



# ACCREDITATION IN TRANSITION: HOW NEW STANDARDS ARE SHAPING THE PROCESS

---

**Shannon Hawkins**

*Director of Accreditation, QUAD A*

**Jessie Dietmeyer**

*Accreditation Manager, QUAD A*

**Ellen Benson**

*Medicare Team Lead, QUAD A*

**Patients First. *Always.***

# OVERSEEING EXCELLENCE: OUR ACCREDITATION MANAGEMENT TEAM



**Jessie Dietmeyer**  
Accreditation Manager



**Shannon Hawkins**  
Director of Accreditation



**Ellen Benson**  
Medicare Team Lead

## ACCREDITATION SPECIALISTS

- Process applications
- Provide guidance on accreditation processes
- Maintains facility throughout their accreditation cycle

## CLINICAL TEAM

- In-House RNs ensure accurate documentation
- Review survey reports and corrections
- Provide stakeholder education
- Respond to standards inquiries
- Research new requirements

## SURVEY SCHEDULING TEAM

- Coordinate onsite surveys
- Assign surveyors
- Compile survey materials
- Monitor surveyor performance





# BACK TO THE BASICS

---

Patients First. *Always.*

# WHAT IS ACCREDITATION?

---

Healthcare accreditation is a process through which a healthcare organization or facility voluntarily undergoes an external evaluation to demonstrate that it meets certain predetermined standards of quality and safety set by an accrediting body. These standards typically cover several aspects of healthcare delivery, including patient care, safety, facilities management, staffing, and administrative procedures. In many parts of the world, including the US, these standards exceed the requirements set by the government.



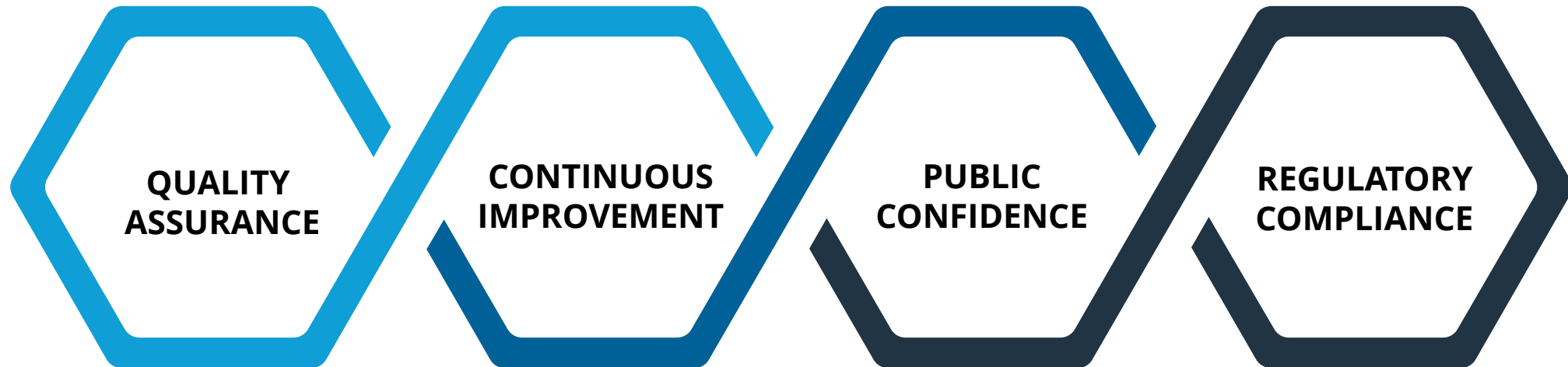
# WHY ACCREDITATION?

---

The last thing your patients  
should ever question while in  
your care **is their safety.**

# WHY ACCREDITATION?

---





# WHO IS QUAD A?

Our Story, Our Duty, Our Difference, Our Promise

---

Patients First. *Always.*



# ABOUT QUAD A

---

QUAD A has worked with thousands of healthcare facilities to **standardize and improve the quality of healthcare they provide** – believing that **patient safety should always come first**. At QUAD A, the goal is simple, to be your **go-to provider when it comes to accreditation**.

- **Global Accreditation Organization**
- **Established in 1980**
- **Non-profit and Physician Founded**
- **Patients First. Always.**
- **Peer-based Survey Process**
- **Educational Approach to Compliance**
- **Mandatory 100% Compliance**
- **Board-certified or Eligible Staff**
- **Drives Continuous Quality Improvement**
- **CMS approved ASC-'97, OPT-'11, and RHC-'12**
- **IEEA accredited international since 2015**

# OUR DUTY

---

- Promote & Assess safety
- Aid in standardized practices
- Facilitate compliance
- Ongoing data-driven standards revisions
- Educate facilities and decrease vulnerabilities in the delivery of patient care



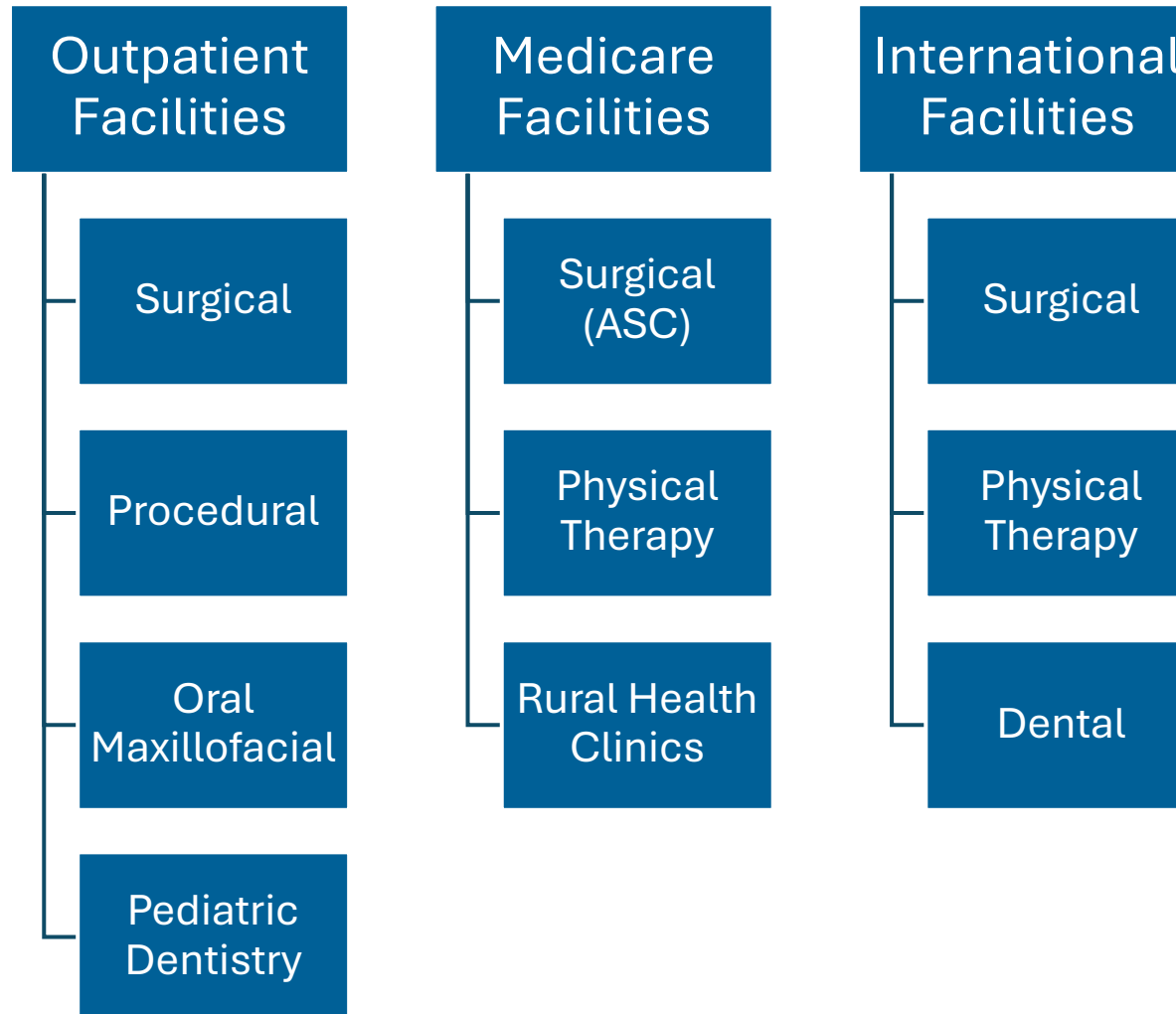
# THE QUAD A PROMISE

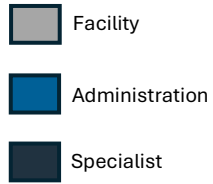
---

To provide *Reliable Resources,*  
*Uncompromising Standards, and*  
*Effective Communication* at every  
stage of the accreditation process.



# OUR ACCREDITATION PROGRAMS





# A STEP-BY-STEP GUIDE: APPLICATION → APPROVAL



## STEP 02

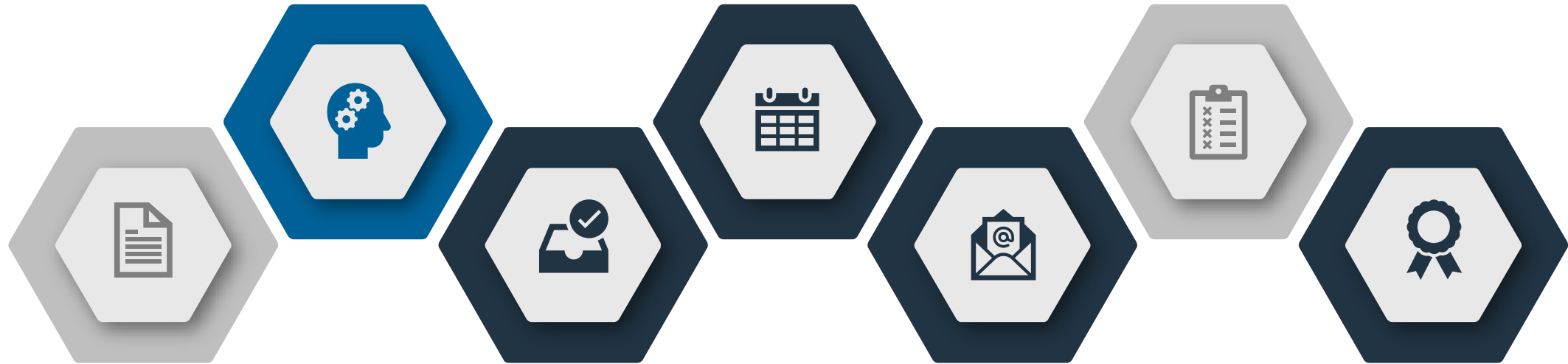
Application materials are provided to the assigned Accreditation Specialist

## STEP 04

Schedule on-site survey.

## STEP 06

If there are deficiencies, the facility is issued a Statement of Deficiency within 10 days. The facility is required to return a Plan of Corrections within 10 days.



## STEP 01

The facility submits a complete application and fees within the QUAD A portal

## STEP 03

Application materials are processed, and facilities will be contacted within 10 business days if additional information is needed.

## STEP 05

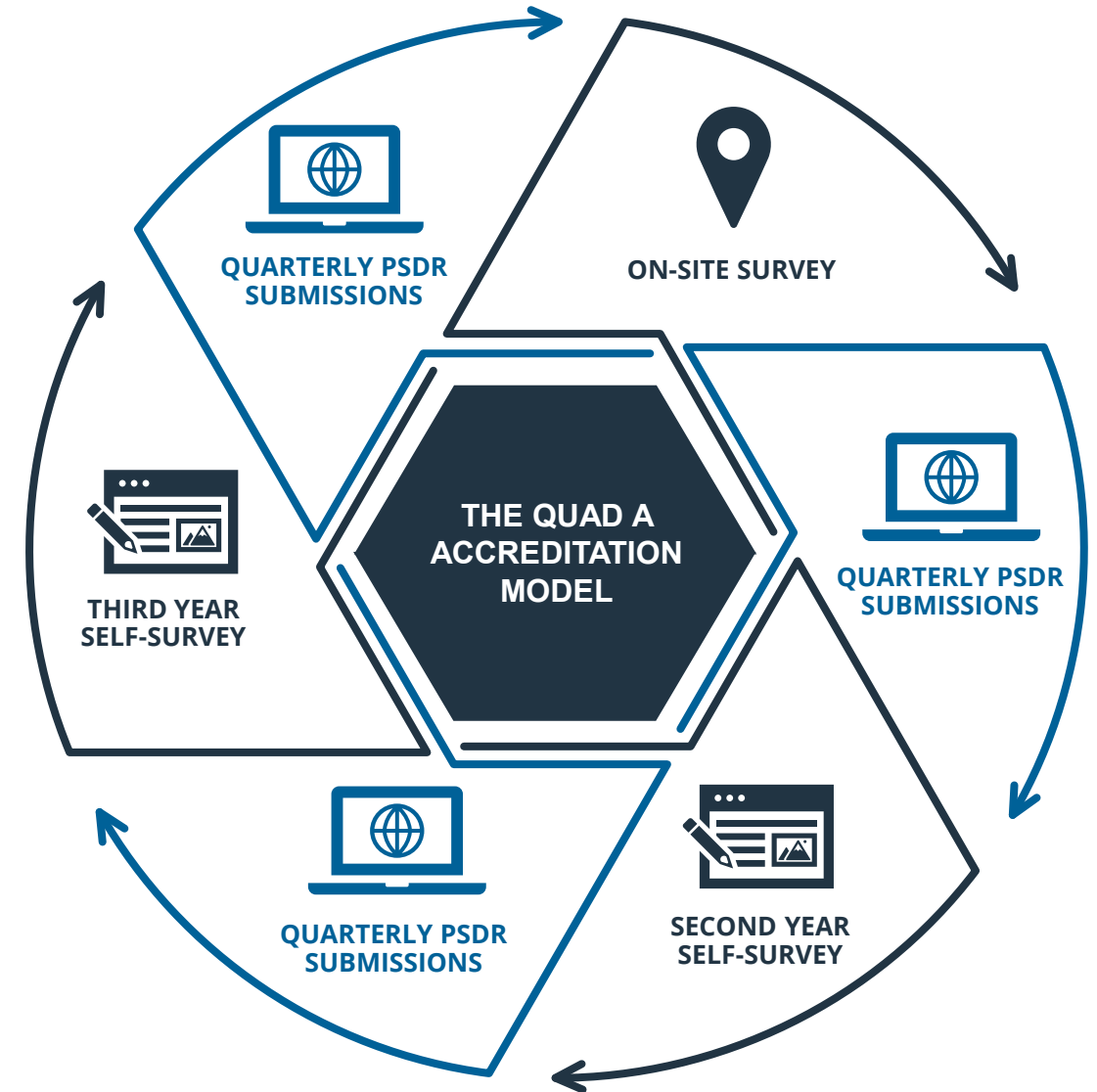
Confirmation of survey is sent to facility.

## STEP 07

If there are no deficiencies, or once deficiencies have been corrected, the evaluation is submitted to the accreditation chair for approval, and certification is then issued.

# ACCREDITATION CYCLE

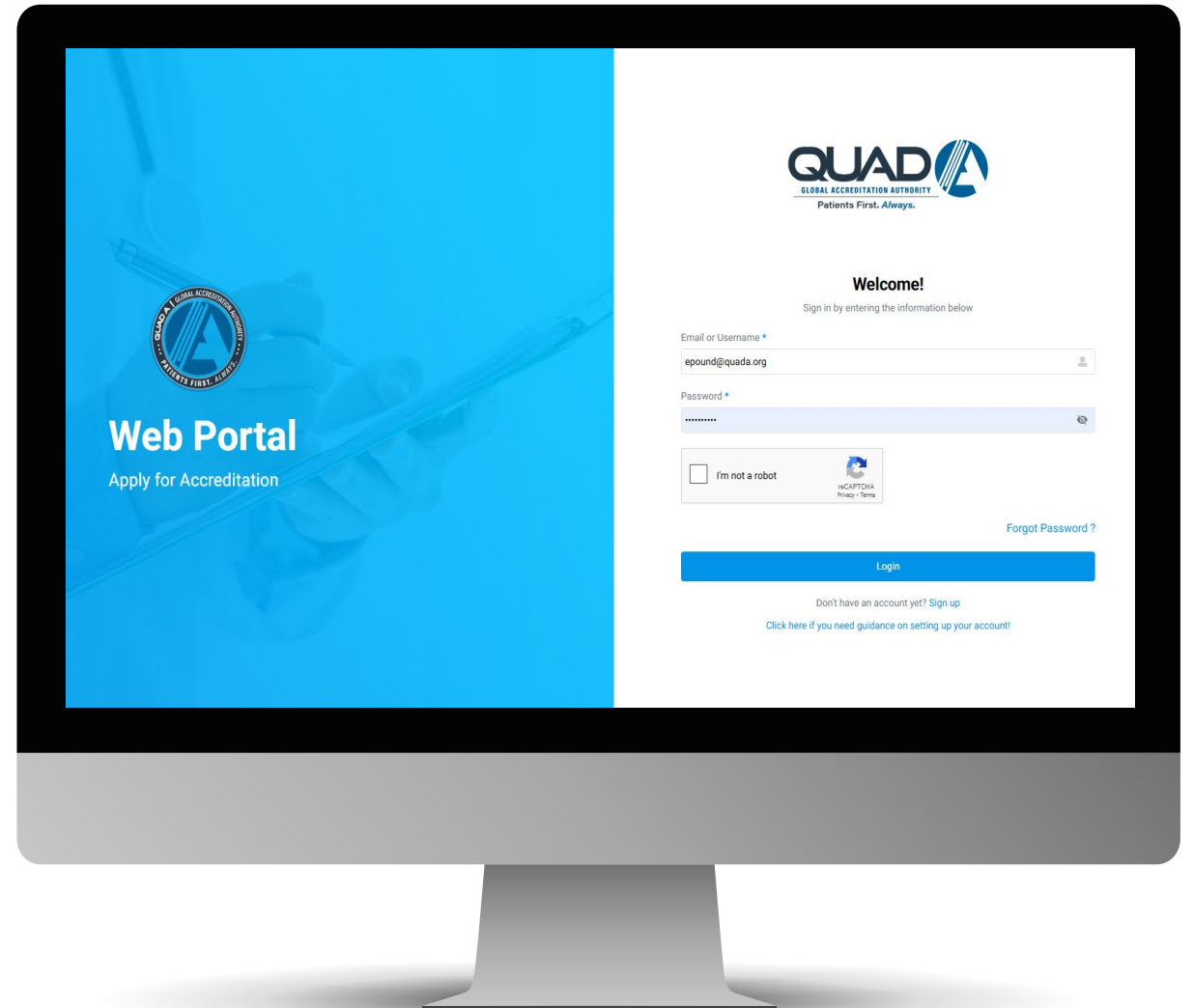
- Triennial accreditation
- Annual Self-Survey
  - Quarterly PSDR Submissions
  - Unanticipated Sequelae Reporting
  - Death Reporting
- Surveys after addition of services
  - Relocations
  - Construction to patient care areas
  - Upgrades in anesthesia class



# TRANSITIONING TO THE QUAD A WEB PORTAL

---

- Proprietary QUAD A system
  - Application
  - Payments
  - Survey Tracking
  - Accreditation Cycle Information
  - Post Survey Actions
  - Notification Center





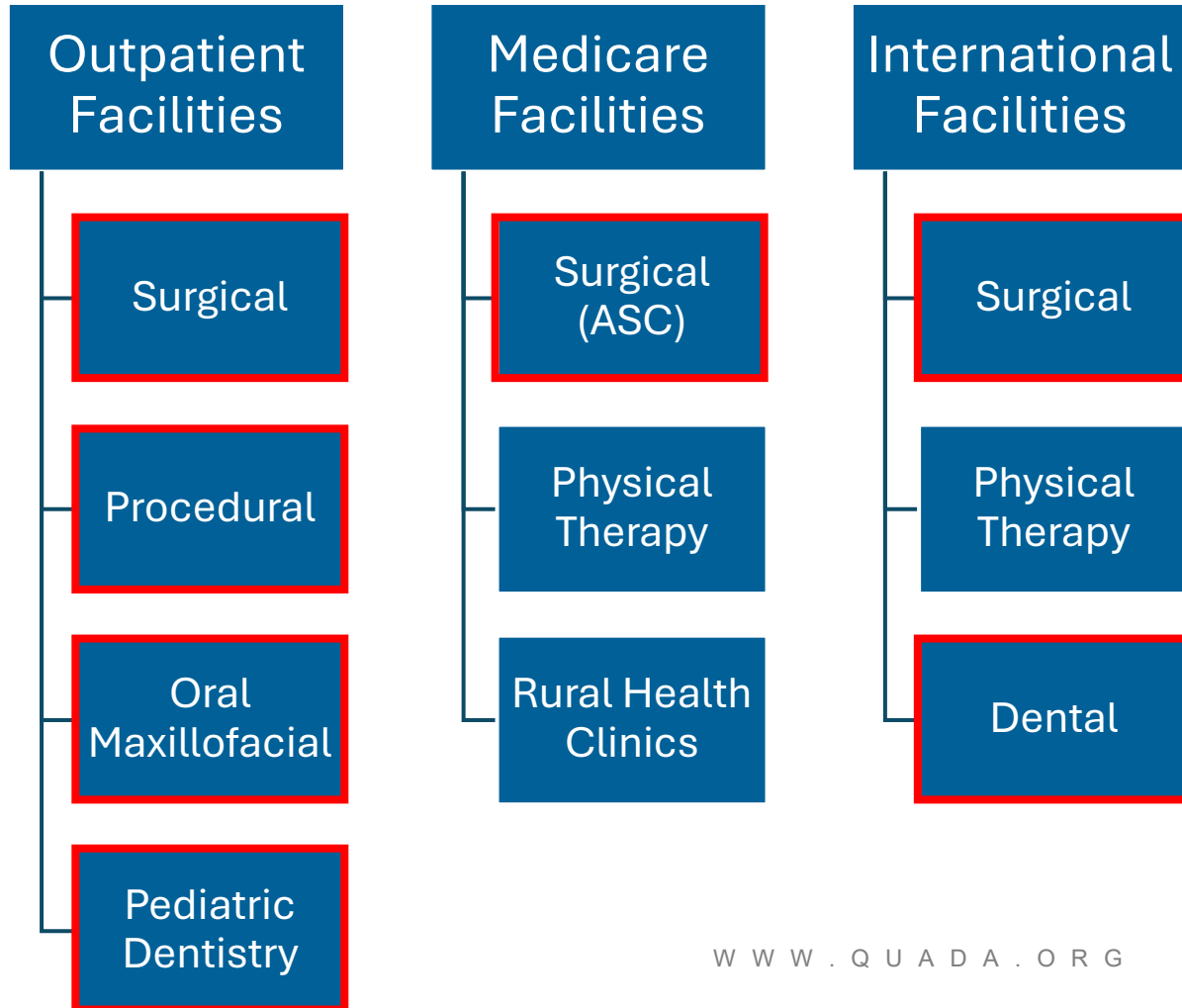
# HOW WILL THE UPDATED STANDARDS INFLUENCE THE ACCREDITATION PROCESS? AN OVERVIEW

---

Patients First. *Always.*



# HOSPITAL PRIVILEGES

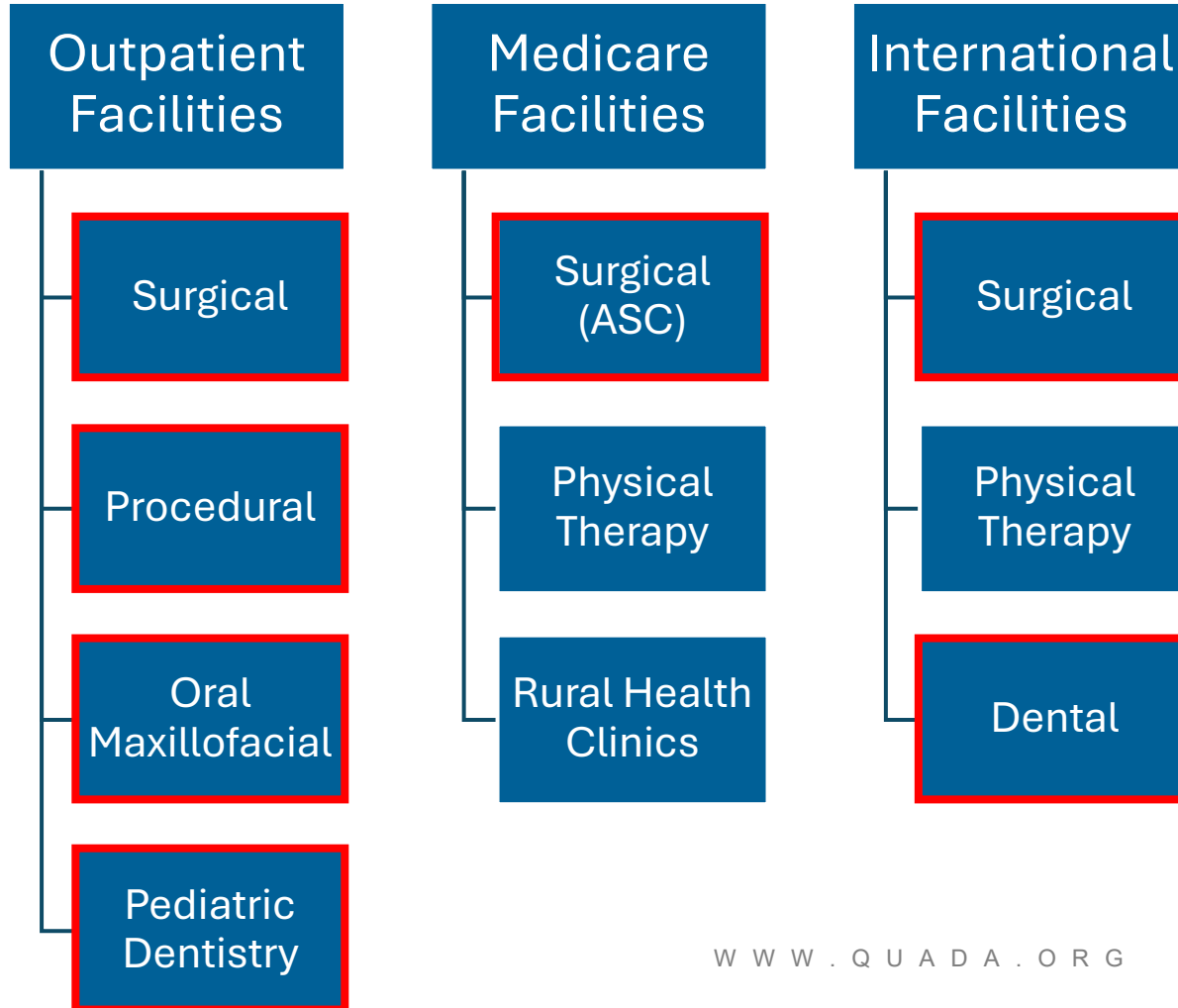


## STANDARD 11-C-6 (NEW):

The facility must have written policies and procedures that address the criteria for clinical staff privileges and the process that the facility's leadership body uses when reviewing physician, APRN, and PA credentials and determining whether to grant privileges and the scope of the privileges for each practitioner.

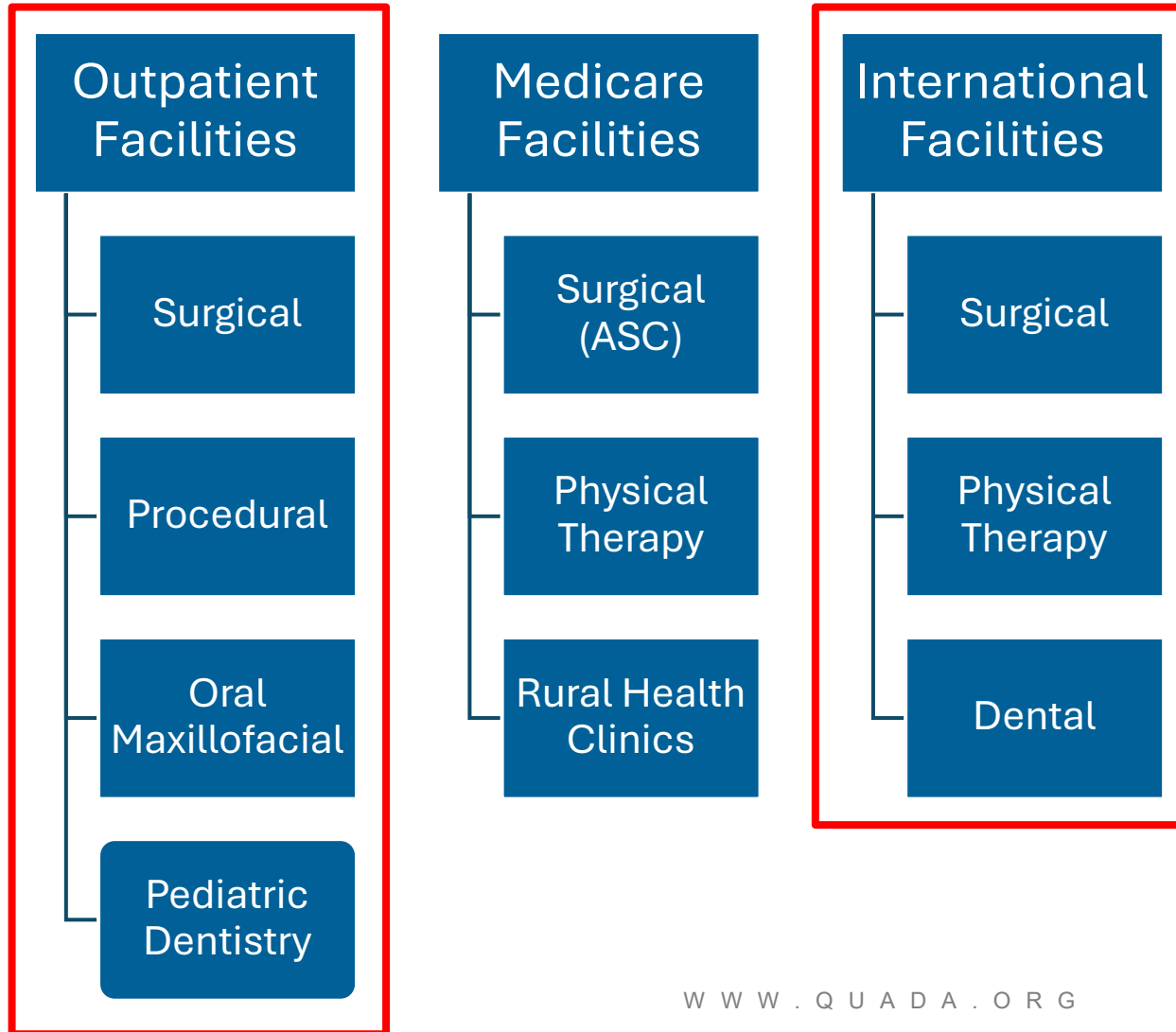
- Hospital privilege information for providers will no longer be required for any QUAD A accredited surgical programs
- Now up to the governing body of the surgery center to determine the competency of providers that work in their facility

# ELIMINATION OF C-M ANESTHESIA CLASS



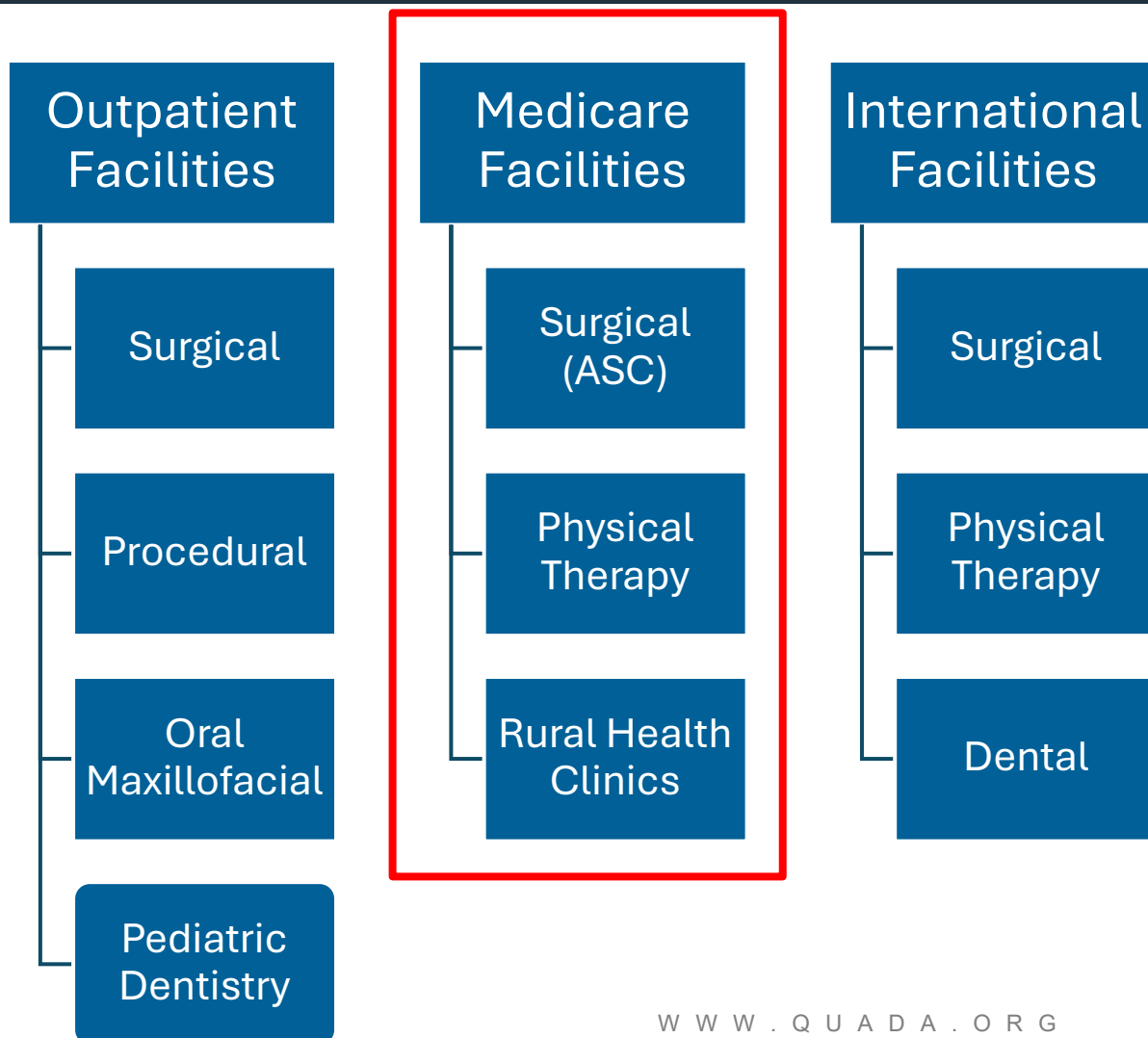
- How will the Quad A accreditation team handle this transition?  
**SLOWLY**
- Facilities with a C-M designation will be transitioned to Class C during next renewal
  - A survey is required if a facility wants to begin a higher level of anesthesia services, specifically general anesthesia
- An in-depth overview of the new anesthesia classifications will be available later during this Lunch & Learn series
  - *Anesthesia Classification Updates: Key Changes to Watch For*

# CHANGES FOR NON-MEDICARE PROGRAMS



- **Observation of Care Implementation**
  - When facilities provide their survey availability, they must provide dates of when providers will see patients, not just business hours
  - As practicing physicians and medical professionals with decades of accreditation experience, the QUAD A Board believes that directly observing policies and procedures in action provides the clearest perspective for assessing compliance
- **Plan of Corrections**
  - Now due within 10 days, previously due within 30 days
  - Allows for QUAD A personnel to review the proposed PoC
  - Gives facilities enough time to begin implementing their PoCs
- **Corrected Onsite**
  - Ensures that all deficiencies, regardless of their status at the time of the survey, are documented and monitored for sustained compliance on an ongoing basis

# CHANGES FOR MEDICARE PROGRAMS



**Besides the changes noted previously, there are no additional changes to QUADA'S Medicare programs.**



# YOUR QUESTIONS, OUR ANSWERS

---

Patients First. *Always.*

# QUESTION:

**We are an interested ASC looking to apply with QUAD A, what is the general time of gaining accreditation?**

# QUESTION:

**We just completed our Self-Survey for renewal, using the current version of the Standards Manual. After the new standards are in effect, do we need to re-do the self-survey?**

# QUESTION:

**I am adding a new physician to my surgery center, what are the new requirements when reporting this to QUAD A?**



# QUESTION:

**Previously we were classified as Class C-M because the highest level of anesthesia used at our facility was IV sedation with Propofol. When we are classified as Class C after our next renewal, does that allow us to start using General Anesthesia if we wished to?**

## CONTACT US!

### Clinical Questions?

*Email Our Clinical Team!*

[standards@quada.org](mailto:standards@quada.org)

**Due to the high volume of submissions and the technical and legal considerations involved in addressing questions related to standards, we kindly ask for your patience. The clinical team will respond as soon as possible, in the order in which the questions are received, to ensure we provide you with the most accurate and well-informed answer possible.**

# **THANK YOU!**

