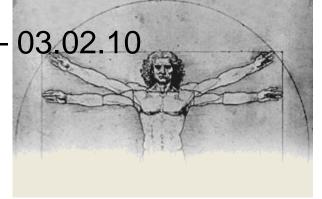
Issues in Retail Clinic Accreditation

Paul Schyve, M.D., Senior Vice President Michael Kulczycki, Executive Director

National Retail Clinic Summit – 03.02.10



Overview

- Role of The Joint Commission as evaluator of quality of care
- Standards as evaluation framework
- Experiences of accredited customers
- System survey process
- Challenging issues
- Other guidelines for retail health



Why Accreditation? Why The Joint Commission?



The Joint Commission role: Helping Health Care Organizations Help Patients



opyright, The Joint Commis

Vision / Mission

How do we envision health care:

All people always experience the safest, highest quality, best-value health care across all settings.

New directions led to updating in 2009:

To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value



Joint Commission model

- Background
 - Not-for-profit organization
 - Accredits 17,000+ total organizations
 - Accrediting ambulatory setting since 1975, including primary care settings:
 - Community health centers
 - Urgent care centers
 - Medical group practices
 - -Retail clinics (convenient care)



Value of Joint Commission Accreditation

- Evaluates quality of patient care
- Demonstrates providers' commitment to patient safety, and strengthens community confidence
- Focuses on systems improvement & continuous standards compliance



...Value of Accreditation

- Offers providers 'brand name' competitive differentiation
- Enhances staff recruitment and development
- Recognized by select insurers and other third parties
- ▼ Nationally recognized...

"Gold Seal of Approval™"



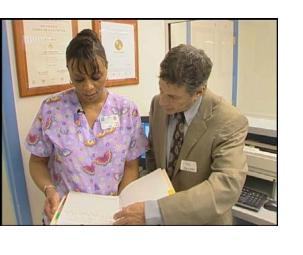
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Increasing recognition of retail health by payers

- Major payers are recognizing model:
 - AetnaHealthPartners
 - CignaBCBS of Minn.
 - Humana
- Payers using existing review processes:
 - Standards
 - Credentials review
 - Clinical benchmarking, including satisfaction
- Payers watching Joint Commission accreditation of convenient care clinics



Accreditation components include:



- Continuous process, not "ramping up"
- Use of web-based tools
- Increased onsite focus on direct patient care
- Standards as blueprint

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Standards are.....

- Statements defining the performance expectations, structures, or processes that must be in place for an organization to provide safe and high quality care
- Elements of performance = evidence of compliance
- Together = A "blueprint" for evaluation



Ambulatory Care Standards



- Evaluation organized around 14 chapters, eg:
 - Provision of Care
 - Leadership
 - Performance Improvement
- New editions released annually
- Electronic version E-dition provides profile of standards unique to convenient care
- Accreditation....is an 'open book' process



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MinuteClinic

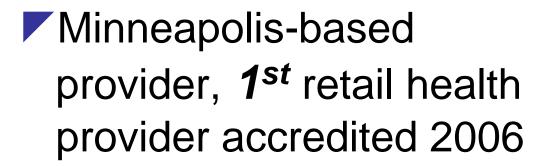




Questions or Concerns

Patients are encouraged to contact MinuteClinic with concerns regarding patient care or safety that were not properly addressed during a clinic visit. Please cell #351-966.200.8489 (9) (2727) or enail customercare@minuteclinic.com.





- Accredited under Ambulatory Care Accreditation Program, using system survey process
- Re-accredited with over 500 sites in 2009

aht. The Joint Commission

MinuteClinic on accreditation benefits

- Fosters a disciplined approach to continuous quality improvement
- Guides organizational design & accountability
- Crystallizes communication about key components of our delivery model, such as "evidence-based medicine" and "quality"



MinuteClinic on accreditation benefits

- Enhances cross-functional teamwork across all levels
- Prompts documentation of proprietary processes & business outcomes
- Promotes understanding among all employees on how their work contributes to overall company mission
- Shapes the culture of work environment



The Little Clinic



Nashville-based provider accredited 2009

Accredited under Ambulatory Care Accreditation Program, using system survey process



Welcome to The Little Clinic[™]

Finally, there's medical care on your schedule, in your neighborhood — right where you grocery shop. Our clinics are staffed by Advanced Registered Nurse Practitioners (ARNPs) and Physician Assistants (PAs) that treat common illnesses and minor injuries. They also provide wellness care; like routine check-ups, screenings and vaccinations. Plus, they can prescribe medication when you need it.

- No appointment necessary
- Open 7 days a week, including weeknights
- Affordable -- covered by many health insurance plans
- Care for the whole family -- 12 months of age and up

Note: The Little Clinic and all of its affiliate health care providers operate in accordance with all the applicable state and federal laws and medical standards.





Post-survey experience

- Response from Director of Quality Improvement, The Little Clinic:
 - ~ "Surveyors were liked by the managers and the practitioners. They were helpful and generous with their knowledge."
 - "I will be responding to post-survey steps; everyone here is excited when we can claim the Gold Seal."



What other Ambulatory customers say about Accreditation results

- Avoids poor medical outcomes
- Increases risk reduction strategies
 - Some liability underwriters recognize accreditation with financial incentives
- Increases infection prevention
- Encourages use of data to drive organization improvements



Study on Impact of Accreditation

- Research conducted by:
 - University of Illinois Survey Research Lab
 - Study funded by Health Services and Resources Administration
- Study = "Quality-Related Activities in Federally Supported Health Centers"
- Presented at June 2007 Academy of Health Annual Meeting
- Published in peer-reviewed

 Journal of Ambulatory Care Management
 (Oct-Dec 2008)



...Study conclusions

- Accreditation affected both content of improvement areas & frequency:
 - quality improvement projects,
 - training, and
 - competency verification
- Accreditation shows "greater likelihood that centers have specific processes in place designed to improve the quality of care."



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System survey process

- Pilot-tested in 2005, approved in 2006
- 2010 = used by 10 corporate customers, over 1,000 sites of care
- Ambulatory providers using system survey process:
 - Convenient care clinics
 - Freestanding emergency rooms
 - Vascular access providers
 - Sleep diagnostic centers
 - Imaging providers



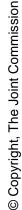
System accreditation

- Concept award single accreditation decision to system with multiple sites
- Evaluates organization-wide functions:
 - Corporate office review over two days
 - Unannounced visits to sample (25%) of total sites
- Provides "audit" of multiple sites implementation of corporate policies



System criteria--required

- Common governance structure
- System management oversight:
 - Performance improvement
 - Set strategic goals and expectations
 - Develop policies & monitor execution
 - Approve and monitor site budgets
 - Performance of site managers
 - Credentialing/privileging



System process

Ambulatory Care

- Survey every three years
- Begin/end scheduled corporate office visit
- Sampling of sites with unannounced visits
- Uses stratified, purposive sampling accounting for size/risk levels of sites
- "Extension" survey process to account for system growth

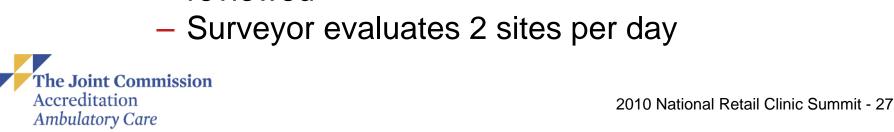
Survey process

Corporate office visits (announced):

- Provide surveyors corporate overview
- Conduct agenda sessions:
 - Leadership, Human Resources, Systems Tracer on Data Use
- Approximately 40% of applicable standards reviewed

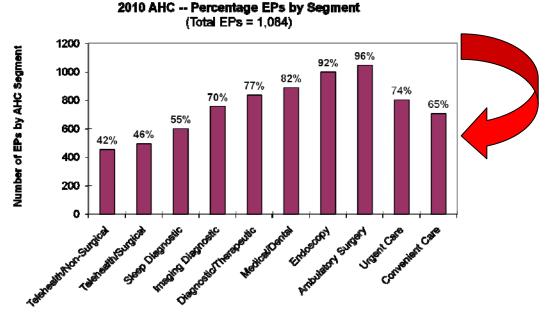
Site visits (unannounced):

- Focused on "patient tracer"
- Validate findings from corporate office
- Approximately 60% of applicable standards reviewed



Standards for retail health

- Used input from customers
- Assign applicability (65%) to Convenient Care from full set of ambulatory standards





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Revised sampling for resurveys

- 3 years experience with system surveys including customer input – led to alternative sampling plan
- Applies to "cookie cutter" organizations, like convenient care, as highly centralized care providers with "single services"
- Uses "applied acceptance sampling" supported by prior information about organization:
 - Reduces site sampling from 25% to 10%
 - Only applies to system resurveys

...Sampling change

- Reduces site level, unannounced survey impact for convenient care providers, eg:
 - Previous resurvey sample = 139
 - New resurvey sample = 56
- Shares financial efficiencies in onsite survey process with customer



Hospital-based providers...

- Convenient care clinic integration with hospital?
 - Organizational and functional review
- Integrated means:
 - Common governance with hospital system
 - Relies on hospital (max = 2 to disprove integration):
 - Credentialing physicians
 - Human resource services
 - Policies & procedures
 - Management
 - Integrated patient records
 - Performance improvement
 - Patient billing
 - Public portrayal of clinics as hospital-based

...Hospital-based

- If integrated, convenient care clinics reviewed as part of hospital survey process:
 - Hospital standards used for site review
 - "System" survey process not applicable
 - 2010, CCA organization "accredited" under Hospital program

If *not* integrated:

- accreditation decision is voluntary
- "System" survey process applies



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Challenges of accreditation process

- Survey "visit creep"
- Unidirectional communication at site level during surveys
- Tenant relationships
- Interpretation of standards
- "Scope creep" by retail health providers

Joint Commission

Future issues

- Role of retail health as referral source to "medical homes"
- Development of accreditation "add-on" component Joint Commission's Primary Care Home initiative
- ✓ Interest by Health & Human Services (HHS):
 - Asst Sec'y for Planning & Evaluation commissioned study
 - RAND Corp. environmental scan, including:
 - Literature review
 - Interview key stakeholders
 - April 2010 "expert panel" session



...Future issues

- Input from industry to Joint Commission:
 - Customer Advisory Council (including CCA member)
 - Professional Technical & Advisory
 Committee representation by CCA
 - Input to standards development
 - Input on survey process

Other guidelines for convenient care

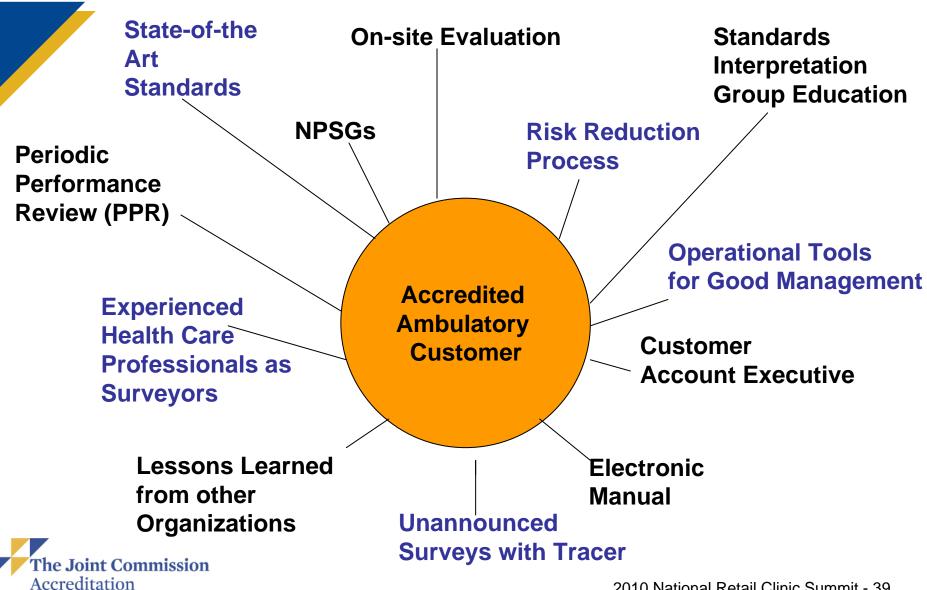
- Guidelines/principles from physician societies:
 - American Academy of Family Physicians
 - http://bit.ly/AAFPretailhlth
 - American Medical Association
 - June 2006 Report of Council on Medical Services
 - contains 8 "principles"
 - American Academy of Pediatrics
 - www.aap.org/advocacy/releases/rbc.pdf
 - Institute for Clinical Systems Improvement
 - Nearly 30 "patient and family guidelines"
 - www.aap.org/advocacy/releases/rbc.pdf
- Convenient Care Association
 - Quality & Safety Standards & 3rd party Certification
 - http://bit.ly/CCAquality



CCA standards crosswalk

CCA	Joint Commission standards
Credentials	Human Resources
Monitoring quality	Performance Improvement
Continuity of care	Provision of Care
PCP relationship	Provision of Care
Federal compliance	Leadership & Infection Prevention
Patient education	Provision of Care
Electronic health records	Information Management
Physical environment	Environment of Care
Emergency response	Provision of Care
Informed choice	Ethics & Patient Rights

Features of Joint Commission Accreditation



Ambulatory Care

Don't take our word for it...

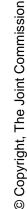
Find out what our customers have to say:

www.jointcommission.org









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