AAAHC Governance Unit Charges

Effective January 1, 2020

Cluster #1
- Standards Development
- Expert Content

Cluster #2
- Surveyor Administration
- Surveyor Credentialing & Privileging
- Surveyor Education

Cluster #3
- Accreditation
- Accreditation Work Groups
- Complaints Investigation

Accreditation Cycle Management

Institute Quality Advisory

The meetings of the Board of Directors of the AAAHC and its committees are conducted in strictest confidence and matters are discussed which are sensitive in nature, and therefore, confidential and of a proprietary nature within AAAHC. These materials are confidential and shall not be disclosed to anyone else, except as may be necessary to effectuate its actions.
Governance Unit Charge

Governance Unit: Standards Development

GU Acronym: SDC

Charge: To ensure that AAAHC measurably drives quality improvement in patient care through Standards that reflect current best practice, are evidence-based and relevant to the intended setting(s), and are understandable, measurable, beneficial, and achievable.

Reports to: Board of Directors

Composition: 5-7 total members; no overlap with Expert Content Committee (ECC) members

Annual Time Commitment Requirements

<table>
<thead>
<tr>
<th>Activity</th>
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<th>Duration</th>
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<th>Location</th>
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<tbody>
<tr>
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<td>Conference calls</td>
<td>9-10</td>
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| Hours/Year of committee work required outside of meetings/calls | 15-30 | Additional travel or time commitments | None |

Activities & Responsibilities

- Provide oversight of the Expert Content Committees (ECCs) to ensure alignment with SDC Standards development methodologies and AAAHC strategy and policies.
- Design and implement a structured periodic Standards review process; implement and maintain the Standards architecture including Standards weighting, scoring schemes, references and other fields requiring clinical expertise.
- Develop and maintain core Standards that apply across all specialties and practices; serve as expert group for more complex Standards interpretation questions.
- Develop and monitor related policies.
- Evaluate Standards effectiveness (e.g., client and surveyor comprehension, deficiencies cited).
- Oversee development and ongoing maintenance of crosswalks to CMS and other related Standards and guidance documents (e.g., NFPA).
- Provide input on accreditation and certification tools (e.g., FAQs, client and surveyor education).
- Recommend creation of ECCs based on organizational priorities, market demand and program development needs.
- Establish an annual Standards Development cluster face-to-face meeting to which all SDC and ECC members are invited (at the annual November meeting) to provide policy and procedure updates, share trends, discuss risks and mitigation strategies, and establish priorities for the subsequent year to ensure alignment with Board and budget expectations.
- Provide oversight to the Public Comment process for new and revised Standards when Public Comment is warranted.
- Comply with all Governance Unit and AAAHC policies.

Authorities

- Provide oversight to Expert Content Committees (ECC).
- Approve all new and revised Standards and determine which new and revised Standards require Board approval and Public Comment.

Composition, Expertise or Experience Required

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- AAAHC surveyor experience preferred, but not required.

Benefits of Membership

- Learn how Standards are developed, tested, interpreted, and assessed for ongoing relevance and currency.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

Related Policies

- Conditions for Creating New and Revising Existing Standards and Elements of Compliance
- Levels of Evidence
- Standards Development and Approval
- Standards Creation
- Public Comment and Final Approval of Standards
Governance Unit Charge

**Expert Content**

Specific to the specialty(ies) and/or practice setting(s) assigned, ensure that AAAHC measurably drives quality improvement in patient care through Standards that reflect current best practice, are evidence-based and relevant to the intended setting(s), and are understandable, measurable, beneficial and achievable.

**Reports to**

Standards Development

**Composition**

5-7 total members

### Annual Time Commitment Requirements

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**Hours/year of committee work required outside of meetings/calls**

15-30 Additional travel or time commitments None

### Activities & Responsibilities

Within the Specialty(ies) or Practice Settings assigned:

- Provide medical and scientific expertise to AAAHC; define and monitor the state of the art and emerging technologies.
- Advise on the maintenance and expansion of AAAHC’s specialty-specific business.
- Develop and maintain up-to-date evidence-based Standards for accreditation and certification programs; implement structured periodic review aligned with AAAHC Standards Development policies.
- Provide input to new program design and revision including the Survey process and monitoring mechanisms for ongoing compliance.
- Monitor client survey performance and standards compliance and effectiveness (e.g., client and surveyor comprehension, deficiencies cited); use feedback to improve clarity or implement other revisions, and inform education and tool development.
- Contribute to the continuing education of the ambulatory community through critiques, publications and participation in AAAHC educational programs.
- Maintain liaison, where appropriate and Board-approved, with other related organizations.
- Serve as expert group for more complex Standards interpretation questions.
- Provide input on accreditation and certification tools (e.g., FAQs, client and surveyor education).
- Collaborate with and advise the Surveyor Credentialing & Privileging, Education, and Accreditation Cycle GUs on Standards interpretation and process enhancements warranting improvements relevant to these GUs.
- Provide subject matter expertise to staff for client education programs and other resource development initiatives; as requested, serve as faculty for client and surveyor education programs.
- Comply with all Governance Unit and AAAHC policies.

### Authorities

- None.

### Composition, Expertise or Experience Required

- Professional technical, administrative or clinical expertise in the assigned area.
- Interest in promoting quality in ambulatory care specific to a single specialty, ambulatory practice setting or technology / procedure area (e.g., lipotripsy, radiology)
- AAAHC surveyor experience preferred, but not required.

### Benefits of Membership

- Learn how Standards are developed, tested, interpreted, and assessed for ongoing relevance and currency.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

### Related Policies

- Conditions for Creating New and Revising Existing Standards and Elements of Compliance
- Levels of Evidence
- Standards Creation
- Public Comment and Final Approval of Standards
- Specialty/Program Specific Standards Handbooks
Governance Unit Charge

**Governance Unit** Surveyor Administration

**GU Acronym** SAC

**Charge**
To oversee the process and policies that guide surveyor resource development that ensures AAAHC fulfills the quality and service expectations reflected in our mission statement and strategic plan and valued by AAAHC clients.

**Reports to**
Board of Directors

**Composition**
5-7 total members including SEC and SCPC Chairs

**Annual Time Commitment Requirements**

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**Hours/year of committee work required outside of meetings/calls**
15-30

**Activities & Responsibilities**

- Provide oversight of Surveyor Education (SEC) and Surveyor Credentialing & Privileging Committees (SCPC) that ensures alignment with SAC policies and AAAHC strategy and policies.
- Provide input to the size and composition of the surveyor pool based on business growth projections, strategic requirements and diversity policies.
- Review and contribute to procedures and general criteria for new surveyor recruitment and selection.
- Develop and oversee surveyor recognition programs.
- Determine needs for surveyor mentors (i.e., which areas; how many are required).
- Review and contribute to policies regarding surveyor performance management. Provide input to essential competencies, surveyor performance metrics, training and education (i.e., both core and specific to privileges/programs), and surveyor evaluation and validation processes.
- Monitor surveyor performance and compliance with AAAHC policies and procedures.
- Establish an annual Surveyor Administration cluster face-to-face meeting to which all SAC, SEC and SCPC members are invited (at the annual November meeting) to provide policy and procedure updates, share trends, discuss risks and mitigation strategies, and establish priorities for the subsequent year to ensure alignment with Board and budget expectations.
- Comply with all Governance Unit and AAAHC policies.

**Authorities**

- Provide oversight to Surveyor Education (SEC) and Surveyor Credentialing & Privileging Committees (SCPC).
- Approve all new and revised policies regarding credentialing and privileging.

**Composition, Expertise or Experience Required**

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- AAAHC surveyor experience highly preferred, but not required.

**Benefits of Membership**

- Influence the selection and development of AAAHC surveyors for accreditation and certification programs.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

**Related Policies**

- Surveyor Credentialing and Privileging Policy
- Life Safety Code Surveyor Credentialing & Privileging Policy

**Improving healthcare quality through accreditation**
Governance Unit Charge

Governance Unit: Surveyor Credentialing & Privileging

GU Acronym: SCPC

Charge: To provide input to and oversee surveyor management programs, including new surveyor selection, credentialing and privileging.

Reports to: Surveyor Administration

Composition: 5-7 total members

Annual Time Commitment Requirements

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<td>Additional travel or time commitments</td>
<td>None</td>
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Activities & Responsibilities

- Establish Surveyor Credentialing & Privileging policies that align with AAAHC quality and business requirements and strategic plan. Submit to the SAC for approval.
- Determine requirements for Surveyors to achieve and maintain privileges and roles, including experience, background, credentials, training, type and number of surveys per year, and ongoing performance metrics.
- Establish criteria for Mentor designation; identify Surveyors who fulfill these criteria.
- In collaboration with Staff, administer the Surveyor Recruitment and Selection process including designating mentors and monitoring training progression.
- Monitor Surveyor compliance to Surveyor Credentialing & Privileging policies and procedures.
- Comply with all Governance Unit and AAAHC policies.

Authorities

- None.

Composition, Expertise or Experience Required

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- At least three years serving as an AAAHC surveyor within the past five years.

Benefits of Membership

- Influence the selection and development of AAAHC surveyors for accreditation and certification programs.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

Related Policies

- Surveyor Credentialing and Privileging Policy
- Life Safety Code Surveyor Credentialing & Privileging Policy
Governance Unit **Charge**

To provide input to and contribute to the design of the Surveyor Education curriculum that drives surveyor consistency, ensures a common understanding of standards and their application in different settings and specialties, and integrates a consultative approach to client interaction.

**Reports to**

Surveyor Administration

**Composition**

5-7 total members

### Annual Time Commitment Requirements

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**Hours/year of committee work required outside of meetings/calls**

| Hours/year of committee work required outside of meetings/calls | 10-20 | Additional travel or time commitments | None |

### Activities & Responsibilities

- Collaborate with staff on setting the curriculum for AAAHC surveyor education based on program changes, needs assessments and program evaluation data.
- Monitor participation and evaluate effectiveness of surveyor education.
- Recommend to SCPC surveyor education requirements linked to specific privileges and roles (e.g. specialty certification programs, Medicare, chair, mentor).
- Provide input to faculty selection and education program evaluation mechanisms.
- Recommend to SCPC procedures and selection criteria for mentor recruitment, selection, and education requirements.
- Comply with all Governance Unit and AAAHC policies.

### Authorities

- None.

### Composition, Expertise or Experience Required

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- At least three years serving as an AAAHC surveyor within the past five years.

### Benefits of Membership

- Influence the selection and development of AAAHC surveyors for accreditation and certification programs.
- Contribute to the improvement of ambulatory care quality and patient outcomes.
- AAAHC surveyor experience preferred, but not required.

### Related Policies

- Surveyor Credentialing and Privileging Policy
- Life Safety Code Surveyor Credentialing & Privileging Policy
Governance Unit Charge

**Accreditation**

To ensure objectivity and consistency in the AAAHC accreditation and certification decision-making by centralizing the decision-making criteria and processes and ensuring compliance; to review process and decision policies recommended to and approved by the Board of Directors; to provide oversight of the AC Workgroups assigned to support AC activity.

**Reports to**

Board of Directors

**Composition**

5-7 total members including at least 2 Board members

**Annual Time Commitment Requirements**

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<td>6-12 *</td>
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<tr>
<td>Hours/year of committee work required outside of meetings/calls</td>
<td>12-15</td>
<td>Additional travel or time commitments</td>
<td>None</td>
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</table>

* AC calls occur on an as needed basis. Conference calls are scheduled when a decision list cannot be ratified via email vote or if a special action is requested of the Committee.

**Activities & Responsibilities**

- Recommend Work Group members as necessary to aid in its duties. The Work Groups recommend accreditation and certification decisions resulting from review of applications, relevant survey reports, surveyor and staff recommendations, and supporting documentation.
- Render decisions pertaining to accreditation and certification for all AAAHC surveyed organizations. This includes the application and reconsideration of interim survey decisions.
- Establish criteria and recommend policies to guide the consistent execution of the decision-making process (e.g., Fast Track criteria and Interim Survey Guidelines), in order to facilitate the timely release of accreditation and certification decisions.
- Monitor Work Group performance statistics to ensure consistent, thorough and timely decisions are made.
- Coordinate with the Complaints Investigation Committee to ensure alignment on policies for interim onsite surveys, Immediate Jeopardy issue management, revocation decisions or renewal denial.
- Establish an annual Accreditation cluster face-to-face meeting to which all AC Work Group and Complaints Investigation Committee members are invited (at the annual November meeting) to provide policy and procedure updates, share trends, discuss risks and mitigation strategies, and establish priorities for the subsequent year to ensure alignment with Board and budget expectations.
- Comply with all Governance Unit and AAAHC policies.

**Authorities**

- Render accreditation and certification decisions in compliance with AC recommended and Board of Directors approved policies and procedures.

**Composition, Expertise or Experience Required**

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- Good working knowledge of the AAAHC accreditation and certification standards.
- Knowledge of other regulatory requirements such as CMS Deemed Status regulations is a positive.
- Must have a recommendation from a member of the Accreditation Committee.
- Must be an active surveyor with chairperson privileges for at least three years.
- Good demonstrated performance based on: Surveyor peer evaluations, client organization evaluations, Survey Report completion, staff concurrence.

**Benefits of Membership**

- Gain insight as to how sustained quality and regulatory compliance can be ensured.
- Occasional opportunity to serve as faculty regarding the accreditation or certification programs.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

**Related Policies**

- Work Group Member Guidebook
Governance Unit Charge

Accreditation Work Groups

GU Acronym: ACWG

Charge

To review individual applications for accreditation, relevant survey reports, and supporting documentation in order to make recommendations to the Accreditation Committee regarding accreditation and certification.

Reports to

Accreditation

Composition

4-5 total members per Work Group; 5+ Work Groups

Annual Time Commitment Requirements

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Hours/year of committee work required outside of meetings/calls: 75-100 *

* Outside of meetings ACWG members participate in the Mailvote process which requires review of survey reports and supporting documents. Members also spend time reviewing documentation in preparation for monthly ACWG calls.

Activities & Responsibilities

- Review individual entity applications, relevant survey reports, surveyor and staff recommendations, and supporting documentation.
- Recommend accreditation and certification decisions as a result of document review.
- Comply with all Governance Unit and AAAHC policies.

Authorities

- Delegated authority to review survey reports, surveyor and staff recommendations, and any other relevant information needed to make an accreditation decision.

Composition, Expertise or Experience Required

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- Good working knowledge of the AAAHC accreditation and certification standards.
- Knowledge of other regulatory requirements such as CMS Deemed Status regulations is a positive.
- Must have a recommendation from a member of the Accreditation Committee.
- Must be an active surveyor with chairperson privileges for at least three years.
- Good demonstrated performance based on: Surveyor peer evaluations, client organization evaluations, Survey Report completion, staff concurrence.

Benefits of Membership

- Gain insight as to how sustained quality and regulatory compliance can be ensured.
- Occasional opportunity to serve as faculty regarding the accreditation or certification programs.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

Related Policies

- Work Group Member Guidebook
Governance Unit Charge

Complaints Investigation

To provide oversight and expert support to the complaints management process including evaluating complaint investigation policies, processes and outcomes, examining trends and risks, and making accreditation revocation and/or interim onsite survey requirement decisions.

Reports to Board of Directors

Composition 4-5 total members including at least two Board members

Annual Time Commitment Requirements

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* CIC calls occur on an as needed basis. CIC members will rotate “on call” phone support and may be called upon to conduct onsite surveys as warranted by the nature of the complaint investigation.

Activities & Responsibilities

Complaints include adverse events, community, employee, and patient care grievances, and infection control breaches identified or reported outside the routine onsite survey accreditation/certification cycle.

- Establish criteria and recommend policies to guide the consistent execution of the complaints investigation process, in order to facilitate the timely release of any decisions associated with these incidences; ensure that policies and decisions regarding complaint investigations and adjudications and decision reporting are consistent and objective.
- Coordinate with the Accreditation Committee to ensure alignment on policies for interim onsite surveys, Immediate Jeopardy issue management, and revocation decisions.
- Monitor complaints investigation performance statistics to ensure consistent, thorough and timely decisions are made and all incidences are closed out.
- Establish an “on call” schedule to provide CIC subject matter expertise to AAAHC staff on complex complaint investigations.
- Adjudicate action plans for complaints warranting accreditation or certification revocation or an onsite interim survey consistent with CIC and AC Board-approved policy.
- Periodically review complaint process and outcome data to identify and monitor trends and other metrics related to the complaint investigation process; make recommendations to other GUs based on issue trends and patient safety initiatives.
- Identify risks to AAAHC related to the complaint investigation process and propose mitigation strategies, as necessary.
- Provide input to the media response process and serve as a subject matter expert for more complex issues warranting response.
- As necessary, participate in onsite surveys associated with the complaint investigation process.
- Comply with all Governance Unit and AAAHC policies.

Authorities

- Render accreditation and certification revocation decisions or onsite interim requirements in compliance with CIC recommended and Board of Directors approved policies and procedures.
Composition, Expertise or Experience Required

- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- Good working knowledge of the AAAHC accreditation and certification standards.
- Knowledge of other regulatory requirements such as CMS Deemed Status regulations is a positive.
- Must be an active surveyor with chairperson privileges for at least three years.
- Good demonstrated performance based on: Surveyor peer evaluations, client organization evaluations, Survey Report completion, staff concurrence.
- Must have served on the Accreditation Committee (AC) or Accreditation Committee Work Groups (ACWG) for a minimum of three years during the past five years, unless serving as a current Board member for at least two years.

Benefits of Membership

- Gain insight as to how sustained quality and regulatory compliance can be ensured.
- Contribute to the improvement of ambulatory care quality and patient outcomes.

Related Policies

- None at this time
Governance Unit Charge

Accreditation Cycle Management

GU Acronym

ACMC

Charge:
To heighten focus on the entire accreditation process that enables increased client accountability and better defines the survey process including surveyor assignment policies and procedures.

Reports to:
Board of Directors

Composition:
5-7 total members including SDC and SAC Chairs

Annual Time Commitment Requirements

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Activities & Responsibilities

- Periodically review accreditation and certification cycle policies including eligibility, survey process and appeals process.
- Serve as a resource to staff to assist in evaluating more complex regulatory agency rules and examine impact on AAAHC accreditation survey policies, process and decisions (e.g., CMS certification termination notifications with consideration for risk).
- Define and monitor the appeals process; note that day to day appeals management is handled by the Accreditation Committee in coordination with Staff.
- Provide input to intra-cycle activities (e.g., annual attestation, adverse event reporting requirements).
- Assure program policies regarding surveyor assignments are consistent and objective.
- Establish metrics and monitor the timeliness and effectiveness of surveyor assignments and surveys.
- Collaborate with staff to establish and monitor a process for conducting validation surveys for which feedback on the effectiveness of surveyor assignments, education and other program initiatives could be assessed and serve as input for program improvement.
- Monitor CMS state agency validation surveys for discrepancies with findings, identifying trends and providing recommendations to inform accreditation/certification processes, Standards development or surveyor education.
- Provide guidance for the development of surveyor tools designed to improve survey effectiveness and documentation of deficiencies; includes establishing requirements for pre-survey review of facility information and translation of gathered data into actionable direction to make best use of time while onsite.
- Provide input to development of the client education curriculum based on program changes, needs assessments and program evaluation data.
- Assist staff in establishing criteria for intra-cycle changes that warrant additional information and/or interim onsite surveys.
- Consider client needs based on marketing feedback and other research.
- Comply with all Governance Unit and AAAHC policies.

Authorities:
None

Composition, Expertise or Experience Required:
- Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
- Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
- AAAHC surveyor experience preferred, but not required.

Benefits of Membership:
- Contribute to the improvement of ambulatory care quality and patient outcomes.

Related Policies:
- Eligibility policies
Governance Unit Charge

Institute Quality Advisory

GU Acronym IQAC

Charge
To ensure that AAAHC demonstrably drives quality improvement in ambulatory patient care through analyzing accreditation performance results for trends and compliance to AAAHC Standards, and by assisting organizations with achieving compliance through meaningful performance measurement, evidence-based tools, and focused educational opportunities.

Reports to Board of Directors
Composition 5-7 total members

Annual Time Commitment Requirements

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<td>required outside of meetings/calls</td>
<td>20-35</td>
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Activities & Responsibilities

• Monitor Institute activities to ensure alignment with and support of the AAAHC mission, vision, and strategic initiatives
• Provide input to staff for development of new value-added tools and resources
• Provide input, review, and approve Institute benchmarking studies and publications
• Offer recommendations to enhance the awards program
• Contribute to Institute activities e.g., bylined articles, etc.
• Comply with all Governance Unit and AAAHC policies.

Authorities

• Generate non-position researched tools/products.
• Produce and publish benchmarking studies.
• Execute Institute award program.
• Collaborate with CDC and other Board approved organizations on Institute activities.
• Create work groups from among GU members.

Composition, Expertise or Experience Required

• Interest in promoting quality in ambulatory care with ability to think beyond a single specialty or ambulatory setting type.
• Professional experience in an ambulatory health care setting. Technical or clinical expertise in a clinical specialty.
• Good working knowledge of the AAAHC accreditation and certification standards and their application.
• Representation from major health care settings, including but not limited to surgical/procedural and primary care.
• Expertise in quality improvement/research methodology.

Benefits of Membership

• Influence topic selection for benchmarking studies and toolkits.
• Promote quality improvement by aiding and advising Institute in its activities.
• Opportunity to use clinical and research expertise to enhance benchmarking studies, toolkits and other publications.
• Publish bylined articles/research papers as AAAHC Institute Quality Advisory Committee member.

Related Policies

• None at this time