents
 - Review of all appropriate documents by staff
 - Includes history and physical
 - Proper time frame and updating
 - Final preparations of the patient and on call to the OR

Patient Following

- Patient to the OR
 - Transfers
 - Time out
- Actual case
 - Medication use
 - No participation or commentary
 - Surgical
 - Anesthesia
 - Completion of the case

Patient Following

- Patient transferred to PACU
 - Handoff
 - Anesthesia to PACU RN
 - Joint assessment of the patient's condition
 - Interval vital signs
 - Patient recovery
 - Patient ready for discharge
 - Is there a physician order?
 - If not, policy for discharge in lieu of an order
 - Aldrette scores, etc.
 - Has the post anesthesia eval occurred?

Patient Following

- Discharge
 - Discharge instructions
 - RX(s)
 - Patient discharged with a person known to and identified by the staff
 - Post discharge telephone calls

Preparation for the survey

- Purchase a Manual - review the web site
- Read every standard
- Understand the scoring and weight
- Become particularly familiar with CMS standards
- Share the standards with appropriate staff members

Preparation for the Survey

- Conduct a mock survey
- Walk through the entire facility using a check-list as if you were a surveyor
- Walk through again as if you were a patient
- Audit patient records to ensure complete documentation
- Practice talking about QAPI and IC

Preparation for the Survey

- Medical Records
 - Review Closed and Open Charts
 - Areas to watch
 - History and Physical
 - Appropriate updates and time frames
 - Anesthesia
 - Pre-evaluation
 - Intra operative record
 - Post evaluation
 - Appropriate content
 - Anesthesia 101!

Day 1 of the Survey

- Additional areas reviewed
 - Governing Body
 - Meeting minutes
 - Medical Staff
 - Credentialing
 - Meeting Minutes
 - Tip: Be sure that all the physicians have current Staff appointments
 - I have been to several ASC's where the physician owners were operating and had either no credentialing or an out of date appointment greater than 2 years!

Day 1

- Contractual arrangements
- Accounting
 - Compliance
- Patient Rights
- Transfer agreement
- Infection Control
- Plan of Provision of Care

Day 1

- Risk Management
- Human Resources
 - Files are selected for review
- QAPI
 - Quality Program must be pervasive throughout the facility including medical staff input

Day 2

- Physical environment
 - Walk through the entire facility
 - Safety
- Lab
- Radiology
- Review of Medical Records
 - Dependent on average monthly census
 - E.g.– average monthly census of 30; 10 records reviewed
 - Emphasis on open charts but closed record are also reviewed

Day 2

- Conclusion of Survey
- Preparation of Report
- Exit Interview
 - Staff
 - CEO, if available
 - Physicians
