



EDUCATIONAL RESOURCES

ACHC Certified Consultant Training

Pharmacy, DMEPOS, & Sleep



ACHCU IS A BRAND OF ACCREDITATION COMMISSION *for* HEALTH CARE

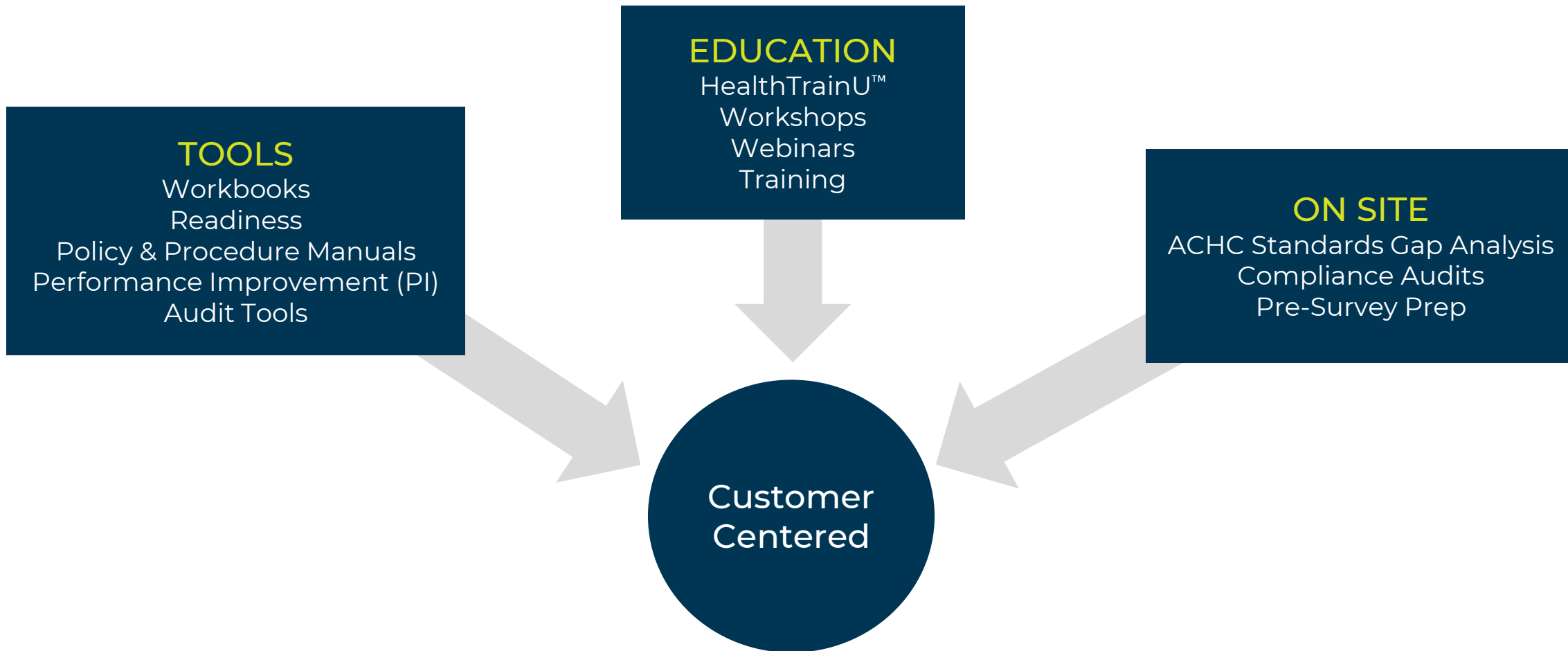




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ACHCU





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Clinical Compliance Educator

Learning Objectives

- ACHC history and our commitment to quality
- Look at available Accreditation Programs and “Distinctions”
- Understand ACHC requirements for DMEPOS, Pharmacy, and Sleep Accreditation.
- Become familiar with the initial and renewal accreditation process.
- Look at Customer Central and how to enter and update customer information
- Learn how to prepare an organization for its accreditation survey.
- Establish expectations for your role as an ACHC Certified Consultant.
- Take a detailed look at the post-survey process (Plan of Correction).
- Regulatory resources available to you

About ACHC

- Nationally recognized AO with more than 35 years of experience
- CMS Deeming Authority for Home Health, Hospice, Renal Dialysis, Home Infusion Therapy, and DMEPOS
- Recognition by major third-party payors
- Approved to perform state licensure surveys
- Quality Management System that is ISO 9001:2015 Certified

ACHC Mission & Values

- Our Mission
 - Accreditation Commission for Health Care (ACHC) is dedicated to delivering the best possible experience and to partnering with organizations and healthcare professionals that seek accreditation and related services.
- Our Values
 - Committed to successful collaborative relationships
 - Flexibility without compromising quality
 - Every employee is accountable for their contribution to providing the best possible experience
 - We will conduct ourselves in an ethical manner in everything we do

Experience the ACHC Difference

- Standards created for providers, by providers
- All-inclusive pricing — no annual fees
- Personal Account Advisors
- Commitment to exceptional customer service
- Surveyors with industry-specific experience
- Dedicated clinical support
- Dedicated regulatory support
- Educational resources





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ACHC Commitment To Quality



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Ensuring ACHC Quality

- CMS Deeming Authority
- ISO certification
- Customer satisfaction
- Complaint investigation
- Internal audits
- Quality council
- Surveyor expertise

The Best Possible Experience For Consultants

- ACHC is dedicated to delivering the best possible experience and to partnering with organizations and healthcare professionals who seek accreditation and related services.

Recognition As Industry Leader

- ACHC/PCAB acceptance
- Industry recognition
- Regulatory recognition
- Payor recognition



EDUCATIONAL RESOURCES

Role Of An ACHC Certified Consultant



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Role Of The Consultant

- To only provide consulting services in areas of expertise
- To provide guidance to organizations seeking ACHC Accreditation
- To assist organizations in achieving compliance with ACHC requirements
- To review the organization's policies and procedures to ensure they meet ACHC standards
- To help organizations navigate the application process
- To assist organizations in pre-survey training and audits
- To collaborate with ACHC Surveyors and staff in order to assist organizations with the ACHC Accreditation process
- To partner with ACHC as we continue to strive to provide the best possible experience and to assist our customers in providing the highest quality patient care

Role Of The Consultant (Cont.)

- To assist customers in the Plan of Correction (POC) process and develop strategies to ensure ongoing compliance
- To provide specialized guidance and expertise to ACHC customers
- To abide by the policies and procedures regarding the ACHC survey process
- To encourage customers to utilize the resources on Customer Central in order to maintain compliance

Communicating With ACHC

- Customer's permission:
 - Notify the Account Advisor.
 - Customer can provide you with access to their data.
- During the survey, be accessible for questions and guidance.
- After the survey, customer should address all questions to their Account Advisor.

Account Advisors

- Personal Account Advisors:
 - Primary contact with customers.
 - Assigned once a customer creates an account.
 - Assist customers with the ACHC survey process.
 - Questions that cannot be answered by them will be answered by the appropriate Clinical Manager.

Conflict of Interest

- ACHC Certified Consultants who are also ACHC Surveyors cannot perform a survey for an agency for which they have also acted as a consultant (five years).
- ACHC Certified Consultants who are also ACHC Surveyors cannot consult for an organization that they have surveyed for at least one year after the survey.
- If you have questions, contact the Program Director and get approval in writing.
- ACHC Certified Consultants who are also ACHC Surveyors should not use their Surveyor position as a marketing tool to get consulting business.
- *ACHC Accreditation Guide to Success* workbooks, policies and procedure manuals, and other tools are proprietary information.

Ongoing Expectations

- Remain up-to-date with ACHC standards as well as policies and procedures:
 - Did You Know emails
 - Regulatory updates on Customer Central
 - The Surveyor newsletter
- Remain up-to-date on the Medicare Quality Standards, supplier standards, specific state requirements, as well as other applicable regulations.
- When possible, attend program specific workshops annually
- Attend Certified Consultant Training every three years.



EDUCATIONAL RESOURCES


Customer Central & Overview of the Accreditation Process



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USERNAME PASSWORD [LOG IN](#)
Forgot username or password?





CUSTOMER CENTRAL
ACHC®


Becoming accredited with ACHC

[Download Standards](#) 

[Complete Application](#) 

[On-Site Survey](#) 

 **Watch a video tutorial of the new Customer Central**

 [Watch Install Video »](#)
[Get Desktop App for Windows »](#)

EDUCATIONAL RESOURCES
ACHCU helps you prepare for and maintain accreditation with products, tools, and events.
[GET SURVEY READY](#)

Customer Central is your personalized website to complete the accreditation process, from start to finish!

Please provide the information requested below to create your account and download ACHC standards

FIRST NAME

LAST NAME PHONE

EMAIL

COMPANY NAME

DBA NAME

ADDRESS

CITY STATE

ZIP

-----ACREDITATION PROGRAM----- NUMBER OF LOCATIONS

SELECT A USERNAME

ENTER PASSWORD CONFIRM PASSWORD

Accreditation completed by: **Which of the following best describes you?**

How did you hear about ACHC? **Are you hospital-affiliated?** YES NO

Go to: cc.achc.org

Log in above, or create a new account below.



Download ACHC's Standards

Select the program and services applicable to your company and click 'Download'. If standards are not required, continue to your application.

Application »

Applying for reaccreditation? Download the program-specific updates under [Educational Tools](#).

| | |
|---|----------|
| Pharmacy | Download |
| Durable Medical Equipment, Prosthetics, Orthotics, and Supplies | |
| Community Retail | |
| Behavioral Health | Download |
| Home Health – Medicare Certified | Download |
| Hospice | Download |
| Private Duty – Non-Medicare Certified | Download |
| Sleep | Download |
| Assisted Living Facilities | Download |
| Ambulatory Care | Download |



PREPARE WITH ACCREDITATION WORKSHOPS



Pre-Survey Preparation



Thorough Review of ACHC Accreditation Standards



Key Steps to a Successful On-Site Survey



How to Complete Important Post-Survey Components

Once inside your client's account, encourage them to purchase standards.

This allows continuous access to the standards.



Account Advisor



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 Fax: (919) 785-3011

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Video Tutorials
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Welcome, Kevin!

Joyous Healthcare - Paradise, NC

Your entire process begins with an application. To start a new application click "New Application," or to renew an existing accreditation, click "Renewal." A "Renewal" allows you to copy a previously completed application - saving you time!

Click the [EDIT] button under the "In Progress" section to continue the process once you've created an application.

[GET STANDARDS](#)
[NEW APPLICATION](#)
[RENEWAL](#)

In Progress

| APPLICATION | DATE SUBMITTED | TYPE | STATUS | LAST UPDATED |
|-------------|----------------|------|--------|--------------|
|-------------|----------------|------|--------|--------------|

You do not have any applications in progress.

Accreditation History

| COMPANY | DATE SUBMITTED | PAYMENT | ACCREDITATION DATE | STATUS |
|---------|----------------|---------|--------------------|--------|
|---------|----------------|---------|--------------------|--------|

If this is your client's first time with ACHC Accreditation, click the "NEW APPLICATION" button.

If you're in an existing accredited account (as shown), you can click on the "RENEWAL" button to save time.

Online Application

- NEW APPLICATION or RENEWAL
- Main office:
 - Profile
 - Location
 - Contacts
 - Services
- Additional locations — branch locations
- Blackout dates
- Services provided

PER Checklist

PRELIMINARY EVIDENCE REPORT (PER) INITIAL CHECKLIST



This checklist constitutes the requirements of the PER, which is mandatory for organizations applying for initial Pharmacy accreditation.

Review and acknowledge that all of the following requirements have been met and submit this signed checklist with the required items listed below.

Required items to be submitted to the Accreditation Commission for Health Care (ACHC):

- Accreditation application
- Non-refundable deposit
- Organization's new client/patient information/admission packet
 - It is preferred that this information be provided to ACHC in digital format
- Organizational chart by position titles
- Any current citation(s) from a federal or state agency (e.g. FDA, Board of Pharmacy, etc.)
- If the pharmacy performs sterile compounding, provide the procedures that outline the process of compounding
 - These can be in the form of policies that match the ACHC Accreditation Standards or can be the complete procedures that are followed for the compounding process


Confirmation of the following (initial in spaces provided):

- _____ I attest that this organization possesses all policies and procedures as required by the ACHC Accreditation Standards
- _____ Organization has 5 client/patient files, or can provide 5 mock files at the time of survey if equipment or supplies have not been provided
- _____ I acknowledge that this organization was/is/will be in compliance with ACHC Accreditation Standards as of _____ (date)

I, having the authority to represent this organization, verify that _____ (organization's legal name) has met the above requirements for survey. Failure to meet any of the aforementioned requirements when the ACHC Surveyor arrives on site may result in additional charges to the organization for a subsequent survey to be performed when the organization has notified ACHC it has met all of the above requirements. I agree that during my accreditation with

ACHC. CUSTOMER CENTRAL STANDARDS APPLICATION RESOURCES + FORMS + UPLOAD EASY PAY MY ACCOUNT +

Account Advisor



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Application **PER** Payment Survey POC Accreditation

Preliminary Evidence Report (PER)

The PER is a compilation of your company's most important policies and procedures. This step provides supporting evidence of compliance prior to the survey. If you have an Extended Policy Review, you will also upload it on this page. There is a 20mb limit per file.


1. Download the program-specific PER checklist from the 'Download Your Checklist' link to the right, and select all that apply.
2. Complete and save the checklist using Adobe Reader. The checklist will have detailed descriptions of required documents.
3. Upload the checklist and supporting documents from the 'Upload a file' link below.

Upload a file

Select files from the 'Upload a file' link above, or drag and drop.

Download Your Checklist

1. DMEPOS PER Initial Checklist
2. Behavioral Health Initial PER Checklist

 [Download Adobe Reader >>](#)

CONTINUE >

First download the correct PER Checklist.

Completely fill out the PER Checklist and upload with supporting documents.

Extended Policy Review

- Optional review of complete policies and procedures by an ACHC Surveyor to determine compliance prior to the on-site survey
- Feedback from an ACHC Surveyor regarding the alignment of agency's policies and procedures to ACHC Accreditation Standards
- Option to purchase through the Customer Central portal
- Customized Reference Guide for Required Documents; policies and procedures available as a download

DMEPOS Addendum

- As part of your application process, you will be asked to complete a section titled “DMEPOS Supply Categories.”
- It is very important that this information is completed accurately for each location.
- You will be asked to verify whether each branch location will bill Medicare and will have a Medicare number.
- Only select the codes for items that each location is actually providing; you should not select codes for items you hope to provide in the future.
- Your application addendum guides ACHC to ensure we have the proper accreditation programs and tools selected for your survey, and that we send a Surveyor with the necessary expertise.

Addendum

- During your survey, your Surveyor will fill out and ask you to sign a new DMEPOS Addendum.
- The Surveyor can only include items for which your organization can fill an order the day of the survey.
- You cannot add codes on your survey day that were not included in your application, as those additions may require additional standards, P&P, or specially trained/licensed personnel and could move you into a new accreditation category (e.g., OR01, S02-S03, MO8-9A, PE05).
- Make sure your application includes all addendum items you provide.

Addendum (Cont.)

- ACHC must know the states in which you are supplying products.
- Many states require license to ship or deliver products into their borders.
 - It is your responsibility to have the appropriate license or documentation as to why you believe you do not need one.
- An addendum item cannot be included without the proper state license.
- Organizations that will NOT bill for products under the DMEPOS program do not need to complete an addendum (they will not be included in reports to Medicare).

Agreement

Accreditation Agreement
(BAA/Contract) reviewed
by customer, signed and
returned to Account
Advisor



14 Calendar Days

Payment Information

Deposit Received:

<<<INSERT DEPOSIT AMOUNT HERE>>>

Discount (if applicable):

<<<INSERT DISCOUNT AMOUNT HERE>>>

Remaining Balance: <<<REMAINING BALANCE>>>

<<<FIRST PAYMENT>>> Due on line upon execution of this Agreement.

<<<SECOND PAYMENT>>> Due 12 months from date of the Accreditation Decision Letter.

<<<THIRD PAYMENT>>> Due 24 months from date of the Accreditation Decision Letter.

Payment Method:

I wish to pay my bill online (an email with a link to online payment will be sent following the execution of this agreement)

I wish to receive a paper invoice for payment

So when am I officially “in process?”

- Completed application (online)
- Deposit (online)
- Completion and return of PER (online)
- Signed and returned Accreditation Agreement
- When will your survey be conducted?
 - New application — Some point after “Date of Readiness” (excluding blackouts)
 - Renewal — Based on when you apply and when accreditation expires



EDUCATIONAL RESOURCES

Customer Central Regulatory Resources



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PER "How To"
On-Site Survey
POC "How To"

WORKSHOPS
Learn more about ACHC standards & survey tips
[MORE INFO](#)

Welcome, Carolyn!

Your entire process begins with an application. To start a new application, click "Renewal." A "Renewal" allows you to update your application, or to renew an existing application - saving you time!

Click the [EDIT] button under the "In Progress" section to edit your application.

GET STANDARDS
 NEW APPLICATION

- Name Change
- Additional Site Location
- Change of Location
- Change Product Codes
- Change Services
- Change of Ownership
- Change of Personnel
- Closure/Withdrawal Notification

Cary, NC

In Progress



| APPLICATION | DATE SUBMITTED | STATUS | LAST UPDATED |
|-------------|----------------|--------------------------|--------------------------|
| x 103738 | | New Customer In Progress | 4/26/2019 8:06 AM [EDIT] |

Accreditation History

| COMPANY | DATE SUBMITTED | PAYMENT | ACCREDITATION DATE | STATUS |
|---------|----------------|---------|--------------------|--------|
|---------|----------------|---------|--------------------|--------|


Use the FORMS tab to edit company information

Branch Addition




CUSTOMER CENTRAL
STANDARDS
APPLICATION
RESOURCES +
FORMS +
UPLOAD
 EASY PAY
MY ACCOUNT +

Company Information

The options below are for companies that are currently accredited and need to make changes to their company information. Additional information and fees may be required.

| | |
|---|----------------------------|
| NAME CHANGE | [Expand] |
| ADDITIONAL SITE LOCATION  | [Expand] |
| <p>Please complete this form if you would like to add an additional location to your organization. Examples include: branch, multiple location, satellite location, drop-site, warehouse, call center, etc.</p> <ul style="list-style-type: none"> • DMEPOS/Pharmacy Branch Addition Packet >> • Home Health Branch Addition Packet >> • Florida Home Health Branch Addition Packet >> • Home Health/Hospice/Private Duty Parent Addition Packet >> • PCAB Branch Addition Packet >> • Behavioral Health Branch Addition Packet >> • Private Duty Branch Addition Packet >> • Florida Private Duty Branch Addition Packet >> • Hospice Multiple Location Branch Addition Packet >> • Sleep Branch Addition Packet >> • Pharmacy (not PCAB) Branch Addition Packet >> | |
| CHANGE OF LOCATION | [Expand] |
| CHANGE PRODUCT CODES | [Expand] |
| CHANGE SERVICES | [Expand] |
| CHANGE OF OWNERSHIP | [Expand] |

Change of Ownership


CUSTOMER CENTRAL
STANDARDS
APPLICATION
RESOURCES +
FORMS +
UPLOAD
 EASY PAY
MY ACCOUNT +

Company Information

The options below are for companies that are currently accredited and need to make changes to their company information. Additional information and fees may be required.

| | |
|--|----------------------------|
| NAME CHANGE | [Expand] |
| ADDITIONAL SITE LOCATION | [Expand] |
| CHANGE OF LOCATION | [Expand] |
| CHANGE PRODUCT CODES | [Expand] |
| CHANGE SERVICES | [Expand] |
| CHANGE OF OWNERSHIP | [Expand] |
| <p>Please complete this form if your organization has gone through an ownership change. Please contact your Account Advisor if you have any questions on what qualifies as a change of ownership.</p> <ul style="list-style-type: none"> • Change of Ownership Checklist for DMEPOS and Pharmacy >> • Change of Ownership Checklist for Home Health and Hospice >> • Change of Ownership Checklist for PCAB >> • Change of Ownership Checklist for Private Duty >> • Change of Ownership Checklist for Sleep >> | |
| CHANGE OF PERSONNEL | [Expand] |
| CLOSURE/WITHDRAWAL NOTIFICATION | [Expand] |

Education Library

ACHC CUSTOMER CENTRAL
STANDARDS
APPLICATION
RESOURCES +
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Education Library

ACHC is dedicated to providing its customers with up-to-date news and education. Below is a list of educational material that ACHC has provided to customers. You will also find a list of helpful links to industry websites.

Please contact your organization's Account Advisor with any questions.

Educational Tools

Educational program-specific documents for your industry.

-----Please Select-----

"Did You Know" Emails

Review archived program-specific emails.

["Did You Know" Emails Section >>](#)

ACHC Today

Review ACHC Today news.

[ACHC Today >>](#)

Industry Links



Great resources for state-specific industry links.

DMEPOS


-----Please Select-----

[Home Health & Hospice](#)

Continued Compliance


CUSTOMER CENTRAL
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Continued Compliance

ACHC is here to help you maintain ongoing compliance and employ industry best practices. Below are continued compliance checklists for each program. Select your program to expand and then click to download the checklists.

[6 Month checklist](#)
[12 Month checklist](#)
[24 Month checklist](#)
[30 Month checklist](#)

Account Advisors

- Key resource in navigating the accreditation process.
- Experts on the process, but not Pharmacists.
- If asking a regulatory or pharmacy practice question, your Account Advisor (AA) will direct your question to the appropriate clinical or regulatory department.
- Phone calls are good, but a well-worded email can help get you the most accurate answers.
- Customer Central and your workbook answer many of the most common process questions.



EDUCATIONAL RESOURCES

ACHC Accreditation Visits To Providers

Overview of the Accreditation Survey Day



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Surveyors

- Who is your Surveyor?
 - Registered Pharmacist or expert in DMEPOS/Sleep
 - Expert on the services you provide
 - More than 20 years of experience
 - Completed comprehensive ACHC training
 - Completed required field training (precept)
 - Background checks and completed Business Associate Agreement (BAA)
 - Selected for your survey based on experience
 - Asked to verify that survey does not create a conflict of interest
 - You will not know the name of your Surveyor in advance

Survey Day

- Your unannounced survey date is selected with several factors in mind:
 - The date you apply and submit all required information
 - The date your accreditation expires (for renewals)
 - A date of readiness selected by new organizations
 - Your selected blackout dates
 - ACHC-listed holidays
- On your survey date, the Surveyor will attempt to call the main number listed on your applications:
 - They will not leave a call-back number but will state their name and that they will be arriving today for your survey.
- SRX (only) surveys with no DMEPOS accreditation may be announced surveys.

Survey Day (Cont.)

- The Surveyor is only a data collector; the Surveyor does not play any role in the ultimate review decision or the status of your accreditation.
- You will be given the opportunity to correct deficiencies during the survey day (if reasonable).
- Correcting deficiencies as you go eliminates the need to submit a Plan of Correction for those items, although the item is still recoded as a “no.”
- If requested items cannot be located in a “reasonable time frame,” the item must be marked as a deficiency.

Survey Day (Cont.)

- Opening conference (set the schedule for the day).
- Tour of facilities.
- Staff interviews.
- Personnel record review.
- Patient record review.
- Patient visits/interviews.
- Review of logs and Medicare-required documents.
- Review of PI/QI data.
- Exit conference.

Opening Conference

- Begins shortly after arrival of Surveyor.
- Management may invite all staff members.
- Good time to gather information needed by the Surveyor:
 - Logs, inspections, reports
 - Licenses, bonds, insurance as required
 - Personnel list
 - Staff schedules
 - HR records
 - PI/QI data
- The Surveyor will use this time to set the schedule for the day.

Personnel Record Review

- Surveyor will review personnel records for key staff and contract staff.
- Must be selected randomly by the Surveyor.
- May include all staff members or only select ones.
- Preferable to have someone from your organization review charts with us.
- Looking for items to include:
 - Application, tax forms, I-9 (as applicable)
 - Job descriptions and evaluations
 - Verification of qualifications/licenses
 - Orientation records, trainings, competencies, ongoing education
 - Medical information (TB/HepB as applicable)
 - Background checks
- For a complete listing of items required in the personnel record, review DRX4-1C of the ACHC Accreditation Standards.

Client Record Review

- Client records must be selected randomly by the Surveyor:
 - Preferable to choose from a list/printout of payments (EOB).
 - Preferable to have someone from your organization review with us.
- May include current patients and discharged patients.
- Both billing and medical records:
 - Representative of the care/services provided.
- Review of patient paperwork and education provided.
- Review of Plan of Service/Plan of Care and updates.
- DRX5-1A details the requirements of the client record.

Patient Visits/Interviews

- ACHC Surveyors will expect you to arrange for us to visit patients/customers as part of your accreditation visit.
- Please provide the Surveyor with a list of potential customers (who are within a reasonable driving distance).
- The Surveyor may also call some recent customers for a phone interview.
- If you have a location that customers may come to for products and/or services, the Surveyor may ask to speak with some of those customers as well.
- The customer needs to give you permission for us to visit or interview them (we do not require that it be in writing).

Review of Logs & Medicare-Required Documents

- Training/in-service logs
- Referral logs
- On-call schedule/logs
- Infection control tracking logs
- Temperature logs
- Fire and disaster drill logs
- Maintenance, repair, and cleaning logs
- Complaint logs
- Surety bond, liability and vehicle insurance, organizational chart, budget, contracts/BAA's, required licenses

Review of PI/QI Data

- Your Surveyor will expect to see evidence of ongoing PI/QI activities for the previous three years (if a renewal); PI/QI meeting notes alone do not meet these requirements.
- If an initial ACHC Survey, documentation of a PI plan will be limited, but the plan should be in place and evidence that you have started the process.
- If you are part of a large health system, your PI/QI data can be included in your corporate plan, but you need to be able to show compliance with each requirement.
- Refer to the Performance Improvement Made Simple Document located on Customer Central.

Closing Conference

- The ACHC Surveyor conducts a closing conference with the organization's representatives.
- Management may decide which staff members attend.
- Can provide a scheduled time for closing to accommodate phone participation by remote staff.
- Surveyor covers all areas of noncompliance with reference to the standard requirement .
- Great opportunity for you to provide missing items or seek clarification.
- The Surveyor cannot comment on how you performed, as they only collect and submit the data.
- The Surveyor should complete the closing conference by the end of the business day.

During Your Survey

- Management is welcome and encouraged to be a part of the entire accreditation process.
- Deficiencies may be corrected during the survey, if practical:
 - The deficiency will be corrected on-site but will be recorded as a “no.”
- Seek clarification from your Surveyor while still on site:
 - If you believe they have misunderstood something, provide clarification.
- Surveyors are experts in the industry and have hands-on knowledge regarding the implementation of the ACHC standards.
 - Take advantage of their knowledge and experience.

Initial Surveys

- Initial surveys can be “complicated.”
- Surveyor is assessing your level of compliance with a set of standards.
- Evidence is limited because ACHC can only hold you accountable back to a “date of readiness” (the date that you represent that you were in full compliance with ACHC requirements).
- As an example, let’s assume that was 90 days before survey:
 - ACHC cannot hold you accountable for compliance prior to that date (but when you represent that you are in compliance you must be fully in compliance).

Initial Surveys

- Example:
 - Personnel record for someone hired three years ago:
 - You did not do reference checks, background checks, or initial orientation or training.
 - You can't go backward and do it now, however:
 - Surveyor will expect to see a background check completed since your date of compliance.
 - They will expect to see trainings and competencies since the date of compliance.


Initial Surveys


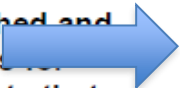

- Startups
- Mock Files
- PI Plan
- Audits/Inspections
- Personnel Training and Competencies
- Your job is to convince the Surveyor you know what to do and how to do it

Post-Survey Process

- Plan of Correction (POC) — The POC template will be sent electronically from your Account Advisor.
 - All documentation must be on the POC template.
 - The POC is provided for you to document the plan to correct each deficiency noted on the SOF as well as your plan to prevent a recurrence.
 - POC must be submitted electronically.

Summary Of Findings Report For Survey On 12/13/2017 | Services: HME, IRX, SRX



| Deficiency Category - Policies & Procedures | | Deficient |
|--|--|-----------|
| Standard | Comments | |
|  DRX2-10F Written policies and procedures are established and implemented that document the requirements for calls that are received from the clients/patients that the organization serves. The organization has a toll-free telephone number available to clients/patients and providers. |  <p>At the time of survey the organization did not have a policy that addressed tracking the response time frames in which calls are answered, the abandonment rate of the calls that are received and the generation of reports required by contracted payors and manufacturers of the products.</p>  <p>Corrective Action: The organization should add to their policy related to phone procedures the company's goals for response time frames in which calls should be answered and for call abandonment rates. The policy should also discuss the generation of any reports that might be required by payors. The organization is working with their current phone service provider to ensure the required information can be provided.</p> | X |

Summary Of Findings Report For Survey On 12/13/2017 | Services: HME, IRX, SRX



| Deficiency Category - Interviews/Observations | | Deficient |
|---|---|-----------|
| Standard | Comments | |
| DRX1-7A | The organization is in compliance with all applicable federal, state, and local laws and regulations. | |
| DRX7-1A | Written policies and procedures are established and implemented that address the surveillance, identification, prevention, control, and investigation of infectious and communicable diseases and the compliance with regulatory standards. | X |
| DRX7-1D | The organization reviews and evaluates the effectiveness of the infection control program. | X |

| Deficiency Category - Pharmacy with ** Evidence Required on POC ** | | Deficient |
|--|---|-----------|
| Standard | Comments | |
| DRX5-2B All clients/patients receive an evaluation/assessment of their needs prior to initiation of Pharmacy Services. | <p>3 of 3 files reviewed did not have evidence of an initial assessment/evaluation:</p> <p>Action Required: All client files need evidence of:</p> <p>Client/Patient information: Client/Patient demographics Physical health component: Appropriateness of in home therapy, (if applicable) Identification of health problems Review of medications Dosing Frequency Method Special dietary requirements Other needed information that could impact the level of care/ services required to meet the client's/patient's needs Principle diagnosis and other pertinent diagnoses Allergies.</p> <p>The social component: Identification of the responsible party An emergency contact</p> <p>The environmental component: Identification of safety or health hazards Presence of adequate living arrangements Home environmental assessments include the potential for safety and security hazards (i.e., throw rugs, furniture layout, bathroom safety, cluttered stairways and blocked exits, unsecured doors, lack of smoke detectors, fire risks).</p> <p>The economic component: A review of the financial resources available to pay for the services/care provided.</p> <p>Functional limitations: Documentation of all functional limitations.</p> <p>The mental component: Orientation/memory Reasoning/judgment .</p> | X |

ACHC Accreditation Decisions



ACCREDITED

Provider meets all requirements for full accreditation status. Accreditation is granted but Plan of Correction (POC) may still be required.*



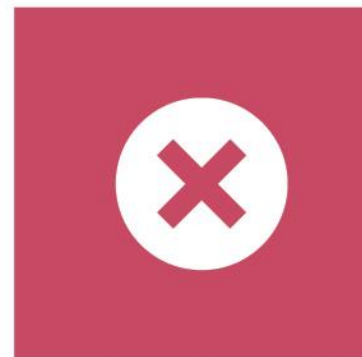
ACCREDITATION PENDING

Provider meets basic accreditation requirements but accredited status is granted upon submission of an approved POC.



DEPENDENT

Provider has significant deficiencies to achieve accreditation. An additional on-site visit will be necessary to be eligible for accreditation.



DENIED

Accreditation is denied. Provider must start process from the beginning once deficiencies are addressed.

PLAN OF CORRECTION (POC)

ONCE COMPLETED, PLEASE EMAIL THIS FORM TO THE ATTENTION OF YOUR ACCOUNT ADVISOR



Organization: Greg's Pharmacy

| Standard | Plan of Correction (Specific action taken to bring standard into compliance) | Date of Compliance (Date correction to be completed) | Title (Individual responsible for correction) | Process to Prevent Recurrence (Describe monitoring of corrective actions to ensure they effectively prevent recurrence) | POC Compliant (ACHC internal use only) | Comments (ACHC internal use only) |
|----------|---|---|--|--|---|--------------------------------------|
| TCRX3-B | What would be a proper POC for this deficiency? | What's a reasonable time frame? | | How do you prevent this from happening again? | | |
| | | | | | | |
| | | | | | | |

Plan of Correction

- Required when a deficiency is found.
- Must be submitted within 30 days of receipt.
- Follow a specific format.
- Submitting a thorough and complete Plan of Correction (POC) will expedite your accreditation.
- All deficiencies require a POC.
- Some deficiencies require evidence of correction.



EDUCATIONAL RESOURCES

Marketing Your Consultant Business



ACHCU IS A BRAND OF ACCREDITATION COMMISSION *for* HEALTH CARE



ACHC Certified Consultant

- Becoming an ACHC Certified Consultant is a notable accomplishment that you should be proud to display:
 - It shows a dedication to providing the very best service to your clients.
 - It provides assurance to healthcare providers when choosing your business.
 - It highlights your knowledge of ACHC Accreditation and your ability to guide them through the process.
 - Allows you access to materials, such as audit tools, designed for our Certified Consultants to help with customer preparation.

Consultant Portal

- Access and update your consultant profile displayed on achc.org.
- As a consultant, you will have access to tools to use with your customers through the portal.*
- Access to your branding kit.
- Stay in-the-know with updates from ACHC and ACHCU:
 - Upcoming webinars
 - Did You Knows
 - News updates from ACHC specifically for you

*Only accessible to Certified Consultants.

ACHC CERTIFIED CONSULTANT PORTAL

Welcome, Lindsey! ACHC | May 14, 1

Manage Your Public Profile - Verified
This information will be displayed on the "Find a Certified Consultant" page.

Photo

Company Name ACHC (Accreditation Commission for Health Care)

Description Accreditation Commission for Health Care (ACHC) is a nonprofit accreditation organization that has stood as a symbol of quality and excellence since 1986. ACHC has CMS Deeming Authority for Home Health, Hospice, and DMEPOS and a quality management system that is ISO 9001:2015 certified.

Address 139 Weston Oaks Ct. Cary, NC 27513

Phone# (855) 937-2242

Website www.achc.org

Certified Consultants John Smith Jane Parker Stephanie Johnson [add/edit](#)

Programs Home Health, Hospice, Private Duty

Update **Preview Profile** [CLICK TO PREVIEW PROFILE](#)

Tools

- Readiness Packets
- Survey Prep
- Compliance Checklist
- Branding Guidelines
- Workbooks

Contact Information

- Email Customer Service
- PPH: 208-6059

Accreditation University
139 Weston Oaks Ct.
Cary, NC 27513

Office Hours:
Monday-Friday: 9:00am - 5:00pm EST

Consultant Listing

- ACHC is proud to host the listing of all of our certified consultants on our website.
 - Customers can search the list to find the best consultant based on their needs:
 - Searchable by P&P manuals, mock surveys, training events, etc.
 - Be sure to keep you profile up-to-date through the portal.

Branding Elements

- ACHC is committed to providing the tools you need to leverage your certified status:
 - Certificate
 - Logos and Brand Guidelines
 - Sample Press Release
 - Certified Consultant Pin



In Conclusion

- As an ACHC Certified Consultant, you can establish trust with providers.
- Utilize the resources available to you to enhance the value of your consultant business.
- Use multiple communication channels to create multiple touch points and reach a broader audience with your message.

ACHC Resources

- ACHC's Marketing Department is available to help with your marketing needs.
- Feel free to contact them at ainfo@achc.org or (855) 937-2242.



EDUCATIONAL RESOURCES

THANK YOU

Greg Stowell

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