







What Accreditation Does For You

- Helps facilities become compliant with a variety of standards
- Provides an educational process to help the facility be the best they can be
- Assures the public of compliance with Medicare Conditions of Coverage

What Accreditation Does For You

- May provide an alternative to Certification by the State department of Public Health
- Fulfills the requirement for CMS reimbursement
- Satisfies the requirement for participation in various insurance contracts

Getting Ready Know the Standards

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

Don't Skimp on the 3 P's Make a Comprehensive Plan

- Develop a team approach
- Begin early and give yourself lots of time
- Review your contracts
- Decide on experts
- Delegate specific projects and get opinions
- Prepare comprehensive check-off lists and forms

Don't Skimp on the 3 P's Prepare Completely

- Determine what evidence is needed to show compliance and where it's located
- Check and double-check all documents for necessary approvals and current dates
- Have team meetings and critique projects
- Train a back-up person

Don't Skimp on the 3 P's Practice to prevent problems

- 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

Organization is the Key

- Purchase enough binders to house all documents
- Make an index for each binder
- Cross reference the index to the applicable standard
- Group similar documents together by standards chapter or topic, or use a combination of both

Grouping by Chapter Chapter 1: Governance

- Articles of Incorporation
- Partnership Agreements
- Governing Body By-Laws
- Governing Body Policies
- Licenses and Certifications
- Mission, Vision, Value Statements
- Governing Body Meeting Minutes
- Contracts, Hospital Transfer Agreement

Grouping by Chapter Chapter 4: QAPI

- Quality Program
- Yearly Quality Plan
- Annual Report including CEO Summary
- Credentials of person overseeing QAPI
- Annual quality training Plan
- Quality Committee Minutes

Grouping by Topic Human Resources

- Human Resource Policies
- Yearly mandatory training schedule
- Orientation Program
- Employee vaccination requirements
- Certification requirements
- Job Descriptions
- Student Training Agreements

Grouping by Topic Meeting Minutes

- Governing Body Minutes
- Infection Control Committee Minutes
- Quality Committee Minutes
- Staff Meeting Minutes
- Safety Committee Minutes

Policy Books

- Policy books should always be kept in a binder separate from other documents so they are easily accessible to the staff
- You will need to have Administrative Policies, Anesthesia and Surgery Policies, Nursing Policies, Medication Policies, Medical Records policies and Human Resource Policies

Avoid Pitfalls Examples of What We Find Patient Rights

- Patient Rights aren't posted
- No policies to support Patient Rights
- One or more required rights are absent
- Grievance process is incomplete with no designated time frames for response

Examples of What We Find Policies

- Purchased policies are not customized
- Policies lack approval by the Medical Director and Governing Body
- Required policies are not written
- Policies are outdated
- Policies do not include references

Examples of What We Find Infection Control

- ICO lacks the necessary training
- There is no annual report
- Hand washing surveillance and environmental rounds are not documented
- IC Program lacks all required components
- IC activities are not included in QAPI

Examples of What We Find Governing Body Minutes

- IC and QAPI activities are not discussed
- Approval of policies and Contracts has not occurred
- Equipment updates are absent
- Physician credentialing elements are incomplete

Examples of What We Find QAPI

- Data collection is done but analysis and problem resolution is lacking
- Outcome data is poorly documented
- Staff other than management is unable to describe the quality process
- Laser procedures are not included in QAPI
- Quality training has not occurred

Examples of What We Find Chart Review

- Missing H&P and or consent
- Physician orders and other documents not signed, dated and timed
- Pain assessment and reassessment not documented using the pain scale

Examples of What We Find Employee Files

- Lack of documentation on orientation, training and competencies
- References and license verification are not documented

Examples of What We Find Environmental Walk-around

- Outdated medications and supplies
- Unsecured medication in unoccupied areas
- Unsecured Oxygen tanks
- Biomedical stickers are absent or not current
- MSDS or OSHA requirements are not met
- Hours of operation not posted

Examples of What We Find Surgical Procedure Observation

- Policies not being followed such as labeling of medications on the sterile field
- Time-out procedure not followed
- Staffing Issues
- Use of radiology equipment

Examples of What We Find Medical Records

- Policies absent
- Medical Record security not adequate
- Phone advice not included in the Medical Record

Finally, It's Survey Day

- Unannounced but on a day you do surgery
- Physician and Nurse Surveyor will arrive
- Surveyors will observe, review documents, conduct interviews and speak with patients
- Surveyors will follow a patient from admission to discharge

Finally, It's Survey Day

- Facility management participation is intense
- There is an opening conference where a plan for the two days will be established
- A closing conference will be held to discuss areas requiring an action plan
- Some deficiencies can be corrected during the survey

Finally, It's Survey Day

- Survey process is collaborative, educative and participative
- Questions are encouraged
- Survey findings are recorded on a deficiency report which will be sent to the facility

Making an Action Plan

- Begin immediately
- Ask for suggestions
- Include pictures if appropriate
- Include audits showing compliance

Congratulations

- Post your certificate of accreditation
- Keep policies and approvals up to date
- Make a plan on how to maintain a state of readiness
- Continue to conduct mock surveys on a regular basis to correct problems immediately
