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Chipping in for Charity

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Net proceeds benefit these local organizations serving counties throughout Central North Carolina.
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ACHC reached another milestone with the recent accreditation of its first assisted living community, Mitchell House Assisted Living & Memory Care in Spruce Pine, N.C.

ACHC understands the value placed on assisted living communities not only for residents, but also for their families. Our focus on both the quality of care and the quality of living is what helps ACHC Accreditation stand out from the rest. Because of this commitment to quality, ACHC will officially launch its Assisted Living program with accreditation for Assisted Living Communities later this year.

“In achieving accreditation, Mitchell House has demonstrated its commitment to strengthen its foundation and enhance organizational performance,” said Denise Hobson, ACHC Program Director. “Accreditation standards set quality benchmarks that promote improvement throughout all aspects of the assisted living community while directly impacting the residents’ quality of life.”

Mitchell House, an Affinity Living Group community, combines the comforts of home with the health and personal care needed for residents to live fully and comfortably. Staff is dedicated to providing a safe, warm, engaging environment for all residents.

“To be recognized by ACHC is a huge honor that we will be proud of for years to come,” said Tennille Garofola, Mitchell House Executive Director. “We respect the work they have done and the high standards of their accreditation process, so this recognition is something we hold high.

“In the assisted living industry, we are entrusted to care for a vulnerable population,” Garofola said. “There can never be too much oversight when it comes to making sure our beloved residents are cared for to the highest degree. I am beyond proud of our team here at Mitchell House for always going above and beyond in caring for our residents. This accreditation is a testament to their hard work and dedication.”

Learn more about Assisted Living and other accreditation programs from ACHC. Visit achc.org, call (855) 937-2242, or email customerservice@achc.org for more information.
The COVID-19 pandemic has touched all of us and as healthcare providers, you have been there every day, making sure patients get the best care despite overwhelming challenges.

Accreditation Commission for Health Care (ACHC) understands how difficult this time has been for you and is grateful for your compassionate efforts. Please know that your commitment to providing critical community services has not been overlooked and is very much appreciated by everyone at ACHC. We will do what we can to support you in those efforts.

While we have also faced our own challenges, it’s been a balancing act, and ACHC remains available to support your needs. By the time this is published, I suspect that we will still be dealing with uncertain times. We will remain flexible by balancing the need for surveys with the safety of your employees and patients and our staff. We are committed to taking care of you and the specific needs of your organization.

Many of you have reached out to us with questions and concerns, and we appreciate you doing so. We’re listening and are here to help. I have always suggested that you use ACHC as an extension of your organization. Our friendly, supportive Account Advisors and clinical experts are available to give you the latest information on accreditation and compliance issues, and will work with you to meet your individual needs. We also regularly provide updates on our website and through emails and social posts.

When it comes to surveys, ACHC is constantly monitoring the situation and conducting appropriate surveys while taking the proper precautions. We are also offering virtual non-deemed initial and renewal surveys and temporary accreditation for select programs.

Our interest is to meet your specific needs while taking the proper precautions to keep both your staff and our staff safe. You can continue to depend on ACHC to assist you during these difficult times. We will get through this together by doing our best to keep those we serve safe.

If at any point you have concerns, please reach out. As your trusted partner, there isn't any situation we can't manage together. Best of luck on a prosperous and healthy remainder of 2020 and thank you for choosing ACHC as your accreditor of choice.

José Domingos
President & CEO
The past few months have been a challenging time for healthcare providers. Many of you have operated at peak levels to meet increased demands during the COVID-19 pandemic while also taking additional steps to protect staff and patients from the spread of infectious disease.

ACHC knows it hasn’t been easy, and appreciates your dedication to providing critical community services. While the long-term impact of the virus is uncertain, we are working with each of you to learn more about your circumstances so we can best meet your specific needs.

We are closely monitoring local, state, and federal healthcare websites and communicating regularly with the Centers for Medicare & Medicaid Services (CMS). This enables us to keep you informed on the most up-to-date government recommendations. In accordance with these guidelines, we adjusted certain policies and procedures, easing your administrative burdens during the COVID-19 public health emergency.

You can rely on ACHC for support throughout the crisis and beyond. As always, we are committed to helping you maintain a safe environment and best serve your communities, employees, and patients. To help you respond more effectively, ACHC is continually finding more ways to assist you during the coronavirus pandemic.

Here to Help
As we navigate changes in these difficult times, ACHC remains flexible and focused on meeting your individual needs. We’re listening and are here to help.

From answering your accreditation questions to keeping you up-to-date on the impact of COVID-19, ACHC is dedicated to delivering the highest quality customer service. Our Account Advisors and clinical experts are available to give you the most current information on accreditation and compliance guidelines while working with you to address your needs.

Thank you for reaching out to us with your questions and concerns about the COVID-19 situation. Please continue to contact us at ProviderSupport@achc.org for assistance.

Provider Resources
Information on the virus is ever-changing, and ACHC responds quickly to updates, sending you emails and social posts to keep you informed of the latest industry and program guidelines.

We also created a special COVID-19 provider webpage to give you convenient access to the most current resources for providers. The webpage features our Frequently Asked Questions, which include responses to common questions about COVID-19. We regularly update our FAQs to remain accurate and current, and continue to include program-specific guidelines from CMS as it broadens flexibilities and eases requirements during the COVID-19 public health emergency.

The webpage also includes a continuous news feed from the Centers for Disease Control and Prevention (CDC) and links to other industry-related articles, such as safety precautions, telehealth resources, and coping with the COVID-19 situation.

Access COVID-19 resources at achc.org/coronavirus.
ACHC considers conducting surveys part of our responsibility to support community-based providers, ensuring they are fully operational and prepared to participate as a provider in the healthcare continuum. To support providers, ACHC is currently conducting some initial and renewal on-site surveys, depending on the program and the number of positive COVID-19 cases in the county where the organization is located.

ACHC also is offering virtual non-deemed initial and renewal surveys and temporary accreditation for select programs, giving providers more ways to demonstrate compliance with quality guidelines and essential infection prevention and control measures.

ACHC Surveyors conducting on-site surveys are following CDC measures to prevent the spread of infectious disease. As a further safety precaution, they also are self-monitoring their health and providing a form certifying that on the morning of each day of an on-site survey they are symptom-free and following CDC measures. Organizations being surveyed are required to provide personal protective equipment (PPE) for the Surveyor.

ACHC published a position statement promoting the use of facial coverings in public as a precaution against the spread of COVID-19:

“ACHC supports the use of face masks or other facial coverings in all public settings as an important step to slow the spread of COVID-19.”

— ACHC Position Statement

The ACHC statement was released in response to recent studies showing that some people infected with coronavirus who lack symptoms and those who eventually develop symptoms can transmit COVID-19 to others before showing symptoms. Also, the virus can spread between people — by speaking, coughing, or sneezing — even if those people are not exhibiting symptoms.

Additionally, ACHCU is partnering with industry experts for special monthly webinars on the most current COVID-19 information and guidance for providers. ACHCU still continues to provide free monthly webinars on industry updates across all programs. Check out the webinars we have coming up and access all previous webinars on demand at achcu.com. For more information on ACHCU services, please visit achcu.com, call (919) 228-6559, or email customerservice@achcu.com.

ACHCU, the educational division of ACHC, helps providers stay up to date on new regulations, industry hot topics, and accreditation updates. ACHCU is offering virtual workshops that bring the full workshop training experience to you in an online, on-demand format. ACHCU also is hosting live, online workshops during the COVID-19 crisis. Continuing education credits are still available for online workshops.

During this time of crisis, we are genuinely grateful for the courageous efforts of all healthcare professionals, and are doing our part to ensure providers are fully operational and prepared to respond to increased demands.

We’re all in this together and we’ll get through this together.

ACHC values the health and safety of providers, employees, and patients, and appreciates your continued trust in us. For more information on programs and services, please visit achc.org, call (855) 937-2242, or email customerservice@achc.org.
The Centers for Medicare & Medicaid Services (CMS) recently passed the Omnibus Burden Reduction (Conditions of Participation) Final Rule, which aims to remove “unnecessary, obsolete, or excessively burdensome” healthcare regulations and increase focus on patient safety and care. The Final Rule went into effect November 29, 2019.

One change for hospice agencies is that they now can defer hospice aide training and competencies to state licensure requirements. If there are no state requirements, hospices will still be required to ensure that their hospice aides meet federal standards for hospice aide training.

Emergency preparedness requirements also were revised. The annual review and update to the all-hazards risk assessment, policies and procedures, communication plan, and training now are required to be reviewed and updated at least every two years. The expectation is that if a significant change is made to policies and procedures, then training should be performed in a timely manner to ensure staff is aware of the change.

The testing of the plan changed from two drills annually to two drills every two years. In the year opposite the full-scale or functional exercise, the agency should complete a second full-scale exercise that is either community-based; an individual, facility-based functional exercise; a mock disaster drill; a tabletop exercise; or a workshop that includes a group discussion led by a facilitator uses a narrated, clinically relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan.

Functional exercises focus on exercising plans, policies, procedures, and staff members involved in management, direction, command, and control functions. Compared with a full-scale exercise, a functional exercise involves fewer participants, and the movements of personnel and equipment is simulated.

A mock disaster drill focuses on practicing how to save lives in a real-time situation for any kind of danger/calamity that occurs with no advance or very little time to evacuate from the premises.

CMS also removed the requirements to have a person on the hospice staff who has specialty knowledge of hospice medications, even though the expectation is that hospice providers should have individuals knowledgeable in hospice medications.

The requirement for hospices to explicitly coordinate with Skilled Nursing Facility/Nursing Facility (SNF/NF) and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) staff for orientation of facility staff was also revised to lessen the burden. However, the expectation remains that the hospice and SNF/NF and ICF/IID staff work together to ensure facility staff are oriented to hospice philosophy, including hospice policies and procedures regarding methods of comfort, pain control, and symptom management, as well as principles about death and dying, individual responses to death, patient rights, appropriate forms, and record-keeping requirements.

— Lisa Meadows, ACHC Clinical Compliance Educator
The Centers for Medicare & Medicaid Services (CMS) recently passed the Omnibus Burden Reduction (Conditions of Participation) Final Rule, which aims to remove “unnecessary, obsolete, or excessively burdensome” healthcare regulations and increase focus on patient safety and care. The Final Rule went into effect November 29, 2019.

The most significant impact on home health agencies is that agencies now have the ability to complete required components of the home health aide competency evaluation during an observation visit of an aide with a patient, or with a pseudo-patient, as part of a simulation. Before, these components had to be observed while the aide performed care on a patient of the agency.

CMS defines a pseudo-patient as a person who is trained to participate in either a role-playing situation or a computer-based mannequin device. A pseudo-patient must be capable of responding to and interacting with the home health aide trainee, and must demonstrate the general characteristics of the primary patient population served by the home health agency in key areas, such as age, frailty, functional status, and cognitive status.

Simulation is defined as a training and assessment technique that mimics the reality of the home care environment, including environmental distractions and constraints that evoke or replicate substantial aspects of the real work in a fully interactive fashion, in order to teach and assess proficiency in performing skills and to promote decision-making and critical thinking.

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Functional exercises focus on exercising plans, policies, procedures, and staff members involved in management, direction, command, and control functions. Compared with a full-scale exercise, a functional exercise involves fewer participants and the movement of personnel and equipment is simulated.

A mock disaster drill focuses on practicing how to save lives in a real-time situation for any kind of danger calamity that occurs, with no advance or very little time to evacuate from the premises.

The requirement to provide verbal notice of the patient’s rights and responsibilities in the individual’s primary or preferred language and in a manner the individual understands must be provided free of charge, with the use of a competent interpreter, if necessary, no later than the completion of the second visit from a skilled professional has been removed. The expectation is that the notice is still provided in the individual’s primary or preferred language; it is the time frame expectation that has been removed.

In addition to the Omnibus Burden Reduction Final Rule, CMS also added discharge requirements, which state that the home health agency must develop and implement an effective transfer and discharge process for patients who are transferred to another home health agency or who are discharged to a Skilled Nursing Facility (SNF), Inpatient Rehabilitation Facility (IRF), or Long-Term Care Hospital (LTCH). The home health agency must assist patients and their caregivers in selecting a post-acute care provider by using and sharing data. The home health agency must ensure that the post-acute care data on quality measures and data on resource use measures is relevant and applicable to the patient's goals of care and treatment preferences.

In addition to the Omnibus Burden Reduction Final Rule, CMS also added discharge requirements …

The home health agency must send all necessary medical information pertaining to the patient’s current course of illness and treatment, post-discharge goals of care, and treatment preferences to the receiving facility or health care practitioner to ensure the safe and effective transition of care, and must comply with requests for additional clinical information as may be necessary for treatment of the patient made by the receiving facility or healthcare practitioner.

— Lisa Meadows, ACHC Clinical Compliance Educator
ACHC’s Private Duty Infusion Nursing (PDIN) service accreditation was discontinued November 1, 2019, when AHC launched its Home Infusion Therapy Accreditation program and began surveying all new and renewal infusion nursing accreditation applications against the new Home Infusion Therapy standards.

The change was prompted by upcoming revisions to Medicare reimbursement requirements, which stipulate that all home infusion therapy suppliers must be accredited to receive Medicare reimbursement beginning January 1, 2021. AHC Home Infusion Therapy Accreditation standards are similar to those for the previous PDIN accreditation service. AHC has numerous resources available on Customer Central — crosswalks, items needed for survey, desk review reference guide, and personnel file survey checklist — to assist providers in preparing for a Home Infusion Therapy survey.

Accreditation needs to play a role in the DMEPOS market. When regulations by the Centers for Medicare and Medicaid Services (CMS) made accreditation mandatory, the main focus was to curb fraud and abuse. CMS approved Accreditation Organizations (AOs) to ensure that each company that has a Medicare Provider Number (PTAN) is following the CMS Quality Standards.

AOs also have a responsibility to make sure that the company is in compliance with the CMS supplier standards.

AHC has requirements that reflect the standards required by CMS, but also believes that each survey performed needs to make a company better in the way it serves its customers.

Accreditation is about making a company better and helping it become an active part of the services for each of its patients. AHC Surveyors have healthcare experience in their survey field and Surveyor training reinforces that visits should not only ensure compliance with CMS requirements, but also help companies understand issues that can make the company better.

One of the most frequent questions we receive concerns the requirements for satisfaction surveys. While it is commonly known that CMS requires feedback from customers for DMEPOS equipment and supplies, little is known about the requirement for surveys to extend to referral and staff satisfaction surveys. This is one of the requirements that are not always met.

CMS quality standards state:

The supplier must implement a performance management plan that measures outcomes of consumer services, billing practices, and adverse events. The data collection may target certain aspects of services that have a potential to cause harm or injury; occur frequently (creating a greater than expected number of adjustments, repairs, or replacements); or require significant training to ensure safe use and benefit of the equipment and/or items.

At a minimum, each supplier must measure:

- Beneficiary satisfaction with, and complaints about, products and services
- Timeliness of response to beneficiary questions, problems, and concerns
- Impact of the supplier’s business practices on the adequacy of beneficiary access to equipment, items, services, and information
- Frequency of billing and coding errors (for example, number of Medicare claims denied; errors the supplier finds in their records after they have been notified of a claims denial)
- Adverse events to beneficiaries due to inadequate services or malfunctioning equipment and/or items (for example, injuries, accidents, signs and symptoms of infection, hospitalizations). This may be identified through follow-up with the prescribing physician, other healthcare team members, the beneficiary, and any caregivers.

The supplier must seek input from employees, customers, and referral sources when assessing the quality of their operations and services.

— Tim Safley, Program Director
Mail Order Pharmacy Accreditation Service

As economic concerns continue to mount for pharmacies, many are looking for ways to reduce expenses by developing systems to increase output while cutting overhead costs and maintaining quality.

ACHC developed the Mail Order service after providers said they were interested in having this unique service accredited because they were interested in demonstrating an ability to meet standards for delivering non-specialty drugs.”

— Jon Pritchett, ACHC Program Director

Utilizing a pharmacy to fill prescriptions rapidly and then deliver them to patients is an option some organizations are using to reduce operating costs, streamline the dispensing process, and assist patients that may not have ready access to a local pharmacy.

ACHC’s new Mail Order Pharmacy Accreditation Program, launched in December 2019, focuses on the preparation and dispensing of prescription medications delivered by qualified distribution methods directly to consumers. Highlights of the program include ensuring that pharmacy personnel are credentialed and trained, patient information is documented and maintained, communication with the patient meets state and federal requirements, and the integrity of the drug is maintained through delivery to the patient.

“This accreditation will allow a pharmacy to demonstrate to their customers, insurance providers, and regulatory agencies that they have quality systems in place to accurately and safely deliver medications,” said Jon Pritchett, ACHC Program Director. “ACHC developed the Mail Order service after providers said they were interested in having this unique service accredited because they were interested in demonstrating an ability to meet standards for delivering non-specialty drugs. This accreditation service also will likely be important to pharmacies as they pursue network contracts.”

Industry support for ACHC Mail Order Accreditation has already come from OptumRx, a leading pharmacy care services company that now recognizes ACHC as an approved accreditor for mail order pharmacy services.

In addition to Mail Order, ACHC offers a broad suite of pharmacy accreditation solutions, including Specialty, Infusion, Long-Term Care, and Sterile/Non-Sterile Compounding services.

Distinction in Rare Diseases and Orphan Drugs

In October 2019, ACHC continued to expand its offerings in Specialty Pharmacy services with the launch of the industry’s first Distinction in Rare Diseases and Orphan Drugs.

Developed in collaboration with rare pharmacy leader PANTHERx, ACHC’s team of pharmacy experts constructed standards that address challenges arising from growing demands for complex medications to treat patients with rare diseases and devastating medical conditions. In September, ACHC granted the nation’s first Distinction in Rare Diseases and Orphan Drugs to PANTHERx.

In addition to the new Distinction in Rare Diseases and Orphan Drugs, organizations seeking to distinguish themselves within the pharmacy market also can obtain distinctions from ACHC in Oncology, Infectious Disease Specific to HIV, Nutrition Support, and Hazardous Drug Handling. Pharmacies seeking accreditation with a Distinction in Rare Diseases and Orphan Drugs must have ACHC Specialty Pharmacy Accreditation.

To learn more about all ACHC Accreditation programs and services, visit achc.org, email customerservice@achc.org, or call (855) 937-2242.
FDA POLICY EASES PRESCRIPTION RULE FOR HAND SANITIZERS

Compounding pharmacy to the rescue! Earlier this year, the FDA released new guidance on the temporary compounding of certain alcohol-based hand sanitizers by licensed pharmacies and outsourcing facilities throughout the duration of the COVID-19 public health emergency.

The temporary policy change is significant because it no longer requires a prescription from a licensed prescriber before a pharmacy can make a compounded prescription. Prescriptions for certain compounded hand sanitizers are not required during the COVID-19 crisis.

For compounding pharmacies, the new FDA guidance contains key information on ingredients, preparation conditions, and labeling requirements for participating facilities.

The FDA guidance does not set up legally enforceable responsibilities for pharmacies. The policy of discretionary enforcement recognizes the fact that compounding pharmacies are specifically equipped with the proper knowledge, facilities, equipment, and training to make a preparation consisting of quality ingredients prepared in a proper manner and with a final concentration effective for sanitization.


Appeals Panel Decisions on USP <795> and <797>: We also recently received news that appeals to USP General Chapters <795> and <797> were granted, and the chapters are being remanded back to the Compounding Expert Committee (read more at https://www.usp.org/news/usp-appeals-panel-issues-decisions-on-compounding-chapters).

Currently, official versions of <795> (last revised in 2014) and <797> (last revised in 2008) will remain official. Facilities that carry accreditation for PCAB non-sterile and/or sterile (CFNS, CFST), Infusion Pharmacy (IRX), or Distinction in Hazardous Drug Handling (HDH) should not expect to see substantive changes related to USP compliance until the chapters are further updated.
SATISFACTION SURVEYS FOR PERFORMANCE IMPROVEMENT

Performance Improvement (PI) in health care is defined, in part, by the Centers for Medicare & Medicaid Services (CMS) as the continuous study and improvement of processes with the intent to better services or outcomes.

ACHC Sleep Standard SLC6-1A requires that the Sleep Lab/Center (SLC) develops, implements, and maintains an effective, ongoing, organization-wide PI program. The SLC measures, analyzes, and tracks quality indicators that enable the SLC to assess processes of care, services, and operations.

Standard SLC6-3B requires that PI activities include satisfaction surveys and that the PI Plan identifies the process for conducting satisfaction surveys for the following:
- Client/patient
- Personnel

Referral Source Satisfaction surveys are no longer required, as of the 2020 update of standards.

An ongoing challenge noted during sleep surveys exists within performance improvement requirements for satisfaction surveys.

Surveyors will often find that client/patient satisfaction surveys are conducted as part of the sleep testing paperwork requirements, but the process for evaluating those surveys as part of PI is not being fulfilled.

Additionally, satisfaction surveys are not being conducted with personnel. Many are not aware that these are required and lack an understanding of how they should be conducted or what to do with the collected data.

Personnel satisfaction surveys tend to be conducted by larger organizations during annual performance evaluations using personnel engagement tools, but these also can be simplified to meet the needs and size of your business.

The key to fulfilling requirements of this standard is to understand the purpose and value of PI activities by measuring, analyzing, and tracking quality indicators that enable the SLC to assess process of care, services, and operations.

To learn more about PI for sleep or to purchase customized audit tools, contact ACHCU, the educational division of ACHC. Visit the ACHCU website at achcu.com, call (919) 228-6559, or email customerservice@achcu.com.

— Dottie Covey-Elleby, BS, RSPGT, ACHC Corporate Surveyor

PASSION FOR CARE, COMMITMENT TO QUALITY

Passion.

I became passionate about pharmacy as a teenager when I was first brought behind the counter to help ring up customers at our local drugstore. The interaction and trust that I saw between the pharmacists and patients was infectious, and I, like many of my colleagues, quickly determined that this was a career that would bring joy in my life.

Later, one of the most difficult decisions I ever made was to leave behind nearly 20 years of experience working directly with patients to work elevating the pharmacy profession by joining Accreditation Commission for Health Care (ACHC).

Don’t get me wrong — I absolutely love what I do today — but anybody in health care can attest to the passion that develops from serving those who trust us to deliver care.

I recently was reminded of this passion when I attended the NORD (National Organization for Rare Disorders) summit in October to discuss ACHC’s new Pharmacy Distinction in Rare Diseases and Orphan Drugs.

If you are not familiar with rare disorders, a rare disorder is defined in the U.S. as one that affects less than 200,000 people. Because of the limited nature of these conditions, understanding their etiology and finding mitigation takes a lot of time and resources. Many of the participants in the research, advocacy, and treatment of rare disorders either have a loved one or are themselves living with one of these conditions, and are doing everything they can to further understand and ultimately improve lives.

I was profoundly affected as I heard story after story of the dedication and commitment this community has, and I am proud that ACHC has played a small role by creating a service to recognize pharmacies that have dedicated significant time and resources and have a passion to serve this incredible population.

Thank you to organizations like NORD for serving this community the way you do, and thank you to all of you in health care that serve your patients with passion.

— Jon Pritchett, Pharm.D., RPh., BCSCP, Program Director
ACHC WELCOMES NEW LEADERS

As healthcare demands continue to increase, ACHC remains at the forefront of developing new accreditation programs and services, giving providers more opportunities to enhance patient care and business efficiencies.

To support our expanding offerings, we recently added several highly recognized and accomplished staff leaders to our growing team. These are the people who are instrumental in shaping our company’s direction and are devoted to continually improving provider and patient services. We are proud to have them at ACHC and welcome their valuable insights and industry knowledge.

We are sharing some information about them with you so you can get to know them better. As always, ACHC is here to help and remains committed to supporting providers and the patients they serve. Please continue to reach out to us with any questions or concerns.

Denise Hobson, RN, BSN
Program Director, Assisted Living & Behavioral Health

Denise Hobson joined ACHC in May 2020 as Program Director for Assisted Living and Behavioral Health. She has over 31 years of experience serving the home and community-based industry.

“Serving ACHC customers in this role offers me the opportunity to complement their delivery of quality patient care through education and partnership,” Denise said. “What a privilege to represent ACHC while serving as an extension of the provider!”

Denise is a Registered Nurse with a Bachelor of Science in Nursing from Winston-Salem State University. She began her home care career with a private organization that offered programs such as home health, private duty, CAP Waiver programs, long-term care, hospice, and infusion nursing. She served as Director of Daily Operations for 11 years.

Denise later transitioned to a hospital-based complex organization, where she served for 14 years as Executive Director of Home Health. Key responsibilities included directing the provision of quality patient care for a multidisciplinary team through continuous quality improvement, policy development and implementation, designing and leading Performance Improvement activities, and measuring and validating regulatory compliance.

After 25 years as a provider, Denise then moved further into the compliance and regulatory industry. She was named Executive Director for the North Carolina Independent Assessment Entity, which also serves as a leader nationwide and is certified by the Centers for Medicare & Medicaid Services (CMS) as a Quality Improvement Organization. Organization-wide products of service included aging and disability support, behavioral health, correctional mental health, and sex offender management. Denise also developed partnership-focused efforts and offered educational training to support provider quality and regulatory compliance efforts.

This led Denise to continue that passion by joining ACHC. Denise brings her knowledge, expertise, and commitment to providers to the ACHC team and will continue efforts to directly impact the delivery of quality services while delivering the best possible accreditation experience.
Margaret “Peg” Terry, RN, Ph.D.
Corporate Clinical Liaison

Margaret “Peg” Terry joined ACHC in March 2020 as the Corporate Clinical Liaison and oversees quality improvement and clinical excellence. With over two decades of creating and implementing quality improvement services in home care organizations, Peg has helped organizations achieve clinical excellence and regulatory compliance. She also has broad experience in providing comprehensive clinical standards and education for the industry.

Peg led teams and committees in successful performance improvement activities at a large healthcare system, with emphasis on survey readiness for all staff across offices. She also led a large private-duty agency.

With this new role, ACHC will be enhancing education programs for clients by adding more research-based courses. “I am excited to work with key national experts to develop and present evidence-based courses to ACHC clients, especially in home care,” Peg said. “This will bring additional power to the vital initiative to develop outcome-based accreditation standards.”

At the national level, Peg wrote, published, and launched the VNAA Blueprint for Excellence, the first evidence-based guide of practices for home health, hospice, and palliative care. This helped ensure consistency in standards of practice and workforce development.

She previously worked at Community Health Accreditation Partner (CHAP), and participated in the development of standards for private duty organizations and also provided both online and in-person educational presentations.

Peg also taught at Catholic University and Walden University. She has written numerous articles and co-authored a book. She is a Registered Nurse and has a B.S. from SUNY, M.S. in Community Health Nursing from Boston University, and a Ph.D. from the University of Maryland at Baltimore.

Gina Kelly, RRT SDS, RPGST
Customer Experience Manager

Gina Kelly joined ACHC in 2018 as a Corporate Surveyor for DME and Sleep and recently transitioned into the role of Customer Experience Manager for DME, Sleep, and Pharmacy. She oversees Account Advisors for the Accreditation Team, and assists with customer relations and fashioning customer experiences.

Gina brings her extensive experience in healthcare and management to the Accreditation Team and works collectively to enhance provider support with Caroline Forrest, ACHC Accreditation Manager for Home Health, Hospice, and Private Duty. Prior to joining the ACHC team full time, Gina worked as an ACHC Contract Surveyor for seven years.

“Making sure providers receive exceptional service from ACHC is my top priority,” Gina said. “We’re available to assist providers throughout the accreditation process, ensuring they have the resources they need to help them meet their specific goals.”

Gina has over 30 years of experience in the Respiratory Care profession as a Registered Respiratory Therapist, including emergency, intensive care, diagnostic, and HME industries. Gina shifted the focus of her career after obtaining the credentials of Registered Polysomnography Technologists in 2000.

Throughout her sleep profession, she conducted all facets of sleep testing, assessments, and education. Gina has extensive experience in managing large teams of employees across multiple locations.

Gina received her Bachelor’s Degree in Healthcare Administration from Mount Olive College in 2012. She maintains her license in North Carolina as a Respiratory Care Practitioner and is credentialed by the National Board for Respiratory Care as a Registered Sleep Technologist.
Teresa joined ACHC in June 2018 as Clinical Compliance Educator for the Renal Dialysis Program and became the Program Manager in December 2019.

In her current role, Teresa oversees the Renal Dialysis Program at ACHC and also is a Clinical Reviewer for Complaints. She has 30 years of experience in the End-Stage Renal Disease (ESRD) field, where she has worked in various roles.

“My goal is for ACHC to be the accrediting organization for ESRD providers that is synonymous with excellence,” Teresa said. “Our team at ACHC understands the challenges ESRD organizations face. We work to help providers go beyond basic requirements to provide exceptional, safe patient care.”

Teresa began her career as a Patient Care Technician, and then pursued her nursing degree. Teresa has worked as a staff nurse, charge nurse, and a research coordinator, and spent most of her previous work as the Clinical Development Coordinator for an independent dialysis provider. Her areas of expertise are policy and procedure development, training and education, and clinical compliance.

Teresa is a Registered Nurse and became a Certified Dialysis Nurse in 2007. She previously served on the Medical Review Board and as a Divisional Board Member for ESRD Network 6. She also served as a speaker with the National Nurses Speakers Bureau for Amgen, Inc. Teresa is currently pursuing a Master of Science in Nursing.

Gina Eastridge Reynolds joined ACHC in October 2019 and leads the Finance, IT, Human Resources, and Facilities teams.

“Serving in a leadership role at ACHC gives me the opportunity to blend my passion for public health and my organizational management skills,” Gina said. “I am thrilled to be a part of this fabulous team that is making a difference in the quality of community-based healthcare!”

Gina began her career in public accounting with the international firms of Arthur Andersen and EY, and has since served in financial management for more than 20 years in a variety of industries — healthcare, real estate development, professional services, and hospitality.

Before joining ACHC, she served as the Director of Finance and Interim CFO at Ipas, an international reproductive health and rights nonprofit organization in Chapel Hill, N.C. At Ipas, Gina managed financial reporting for a grant portfolio of over 100 grants from private foundations and European government agencies. She also led finance teams in the U.S. and 15 other countries through a global financial software implementation.

Additionally, Gina previously was the Controller at Bell Leadership Institute, a management consulting/leadership development firm in Chapel Hill.

She holds a Bachelor of Science in Business Administration from the Indiana University Kelly School of Business.

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At ACHC we hire only the best. As a nonprofit company with a rapidly growing customer base, our philosophy is innovation, honesty, and, quite simply, excellence. If you’re a goal-oriented individual who would like to experience the ACHC difference, we’d love to have you join our team.

Visit achc.org/careers to view our open positions and find out more.
Susan Mills recently was named ACHC Associate Clinical Director and oversees ACHC’s Home Health, Hospice, Private Duty, Home Infusion Therapy, Palliative Care, and Ambulatory Care programs, and the Home Care international program.

“My vision is to partner with agencies and provide the education and guidance needed to support safe, quality patient care,” she said. “At ACHC, we know that each organization is different and has specific needs. I’m always proud to work with providers and help them best meet their compliance and regulatory goals.”

Susan is a Registered Nurse with an Associate Degree in Nursing from Fayetteville Technical Community College and is currently pursuing a master’s degree in Health Administration from American College of Education.

After graduation from nursing school, Susan worked in the hospital setting for seven years, where she obtained her chemotherapy certification, worked in the SICU, and was Assistant Manager on a Medical/Surgical Unit.

She began her 20-year career in home health and hospice as a field nurse, rising to a Regional Quality Improvement Coordinator and eventually to Home Health Director. During this time, she obtained and maintained her Infection Control, OASIS, and ICD-9 Coding certifications. She developed and implemented a safety and infection control training program for 30 agencies. Susan previously was a member of the Western North Carolina Health Department Alliance for Home Health Agencies.

The positive experience she had with ACHC over the years in home health as a field nurse, in the quality role and as a manager, prompted her to begin as a contract Surveyor for ACHC in 2008 and a full-time Surveyor in 2012. She transitioned to Clinical Review Specialist in 2014, Clinical Manager in 2017, and progressed to Associate Clinical Director of Home Health, Hospice, Private Duty, and Home Infusion Therapy in 2019.

Susan has 28 years of home health and hospice experience, which allows her to share her vast knowledge and clinical expertise with our customers.

Jon Pritchett, Pharm.D., RPh., BCSCP
Program Director

Dr. Jon Pritchett recently was named a Program Director at ACHC and oversees Pharmacy programs, including Specialty, Infusion, and Compounding services.

“My vision for the ACHC Pharmacy program is to provide recognition for those pharmacies that are serving their patients by consistently going above and beyond to build quality into their systems for medication delivery,” Jon said. “I want the community to know that when utilizing an ACHC-accredited pharmacy they are choosing a partner that has been validated to have the appropriate training, equipment, and infrastructure to handle their prescription needs.”

Jon’s passion for pharmacy began at age 15 when a job in a drug store showed him the impact that a pharmacist could have on their community. He went on to become a pharmacist and earned a Doctor of Pharmacy (Pharm.D.) from Campbell University College of Pharmacy & Health Sciences.

Prior to joining ACHC, Jon practiced pharmacy in a community setting, where he specialized in sterile and non-sterile compounding and clinical services, and led his pharmacy through multiple rounds of accreditation. Jon is a Registered Pharmacist in the state of North Carolina and holds certification by the Board of Pharmacy Specialties as a Sterile Compounding Pharmacist. He also serves the American Pharmacists Association (APhA) as the Compounding Special Interest Group Coordinator.

He also is a member of many professional organizations, including the Alliance for Pharmaceutical Compounding (APC), National Association for Specialty Pharmacy (NASP), National Home Infusion Association (NHIA), National Community Pharmacists Association (NCPA), International Pharmaceutical Federation (IFP), American Society for Pharmacy Law (ASPL), North Carolina Association of Pharmacists (NCAP), and Campbell University Alumni Association.

In his role at ACHC, Jon leads the Pharmacy program by working with a group of tremendously dedicated pharmacists, technicians, and staff to elevate pharmacy practice through standards, education, and surveys. He regularly presents to state boards of pharmacy across the U.S., federal and state legislators and agencies, and pharmacy personnel about pharmacy accreditation standards and their implementation, current trends in pharmacy practice, and compliance.
ACHC HOME INFUSION THERAPY & HOSPICE PROGRAMS RECEIVE CMS RECOGNITION

ACHC continues to develop solutions to meet the needs of providers in every facet of health care, and remains committed to offering providers the customized accreditation experience they have trusted for decades. Our goal is to expand our efforts to enhance business operations and improve patient outcomes across the entire continuum of care.

To help providers meet the challenges of an evolving healthcare system, ACHC continually works to increase and improve its accreditation options. We recently received deeming authority from the Centers for Medicare & Medicaid Services (CMS) for our new Home Infusion Therapy Accreditation program. CMS also recently renewed our authority to conduct deemed status Hospice surveys for Medicare providers.

HOME INFUSION THERAPY

Upcoming changes to Medicare reimbursement requirements are altering accreditation rules for home infusion therapy suppliers. ACHC launched its Home Infusion Therapy Accreditation program in November 2019 to assist these providers in addressing the issues these changes raise for healthcare organizations.

In April 2020, the Centers for Medicare and Medicaid Services (CMS) granted ACHC initial deeming authority for Home Infusion Therapy Accreditation. The decision gives ACHC deeming authority to conduct surveys that meet or exceed Medicare requirements, including new reimbursement rules mandated by the 21st Century Cures Act. Beginning January 1, 2021, the act stipulates that home infusion therapy suppliers seeking Medicare reimbursement must be accredited by an approved accreditor like ACHC.

ACHC was granted the longest possible approval term for an initial program by receiving a four-year approval, from April 2020 to April 2024.

“ACHC is proud to receive national recognition from CMS for our Home Infusion Accreditation program,” said Susan Mills, ACHC Associate Clinical Director. “This confirms our dedication to supporting care of the highest quality as demand grows for home infusion therapy services. Our standards meet new requirements for patient care and safety, and enable providers to enhance their businesses and the services they offer.”

ACHC Home Infusion Therapy Accreditation looks at the education, assessment, medication review, and development of the plan of care provided by a nurse or healthcare professional during a home visit. Educational resources, including crosswalks that detail all standards changes and FAQs, are available to help organizations meet the new requirements.

In addition to Home Infusion Therapy, ACHC has CMS deeming authority for Home Health, Hospice, Renal Dialysis, and DMEPOS accreditation, and a Quality Management System certified to ISO 9001:2015.
ACHC reaffirmed its status as a national leader in hospice accreditation with the recent renewal of its recognition as an approved accreditor for Medicare providers.

The approval by CMS renews ACHC’s authority to conduct deemed status surveys that meet or exceed Medicare requirements. For providers, this means that achieving ACHC Hospice Accreditation certifies that they meet the Medicare Conditions of Participation. It also means that ACHC may accredit hospices in lieu of initial and ongoing surveys.

ACHC’s renewal as an approved accreditor is valid for six years — the longest acceptance period an accreditation organization can receive from CMS when renewing its application. ACHC has been recognized by CMS to conduct deemed status hospice surveys since 2009.

Research shows that demand for hospice services is expected to rise as the number of people aged 65 and over continues to increase. ACHC Accreditation can help providers address these challenges. Our simple, patient-centered approach to hospice accreditation gives providers a convenient, time-efficient way to meet regulatory requirements, enhance business operations, and demonstrate their dedication to a higher level of performance, patient care, and safety.

To learn more about all ACHC Accreditation programs and services, visit achc.org, email customerservice@achc.org, or call (855) 937-2242.

Hospice Accreditation certifies that they meet the Medicare Conditions of Participation. It also means that ACHC may accredit hospices in lieu of initial and ongoing surveys.

“Our continued recognition from CMS as a national accrediting organization speaks to the very core of ACHC’s long-standing commitment to excellence and the highest-quality patient care,” said Susan Mills, ACHC Associate Clinical Director. “ACHC accredits over 1,100 hospice providers and understands the unique challenges providers face. We focus on providing the best service to help providers meet their compliance and regulatory goals.”

ACHC understands the unique challenges providers face. We focus on providing the best service to help providers meet their compliance and regulatory goals.”

— Susan Mills
ACHC Associate Clinical Director

DID YOU KNOW? 98% of our customers regard their experience with ACHC as positive*

98% of our customers would recommend ACHC*
ACHC strives to collaborate with providers, organizations, and associations to consistently offer the best service, resources, and industry expertise to our customers.

Through ACHC’s Preferred Partner program, we team up with select groups to provide educational resources and accreditation discounts. We aim to offer accreditation solutions that help providers achieve business objectives while improving outcomes and patient safety.

ACHC Preferred Partner benefits include:

- **E-Newsletters**: ACHC Today and PCAB Today monthly newsletters feature educational articles and industry news. Partners can include information on events, news, and articles at no charge.

- **@ACHC**: ACHC maintains a strong social media presence on LinkedIn, Twitter, and Facebook. Partners can provide news and events to share with our followers.

- **Promotions**: ACHC sends out a media release to announce our collaborations and features partner organizations on our website.

- **Surveyor**: Published twice a year in both print and electronic formats, our Surveyor publication features program updates, industry news, and partnership information. In each issue, ACHC partners are listed, select partners are featured in special articles, and discounted ad space is made available.

- **Educational Events**: ACHCU, the educational division of ACHC, offers webinars, workbooks, and program-specific tools for healthcare professionals. Partners have access to industry speakers for their events, can co-host a workshop, and can co-host webinars on requested topics.

**THANK YOU TO OUR VALUED PARTNERS**

21st Century Home Health Consulting Services  
Accredited Home Healthcare Directory  
Alliance for Pharmacy Compounding  
Always Best Care  
American College of Apothecaries  
Amerisource Bergen Drug Company  
Aspire Health Pharmacy Services  
Association for Home & Hospice Care of North Carolina  
Atlantic Coast Medical Equipment Services Association  
Benzer Franchise  
California Association for Health Services at Home  
California Hospice and Palliative Care Association  
CARE Pharmacies Cooperative Inc.  
The Carolinas Center  
ComForCare Health Care Holdings, LLC  
Community Oncology Pharmacy Association  
Comprehensive Pharmacy Services, Inc.  
Connecticut Association for Healthcare at Home Corridor  
DNV GL  
ExceleraRx  
FirstLight Home Care Franchising, LLC  
Florida Alliance for Health Care Services  
Grove Medical, Inc.  
Home Care Alliance of Massachusetts  
Home Care Association of America  
Home Care Association of Florida  
Home Care Association of New York State  
Illinois HomeCare & Hospice Council  
Imark Billing  
IMCO Home Care  

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“ACHC has always been part of our state association efforts and we appreciate the support that is passed along to our membership.”

— Beth Bowen
Executive Director, FAHCS
ACHC OFFERS OFF-SITE REVIEWS FOR RENAL DIALYSIS PROVIDERS

As part of continuing efforts to best meet the needs of providers, ACHC recently conducted its first temporary accreditation survey for a renal dialysis provider. Ditmas Park Dialysis Center in Brooklyn, N.Y., was the first renal dialysis center to receive an off-site review for temporary accreditation from ACHC.

During the COVID-19 public health emergency, ACHC is offering a temporary accreditation option with virtual off-site compliance reviews for renal dialysis facilities seeking initial Medicare certification or requesting service additions. The Centers for Medicare & Medicaid Services (CMS) supports the use of temporary accreditation to ensure local healthcare systems can provide services during a potential surge of COVID-19 patients.

RenAlliance Group CEO Miles Davis and his team were instrumental in assisting Ditmas Park Dialysis Center. RenAlliance Group is a national dialysis management and billing company that helps dialysis centers improve their clinical and financial outcomes by offering development, management, consulting, and oversight services.

Temporary accreditation provides an efficient, convenient way for renal dialysis organizations to obtain a temporary CMS Certification Number (CCN), which allows them to quickly begin caring for patients and billing Medicare. ACHC is conducting virtual off-site compliance reviews for organizations seeking temporary accreditation. A second, subsequent on-site survey for full accreditation certification and a permanent CCN will be conducted at an unspecified time after the COVID-19 emergency is over. Temporary accreditation still requires the same compliance with accreditation standards as an on-site survey, as reasonably possible. To learn more about temporary accreditation, sign up for a free consultation with an ACHC expert at https://info.achc.org/renal-dialysis-temporary-accreditation.

New providers and service additions also can choose to have an initial on-site accreditation survey if they are in an area not severely affected by coronavirus. This gives organizations a direct opportunity to receive full accreditation status and a permanent CCN. ACHC has CMS deeming authority for Renal Dialysis and offers accreditation for In-Center Dialysis and Home Dialysis Support services.

To further support renal dialysis providers, ACHC also has recently updated its Renal Dialysis Standards to make the accreditation process more streamlined and efficient for providers.

— Teresa Hoosier, RN, CDN, Program Manager, Renal Dialysis

Please call us at (855) 937-2242 or email customerservice@achc.org to find out more about ACHC’s Renal Dialysis Accreditation options.

RENALLIANCE GROUP TESTIMONIAL

We would absolutely recommend ACHC for a remote survey to anyone who is looking to open a dialysis center, especially during this pandemic.

RenAlliance Group is a dialysis management and billing company. As CEO, I have been following ACHC for years, meeting with Teresa Hoosier at each dialysis conference. Teresa would speak about the timelines for getting a CMS survey scheduled in other parts of the country. It was a no-brainer for them to be deemed and accredited through ACHC. I never felt we in New York had a need for ACHC services since we were able to get our CMS surveys scheduled rather quickly in a matter of weeks.

That all changed over the last year. As the demand for surveys increased in New York and the workforce of Surveyors declined, we found initial survey timelines Teresa always referenced now hit us in New York. I was now experiencing firsthand the difficulties of getting a dialysis facility operational by waiting for a CMS survey to obtain a CCN number. Not having our CCN certification meant we were restricted to only treat a small number of patients with many of the
fixed costs of a fully operational center.

In 2019, we decided to partner with ACHC for our first deemed survey for CMS CCN Certification. The account setup with a login to the client portal was quick. The client portal gave us a wealth of information we needed to understand the process and the standards. Honestly, reading through the standards gave us anxiety about the process, which was relieved as soon as we signed up. The courteous account manager guided us through every step of the pre-survey process. ACHC’s standards helped us identify where our policies or processes were weak before getting to survey day.

Survey day, anxiety once again kicks in when you get the phone call “the Surveyors are here.” If you’re reading this and decide to sign up with ACHC, do not let that scare you! The kind, professional, calm atmosphere set by the Surveyors was extremely comforting for the staff — a day that allowed the staff to shine and demonstrate their skills and knowledge. Congratulations! We were approved and received our CCN.

Fast-forward to March 2020, the catastrophic month when the pandemic hit.

Due to the pandemic, CMS was suspending all non-essential surveys, which affected some centers we had in the process of opening. Knowing that we have the responsibility to the community to continue with our plan of opening our dialysis centers to help with the dialysis need, we struggled to find a solution. We immediately reached out to ACHC, who eased our worries by offering virtual surveys and we knew that was the answer.

Going through the ACHC virtual survey was at first extremely daunting and unfamiliar. ACHC provided us with the checklist of everything that was needed to be survey ready and an agenda of what to expect for survey. The day of survey, we did not know what to expect on our first remote survey but felt confident in the ACHC Surveyor Shannon Roberts, who was professional, knowledgeable, and very thorough. ACHC exceeded our expectations and we had a flawless survey experience.

We would absolutely recommend ACHC for a remote survey to anyone who is looking to open a dialysis center, especially during this pandemic. Don’t wait for the DOH to come when you can just call ACHC.

— Miles Davis, CEO, RenAlliance Group

Franciscan Durable Medical Equipment is owned and operated by Franciscan Alliance, Inc., a leading Catholic healthcare system serving patients in Indiana and Illinois. We provide faith-based, quality care and services with a high level of compassion and special concern for the healthcare needs of the poor and disadvantaged.

As health care continues to drive toward quality and measurable evidence-based outcomes, partnering with an organization like ACHC for accreditation and regulatory compliance is a key component to building a successful program.

Offering a comprehensive medical equipment program with nearly 30 years of experience, Franciscan Durable Medical Equipment extends a highly qualified team providing convenient, prompt delivery, with an on-call associate available 24 hours a day, 7 days a week. Our organization features a diverse product selection with a specialization in respiratory products. Also, we are accredited to provide fitter services for our post-mastectomy patients as part of Franciscan Health’s breast health program.

Franciscan Durable Medical Equipment first became accredited by Accreditation Commission for Health Care, (ACHC) in 2005. As a customer of ACHC for the last 15 years, our team has prepared, achieved, and maintained accreditation excellence by utilizing the feedback and direction provided by ACHC. We have developed a very robust quality assurance and process improvement program through initiatives provided by ACHC.

As health care continues to drive toward quality and measurable evidence-based outcomes, partnering with an organization like ACHC for accreditation and regulatory compliance is a key component to building a successful program. We value the customer service, education, and industry best practices provided by ACHC and their Surveyors.

— Franciscan Durable Medical Equipment
ACHCU focuses on broadening awareness and knowledge of industry requirements and offering ongoing education and training. As ACHC’s educational division, ACHCU offers a range of educational tools, workshops, certifications, policy and procedure manuals, readiness packets, and more. Our library of resources is constantly expanding as we stay committed to providing the highest quality education to empower you.

ACHCU offerings include:

**Continuing Education Hours**
In an effort to provide more value through educational resources, ACHCU continues to add offerings that award continuing education hours for different professions. Some of these include:

- Home Health Workshop – 7 contact hours
- Hospice Workshop – 7 contact hours
- Home Health & Hospice Intensive Workshop – up to 21 contact hours
- Specialty Pharmacy Workshop – 6.5 CEs
- Hazardous Drug Designated Person Certification – 31.5 CEs
- PCAB Workshop – 6.5 CEs
- USP <800> Workshop – 6.5 CEs

**Virtual Workshops**
Many companies rely on their staff to ensure they are in compliance, which can take away from daily business responsibilities and operations. Oftentimes, staff has never been through the accreditation process, and the learning curve can seem overwhelming. Plus, attending an ACHCU workshop in person is not always an option. With that in mind, ACHCU now offers virtual workshops.

ACHCU’s virtual workshops bring our comprehensive training to you. In an easy-to-use online, on-demand format, we deliver the full workshop experience to you at your convenience. The first of these is available for the ACHC Home Health program, and offers seven continuing education contact hours.

**Webinars**
ACHCU helps providers stay up to date on new regulations, industry hot topics, and accreditation updates. One way we strive to do this is through our FREE monthly webinar offerings across all programs. ACHCU partners with industry experts to bring you the most current news and guidance on what is happening in our industry. Check out the webinars we have coming up and access all previous ones on demand at achcu.com.

**COVID-19 Update**
ACHCU has worked diligently during the pandemic to continue to meet the needs of our providers under the current circumstances. Over the past few months, ACHCU has partnered with multiple industry experts to provide up-to-date information through our monthly webinars. These can be accessed at https://achcu.com/covid-19-webinars.

**Live Workshops**
Due to the COVID-19 pandemic, ACHCU hosted its first LIVE, ONLINE ACHC Accreditation Workshops in June. These were offered to Specialty Pharmacy, Home Health, and Hospice providers. ACHCU provided the same great educational information and experience through these live offerings. Providers received a prerecorded webinar to view prior to the live training as well as the ACHC Accreditation Guide to Success workbook. More live, online workshops are scheduled in August and September. Visit achcu.com for more information and to register.
"The ACHC Accreditation Workshop is the best way to learn about ACHC standards and how to prepare for survey. I highly recommend this workshop, even for the experienced providers."

— Yvonne Blevins, RN
Regional Compliance Nurse

"This was truly one of the best classes I have taken in 25 years of doing home health care!"

— Stephanie H.
Owner, Administrator

"We have been with ACHC for years but had never attended an ACHC workshop. What were we waiting for? I don’t know because it was so very helpful and informative!"

— Leslie M.
Administrator, Director

As we navigate during this challenging time for our industry, ACHC International continues to meet regularly with our international partners to plan for a successful remaining 2020. Because the COVID-19 pandemic affected us worldwide, all international surveys have been postponed until further notice.

Once we feel it is safe to resume surveys and get back on the road, our journey to the UAE will continue as our Home Care agencies begin the renewal process for reaccreditation. The word from these agencies has spread, and we continue to receive inquiries from agencies that want to demonstrate the level of quality exemplified by the ACHC International Standards. This growth and the continued efforts from our dedicated partners in the UAE will only solidify long-term success in the region.

Almost 7,500 miles away, ACHC International’s success continued. Spearheaded by our educational division, ACHCU, we landed on the shores of Australia to educate and raise awareness about our PCAB standards for compounding pharmacy. The results led to our first PCAB-accredited pharmacies in the land down under. Since that time, other pharmacies have inquired after learning of the value of PCAB accreditation, as demonstrated by their peers. Our survey team will be back to the land down under later this calendar year or in the beginning of 2021.

Currently, ACHC International is pursuing opportunities throughout Europe and around the globe. ACHC International will continue to look to partner with international agencies that share the same commitment and vision for enhancing patient care by empowering providers.

To all of our international partners and customers, we would like to express a sincere thank you. It is through your desire for quality health care and education that we owe our continued success. Look forward to great things to come from ACHC International!

— Matt Hughes, Director, Business Development

EXPANSION UPDATE

Once we feel it is safe to resume surveys and get back on the road, our journey to the UAE will continue as our Home Care agencies begin the renewal process for reaccreditation.
ACHC recently eased the survey evidence requirement for Home Health, Hospice, Private Duty, Home Infusion Therapy, Behavioral Health, and Renal Dialysis providers.

The change, which became effective May 1, 2020, is part of ACHC’s continuing efforts to enhance operational efficiencies and patient outcomes. The new measure simplifies the accreditation process, saving valuable time and allowing providers to focus more on patient care not only during the COVID-19 pandemic, but also going forward.

Submission of evidence is no longer required for each Plan of Correction. Any request to submit evidence will be based on the nature and scope of a deficiency and will be noted on the Plan of Correction. An Account Advisor also will contact a provider if evidence is required.

Please call us at (855) 937-2242 or email customerservice@achc.org for more information.
ACHCU, the educational division of AHC, officially launched HealthTrainU™ in October 2019. The online learning management system, previously known as MED U, was acquired by ACHCU in the summer of 2019. The system expands ACHCU’s educational offerings while allowing healthcare organizations to easily and efficiently manage, track, and document their employees’ educational progress on positional and mandated compliance courses.

As an accredited IACET provider, HealthTrainU offers nearly 200 courses written by experts in continuing education that can help providers conveniently meet OIG, OSHA, organizational, licensing, and accreditation requirements. HealthTrainU recently was approved as an HME CE provider by the State of Ohio Board of Pharmacy. Courses are available online 24 hours a day, 7 days a week, which allows staff to complete coursework at their own pace.

Subscriptions to HealthTrainU give organizations access to quality, industry-relevant education at competitive prices. HealthTrainU has a subscription plan to fit any business, and individual courses also can be purchased. This flexibility allows organizations to set up a comprehensive, job-specific education curriculum that is simple to administer and tracks employee progress. Our customizable approach saves companies time and money while providing education tailored to meet their staff’s specific needs at a low cost. Payment options also are available.

“We are dedicated to continuing to provide user-friendly, industry-relevant education materials, in addition to the excellent customer service the industry has come to expect from AHC,” said Greg Stowell, Senior Manager of Education and Training. “We are excited about the potential HealthTrainU has to provide useful, on-demand training and personnel record tracking.”

ACHCU plans to enhance current educational materials and expand the curriculum to address needs across multiple healthcare industries. The goal is for HealthTrainU to be the single source of all required healthcare accreditation and regulatory educational materials. See how HealthTrainU can help you easily manage your company’s educational needs. Sign up for your free trial by calling Mike McKillip at (833) 875-6338 or emailing him at mmckillip@achcu.com.

ACHCU is focused on the success of each healthcare provider, serving as an educational partner in accomplishing accreditation, regulatory, and quality goals. Our educational services offer tools, trainings, and other resources to empower providers to meet their specific needs. ACHCU is committed to helping providers create a strong foundation for better patient safety and care as well as sustainable business growth.
Join the growing number of providers who depend on ACHCU for education and training. ACHCU's dedication to providing the highest quality education empowers providers through a constantly expanding library of:

- Educational tools,
- Workshops,
- Certifications,
- Policy and procedure manuals,
- Readiness packets, and more.

To learn more about ACHCU's full menu of services, please visit our website at [achcu.com](http://achcu.com), call (919) 228-6559, or email customerservice@achcu.com.