



Mock Survey Says:

Cencora Consultants' Top Accreditation Mock Survey Findings and How to Avoid





Welcome



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TODAY'S AGENDA

- Accreditations overview
- What is a mock survey?
- Common findings during mock survey
- How to avoid common findings





Accreditations overview



What is the purpose of an accrediting organization?

- Accreditation organizations accredit entities that provide health care such as hospitals, pharmacies and physician practices
- Use evidence-based measures to develop standards through an integrated network of health care stakeholders committed to improving the quality of care
- Develop processes and standards to promote industry best practices, encourage quality improvement and empower consumers
- Accredited specialty pharmacies typically:
 - Provide therapy-specific patient management
 - Promote safe and accurate dispensing
 - Provide 24/7 patient and prescriber support
 - Comply with risk management, consumer empowerment and performance standards
 - Report quality measures to accrediting organization



Accreditations overview

Preparation for specialty pharmacy accreditation



Gap analysis and strategy

Comprehensive gap analysis

Patient management workflow and technology

Quality committee design and oversight



Policy and procedures

Develop policies and procedures to meet accreditation standards

Develop necessary processes, documentation, tracking and auditing tools for implementation



Training and quality

Targeted training for functional areas



Application submission

Readiness assessment

Application submission

Request for Information (RFI)



Mock audits

Survey documentation prep

Corrective action recommendations and performance improvement





Mock survey basics

- A mock survey is a tool that helps organizations prepare for a regulatory or accreditation survey by identifying areas for improvement and developing corrective action plans
- Mock surveys can help pharmacies:
 - Ensure survey readiness and decrease findings / deficiencies
 - Identify performance improvement opportunities
 - Improve processes and procedures leading to enhanced patient outcomes
 - Build survey confidence among pharmacy team members



Mock survey basics

Plan

- Assign qualified team members
 - Pharmacy leadership, ongoing readiness team members, quality leaders
 - Hire a consultant

Formalize

- Set date(s) / time(s)
 - Dedicate 4 to 6 hours
 - At least 2 to 4 weeks prior to your scheduled survey
- Request information as a surveyor would
- Review actual documentation
- Set an agenda



Mock survey basics

- Agenda
 - Review patient records
 - Randomization is important
 - Review human resource files and training
 - Conduct a walk-through of the specialty pharmacy
 - Conduct staff interviews





Our top 10 findings







1. Quality

compliance not part of the quality (PI) program



Pharmacies are not including the results of their internal or external compliance audits in their quality programs

- Ensure a complete pharmacy policy and procedure that outlines an internal compliance audit process
- Make your compliance audit objective
 - Develop a tool inclusive of selected state and federal legal requirements, accreditation requirements, clinical and pharmacoeconomic items
 - Conduct a walk through of the specialty pharmacy using your developed tool
 - "Score" your audit and include as a performance metric for tracking and trending over time
 - Report your compliance "score" to your quality management committee at a frequency determined by your policy





2. Quality

patient record audits not part of the quality (PI) program



Pharmacies are not conducting patient record audits nor are they including the results of these audits in the quality program

- Develop an audit tool for patient record documentation
- Determine an adequate sample size (10%) and frequency
- "Score" your audit and include as a performance metric for tracking and trending over time
- Report your audit "score" to your quality management committee at a frequency determined by your policy to meet the requirement for clinical oversight of the patient management program





not separating hazardous drugs



Pharmacies have quarantine areas for unusable medications but are not separating hazardous from non-hazardous

- Maintain two quarantine bins or areas one for hazardous and one for nonhazardous
- Place hazardous medications in chemotherapy drug transport or appropriate waste bags if using one quarantine bin or area





expired or inaccessible federal and state posters



Pharmacies are not checking federal and state posters for accessibility and expiration date

- Ensure that posters are located in the pharmacy or are easily accessible by pharmacy staff
- Include as an item on your internal compliance audit tool





no temperature monitoring or tracking on refrigerators in pick-up area



Pharmacies are not including refrigerators in the prescription pick-up area as part of their continuous electronic temperature monitoring

- Include refrigerators in the patient pick-up area for continuous electronic temperature monitoring
- Do not use an unmonitored refrigerator for storing specialty prescriptions awaiting pick-up





not documenting cleaning agent or maintaining a cleaning log



Pharmacies are not documenting which agent(s) are used for cleaning trays, spatulas, workstations and/or equipment

- Develop a daily, weekly, and/or monthly checklist or log for applicable equipment (trays, spatulas, tablet counters) and workstations and assign staff to document
- Include cleaning agent(s) used in the pharmacy on your cleaning checklist or log
- If using multiple cleaning agent(s) designate which equipment each agent is being used to clean





7. HR

no role based competency assessment process



Pharmacies do not have a process for role based competency assessment

- Do not rely solely on organizational required training
- Develop separate competencies for roles in the pharmacy (i.e., pharmacist, technician, patient care coordinator)
- Conduct during onboarding, annually, and when roles/responsibilities are updated or changed (or more frequently when required)
- Ensure the process includes corrective action or next steps when competency does not meet established expectations





8. HR

incomplete primary source verification of renewed licenses/certifications



Pharmacies and/or HR departments are not verifying active licenses and certifications through the primary source prior to expiration

- Assign ownership of the PSV process for license/certification renewals (pharmacy vs. HR)
- Ensure documentation is from the **primary source** and includes the **date/time** the license was checked (**prior to expiration**)
- Create document to track expiration dates with or without calendar reminders
- Consider outsourcing to a third-party vendor for large pharmacy teams
- Create a 'hard-wired' process for certification verification for applicable promotions





9. Medication distribution

no qualification testing when packaging processes change



Pharmacies are not documenting new qualification testing when changing type(s) and amount(s) of packing materials

- Include as a standing agenda item for quality committee meetings to ensure review of any changes or updates
- Assign ownership of the testing process





10. Incomplete patient records



Pharmacies are not documenting that the patient received their written medication instructions (i.e., monograph)

- Ensure your patient management platform or prescription management system has a place to document this
- Some prescription management systems may capture this via barcode scan, etc. – if unsure your documentation is acceptable, ask the accrediting organization
- Include on a packing slip or delivery ticket that is maintained in the patient file





10. Incomplete patient records



Pharmacies are not establishing patient goals upon initial assessment and are not updating upon subsequent reassessment

- Ensure your patient management platform has a place to document this
- Create patient-specific SMART goals with a target date
- Ensure follow-up assessments and care plans include a placeholder for updating the goals of therapy
- Audit patient records





10. Incomplete patient records



Pharmacies are not documenting an emergency contact

- Ensure your patient management platform or prescription management system has a place to document this
- Audit patient records





Building confidence - recommendations







Introduction

- Develop a short presentation to set the tone for the day and humbly brag on your specialty pharmacy program
 - Scope of services
 - Outcomes reporting
 - Patient and prescriber satisfaction
- Conduct practice staff interviews to build survey confidence amongst your pharmacy team



HR

- Annual training: make a table of contents to match your trainings to the standard requirements
 - Coordinate timing of annual competency assessments to required training or performance evaluations
- Consistent file organization
 - Ensure that numbering/file naming is the same for each employee file
 - Use a checklist or a template
- Make sure job descriptions are updated and align with current assigned roles and are acknowledged (internal transfers, promotions)





Quality

- Documentation is crucial
- Implement post-mock survey performance improvement plans prior to your scheduled survey (POC, CAPA, etc.)
- Maintain a quality meeting agenda template inclusive of all quarterly and annual reporting requirements
 - Source of truth/reporting schedule/calendar and reporting checklist
- Maintain organized files





Patient records

- Remember the importance of the Welcome Packet
 - Patient information and support
 - Rights and responsibilities
 - Privacy practices
 - Complaint process
 - Emergency preparedness information
 - Infection control education







Summary

- Mock surveys can help specialty pharmacies:
 - Ensure survey readiness and decrease findings / deficiencies
 - Identify performance improvement opportunities
 - Improve processes and procedures leading to enhanced patient outcomes
 - Build survey confidence among pharmacy team members
- Focus your efforts



Accreditations overview

Comprehensive accreditation consulting support for specialty pharmacies



Gap analysis and strategy

Request data and assess current specialty pharmacy policies and processes



Policy and procedures

Curate policy and implementation tools and templates to help meet and exceed standards



Training and quality

Administer staff training and survey readiness plan, including pre-survey mock audit



Ongoing compliance support

Help identify and address quality, safety, and accreditation compliance gaps

A portfolio of services that targets specific accreditation challenges or provides full-service support from start to finish





Get in touch

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