



This course supports the assessment for Accreditation Audit. The course covers 8 competencies and represents 4 competency units.

## Introduction

### Overview

Accreditation serves as a symbol of excellence in the healthcare industry. Accreditation is a dynamic process that identifies best practices and promotes high quality performance measures. Organizations that earn accreditation from a nationally recognized accrediting entity validate their commitment to quality and accountability. These companies voluntarily undergo a rigorous and periodic review that evaluates their operations and services against contemporary standards developed by experts and stakeholders in the healthcare arena. The value of accreditation is widely recognized by all stakeholders in the healthcare arena (e.g., regulators, consumers, employers, healthcare providers, health insurers, and purchasers) who actively participate in developing quality benchmarks.

This course covers regulatory audits, resource assessment, quality improvement, patient care improvement, organization plans, risk management, effective interaction, and compliance as evidenced during an accreditation audit.

### Getting Started

Welcome to Accreditation Audit! In this course, you will study five topics with sub-topics in each. Within each sub-topic, you will be asked to read text and external articles and review self-check questions. To help you track your progress in the course, view the Topics and Pacing guide located in the Preparing for Success section. Competency will be demonstrated by the successful completion of a performance assessment.

Watch the following video for an introduction to this course:

Note: To download this video, right-click the following link and choose "Save as...": download video.

### Competencies

This course provides guidance to help you demonstrate the following 8 competencies:

- **Competency 705.2.4: Regulatory Audits**  
The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.
- **Competency 705.3.2: Resource Assessment**  
The graduate identifies and assesses external and internal resources available to a healthcare organization
- **Competency 705.3.4: Patient Care Improvement**  
The graduate interprets quality assessments and prioritizes patient care improvement needs.



- **Competency 705.3.5: Quality Improvement**  
The graduate designs quality improvement programs to enhance the level of patient care in a healthcare organization.
- **Competency 705.3.6: Organization Plans**  
The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.
- **Competency 705.3.8: Risk Management**  
The graduate develops risk management programs that result in improved quality patient care.
- **Competency 705.3.9: Effective Interactions**  
The graduate can effectively interact with physicians, nurses, and other healthcare providers.
- **Competency 705.4.3: Compliance**  
The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### **Course Instructor Assistance**

As you prepare to demonstrate competency in this subject, remember that course instructors stand ready to help you reach your educational goals. As subject matter experts, mentors enjoy and take pride in helping students become reflective learners, problem solvers, and critical thinkers. Course instructors are excited to hear from you and eager to work with you.

Successful students report that working with a course instructor is the key to their success. Course instructors are able to share tips on approaches, tools, and skills that can help you apply the content you're studying. They also provide guidance in assessment preparation strategies and troubleshoot areas of deficiency. Even if things don't work out on your first try, course instructors act as a support system to guide you through the revision process. You should expect to work with course instructors for the duration of your coursework, and you are encouraged to contact them as soon as you begin. Course instructors are fully committed to your success!

## **Preparing for Success**

The information in this section is provided to detail the resources available for you to use as you complete this course.

### **Learning Resources**

The learning resources listed in this section are required to complete the activities in this course. For many resources, WGU has provided automatic access through the course. However, you may need to enroll manually in or independently acquire other resources. Read the full instructions provided to ensure that you have access to all of your resources in a timely manner.

#### **Manually Enrolled Resources**

Take a moment to enroll in the learning resources listed in this section. To enroll, navigate to the "Learning Resources" tab, click the "Sections" button, and then click the "Enroll Now" button for each resource. Once your mentor approves your enrollment in the resource, you will receive an e-mail with further access instructions. Contact your mentor if you have questions.



## **The Anatomy of Care: Real World Simulation**

Access this simulation by enrolling through the "Learning Resources" tab.

### **Automatically Enrolled Resources**

You can access the learning resources listed in this section by clicking on the links provided throughout the course. You may be prompted to log in to the WGU student portal to access the resources.

### **VitalSource E-Texts**

The following textbooks are available to you as e-texts within this course. You will be directly linked to the specific readings required within the activities that follow.

- Hernandez, S., & O'Connor, S. (2010). *Strategic human resources management in health services organization* (3rd ed.). Clifton Park, NY: Delmar, Cengage Learning. ISBN: 0766835405.
- Moseley, G. (2015). *Managing legal compliance in the health care industry* (1<sup>st</sup> ed.). Burlington, MA: Jones & Bartlett Learning. ISBN-13: 9781284034271.
- Shortell, S., & Kaluzny, A. (2006). *Health care management: Organization design and behavior* (6th ed.). Clifton Park, NY: Delmar, Cengage Learning. ISBN: 978 1435 463 950.
- Williams, S., & Torrens, P. (2008). *Introduction to health services* (7th ed.). Clifton Park, NY: Delmar, Cengage Learning. ISBN: 1418012890.

*Note: These e-texts are available to you as part of your program tuition and fees, but you may purchase a hard copy at your own expense through VitalSource or a retailer of your choice. If you choose to do so, please use the ISBN listed to ensure that you receive the correct edition. The following sites provide instruction on how to use features such as downloading your e-texts for offline use and purchasing a print-on-demand option, if available.*

- VitalSource Navigational Video
- Print-On-Demand Option

### **Other Learning Resources**

You will use the following learning resources for this course.

### **Joint Commission Handbook**

In several activities you will be asked to access the Joint Commission handbook. Click on the link provided in the activity and follow the activity instructions to access the correct materials.

### **Case Study**

This resource has been broken up into five files. You will use information from all five files in this course and you will need to save each file from the links below.

- Accreditation Audit Case Study - General Case Scenario Artifacts
- Accreditation Audit Case Study - Task 1 Artifacts
- Accreditation Audit Case Study - Task 2 Artifacts



- Accreditation Audit Case Study - Task 3 Artifacts
- Accreditation Audit Case Study - Task 4 Artifacts

*Note: For this case study, there are files in Shockwave Flash Format. This type of file can be opened with Adobe Flash. You may also download the free GOM Media Player online to open this attachment.*

## **Understand the Evaluation**

You will submit your work in Taskstream for each task. You may work on the tasks in any order, but it is recommended that you work in ascending order.

AFT Tasks 1, 2, and 3 are three-level tasks. The evaluator will score the tasks as follows:

- 0 = unsatisfactory
- 1 = needs revision
- 2 = satisfactory

You must receive a score of 2 in each rubric aspect to pass the tasks.

AFT Task 4 is a five-level task. It is scored by an evaluator according to the following five-level score:

- 0 = unsatisfactory
- 1 = does not meet standard
- 2 = minimally competent for undergraduate; not competent for graduate
- 3 = competent
- 4 = highly competent

You need a score of at least 3 in each rubric aspect in order to pass the task.

If you do not pass one or more tasks, you will have three opportunities to revise your submission for this assessment. Review your work carefully before submitting it. If you do not understand a concept, reach out to a course instructor for help.

If you have any questions about what is expected of you in a performance task, please refer to the task's instructions as well as the scoring rubric and the "Evaluation Procedures" tab in Taskstream.

## **Topics and Pacing**

This outline suggests a weekly structure to pace your completion of learning activities. It is provided as a suggestion and does not represent a mandatory schedule. Follow these guidelines carefully to complete the course in the suggested timeframe.

Week 1:

- Prepare for Success



- Regulatory Audits

Week 2:

- Compliance
- AFT Task 1

Week 3:

- Resource Assessment
- Quality Improvement

Week 4:

- Risk Management
- Effective Interactions
- AFT Task 2

Week 5:

- Patient Care Improvement
- Tracer Methodology
- AFT Task 3

Week 6:

- Regulatory Audits
- Organizational Plans

Week 7:

- Joint Commission Compliance
- AFT Task 4

Week 8:

- Final Steps

## **Regulatory Audits and Compliance**

In this subject, you will learn about regulatory audits and compliance in terms of the impact on the healthcare institution and how the director of accreditation must ensure the success of the audit.

### **Regulatory Audits**

Before you can understand the need for regulatory audits, it is important to understand the type of facility that requires such an audit.



At the end of this section, you will be able to identify accreditation requirements that apply to a healthcare organization or a given situation, and recommend an appropriate organizational compliance response to a provision of a given regulation.

This topic addresses the following competencies:

- **Competency 705.2.4: Regulatory Audits**

The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.

- **Competency 705.4.3: Compliance**

The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### **The Continuum of Care**

Read the following chapter in *Introduction to Health Services*:

- Chapter 9 ("The Continuum of Long-Term Care")

Test yourself by answering the following questions:

- What is the continuum of care framework?
- What are the four basic integrating mechanisms, and why they are essential to achieving a seamless continuum of care?

Access "The Anatomy of Care: Real World Hospital Simulation" to view various aspects of the healthcare institution. To access the simulation, refer to the instruction on "Manually Enrolled Resources" under Preparing for Success.

Think about the following questions:

- What are the regulatory issues?
- What are the categories and services of the continuum of care?
- Why do you think they need to be regulated?

### **The Value of Joint Commission Accreditation**

Access the Joint Commission document:

- "The Value of Joint Commission Accreditation"

Access and watch the following video:

- "A World of Difference"

Accreditation is an important component for hospitals. Consider how the continuum of care can be improved by the Joint Commission.



## Compliance

This section will help you understand what can be done to ensure that everyone involved in the hospital is aware of the compliance status.

At the end of this section, you will be able to outline a process for a given healthcare organization to comply with an accrediting agency, and develop a compliance plan for a given healthcare organization to meet accrediting regulations.

This topic addresses the following competencies:

- **Competency 705.2.4: Regulatory Audits**

The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.

- **Competency 705.4.3: Compliance**

The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### Healthcare Compliance Programs

Read the following chapter in *Managing Legal Compliance in the Health Care Industry*:

- Chapter 8 ("Compliance Programs in General")

Test yourself by answering the following questions:

- What best practices can be put in place to ensure compliance?
- Are the basic concepts of the health industry's compliance programs effective?

### Complete: AFT Task 1 Performance Task

Complete the following task in Taskstream:

- Accreditation Audit: AFT Task 1
- Accreditation Audit Case Study - Task 1 Artifacts

For details about this performance assessment, see the "Assessment" tab in this course.

View the following supplemental resources for Task 1 Performance:

- Recorded Webinar: AFT Task 1
- Joint Commission Standards

## Resource Assessment and Quality Improvement

Every company has a myriad of resources that they can tap into to improve the quality of the organization. These resources can include the staff, community, or legislation. Great institutions are able to use the wisdom of these resources to gain a competitive edge.



## Resource Assessment

At the end of this section, you will be able to identify private resources available to a healthcare organization, identify public resources available to a healthcare organization, and analyze needs for a given hospital to determine if sufficient resources are available to meet the hospital's needs.

This topic addresses the following competencies:

- **Competency 705.3.2: Resource Assessment**  
The graduate identifies and assesses external and internal resources available to a healthcare organization.
- **Competency 705.3.5: Quality Improvement**  
The graduate designs quality improvement programs to enhance the level of patient care in a healthcare organization.

## Organization Theory and Health Services Management

Read the following chapters in *Health Care Management: Organization Design and Behavior*:

- Chapter 3 ("Organization Design and Coordination")
- Chapter 10 ("Strategic Thinking and Achieving Competitive Advantage")

Test yourself by answering the following questions:

- What is the resource dependency theory in the evolution of healthcare?
- What is the strategic management perspective in the healthcare industry?

## Quality Improvement

Quality is a journey, not a destination; it is a process, not an outcome. How do you measure quality? At the end of this section, you will be able to identify common quality improvement tools that the Joint Commission recommends for ensuring safety of patients, and recognize how poor quality of service impacts patient care, reimbursement, public opinion, or recruitment of staff in a given situation.

This topic addresses the following competencies:

- **Competency 705.3.2: Resource Assessment**  
The graduate identifies and assesses external and internal resources available to a healthcare organization.
- **Competency 705.3.5: Quality Improvement**  
The graduate designs quality improvement programs to enhance the level of patient care in a healthcare organization.

## The Quality of Healthcare

Read the following chapter in *Introduction to Health Services*:

- Chapter 14 ("The Quality of Health Care")



Test yourself by answering the following questions:

- What improvements can be made to increase the quality of healthcare services?
- What are the six possible interventions to improve adoption of improved treatment practices?

## **Risk Management and Effective Interactions**

The goal of risk management is to reduce the financial and legal exposure of the hospital. The goal of effective interaction is to ensure that all parties are communicating and working together in a collaborative fashion. Together these principles will ensure the highest level of quality patient care.

### **Risk Management**

Risk management is a necessary part of a healthcare organization. It provides guidelines and structure to ensure that processes are in place for a safe environment for patients and staff alike.

At the end of this section, you will be able to describe the role of quality in patient care, and outline a risk management program designed to ensure the safety of a given healthcare organization's patients.

This topic addresses the following competencies:

- **Competency 705.3.6: Organization Plans**
  - The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.
- **Competency 705.3.8: Risk Management**
  - The graduate develops risk management programs that result in improved quality patient care.
- **Competency 705.3.9: Effective Interactions**
  - The graduate can effectively interact with physicians, nurses, and other healthcare providers.

### **Risk Management**

Access the following web page to help you define risk management:

- "Risk Management, Disaster Planning and Protecting Against Crime"

Test yourself by answering the following question:

- What is the basic premise of risk management?

### **Effective Interactions**

It is crucial in the dynamic healthcare arena to be able to work together to meet the organization's goals. How can you ensure groups and teams work together in a unified fashion? What can you do to facilitate this goal? Explore answers to these questions as you work through the activity in this section.



At the end of this section, you will be able to develop a plan to address specified healthcare professional management issues, and examine the relationship between physicians and midlevel practitioners in a given healthcare organization to diagnose potential communication, work, or ethical problems.

This topic addresses the following competencies:

- **Competency 705.3.6: Organization Plans**  
The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.
- **Competency 705.3.8: Risk Management**  
The graduate develops risk management programs that result in improved quality patient care.
- **Competency 705.3.9: Effective Interactions**  
The graduate can effectively interact with physicians, nurses, and other healthcare providers.

### **Groups and Teams**

Read the following chapter in *Health Care Management: Organization Design and Behavior*:

- Chapter 5 ("Teams and Team Effectiveness in Health Services Organizations")

Test yourself by answering the following questions:

- What can you do to help promote team effectiveness?
- What strategies can you employ to increase the probability that a non-cohesive group be productive?

### **Complete: AFT Task 2 Performance Task**

Complete the following task in Taskstream:

- Accreditation Audit: AFT Task 2
- Accreditation Audit Case Study - Task 2 Artifacts

For details about this performance assessment, see the "Assessment" tab in this course.

View the following supplemental resources for Task 2 Performance:

- Recorded webinar: AFT Task 2
- Quality Improvement Tools: This article provides a description of each quality improvement tool that can be used to conduct the root cause analysis.
- Sentinel Event Interview Transcript

## **Patient Care Improvement**

Patient care improvement and quality of care are, and have always been, the foundation and



core mission of all healthcare providers and professionals. Healthcare providers must do more than communicate their dedication to patient care improvement; they must create and foster an environment and culture of quality and safety. The patient care improvement process is achieved when every staff member has a commitment to excellence in patient care and operational performance that is demonstrated every day in practice and actions.

## **Patient Care Improvement**

The goal of any healthcare organization is to provide the highest level of care to patients. This requires a continuous quality improvement process to ensure that all processes, systems, and procedures are in place to serve the best interest of the patient.

At the end of this section, you will be able to analyze the results of a given patient care survey, and design a quality improvement program that includes critical pathways to help improve patient care.

This topic addresses the following competency:

- **Competency 705.3.4: Patient Care Improvement**

The graduate interprets quality assessments and prioritizes patient care improvement needs.

### **Managing for Efficiency and Effectiveness**

Review the following chapter in *Health Care Management: Organization Design and Behavior*:

- Chapter 5 ("Teams and Team Effectiveness in Health Services Organizations")

Test yourself by answering the following questions:

- What are the factors associated with increased productivity and efficiency?
- How can "managing trade-offs" impact patient care?
- Some people believe the greatest improvements result from changes in the organization and management of patient care units, as they are the mainstay of the healthcare institution. What do you think?

## **Tracer Methodology**

The tracer methodology is the cornerstone of the Joint Commission survey. The tracer method follows a patient through the course of care and evaluates all aspects of care. This method helps you look at the flow of a system or process throughout the organizations.

At the end of this section, you will be able to explain how to measure quality of care from a patient's perspective, and explain how to measure quality of care from a healthcare provider's perspective.

This topic addresses the following competency:

- **Competency 705.3.4: Patient Care Improvement**

The graduate interprets quality assessments and prioritizes patient care improvement



needs.

## **Tracer Methodology**

Access the following website to identify elements needed to complete a tracer methodology for a patient:

- Facts About the Tracer Methodology

### **Complete: AFT Task 3 Performance Task**

Complete the following task in Taskstream:

- Accreditation Audit: AFT Task 3
- Accreditation Audit Case Study - Task 3 Artifacts

For details about this performance assessment, see the "Assessment" tab in this course.

View the following supplemental resource for Task 3 Performance:

- Recorded webinar: AFT Task 3

## **Regulatory Audits, Organization Plans, and Compliance**

There are few things more frustrating than being sanctioned, having payments withheld, or having other penalties imposed on a healthcare organization because of non-compliance with an accrediting agency. The remedy for these problems is to perform regulatory audits—inspections of all the regulations your company could be subject to, along with an assessment of actions (including organization plans) you need to take to stay within the rules.

### **Regulatory Audits**

The Focused Standards Assessment (FSA) helps the healthcare organization to identify and manage risks by reviewing applicable standards, assessing compliance, developing and implementing plans of action, and identifying measures to gauge success in carrying out those plans. By participating in the FSA, the healthcare organization can better incorporate Joint Commission standards into routine operations to ensure the provision of safe, high-quality care on an ongoing basis.

At the end of this section, you will be able to identify various standards for an accrediting agency and define requirements necessary to comply with specified regulations.

This topic addresses the following competencies:

- **Competency 705.2.4: Regulatory Audits**

The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.

- **Competency 705.3.6: Organization Plans**

The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.



- **Competency 705.4.3: Compliance**

The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### **Focused Standard Assessment**

Access the following document:

- Facts about the Intracycle Monitoring Process

Consider the following questions:

- What are the components for completing a focused standard assessment (FSA)?
- What is the regulatory agency?
- What types of issues would be included in the assessment?

### **Organization Plans**

Staffing plans should not cover an entire hospital. Different sections of a healthcare facility require different levels of planning and analysis; some may not require any planning or analysis. Staff planning efforts should only be focused on those areas of the organization that require advance planning.

At the end of this section, you will be able to define staffing requirements necessary to comply with specified regulations, and identify current staffing and anticipated staffing needs for a specified healthcare organization in a given situation.

This topic addresses the following competencies:

- **Competency 705.2.4: Regulatory Audits**

The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.

- **Competency 705.3.6: Organization Plans**

The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.

- **Competency 705.4.3: Compliance**

The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### **Personnel Selection and Onboarding**

Read the following chapter in *Strategic Human Resources Management in Health Services Organizations*:

- Chapter 11 ("Personnel Selection and Onboarding")

Test yourself by answering the following questions:

- What outcomes or metrics might be used to evaluate effectiveness of staff?



- What form of "onboarding" can be utilized to ensure staff is aware of compliance requirements?

## **Joint Commission Compliance**

It may be necessary to develop a plan of action, which is a detailed description of how a healthcare organization plans to bring into compliance any standard identified as being deficient in the Focused Standards Assessment (FSA). The plan of action should include the planned action to be taken as well as target dates for completion and compliance.

At the end of this section, you will be able to develop an initiative to ensure patient care needs in a given situation are met, and identify how practice guidelines impact patient care and safety guidelines for an accrediting agency.

This topic addresses the following competencies:

- **Competency 705.2.4: Regulatory Audits**  
The graduate ensures a healthcare organization is in compliance with mandatory regulatory audit guidelines pertaining to the organization.
- **Competency 705.3.6: Organization Plans**  
The graduate prepares organizational plans such as disaster plans, contingency plans, or staffing plans.
- **Competency 705.4.3: Compliance**  
The graduate identifies and helps a healthcare organization comply with applicable healthcare statutes and regulations.

### **Compliance With Joint Commission**

Access the following website to view the electronic version of the accreditation manual:

- [Joint Commission E-dition](#)

Consider the following question:

- Why would a hospital seek Joint Commission compliance?

### **Complete: AFT2 Task 4**

Review the additional information in the following documents to assist you in identifying changes in standards:

- "Staffing Effectiveness Standard Suspended for Hospitals and Long Term Care"
- "Staffing Effectiveness Requirements for Hospitals and Long Term Care Organizations"

Complete the following task in Taskstream.

- Accreditation Audit: AFT2 Task 4
- Accreditation Audit Case Study - Task 4 Artifacts



For details about this performance assessment, see the "Assessment" tab in this course.

View the following supplemental resources for Task 4 Performance:

- Recorded webinar: AFT2 Task 4
- Nursing Staffing Plans:
  - Nurse-Staffing Levels and the Quality of Care in Hospitals
  - State-Staffing Plans Ratios
  - Nursing Hours Per Patient Day
  - Measurements of Nurse Staffing

## **Final Steps**

Congratulations on completing the activities in this course! This course has prepared you to complete the assessment associated with this course. If you have not already been directed to complete it, schedule and complete your assessment now.