Health Care Staffing Services Certification

**One Reviewer for One Day – Review Agenda**

| **Time** | **Activity** | **Organization Participants** |
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| 40 minutes starting at 8:00 a.m. | **Opening Conference**   * Introductions * Joint Commission & Certification overview * Slide presentation * President’s video * Agenda review * Dialogue about what the reviewer can do to help make this a meaningful review   **Staffing Firm Overview**   * Organizational structure * Customer base * Review and discuss information provided on certification application | Certification review coordinator  Leader(s)  Others at the discretion of the organization |
| 20 minutes | **Reviewer Planning Session**  *Please note: The reviewer needs a list of customers where clinical staff are currently working or have worked.*   * Reviewer selection of contracts/agreements for review—A **minimum of six contracts/ agreements** will be identified * Selected contracts/agreements need to be available for the Contract/Formal Agreement Review activity   *Please Note: The reviewer needs a roster of clinical staff that are currently placed or available for placement, sorted by discipline.*   * Reviewer selection of clinical staff records and tracers--A **minimum of 20** clinical staff will be identified * Files for these individuals need to be available for the Personnel File Review activity | Certification review coordinator (at the reviewer’s request) |
| 60 minutes | **Orientation to Staffing Firm and Data Use**  Business Functions   * Management and operations * On-call structure, if applicable * Marketing activities * Emergency management * Information management * Cyber security and protection systems * Code of business ethics   Customer/Client Functions   * Contracting/formal agreement processes * MSPs and vendor management * Subcontracting * Conflict of interest policies * Customer reassignment of clinical staff (floating) * Tracking and fulfillment of customer/client staff requirements   Staffing Functions   * Performance of recruitment, retention, and competency evaluation processes * Clinical staff performance evaluation processes * Setting clinical staff health requirements * Expectations regarding National Patient Safety Goals   Data Use   * Approach to performance improvement * Data collection processes * Data quality and maintaining integrity * Data analysis processes * Priorities for improvement * Certification standardized performance measures * Customer satisfaction data * Clinical staff satisfaction data * Customer complaint reporting * Clinical staff complaints, exit interview data | Leader(s) and individual(s) responsible for these functions |
| 30 minutes | **Review of Firm’s Uploaded Documents** |  |
| 30 minutes | **Contract/Formal Agreement Review**   * Discussion of contracting/formal agreement process * Facilitated review of a select sample of contracts and formal agreements | Individual(s) familiar with content and responsible for formal agreements/ contracts |
| 60 minutes | **Competence Assessment & Credentialing Session**   * Application process * Employment history checks * Credentials verification process * Hiring criteria * Orientation * Placement criteria * Clinical staff to customer matching process * Clinical staff supervision * Clinical staff performance evaluation, including customer feedback * Maintaining competency of clinical staff | Individuals responsible for managing and performing these processes |
| 30 minutes | **Reviewer Lunch** |  |
| 120 minutes | **Personnel File Review**   * Facilitated review of the selected sample of files begins in this activity * Discussion during this activity will focus on the firm’s internal credentials quality assurance audit process, including * Reporting audit results * Compiling and analyzing the audit data for trends * Identifying opportunities to improve the credentialing process * Planned improvements or changes already implemented to the credentialing process * Efforts to maintain and sustain improved performance | Individual(s) with authorized access to files  Individual(s) who can facilitate the file review  Individual(s) that performs credentials audits for the firm |
| 30 minutes | **Individual Clinical Staff Tracers**   * First contact (recruitment) * Data gathering (application process) * Discussion related to file review   + Licensure   + Credentials   + Competency   + Continuing education   + Orientation   + Health status * Hiring decision * Orientation/assignment availability * First placement   + How data is provided to customer   + Clinical staff to customer matching process   + Customer reassignment of clinical staff (floating)   + Registering concerns/complaints * Performance evaluation process | Individual(s) who can step the reviewer through a clinical staff person’s experience with the firm from point of first contact through recruitment, hiring, orientation and first placement, through initial performance evaluation  Should involve individuals responsible for the day-to-day performance of activities |
| 60 minutes | **Summary Discussion & Reviewer Report Preparation**  This time will be utilized for a final discussion prior to the reviewer’s report preparation and the exit conference. Topics that may be discussed include:   * Any issues not yet resolved (IOUs) * The identified Requirements For Improvement (RFIs) * What made the review meaningful to the team * Sharing best practices to inspire quality improvement and/or outcomes * Educative activities of value to the program * Did I meet the goals of your team today? | Certification review coordinator, if requested by reviewer |
| 30 minutes ending at approximately 4:30 p.m. | **Organization Exit Conference** | Program and clinical leadership  Others at the discretion of the organization |