



2019 CCH Ambulatory at Provident Hospital Accreditation Continuous Readiness Strategy



2019 Ambulatory Accreditation & Continuous Readiness Str

1. Establish Clinic Site Tracer Collaborative with Leadership and Staff

- Assess accreditation compliance with regulatory standards using Local staff, Clinic Manager, leadership and peer cross checks.
- Communicate findings, resolutions and best practices in leadership meetings.
- Institute an ongoing readiness monitoring and reporting schedule.
 - Monthly local regulatory check list audits
 - Monthly Lab audits
 - Report deficiencies and actions taken to Regional
 - Maintain completed check list in local binders

Registered Nurse Local Clinic Staff Nurse Clinicians,
PCMH team
Laboratory Consultant,
Infection Control

Clinic Manager,

- Quarterly regulatory audits at all cluster/clinic locations
- Report deficiencies to local leadership and compliance status weekly.

- Annual site survey sites of colleague
- Report deficiencies to local manager and Regional Director.
- Share best practices in leadership meetings.

Peer Tracers,
Registered Nurse
Local Staff

2. Annual/Bi-Annual Human Resources File Tracer

- Site Orientation
- Competency (Infection Control, Laboratory, Medication Management)
- Licensure and Certification validation

3. Biannual Oversight Tracers

• Quality Team , EOC Rounds (Safety, Infection Control, Facilities, Pharmacy), Associate Nurse Exec./ Nursing Director



2019 Provident Hospital Accreditation Continuous Readiness Strategy



TJC Survey Readiness Strategy

- 1. Revisit the Previous Survey Findings
- 2. Review Most Frequently Cited Standard
- 3. Learning Organizational approach (review Stroger findings/lessons)
- 4. Identify New Focus Areas

Survey Enhancements (suicide prevention, dialysis, medication compounding and high level disinfection)

Culture of Safety Questions

5. Hardwire New Services

Dialysis

Critical Care and Prolonged Ventilation Services

Sleep Lab



Survey Readiness Strategy Cont'd

6. Conducting Regulatory Tracers

- Individual Tracers trace a patient through the organization.
- System Tracers trace a specific program, i.e. infection control or medication management.
- *Program Specific* trace a specific clinical department or high risk, high volume process/procedure.
- 7. Workforce Interviews and Training
- 8. Physical Environment Risk Assessments
- 9. Policies/Procedures Review and Updating
- 10. Include Joint Commission readiness agenda items in department meetings
- 11. Disseminate information to the workforce



Survey Readiness Tools

- 1. TJC Regulatory Standards
- 2. TJC Regulatory Compliance reports
- 3. Provident Joint Commission Regulatory Guide
- 4. Survey readiness tips/updates
- 5. Regulatory Checklist



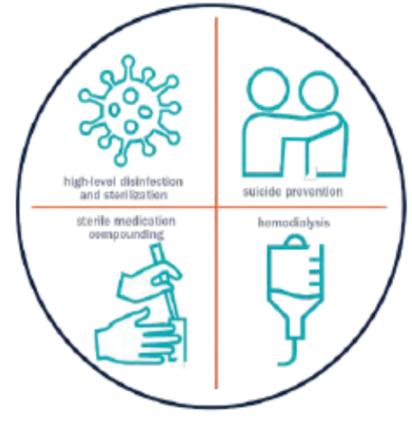
Survey Enhancements



TJC Survey Enhancements

Purpose: Survey prep, reduce risk and prevent adverse events.

- I. Suicide Prevention
- II. High Level Disinfection
- III. Sterile Medication Compounding
- IV. Dialysis



4-1-1 on Survey Enhancements



Suicide Prevention

- I. Addressing Ligature Risks (Risk assessment)
 - A. Patient rooms
 - B. Patient bathrooms
 - C. Protocol for removing objects
- II. Screening and Assessments
 - A. General screening
 - B. Detailed screening when necessary
- III. Additional requirements
 - A. 1:1 Direct observation or "Line of Sight"
 - B. Education and training for staff observing patients
 - C. Educating visitors
 - D. Monitoring bathroom use
 - E. Monitoring visitors



TJC Survey Updates



Sentinel Event Alerts

- #60 Developing a Reporting Culture
 - Establish trust that corrective action will be taken
 - Remove fear of unwarranted punitive action
 - Near misses identify potential weaknesses in the system
- #47 Radiation risks of diagnostic imaging and fluoroscopy- Updated
 - Eliminating avoidable radiation exposure
 - Original release was August 2011
 - References to fluoroscopy, staff education and the need for a Radiation Safety Officer

Quick Safety Alerts

- Protecting patients and others from influenza in the health care environment
- De-escalation in health care
- Accurate Patient Identification (Information gathering and matching)



Standard changes- Effective July 1, 2019

Provision of Care

PC.03.01.01- EP#5- A registered nurse supervises peri-operative nursing care.

- Supervision of staff performing circulatory duties during surgery

National Patient Safety Goal

NPSG.03.05.01- Anticoagulation Therapy

NPSG.15.01.01- Reduce the risk for suicide

- 1:1 monitoring of patients
- Removing objects that can be removed
- Assessing objects introduced by visitors
- Use safe transportation procedures



Thank you.

