

triangletimes

Volume 8 | Issue 3 | Fall 2021

Surveyor Recruitment Initiative Launches



When you think of accreditation, do you see yourself or a colleague as a surveyor? Distinguish your career while assisting other ambulatory care organizations seeking excellence through accreditation. AAAHC welcomes you to apply and share your health care experience.

AAAHC seeks experienced ambulatory Health and Life Safety Code professionals who are familiar with AAAHC Standards and can foster an educational and collaborative accreditation survey experience. Applicants should plan to spend approximately 20 minutes completing the application and must have a resume or CV, in PDF or Word format, available to upload to the site. Applicants will be contacted about the status of their application within 30–45 days.

AAAHC plans to begin core track (primary care and surgical/procedural) training in Q1 2022. Individuals who are accepted into the program will attend blended learning sessions. In the first quarter of 2022, AAAHC will present a mandatory two-day live or virtual training session, complemented by additional virtual and self-paced content. Candidates will complete two in-person training accreditation surveys as part of a surveyor team. AAAHC will assign a surveyor peer mentor who will provide guidance, education, and evaluation throughout the training and onboarding process to candidates. Training will emphasize the technical and tactical knowledge and skills needed to be an effective surveyor as well as team-building and peer-to-peer learning. Expect a highly structured selection process featuring online applications, staff review, and expert interview team (experienced surveyors, staff leadership).

Please visit the surveyor page on our website at aaahc.org/surveyors to learn more. ▲

Leadership Message



Noel M. Adachi
President & CEO
of AAAHC

In a year that intensified the demands on our organizations, I'm grateful for the opportunity in this fall issue of *Triangle Times* to share with you my insights on the recent concerns that cause me to pause and reflect.

No doubt your days are filled with countless demands that drive you to improve the quality of health care for patient safety. This is especially true for facilities that participate in the Centers for Medicare & Medicaid (CMS) deemed status program. On November 5, 2021 CMS published the *Omnibus COVID-19 Health Care Staff Vaccination rule*, establishing a new Condition for Coverage (CfC) requiring specified Medicare and Medicaid program participants to establish COVID vaccination requirements for all staff members, regardless of clinical responsibility. Medicare-certified facilities, including ASCs, ESRDs, RHCs, and FQHCs must comply with the new standard.

As of December 5, 2021, covered facilities must have implemented written policies and procedures addressing the tracking and secure documentation of vaccination status for all staff (including primary doses, boosters, delays, and exemption requests), processes for submission and review of vaccination exemption requests, documentation of federally-required

Q&A with the New Mexico Primary Care Association's Ronnie Campos



Veronica "Ronnie" Campos, RN, PCMH-CCE

AAAHC caught up with Veronica "Ronnie" Campos who has years of experience with accreditation. Ronnie is a 44-year registered nurse (RN) and worked as a HIT Trainer and eCW EMR trainer for New Mexico Primary Care Association. As she retired earlier this year, Ronnie shared her thoughts on AAAHC Standards and the accreditation survey with us.

TT: From your experience with the New Mexico Primary Care Association, you must have some great insights on AAAHC surveys. Can you expand upon that?

RC: The survey process is extremely informative, helpful. The questions asked are non-accusatory. There are no "gotcha" moments to take you by surprise — it's an overall collegial process.

AAAHC Surveyors act as peers. They are health care professionals and understand the challenges of ambulatory care organizations. With other AOs, you would have to walk on glass for six weeks. This disrupted clinical productivity. AAAHC doesn't do this. For example, AAAHC asks to see the policies and procedures in place prior to an onsite survey, which is extremely helpful.

TT: What are the most useful resources or services offered by AAAHC?

RC: AAAHC is always accessible. They assign an organization a point person from the get-go. That person becomes a contact for the organization within AAAHC, answering questions and facilitating steps in the process.

AAAHC has set up training which is specific to each group. The resources and information on the AAAHC website help organizations to understand the process and the requirements of accreditation.

AAAHC Standards are very organized. The checklists and worksheets are extremely helpful — understandable (do this, do this, this, and this). Using the Standards handbook, organizations can conduct a self-assessment on their own prior to the survey.

AAAHC also offers resources on topics, such as emergency preparedness, medication reconciliation, and credentialing and privileging which can assist organizations in preparing for a survey. The annual *Quality Roadmap* presents data of high compliance and high deficiency standards that are also useful for survey readiness and development of quality improvement studies.

For AAAHC, the survey is a day or two in the lifecycle of a health care facility. The real sign of an organization earning accreditation is living that accreditation throughout the entire 3-year term.

TT: What advice would you give organizations as they prepare for accreditation?

RC: Start 6–12 months ahead of the accreditation (or reaccreditation) survey. Have everything in place. Work as a team. Prepare the team with assigned tasks. Ensure you fix any preexisting issues prior to the survey.

AAAHC appreciates the insights from Ronnie Campos and encourages follow-up with tools, resources, and education throughout your pre-survey planning.

For more information about AAAHC accreditation, please visit our website at aaahc.org/accreditation.

continued on next page

Coming in 2022 *Triangle Times* turns exclusively digital

Take the 1095 Strong Journey

1

ORDER a copy of the appropriate AAAHC handbook to review current Standards. Note, AAAHC-Accredited Organizations receive updated handbooks as part of our program support.

2

CONDUCT a self-assessment with AAAHC Standards and develop an action plan to address any gaps.

3

APPLY now and prepare your organization for the survey.

4

SCHEDULE your survey. AAAHC determines the length of the onsite visit, the number of surveyors, and the survey date.

5

STAY 1095 Strong and maintain your accreditation readiness. ▲



Finish 2021 Strong with Virtual Achieving Accreditation

In December, AAAHC closes out the year with the virtual *Achieving Accreditation* program. The conference features live panels and breakout sessions, small group collaboration, and opportunities to ask experts about a variety of topics related to Standards, policies, processes, and quality improvement initiatives.

Engaging content over three days covers topics such as advanced infection prevention, clinical records, facilities and environment, anesthesia care services, surgical and related services, Life Safety Code, and Medicare Deemed Status. Attendees appreciate the personal touch for onboarding to the virtual platform as they learn the Standards with the tried and true format for remaining *1095 Strong*. Whether you're new to accreditation or preparing for a reaccreditation survey, you will find this program offers an unmatched educational experience.

To learn about and register for the December conference, please visit aaahc.org/Achieving. ▲

Kershner Season Opens

AAAHC recognizes the value of ongoing quality improvement (QI), and how it supports our mission of improving health care quality through accreditation. And what better way to demonstrate that approach than by submitting your exemplary study for our annual Kershner QI Award?

AAAHC encourages our accredited organizations to showcase their QI accomplishments, the results of which not only improve quality of care but also demonstrate the *1095 Strong, quality every day* commitment to staying accreditation ready throughout the 3-year term.

The Kershner QI Award stands as a testament to that shared commitment. AAAHC accredited organizations that have successfully implemented meaningful changes in their operations to boost quality of care, patient safety, and overall efficiency through quality improvement are eligible to submit one exemplary study. This prestigious award program validates the boost in quality of care, patient safety, and overall efficiency through ongoing QI efforts.

Interested organizations may review requirements and submit studies by visiting the Kershner Award Submissions page on our website at aaahc.org/Kershner. ▲

Kershner QI Award

• **Sep 1–Jan 21, 2022**

2021–22 award submissions open

Select and Submit a Great Kershner Award Entry complimentary self-paced webinar

Achieving Accreditation

• **Dec 6–8**

Virtual conference

For information about currently available live and self-paced education opportunities, please visit aaahc.org/1095Learn

Leadership Message *continued from page 1*

accommodations, contingency plans for staff who are not yet fully vaccinated, and infection control/prevention measures to mitigate COVID-19 transmission. All staff must have completed the primary vaccination series, excluding the 14-day wait period for full vaccination status, by January 4, 2022.

AAAHC looks forward to the publication of a Quality, Safety and Oversight (QSO) memorandum to provide further guidance related to the requirements.

As of the writing of this article, 76.5% of U.S. adults have received at least one inoculation! However, we see increased infection rates and hospitalizations that stem from variants of COVID-19. Even with the release of the vaccine, our lifestyle today is still not where we expected it would be when the vaccine was released in 2021.

In early September, the federal government announced a nationwide vaccine mandate, ordering employers with 100 or more workers to require the vaccine or conduct weekly testing of unvaccinated employees. AAAHC aligns with this action.

Earlier this fall, AAAHC implemented a new policy for all surveyors and AAAHC Headquarter employees. Effective October 15, all AAAHC surveyors — whose frontline role in the accreditation process may place them at greater risk of COVID-19 infection — must comply with this new guidance and have received either two doses of the Pfizer or Moderna vaccine, or the single-dose Johnson & Johnson vaccine. Surveyors and staff are expected to comply with booster recommendations as well. The decision of the AAAHC Board of Directors and executive leadership team aligns with many of the health care organizations we serve, including all facilities that participate in the CMS deemed status program.

In an effort to protect the health of our Surveyors, their families, friends, and the communities at large, AAAHC implemented this policy to help reduce risk, as conducting surveys may require close interaction with unvaccinated patients and others who may be immunocompromised and at a higher incidence for complications from COVID-19. Mitigating the

spread of COVID-19 requires careful evaluation of all tools and resources. In making this decision, we reviewed CDC recommendations and considered the variety of local, state, and facility requirements regarding the vaccination.

AAAHC worked throughout the pandemic and the unfortunate aftermath of Delta, to provide clear and current information, as well as best practice insights for our accredited organizations. Our AAAHC Surveyors — the majority of whom are already fully vaccinated — are an integral part of the *1095 Strong* philosophy that supports patient safety and quality patient care.

The passion we have for empowering health care facilities to adhere to, and exceed, AAAHC Standards is unmatched. This challenging but important role works to keep patients safe in the ambulatory setting through detailed and complex accreditation surveys. ▲

¹ covid.cdc.gov/covid-data-tracker/#datatracker-home

2021–22 Kershner QI Award submissions open through Jan 21, 2022
For details, please visit aaahc.org/Kershner