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ACCREDITATION

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Competency Counts

by **Roberta Domos, RRT**

Virtually all accreditation organizations incorporate competency programs into their standards, so that's a good place to start your preparations.



Mandatory accreditation is here, at least for the first 10 competitive bidding areas (CBAs). The addition of 70 more CMS CBAs will require many more providers to be accredited in the next year, and private insurance payors that did not previously require accreditation have made it mandatory as well. The trend will continue until DME accreditation is the standard for the industry.

While some business owners may bristle at the ever-increasing requirements in the face of decreasing reimbursement, there is a silver lining. No longer will the dedicated companies be forced to compete with those that do not take quality seriously. As a result, the playing field will be far more level. It will not hurt the industry to lose companies that tend to give all providers a black eye, and whose lack of minimal standards often results in collective punishment for all DME business owners.

As a consultant with a clinical background, I reject the notion that low price equals competition when it comes to health care services. It may well be that the mandatory accreditation requirement is the only real competitive part of the competitive bidding process. As such, it is a good thing that mandatory accreditation for Medicare providers is not tied directly to the competitive bidding program in the law that was passed by Congress. As the legislation is currently written, even if competitive bidding implodes, the accreditation mandate would remain. The result is that all DME providers need to start preparing for accreditation, and the sooner the better.

TRAINING AND COMPETENCY

Having helped hundreds of companies, I can testify that it is much less stressful if the process is not rushed. Providers who wish to get a jump may want to start work on an employee training program.

A major element of every accrediting body's standards is an employee training and competency program. In most cases, the accrediting body has detailed and specific standards on the components of a provider's competency program, and what training is required. While most DME providers take significant measures to ensure staff members are properly trained and competent, many do not take the extra step of documenting the training that has taken place. The vast majority of CMS-approved accrediting bodies will expect:

- documentation of a comprehensive job orientation;
- accurate job descriptions for each employee;
- documentation that employees received mandatory education required by applicable Occupational Safety and Health Administration (OSHA) and Department of Transportation (DOT) regulations, and accrediting body standards;
- objective competency testing associated with required duties such as patient education and equipment maintenance and repair and/or documented supervisory observation of personnel completing duties;
- personnel performance evaluations; and
- a company-wide yearly evaluation of the competency program.

Tools and Tactics

- Plan early and avoid the stress that comes with rushing.
- Get a jump on accreditation by working on an employee training program.
- Ensuring that staff members are properly trained is not enough—you must document the training.
- A job orientation checklist is a useful document to remind trainers to complete the required items.
- Develop accurate job descriptions that list employees' responsibilities, reporting relationships, and physical and educational requirements.
- Review all the company's job descriptions annually to ensure they remain relevant.
- Focus on routine competencies that affect large numbers of patients.

DOCUMENTATION IS KEY

Typically, when new employees are hired, the company invests time training and orienting them to their new job—even if the employees have extensive DME experience. The key is to document this orientation when it takes place.

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In the case of companies that have long-standing employees, it is a good idea to complete this documentation for existing employees, even if it took place in the past—prior to the accreditation survey. That's because the accrediting body has some specific requirements on what this job orientation should include, such as education and training on required procedures, the company's conflict of interest policy, emergency preparedness plan, and its Medicare compliance plan. A job orientation checklist is a useful document to remind trainers to complete the required items, and to document in the employee's personnel file that the training actually took place.

Develop accurate job descriptions that list employees' responsibilities, reporting relationships, and the physical and educational requirements of the job. For existing employees, the best job descriptions are usually developed with the employee's input, and then approved by management. Once the job description is final, the employee should sign it to document that he is aware of his specific role within the company. Given that an employee's role can change over the course of employment, it is a good practice to review all the company's job descriptions annually to ensure they remain relevant.

OSHA and DOT have certain mandatory training requirements that are relevant to patient care personnel within a DME company (those employees who have face-to-face contact with patients in the home, or within a confined space at the DME facility). In general, these include training to prevent blood-borne pathogens or tuberculosis infections, safe handling of hazardous materials such as cleaning solutions and compressed gasses, and regulations concerning the distribution and tracking of compressed or liquid oxygen.



Roberta Domos

In addition, most accrediting bodies require that employees undergo mandatory training regarding patient confidentiality and HIPAA regulations, and safety issues both in the home environment, and in the workplace.

Once you have completed the mandatory training, turn your attention to documenting the competency of your employees. The focus of most accrediting bodies will be directed to three main areas: the competency of employees to educate patients on the proper and safe use of the equipment you provide; their understanding of proper infection control procedures for handling returned rental equipment; and their competency in checking and maintaining equipment between patient use according to manufacturers' recommendations. You can document an employee's competency regarding these tasks using objective written tests, or by observing them completing these tasks and using a checklist to document that they completed each component of the task successfully.

Obviously, it is unrealistic to fully document that every employee is competent on every component involved in every single product the company provides. Choosing which competencies are required is up to the company owners or managers. Choose the more important tasks and keep in mind the following guidelines:

- Choose tasks that are performed routinely and affect large numbers of patients such as correctly completing patient plan-of-care forms or other documentation.
- Choose tasks that are deemed high risk to the patient or staff member—such as handling compressed gasses or following infection control procedures.
- Choose tasks that require an employee to perform a function that extends beyond the scope of professional training—such as a respiratory care practitioner instructing someone regarding phototherapy, or a pharmacist training a patient on how to use a CPAP device.
- Choose tasks that require certification according to manufacturer requirements—such as the repair of a power-operated vehicle or compressed gas transfilling device.

Make sure your competency program includes feedback to employees regarding the successful completion of their job duties, and goals for future training. Performing personnel evaluations once yearly for each employee will adequately meet this standard. The more specific the annual evaluation is to the employee's job responsibilities, the more helpful it will be to your valuable staff members in improving their skills, and the more favorably the evaluation process will be viewed by the accrediting body.

Lastly, analyze where your employees as a whole can improve their skill sets, assess what educational and training opportunities would be wise to include in the future, and determine how the training program as a whole can be improved. The most efficient way to document your company's competency program assessment is typically within your yearly performance improvement overview, which is also a required element of accreditation preparation.

If it seems daunting to develop a competency program on your own, contact consultants that specialize in accreditation preparation—typically, they have already developed all the tools you will need and can help you implement them. Keep in mind that any consulting assistance you obtain for accreditation should include a predeveloped competency program that can be easily customized for your business.

If you have the rest of the accreditation process down pat and don't need a consultant, you can use online training and competency tools that have been developed specifically for DME businesses. While a fee is required, they can be helpful for larger providers that have too many employees to keep track of individually without adding a full-time staff member to make sure all the requirements are being met on a consistent basis.

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