

# WHY QUAD A? THE DIFFERENCE THAT SETS US APART

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Director of Business Development, QUAD A

Patients First. Always.

## **DRIVING SUCCESS: MEET MICHON!**



#### **MICHON MAYFIELD, MHA**

**DOMESTIC US DIRECTOR OF BUSINESS DEVELOPMENT** 

### **OUR DUTY**

- Promote & Assess quality of care
- Aid in standardized practices
- Guidance for compliance
- Ongoing data-driven standards revisions
- Educate facilities and decrease vulnerabilities in the delivery of patient care

### THE QUAD A PROMISE

To provide *Reliable Resources, Uncompromising Standards, and Effective Communication* at every stage of the accreditation process.

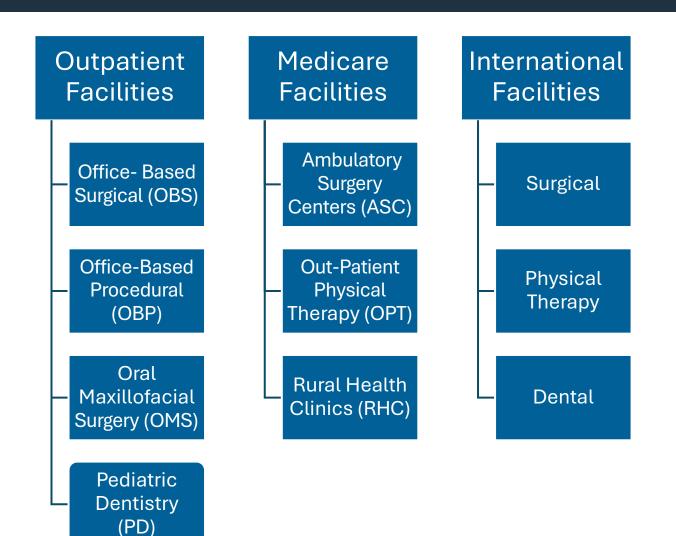




# GETTING ACCREDITED WITH QUAD A

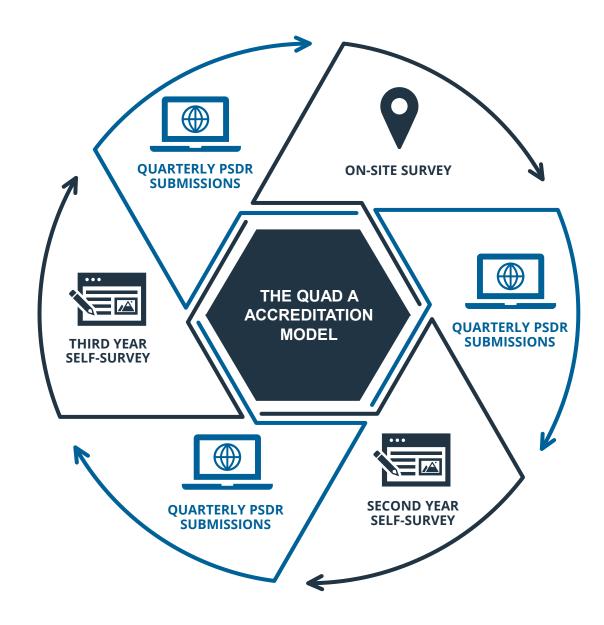
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# OUR ACCREDITATION PROGRAMS



#### ACCREDITATION CYCLE

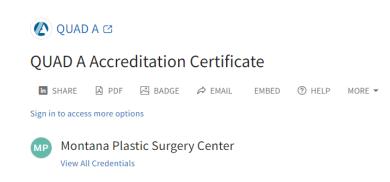
- Triennial accreditation
- Annual Self-Survey
- Mandatory Reporting
  - Quarterly PSDR Submissions
  - Unanticipated Sequalae Reporting
  - Death Reporting
- Surveys after addition of services
  - Relocations
  - Construction to patient care areas
  - Upgrades in anesthesia class





**Certificate of Accreditation** Montana Plastic Surgery Center for having met the standards of a CLASS C ambulatory surgery facility in which major surgical procedures are performed under intravenous Propofol or general anesthesia with external support of vital organs. William B. Rosenblatt, MD Chief Executive Officer

Embeddable real-time certificates





# PATIENT SAFETY DATA REPORTING (PSDR)

- QUAD A's proprietary data collection system that enhances quality control measures by quantifying safety data from within our accredited facilities
- This mandatory data reporting process fosters clinical excellence by demonstrating the benefits of accreditation and revealing trends that impact patient outcomes
- With data from hundreds of thousands of cases, it forms one of the nation's largest healthcare data repositories

# **RESEARCH & OUTCOMES**

#### Researchers have maximized the available PSDR data:

- "National Mortality Rates after Outpatient Cosmetic Surgery and Low Rates of Perioperative Deep Vein Thrombosis Screening and Prophylaxis." Plastic and Reconstructive Surgery, 142(1), 90-98.
- "Quantifying the Crisis: Opioid-Related Adverse Events in Outpatient Ambulatory Plastic Surgery" Plastic and Reconstructive Surgery145(3):687-695
- "Complications from Fat Grafting and Gluteal Augmentation in Outpatient Plastic Surgery: An Analysis of American Association for Accreditation of Ambulatory Surgical Facilities"
- "Liposuction Complications in the Outpatient Setting: A National Analysis of 246,119 Cases in Accredited Ambulatory Surgery Facilities"
- DVT Study announced May 2024, Saving Lives: The Key to Preventing a Common Postoperative Complication

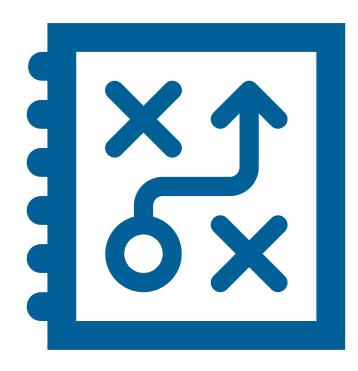


# THE QUAD A DIFFERENCE



# THE QUAD A PLAYBOOK

- Strive for unbiased evaluations
- Consistent survey method and application
- Peer surveyors empathize with challenges
  - Make clear citations
  - Suggest corrective actions
  - Identify best-practices, beyond citations
- 100% compliance requirement
  - Yes or No standards designed for objectivity
- Evidence of corrections requirement helps ensure adequate measures that are sustainable



# OUR APPROACH TO ACCREDITATION

### Integrative philosophy to understand:

- Scope of practice rules
- Professional certifications
- Local laws and regulations

### Work directly with regulatory agencies

- Report compliance
- Collaborate on investigations

# QUAD A STANDARDS DEVELOPMENT

# Standard development includes pilot testing and evaluation upon approval of the draft:

 Allows for a comprehensive evaluation of each standard to make sure it is RUMBA (relevant, understandable, measurable, beneficial, and achievable)

# If not RUMBA, the standard is revised by the Standards Committee:

- The committee consists of members and ad hoc advisors, medical professionals including physicians, dentists, nurses, and therapy providers
- Committee members practice in diverse medical and nursing specialties as well
- Committee representation includes hospital, ASC, and outpatient setting-based members

# QUAD A STANDARDS DEVELOPMENT CONTINUED

The Standards Committee is responsible for the development of individual standard items and compiling drafted items into the various accreditation program manuals:

- Outpatient Procedural
- Outpatient Surgical
- Outpatient Oral Maxillofacial
- Outpatient Pediatric Dentistry

- Medicare Physical Therapy
- Medicare Rural Health Clinics
- International Surgical
- Medicare Surgical (ASC)

# OUR SURVEY METHODOLOGY

#### Surveyors interact with staff and patients

- Primarily assess through observation and staff interviews
- Support observation and interview findings with document review

#### Surveyors pose open-ended questions

- Clinic explains the "how" and "why" of their duties
- Surveyors may request a demonstration

#### Surveyors request documentation

- records of emergency drills and their results
- the plan and results of the quality improvement program
- There is no need to print off documents that are kept electronically in the clinic (may need staff to help navigate systems)

#### Surveyors want to help and may offer suggestions

- Do not always indicate citations, may only be helpful observations
- Suggested practices are not the only ways to achieve compliance, the Medical Director decides how to correct deficiencies

## COMPLIANCE: TESTS HUNDREDS OF STANDARDS

#### **DOCUMENTATION**

- Policies and Procedures
- Logs
- Patient Records
- Provider Credentials
- Personnel Record Training, Job Description, Vaccinations

#### **PROCESSES**

- Sterilization
- Infection Control
- Anesthesia
- Governance
- Quality Improvement

#### PHYSICAL PLANT

- Layout
- Equipment
- Supplies
- Medication, Gases, Refrigeration
- Fire Prevention
- Security
- Waste
- Back-up Power

# ONGOING QUALITY

#### Ensure ongoing compliance

- Retrospective look at records throughout the cycle
- Use clinical records and personnel records worksheets quarterly
- Use standards tool for ongoing self-assessment
- Ongoing quality improvement program
- Ongoing risk assessment and mitigating risk
- Active peer review
- PSDR Submissions



# QUAD A ACROSS THE GLOBE



### **DRIVING SUCCESS IN MENA REGION: MEET MUDDRICK!**

#### **MUDDRICK ANWAR**

**MENA REGION DIRECTOR OF BUSINESS DEVELOPMENT** 





# THE EVOLUTION OF QUAD A'S GLOBAL EXPANSION

- Expanding expertise GLOBALLY through engagement with professional organizations
  - Successful implementations include
  - AAOMS helped create standards and training for oral surgery
  - NARHC experts to craft training and serve as rural health faculty
  - NARA resources contribute to training and serve as therapy faculty
  - Incorporated anesthesia and gastroenterology to improve surveys
  - Work closely with CMS in US when implementing standards revisions
  - DHA





# **EXPANDING OUR GLOBAL FOOTPRINT**

- Voluntary origins
  - Societies and Government agencies began regulating ambulatory care
- Successful partnership because QUAD A:
  - Has a history of responsiveness
  - Has a culture that supports surgery centers across the globe
  - Engages both domestically and internationally renowned practitioners with requisite knowledge
- Respect for patient care as a global standard that creates consistent care



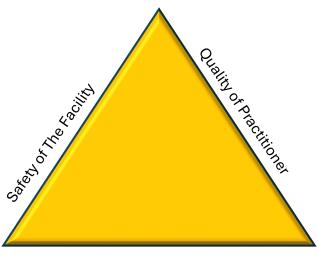
# FEEDBACK FROM AROUND THE GLOBE



"...preparing for the inspection and the inspection process itself has been very beneficial to me, my staff and of course the full effect for my patients in terms of patient safety."

-Richard Hamilton, MD Medical Director Hamilton House Day Surgery Australia "When I started, I thought that maybe it would be a good marketing tool. But after being accredited, I can see that it has helped the facility. The standardization of process has helped the staff."

-Timo Pakkanen, MD Siluetti Health Clinic Helsinki Finland



Appropriateness of Patient

W W W . Q U A D A . O R G P A T I E N T S F I R S T . A L W A Y S .



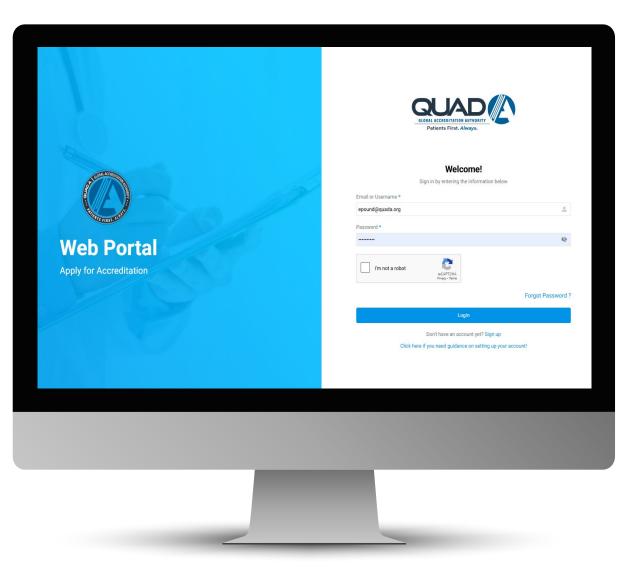
# AVAILABLE RESOURCES



#### portal.quada.org

# APPLYING FOR ACCREDITATION WITH QUAD A

- Proprietary QUAD A system
  - Application
  - Payments
  - Survey Tracking
  - Accreditation Cycle Information
  - Post Survey Actions
  - Notification Center



# COLLABORATION= THE QUAD A WAY

- Effective accreditation programs require clinical expertise
- QUAD A engages providers to ensure the program directly impacts care without extra noise regardless of where you're located on the map
- Example: oral maxillofacial surgery standards
  - Approached by OMS society 2010-2011
  - Aware that NY wanted to bring DDS into the accreditation regime
  - Task force, society members standards committee
  - Gain an appreciation for unique aspects of practice eg, anesthesia
  - Train DDS surveyors to perform accreditation surveys
- Missing element is usually state/region buy-in
  - Both international and domestic removal of this barrier in recent years
    - Example: Dubai
  - Commitment sets you apart



# QUAD A'S ONLINE RESOURCES

# **NEWSLETTER**

QUAD A Patients First Newsletter is issued every other Thursday to all accredited facilities, its contacts, and other subscribers. This newsletter provides up to date information on topics of interest to QUAD A's accredited facilities.

We look forward to working collaboratively with our clients as we transition to the new standards in April. We will provide education, guidance and oversight of the accreditation process, and support to your team in remaining compliant with our standards.

# **PODCAST**

QUAD A NOW is our Global Accreditation Podcast, where we explore the world of patient safety, the impact of accreditation, and other topics relevant to outpatient healthcare facilities and dental practices.

Join us as we explore diverse topics, share success stories, and navigate the challenges that define the pursuit of excellence in patient safety.



# FINANCIAL INVESTMENT



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# FEE STRUCTURE

### Pricing is composed of 2 types of fees

- Survey Fee paid once every 3 years
- Annual Fee paid yearly

# Transparent pricing based on the number of practitioners

 Changes to the clinic staff may result in a revised annual fee

#### THE ECONOMICAL CHOICE

- Recognize financial constraints
- Endeavor to contain costs
- Geographically sourced surveyors
- Central administration and processing



#### **CONTACT US!**

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#### **Standards Questions?**

**Email Our Clinical Team!** 

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