



Q&A With The Joint Commission

Navigating the Most Common First Survey Challenges

Home Care Accreditation

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Today's Home Care Experts



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Survey Process

Pre-Submitted Questions

Is there a sample survey timeline we can access to see what will happen while surveyors are with us?

Pre-Submitted Questions

Because of COVID will the survey be longer to add that to things the surveyor will ask us about?

Pre-Submitted Questions

Can a Palliative Care Program be Joint Commission certified while their hospice service line is certified by the ACHC?

Pre-Submitted Questions

Does The Joint Commission accredit board and care facilities? If so, can you give some advice of what steps should be taken to start the process to become accredited?

Pre-Submitted Questions

Are there "Self-Survey" tools/checklists/etc. for us to use to self-check our own compliance to the standards pre-survey (or between surveys)?

Pre-Submitted Questions

Are the surveyors who will survey my agency home care nurses?

Pre-Submitted Questions

During the survey, will your survey person ask our patients questions? If they do, are we supposed to tell them that beforehand?

Pre-Submitted Questions

Is the minimum client requirement limited to home healthcare only, or a combination of clients across the business spectrum?

Pre-Submitted Questions

What is your recommendation for Tracer activity cadence to remain continually survey ready?

Pre-Submitted Questions

Who from our agency needs to be available when the survey occurs? Do they just answer questions, or do we need to provide a presentation?

Pre-Submitted Questions

What do I need to pass the Joint Commission survey when I don't have patients?

Pre-Submitted Questions

Are there specific accreditation requirements for New Jersey?

Pre-Submitted Question

What does deemed status mean?

Continuous Resource

The Heads Up Report

Heads-Up Reports on Joint Commission Connect The Joint Commission

HEADS UP...

TOPIC: Leadership accountability
SETTING: Home Care (OME) Program

Why is this important?

Leadership is an important component in the provision of home care services. Many leadership responsibilities directly affect the provision of care, treatment, or services, as well as the day-to-day operations of the organization. The complexity and construct of organization leadership varies, in some cases, these responsibilities will be shared among leaders, and in other cases, a particular leader has primary responsibility. Individual leaders may have several different roles. Regardless of the organization's structure, it is important that leaders carry out all their responsibilities. Ultimately, leadership is accountable for the safety, quality, treatment and services provided by home care agencies. The LD standards are often cited when systemic problems are noted throughout the organization.

Scope of the Problem:

Time period: **July 1, 2020 through May 13, 2021**
Number of full surveys performed: **1,258**

Number of surveys with moderate to high risk findings for LD.01.03.01 EP 12: **90 (7%)**
Number of surveys with moderate to high risk findings for LD.01.03.01 Governance is ultimately accountable for the safety and quality of care, treatment, or services.

Relevant standard/EP: LD.01.03.01 Governance is ultimately accountable for the safety and quality of care, treatment, or services.
EP 12 For home health agencies and hospices that elect to use The Joint Commission deemed status option:

- The organization has a governing body that assumes full legal authority and responsibility for the overall operation of the organization.
- Overall operation of the organization includes provision of services, fiscal operations, review of the agency's budget and operational plans, and its quality assessment and performance improvement (QAPI) program.
- A qualified administrator appointed by and reporting to the governing body is responsible for the day-to-day operations of the hospice.

Sample survey observations [from surveyor notes] and contributing factors

Sample observations:

- The governing body/leadership did not ensure that the following Conditions of Participation (CoPs) were met as determined through observations, documentation, and staff interviews.
- Leadership and the governing body were aware of [include cited findings] and did not address them.
- Leadership and the governing body failed to understand the degree of risk in...[listing of relevant CoPs].
- There was evidence that harm occurred to a patient, visitor, family member or staff as a result of [relevant CoPs].
- New owners did not have an annual operating budget for the past two years, nor did they have a governing board to oversee and approve a budget.
- HCO had not adopted bylaws, a charter, articles of incorporation, an official statement of objectives or the hospice's governing policies that states explicitly that the program provided services directly or through arrangements with other qualified providers and that the program did not refuse service to or employment to or in any other way discriminate against any person on the basis of race or color, age, religion, sex, pregnancy, childbirth and national origin as a requirement of California and federal (The Civil Rights Act of 1964) law.

Potential contributing factors:

- Staff turnover resulted in a knowledge deficit within current staff.
- Position changes resulted in lack of sufficient auditing and monitoring.
- Leadership transitions led to lack of communication and accountability for ongoing compliance.
- Lack of monitoring system to ensure staff were compliant with the CoPs.

blems in your organization

cedures

nd procedures that outline the roles and responsibilities of leadership and governing body? Do these policies that affect the provision of care, treatment or services? Do these policies and procedures address the day-to-

responsible for carrying out leadership roles and responsibilities?

responsibilities?

re of their roles and responsibilities?

on their assigned responsibilities?

izational chart as required by CMS?

r the governing body when something is not in compliance with policies or standards?
compliant issues are identified?

to support your care and services such as Infection Control Program, Quality Assessment and
Program, etc.?

nization to assess adherence and compliance with policies, procedures and standards?
regular basis (e.g., annually)

ne in mitigating risks in these areas?

Services (CMS) website for more information regarding CoPs:
<https://www.jointcommission.org/standards/standards-listing/CFCSAndCoPs/homehealth>

Account Operations

Pre-Submitted Questions

Will my survey be announced or will there be some sort of communication telling me the surveyor is on the way?

Pre-Submitted Questions

Can you go into details about the requirements for Specialty Pharmacy to be eligible for accreditation under Home Care?

Standards Questions

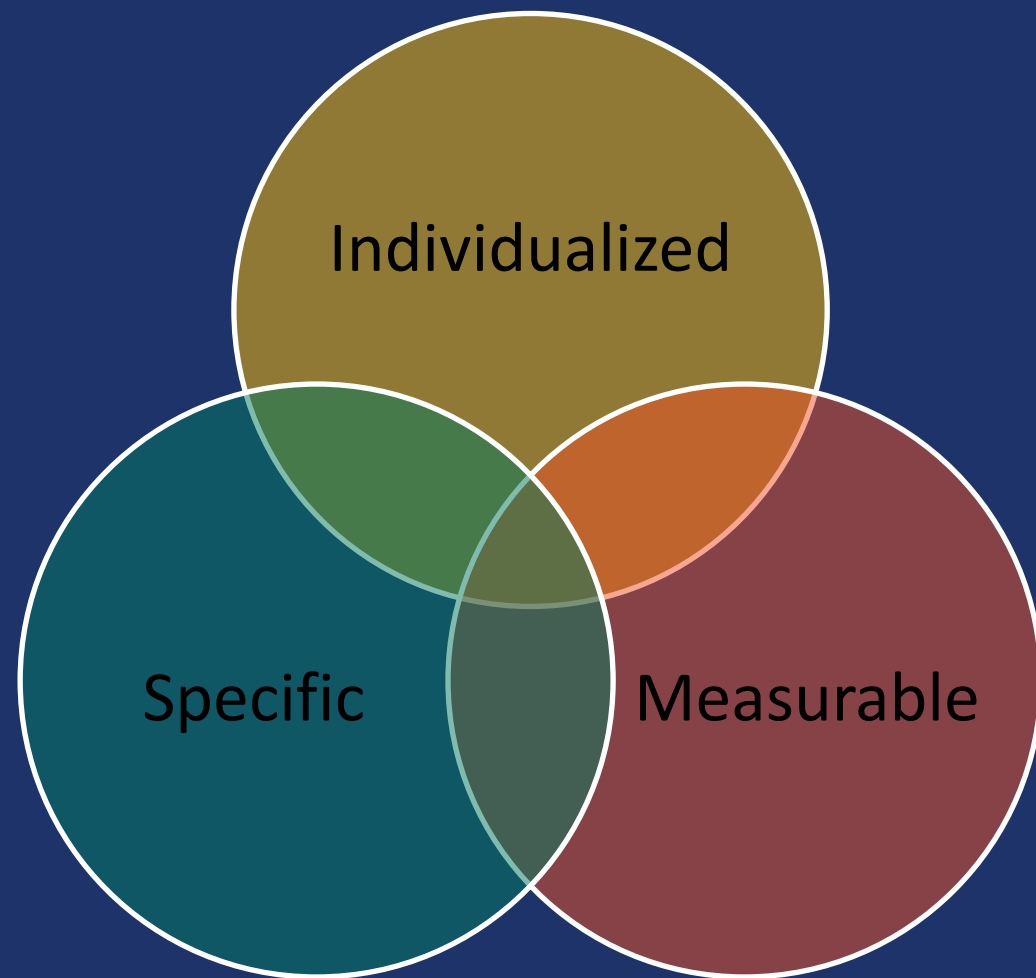
Pre-Submitted Questions

What standards require a track record of compliance vs. those that do not until the next full survey?

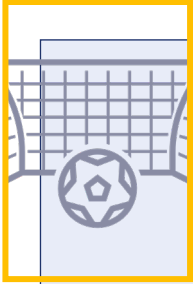
Pre-Submitted Questions

Home Health and Hospice organizations are struggling with Care Planning as the number one deficiency -- how can Joint Commission guide us to better our score?

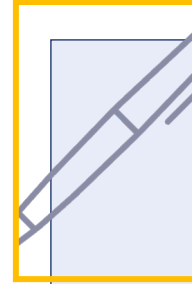
Goals: Breaking it Down



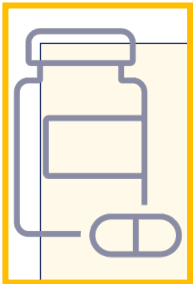
Measurable Goals



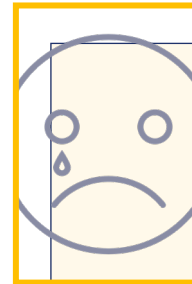
Goals should have a realistic time frame and be capable of measuring progress towards outcomes.



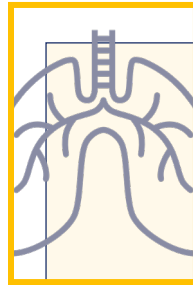
It is helpful to utilize “as evidenced by” statements.



*The patient will achieve effective pain management **as evidenced by** a stated pain rating of 4/10 within a week.*



*The patient will experience a decrease in depression **as evidenced by** 3 or fewer crying episodes a day within two weeks.*



*The patient will be free from shortness of breath **as evidenced by** a respiratory rate of 18-24 breaths/minute within a week.*

Pre-Submitted Questions

What does it mean that there is a 2 minute wet time for cleaning medical equipment? How do you define wet time?

Pre-Submitted Questions

What is the best practice for OTC ointments/creams? Add to med list?

Pre-Submitted Questions

**To determine if a product
is FDA approved**



Pre-Submitted Questions

Can you explain which competency assessments are required?

Pre-Submitted Questions

How should we keep track of updates for survey and company success?

Pre-Submitted Questions

What is the most common pitfall?

Time for additional questions

Thank you!