


Sterile Processing Accreditation Surveys: Risk Reduction and Process Improvement 1.5 www.aorn.org/CE

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Purpose/Gol

To provide the learner with knowledge specific to the sterile processing accreditation process.

Objectives

1. Discuss the role of accreditation surveys in patient safety.
2. Describe deeming authority.
3. Discuss The Joint Commission's accreditation process.
4. Identify the organizations that are used to form the basis for meeting accreditation requirements.

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Rose E. Seavey, MBA, BS, RN, CNOR, CRCST, CSPDT, has no declared affiliation that could be perceived as posing a potential conflict of interest in the publication of this article.

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ABSTRACT

Accreditation surveys protect patients and personnel by monitoring health care facility compliance with rules, regulations, and best practices. Accreditation, or the lack of it, can affect a facility's ability to be reimbursed. The ability of personnel to follow best practices and adhere to regulatory requirements in the surgical processing department and the OR has a critical effect on reducing or eliminating health care-associated infections, including surgical site infections. This article discusses preparing for an accreditation survey, being ready to demonstrate compliance when surveyed, and how accreditation surveys help reduce risk for patients and personnel, promote best practices, and improve patient care. *AORN J* 102 (October 2015) 359-365. © AORN, Inc, 2015. <http://dx.doi.org/10.1016/j.aorn.2015.07.005>

Key words: *accreditation, survey, health care-associated infections, surgical site infections.*

Accreditation surveys, which are performed by various agencies and professional organizations, are universally recognized as a means of improving the quality of health care. Survey accreditation processes for health care facilities are peer reviewed by professionals with a focus on safety and quality of patient care. The emphasis on safety and quality of patient care during accreditation surveys depends on a facility's risk reduction and process improvement activities. Assessing and addressing potential risks related to reprocessing (eg, loaner instrumentation that arrives late or with torn wrappers) and taking steps to improve processes can help an organization be proactive instead of reactive. The national emphasis on eliminating health care-associated infections and especially surgical site infections means that sterile processing is a major focal point of today's accreditation survey processes.¹

Accreditation, or the lack of it, can affect a health care organization's reimbursement, which can negatively affect health care facilities that already function on tight budgets. For example, private insurance companies may require accreditation as a

condition of payment. To qualify for federal funding for patients in the Centers for Medicare & Medicaid Services (CMS) programs, health care facilities must demonstrate that they comply with the government's Conditions of Participation (CoPs), one of which is accreditation.²

Published standards and guidelines built on sound principles, scientific research, and the opinions of experts in the field form the basis for best practices. To help ensure compliance with published standards and guidelines, accrediting organizations measure the performance of personnel and the safety of health care facilities. Adhering to published guidelines and standards related to sterile processing improves the quality and safety of care for patients undergoing operative or other invasive procedures.

CENTERS FOR MEDICARE & MEDICAID SERVICES

On July 30, 1965, President Lyndon Johnson signed the Medicare and Medicaid programs into law as part of the Social Security Act.³ To receive payment from CMS, a health care

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