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Accreditation: three recommendations for continuous readiness

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As a long-time accreditation professional, there's a scenario l've witnessed again and again. A vital new issue arises in the health care industry and organizational leaders allocate major resources to address it. Recent examples include opioid abuse and high-level disinfection, and the list can also include matters such as technology upgrades and facility renovations. With so much time and energy focused on a few areas, the organization may lose sight of the basics of care delivery or miss a change not so newsworthy. Then, when The Joint Commission or the Centers for Medicare and Medicaid (CMS) arrive for a survey, hospital leaders are taken off guard when they receive a report that's less than stellar.

There's no question that trending health care challenges and facility upgrades are important, but leaders can't allow these issues to overtake the hospital's everyday goals of patient safety and high-quality care delivery.

As you probably know, CMS surveys can have real impact. A single substantial compliance failure, or several basic compliance failures, can put an organization in "Immediate Jeopardy" status and result in the temporary suspension of their Medicare certificate, risking their reimbursements. Organizations that get two or more Immediate Jeopardy designations in a performance period (currently 40 months) could also lose their ability to participate in the CMS Value-Based Purchasing program.

What can leaders do to take a pro-active stance on accreditation and maintain a continual state of readiness? How do you avoid the "not important until it is" syndrome? Here are three recommendations that could help.

1. Establish a clear process for identifying and resolving issues

Forward-thinking organizations have a committee or council composed of senior managers from each department to address accreditation issues. Members of the committee perform periodic tracers and assessments in various parts of the hospital, especially those areas that CMS and The Joint Commission place particular emphasis on. When issues are found, they create action plans to resolve each problem. In effect, it's a continuous feedback loop between the committee and the individual departments to make certain that every issue revealed by the internal surveys and tracers is addressed effectively. The committee can also bring up new and changing requirements from CMS, The Joint Commission or other regulatory agencies and take action on them.

2. Get a senior leader involved in the accreditation team

When a senior leader champions accreditation preparedness, the results can be dramatic. During my work with members, I see that a senior leader's involvement is a signal to the entire organization that these initiatives are to be taken very seriously. Without a senior leader on board, the accreditation committee may identify potential issues that exist in the organization, but the issues are never escalated to the level of action. I've seen CEOs and chief of operating officers shadow the tracer process with staff, leading to plenty of "a-ha" moments—the difference in outcomes is amazing. Without a doubt, continual readiness is something that starts at the top.

3. Rely on accreditation professionals outside the organization

Some health care organizations allocate extensive resources to accreditation, while others are a little more lean. Whatever the extent of your accreditation program, it's always a smart idea to bring in outside eyes to examine your organization from the viewpoint of regulators and help you identify issues before they become full-blown problems.

At Vizient, we offer a multifaceted program at the national level to help you manage the multiple challenges of accreditation. We're always aware of the issues that The Joint Commission and CMS are focusing on, and we share that with members on a continual basis. Members can stay informed and prepared through our programs, including educational webinars, an annual conference devoted to accreditation and regulatory topics, and online forums that allow you to share stories and best practices with other Vizient members. We also provide resources like our monthly "continuous patient readiness plans" that deliver an ongoing stream of information about new or changing requirements.

Many members take advantage of our most comprehensive solution: a three-year accreditation compliance service that includes presurvey risk assessments with solution options, as well as post-survey support. We can even support you when surveyors from The Joint Commission are onsite.

Accreditation can be very challenging, but if you address it as an organization, involve senior leaders, and partner with outside experts, you'll be much better prepared to achieve a state of continuous compliance.

As the nation's largest member-owned health care services company, Vizient provides networkpowered insights in the critical areas of clinical, operational, and supply chain performance and empowers members to deliver exceptional, cost-effective care.

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