



## Experience the ACHC Difference

Achieving a Successful ACHC Behavioral Health Survey









## Pre-Survey Preparation





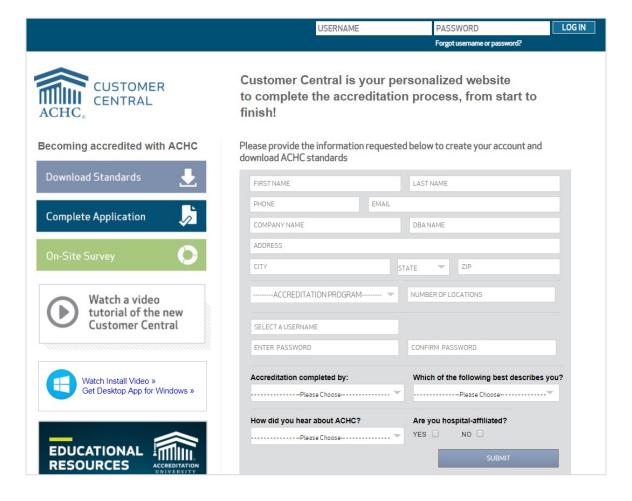
#### Create a Customer Central Account

- Step 1: Visit cc.achc.org
- Step 2: Complete the demographic information
- Step 3: Preview the appropriate standards
- Step 4: Download your customized ACHC standards





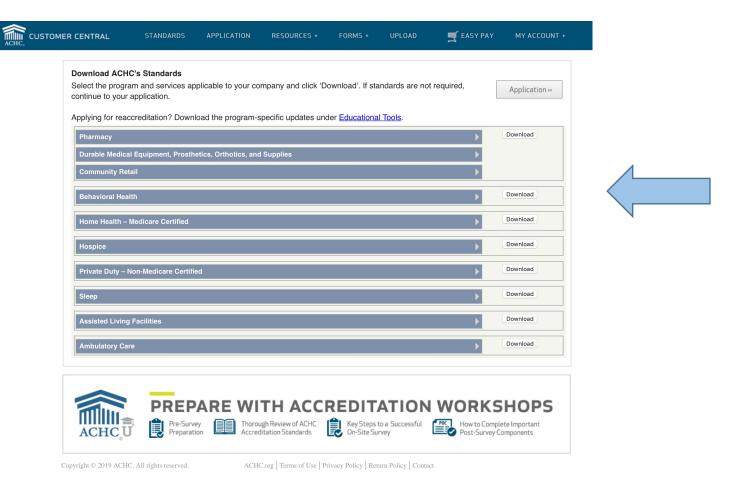
#### Demographic Information







#### **Download Standards**





## Appendix A

#### **Appendix A: Standard Service Table for Selected Services**

Standard	ACTT	ARS	CMGT	CS	DTX	ОТХ	PHS	PSR	PSRM
BH1-1A	Х	Х	X	Х	Х	Х	Х	Х	X
BH1-1B	Х	Х	Х	Х	Х	Х	Х	Х	X
BH1-2A	Х	Х	Х	Х	Х	Х	Х	X	X
BH1-2C	Х	Х	Х	Х	Х	Х	Х	Х	X
BH1-3A	Х	Х	X	Х	Х	Х	Х	Х	X
BH1-3B	Х	Х	Х	Х	Х	Х	Х	Х	X
BH1-3C	X								
BH1-4A	Х	Х	Х	Х	Х	Х	Х	Х	Х
BH1-5A	X	Х	Х	Х	Х	Х	Х	X	X
BH1-5B	Х	Х	Х	Х	Х	Х	Х	Х	Х
BH1-6A	X	Х	Х	Х	Х	Х	Х	X	X
BH1-6B	Х	Х	Х	Х	Х	Х	Х	Х	X
BH1-7C								X	
BH1-7D									X
BH1-8A	Х	Х	Х	Х	Х	Х	Х	Х	X
BH1-8B	Х	Х	Х	Х	Х	Х	Х	X	X
BH1-9A	Х	Х	Х	Х	Х	Х	Х	Х	X
BH2-1A	Х	Х	Х	Х	Х	Х	Х	Х	Х
BH2-1B				Х					



## Appendix B

#### Appendix B: Reference Guide for Required Documents, Policies and Procedures

Customized for: ACTT, ARS, CMGT, CS, DTX, OTX, PHS, PSR, PSRM

Standard #	Documents, Policies and Procedures	Agency Notes			
BH1-2A	Written Policies and Procedures				
BH1-3A	Written Policies and Procedures				
BH1-3C	Written Policies and Procedures				
BH1-4A	Written Policies and Procedures				
BH2-1A	Written Policies and Procedures				
BH2-1H	Written Policies and Procedures				
BH2-1P	Written Policies and Procedures				
BH2-1T	Written Policies and Procedures				
BH2-2A	Written Policies and Procedures				
BH2-2B	Written Policies and Procedures				
BH2-2C	Written Policies and Procedures				
BH2-3A	Written Policies and Procedures				
BH2-4A	Written Policies and Procedures				
BH2-5A	Written Policies and Procedures				





## Application

- Online application
- Deposit
- Signed Accreditation Agreement
- Payment method
- Preliminary Evidence Report (PER) checklist
- Required documents in order to be placed into scheduling



#### Online Application

- Select "NEW APPLICATION" or "RENEWAL"
- Main office
  - Profile
  - Location
  - Contacts
  - Services
- Additional locations/branch locations
- 10 Blackout dates
- Identify services you want accredited
- Renewals should complete application 6-9 months prior to expiration
- Contact your AA if any of this information needs to be updated



#### Preliminary Evidence Report







#### PER Checklist

- PER
  - Mandatory documents and/or criteria that must be submitted and met in order to begin the survey process
- Date of Compliance you establish on the PER
  - **ACHC-only requirements**
- State requirements
  - Acceptance of first patient
- Agency policies
  - Implementation date of policy



#### **Extended Policy Review**

- Optional review of complete policies and procedures by an ACHC
   Surveyor to determine compliance prior to the on-site survey
- Feedback from an ACHC Surveyor regarding the alignment of agency's policies and procedures to ACHC Accreditation Standards
- Option to purchase through Customer Central
- Customized reference guide for required documents and policies and procedures, available as a download
- Utilize Appendix B to organize policies





## Appendix B

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Customized for: ACTT, ARS, CMGT, CS, DTX, OTX, PHS, PSR, PSRM

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BH1-2A	Written Policies and Procedures				
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BH1-3C	Written Policies and Procedures				
BH1-4A	Written Policies and Procedures				
BH2-1A	Written Policies and Procedures				
BH2-1H	Written Policies and Procedures				
BH2-1P	Written Policies and Procedures				
BH2-1T	Written Policies and Procedures				
BH2-2A	Written Policies and Procedures				
BH2-2B	Written Policies and Procedures				
BH2-2C	Written Policies and Procedures				
BH2-3A	Written Policies and Procedures				
BH2-4A	Written Policies and Procedures				
BH2-5A	Written Policies and Procedures				



#### Policy Review Results

- Desk Review Report will come from the Account Advisor
- 21 days to revise and re-submit all corrections to Account Advisor
- 30-day window to prepare staff
  - Policy often reflects practice







## Preparation

- Educate Key Staff
  - Clinical staff (employees & contract)
  - Administrative/leadership
  - Governing body
  - Service recipients
- Prepare the agency
  - Human Resources
  - |T
  - Walk around your agency







#### Achieving A Successful Survey Outcome

Understanding the ACHC Behavioral Health Standards





#### Review the Standards

- Identifier BH
  - Service applicable: ACTT, ARS, BHH\*, CMGT, CRS\*, CS, DTX, FCS\*, ICS, IIH, IOTX,
    OTX, PHS, PSR, PSRM, PSS, PVS, RCS\*, RTX, SES, SGL, WM, WME
- Standard
  - Provides a broad statement of the expectation in order to be in compliance with ACHC standards
- Interpretation
  - Gives you more detailed information and specific direction on how to meet ACHC standards
- Evidence
  - Items that will be reviewed to determine if the standard is met



#### Standard Example



Standard BH1-6B: Responsibility and accountability for programs are defined. The organizational chart shows the relationship of all positions within the organization with identifiable lines of authority.

Interpretation: The organizational chart must be current and show the position(s) responsible for each program/service, and the relations ship for each job function down to the service recipient care/service level.

Evidence: Organizational Chart

Evidence: Response to Interviews

Services applicable: ACCT, ARS, BHH, CMGT, CRS, CS, DTX, FCS, ICS, IIH, IOTX, OTX, PHS, PSR, PSRM,

PSS, PVS, RCS, RTX, SES, SGL, WM, WME



#### Most Stringent Regulation

 Must be in compliance with the most stringent regulation in order to be determined compliant with ACHC Accreditation Standards



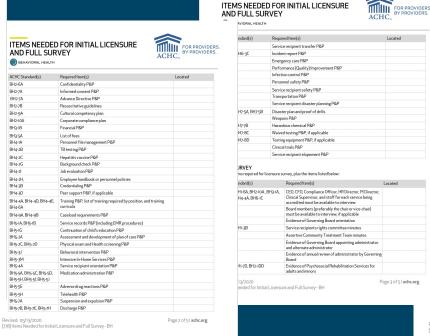


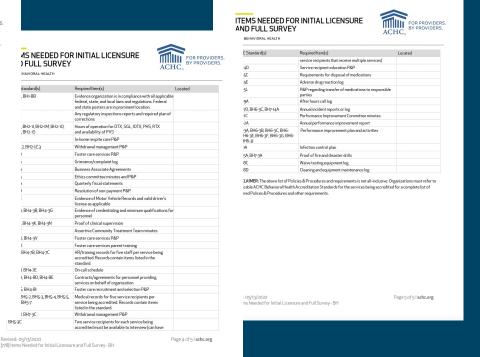


#### Items Needed For Initial Licensure and Full Survey



BH5-7B, BH5-7E, BH5-7H Discharge P&P









## Reports

- Current service recipient census
- Current service recipient schedule
- List of discharges/transfers for the past 12 months
- Personnel list
  - Employees
  - Contract staff
- Previous survey results
- Admission packet and education materials
- Staff meeting minutes for the past 12 months
- Internal Plans of Corrections



- Copies of bylaws, Articles of Incorporation
- Applicable license/permits for each location
- Governing body meeting minutes for the past 12 months
- Orientation records and signed confidentiality statements for governing body members
- Service recipient rights committee meeting minutes for the past 12 months
- Orientation records for the service recipient rights committee members
- Organizational chart
- Contracts for any person(s) designated to be responsible for overall supervision of services/programs (if applicable)
- Prior regulatory inspection reports



- Marketing materials
- Service Recipient Rights and Responsibilities statement
- Incident and investigation reports
- Grievance/complaint log
- Confidentiality practices
- Business Associate Agreements
- Compliance plan/program
- On-call calendar
- Evidence of how communication language barriers are addressed
- Evidence of how ethical issues are addressed



- Budget/evidence of review of budget
- Financial management practices
- Written list of service recipient charges for service(s)



- Personnel records
  - Employees and contract staff
- Employee handbook or evidence that staff have access to personnel policies and procedures
- Written education plan and evidence of ongoing education



- Service recipient records
  - Surveyor needs the entire service recipient record (electronic and paper documents)
  - Do not print the record
  - Surveyor will need "read only" access to the entire record
  - Organization must provide the Surveyor with a laptop or desktop computer for reviewing the service recipient record



- Performance Improvement (PI) Program
  - Individual designated as responsible for the program
  - Evidence that governing body, organizational leaders and personnel are involved in the program
- Evidence for the tracking of:
  - Complaints and grievances
  - Service recipient incidents/variances
  - Quarterly chart audit
- Ongoing and/or current PI projects
- Annual evaluation of PI Program



- Evidence of an Infection Control Program
  - TB Exposure Plan
  - Bloodborne Pathogen Plan
  - Policies and Procedures
  - Training of staff
- Emergency Preparedness Plan
- Access to SDS information
- CLIA certificate of waiver for laboratory testing being performed at your organization, as well as verification that the referral laboratory is certified in the appropriate specialties and subspecialties
- Maintenance logs



#### Additional Considerations

- Maintenance and safety logs
- Previous inspection records
- Evidence of fire drills
- Medication/drug disposal logs/records
- Temperature logs for refrigerators that contain:
  - Medication(s)
  - Lab(s)
- Evidence of qualified individual overseeing meal planning for 24-hour day programs





#### **Focus Areas**

- Utilize the audit tools, Compliance Checklists, and Self-Assessment to prioritize education
- Implement an internal Plan of Correction (POC)
- Share improvements with you Surveyor during survey









# Achieving a Successful Survey Outcome

On-Site Survey Process





#### Role of a Surveyor

- To ensure ACHC Accreditation Standards are being followed
- Data collectors
- Documented evidence that is "readily identifiable"





#### **On-Site Survey**

- Notification call
- Opening conference
- Tour of facility
- Personnel file review
- Service recipient record review
- Interview with governing body/owner, staff, and service recipient
- Review of organization's implementation of policies
- Performance Improvement (PI)
- Exit conference



#### **Opening Conference**

- Begins shortly after arrival of Surveyor
- Good time to gather information needed by the Surveyor
- KEY REPORTS
  - Current census and current schedule
    - Name, diagnosis, start of service, disciplines involved
  - Discharges and transfers
  - Personnel (employee and contract)
    - Name, hire date, and discipline/role
  - Any previous survey results from the 12 months (if applicable)
  - Admission packet or education materials given to service recipients





#### **Opening Conference**

- Designate a space for the Surveyor(s)
- Laptop or computer to access service recipient records
  - Read-only access
- Appoint a liaison



## Tour

- Brief tour of facility
  - Service recipient record storage
  - Maintaining confidentiality of Protected Health Information (PHI)
  - Supply closet/area
  - Biohazard waste
  - Required posters
  - Fire extinguishers/smoke detectors/non-smoking signage
  - Restrooms



#### Personnel Record Review

- Review personnel records for administrative and/or supervisory personnel, licensed and unlicensed personnel, support personnel, and contracted personnel
  - Application, tax forms, and I-9
  - Job descriptions and evaluations
  - Verification of qualifications
  - Orientation records, competencies, and ongoing education
  - Medical information
  - Background checks

For a complete listing of items required in the personnel record, review Section 4 of the ACHC Accreditation Standards.





#### SURVEY CHECKLIST - PERSONNEL FILES





Please gather or flag the identified items for the following personnel/contract individuals.

#### COMPLIANCE DATE:

COMPLIANCE DATE:		Tal	trator.	rector	ector.	Name	ame	ame
Standard	Item Required	trator.	O.	Oi:	Ŏŗ.	Je.	Ú.	į.
BH1-5A	Administrator qualifications							
BH1-5A	Alternate Administrator qualifications							
BH1-6A	Clinical Supervisor/Program Director qualifications							
BH2-6A	Signed confidentiality statement							
BH2-7B	Evidence of current CPR certification, if applicable							
BH4-1B	Position application (N/A for contract staff)							
BH4-1B	Dated and signed withholding statements (N/A for contract staff)							
BH4-1B	I-9 Form (N/A for contract staff)							
BH4-2B	Evidence of initial and annual TB screening							
BH4-2C	Evidence of Hepatitis B vaccination received or signed declination statement							
BH4-2D	Signed job description							
BH4-2E	Evidence of valid driver's license and motor vehicle records check, if applicable							
BH4-2G	Appropriate criminal background checks							
BH4-2G	Office of Inspector General (OIG) Exclusion List check							

Effective: 07/01/2020 [982] Personnel Files Survey Checklist – BH Page 1 of 2 |achc.org





#### **Medical Chart Reviews**

- Review service recipient records
- Representative of the service(s) provided
  - Interdisciplinary
  - Adult or minor
  - Environment served
  - Complexity of need
  - All payors
- Electronic Medical Record
  - Do not print the service recipient record
  - Need access to the entire record
  - Need to have a laptop/desktop supplied by the organization
  - Navigator/outline





#### **Medical Chart Reviews**

Number of Service	Minimum # of Chart Reviews					
1	3 per service					
2 or more	3 per service, no more than 5					



#### **Exit Conference**

- Mini-exit
  - At the end of each day to identify deficiencies
- Final exit conference
  - Present all corrections prior to the exit conference
  - Surveyor cannot provide a score
  - Invite those you want to attend
  - Preliminary Summary of Findings (SOF) as identified by Surveyor and the ACHC Standard
  - Seek clarification from Surveyor while still on site



#### Corrected On Site

 ACHC-only requirements can be corrected on site and a Plan of Correction (POC) will not be required





#### Resources

- Account Advisor
- Customer Central (cc.achc.org)
- Behavioral Health Survey Prep
  - Items Needed For Initial Licensure and Full Survey
  - Personnel Files Survey Checklist BH
- Monthly "Did You Know" emails
- ACHC Today emails
- ACHCU (achcu.com)



## Re-cap

- Generate the needed reports
  - Current census
  - Personnel and contract individuals
- Electronic Medical Record
  - Read-only access
- Gather information on the Items Needed list
- Flag the required policies and procedures
- Flag the required documents for personnel files







#### Thank you

Accreditation Commission for Health Care 139 Weston Oaks Ct., Cary, NC 27513 (855) 937-2242 | achc.org



