Surveys and Accreditation

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Objectives:

- Outline standard processes to implement to assist the organization in maintaining awareness of statutory and regulatory requirements (e.g., CMS, HIPAA, OSHA, PPACA)
- Identify appropriate accreditation, certification, and recognition options (e.g., DNV GL, ISO, NCQA, TJC, Baldrige, Magnet)
- Describe best practices to lead or assist with survey or accreditation readiness
- Lay out plan how to facilitate communication with accrediting and regulatory bodies
- Prework / Homework: Bring to class:
 - Results of last survey
 - Paper copy of SOM Appendix W or A (COP's) or Electronic Device to pull up the SOM Appendix W or A (COP's)

Q&A – Day One Questions
Overview of Accreditation/ Survey
 Review of Regulations COP's Appendix A – PPS hospitals, Appendix W – CAH's Chapter 9 Title 175 – Nebraska Law governing hospitals Life Safety Codes Corporate Compliance, HIPAA, EMTALA Survey Protocol – Key items in COP's
Break
 Conditions of Participation (COP) Review Review of the regulation's organization will be evaluated against to establish their level of performance in relation to regulatory requirements
Lunch
 Survey Readiness Continuous Survey Readiness (CSR) The day the surveyors arrive - What to do
 Key Items and Tips Who to involve at your facility
 Small Group Work Develop Checklist for initial setup of survey
Break
 Immediate Jeopardy (IJ) Definition What to do if IJ is identified
 Plans of Correction How to write a plan of correction action plan
 Vital Areas of Quality Focus High risk areas Annual Policy Review Top CAH deficiencies in Nebraska
Wrap-Up Feedback