The Joint Commission and Waived Testing

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Presentation Objective

- Describe The Joint Commission survey of waived testing across health care settings
- Outline the rates of non-compliance found in surveys by program settings
- Describe the most frequent findings on survey by program setting
The Joint Commission

An independent, not-for-profit organization, The Joint Commission accredits and certifies more than 20,000 health care organizations and programs in the United States across the continuums of care.

**Our Mission:** To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.
Joint Commission and Care Continuum

Continuum of Care
Owned, Affiliated, or Contracted Services

PATIENT

Hospice
Long Term Care
Behavioral
Ambulatory
Hospital
Lab
Office-based surgery
Retail Clinic
Primary Care Home
Primary Care Home
Primary Care Home
Joint Commission Waived Testing Compliance Data

- The Joint Commission surveys across programs using the same standards for waived testing
- Each program uses their specific surveyors with varied backgrounds
- A sample of waived testing is surveyed using Tracer Methodology
  - Laboratory: Every other year
  - All Other Programs: Once every three years
- The laboratory program is typically surveying in an organization accredited by another clinical program. The Joint Commission lab program does look at both manual and electronic chart data.
- 25 total elements of performance assessed
Areas of standards review for waived testing

- Policies and procedures are established, current, approved and readily available.
- The person from the organization whose name is on the CLIA certificate identifies staff performing and supervising testing.
- Staff and independent practitioners performing tests are competent.
- The organization performs quality control checks on each procedure.
- The organization maintains records for waived testing.
## Joint Commission 2012 Full Year Data

<table>
<thead>
<tr>
<th>Program</th>
<th>Total Non Compliant Stds Cited</th>
<th># applicable surveys (may have multiple CLIA numbers)</th>
<th>% orgs w findings</th>
<th>%org w/ &gt;1 finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory</td>
<td>301</td>
<td>579</td>
<td>32%</td>
<td>11%</td>
</tr>
<tr>
<td>Office-based OR</td>
<td>97</td>
<td>195</td>
<td>23%</td>
<td>9%</td>
</tr>
<tr>
<td>Behavioral</td>
<td>49</td>
<td>760</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Hospital</td>
<td>152</td>
<td>1483</td>
<td>8%</td>
<td>1%</td>
</tr>
<tr>
<td>Laboratory</td>
<td>413</td>
<td>816</td>
<td>32%</td>
<td>8%</td>
</tr>
<tr>
<td>Long Term Care</td>
<td>168</td>
<td>150</td>
<td>83%</td>
<td>15%</td>
</tr>
<tr>
<td>Home Care</td>
<td>453</td>
<td>1568</td>
<td>16%</td>
<td>3%</td>
</tr>
</tbody>
</table>
## Types of survey findings

<table>
<thead>
<tr>
<th>Program</th>
<th>Most Frequent RFI</th>
<th>%</th>
<th>2nd most frequent RFI</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory</td>
<td>competency performed w 2 methods</td>
<td>12</td>
<td>reference range present</td>
<td>9</td>
</tr>
<tr>
<td>Office-based OR</td>
<td>competency performed w 2 methods</td>
<td>7</td>
<td>reference range present</td>
<td>7</td>
</tr>
<tr>
<td>Behavioral</td>
<td>competency performed w 2 methods</td>
<td>2</td>
<td>confirmatory criteria</td>
<td>1</td>
</tr>
<tr>
<td>Hospital</td>
<td>competency performed w 2 methods</td>
<td>2</td>
<td>written procedures</td>
<td>2</td>
</tr>
<tr>
<td>Laboratory</td>
<td>Reference range present</td>
<td>14</td>
<td>complete procedures</td>
<td>6</td>
</tr>
<tr>
<td>Long Term Care</td>
<td>competency performed w 2 methods</td>
<td>20</td>
<td>competency performed at correct intervals</td>
<td>11</td>
</tr>
<tr>
<td>Home Care</td>
<td>competency performed w 2 methods</td>
<td>9</td>
<td>competency performed at correct intervals</td>
<td>4</td>
</tr>
</tbody>
</table>
Data Observations

- Behavioral health rate is lowest because they were reviewing 3-year competency instead of annual competency, plus they have few waived tests. Retraining was completed in January 2013 by the lab program staff.

- Ambulatory surveyors were retrained in 2011 by the lab program and have the most similar rate and type of findings. This program also has a high number of paper charts.

- Lab surveyors found different issues in the same hospitals than the hospital surveyors and at much higher rates.
Conclusions

- Even with well-defined standards, clinical staff struggle with the framework for performing waived tests, especially verifying staff performance.
- A significant number of findings occur in programs that have no other laboratory review. The data suggests that all organizations performing waived testing may benefit from some on-site review performed periodically.
- Laboratory surveyor staff are needed to support and train the clinical program surveyors.