The Joint Commission

Health Care Staffing Services Certification

Review Process Guide

2025

What's New in 2025

Updates effective in 2025 are identified by underlined text in the activities noted below.

Changes effective January 1, 2025

Organization Review Preparation Guidelines – Updated to reflect the use of the secure Joint Commission *Connect* extranet site to upload requested documents for the off-site review.

Intracycle Evaluation Process – Corrected the number of standardized performance measures to four.

Other minor edits.

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Review Process Introduction

This guide is intended to prepare your organization for a review of compliance with the Health Care Staffing Services certification standards. It is important that you read this guide and follow the instructions, as well as access the recommended resources so that your organization is prepared for participating in the certification review process. In this activity guide your organization will find guidance on how to prepare for a Health Care Staffing Services certification review.

The *Certification Review Process Guide* describes each activity of a Joint Commission certification review. Organizations should become familiar with the review activities which include:

- The purpose of the activity,
- Descriptions of what will happen during the activity
- Suggested amount of time for the activity
- Discussion topics, when applicable
- Recommended participants
- Any materials to have available for the activity

These activity descriptions can be shared organization-wide as appropriate.

Introductory Phone Call

A Joint Commission Account Executive will be in touch with your organization by phone soon after your application is received. The purpose of this call is to:

- Conduct initial introductions
- Confirm information reported in your application for certification
- Confirm your hours of operation; if these change at any time, please call and inform your Account Executive
- Confirm your mailing address, internet website address, if applicable
- Confirm that your organization knows how to access your secure Joint Commission *Connect* extranet site to view communications and certification-related information
- Obtain the phone number for any on-call service that your firm may provide
- Answer any of your questions.

Health Care Staffing Certification Review Configurations

There are three possible configurations for a health care staffing certification review:

- One Day Review
- Multi-Day Review
- Multi-Site Review (formerly referred to as the Corporate Integration Review)

The event scheduled for your organization is based on the information provided in your certification e-application. The same activities take place on each of these reviews. Multi-Day review events include more contract, personnel file reviews, and clinical staff tracers. The Multi-Site event includes a few additional activities and is described in the following overview.

Multi-Site (Corporate) Review Process Overview

Many health care staffing firms operate multiple offices in order to meet the demands of their customers and to have a physical presence in health care markets across a particular geographic area (e.g., city, county, state, region, country). This review event was created to evaluate staffing firms with multiple sites. The Multi-Site (corporate) unique review process and activity descriptions have been integrated throughout this Health Care Staffing Services, Certification Review Process Guide. The content will be identified as applicable to this review type by either lead-in text or within activity titles.

Multi-Site Review Process Description

Part one:

- The staffing firm main site (corporate office) will receive a 30-day notice on initial and 7-day notice on recertification scheduled reviews.
- A Joint Commission Health Care Staffing Services (HCSS) reviewer performs a one-day review of the main site (corporate office) of the staffing firm.
- The review focuses on leadership, corporate structure, and multi-office management and operations.
- Additional emphasis will be placed on:
  - Corporate systems in place to support sites (branch offices)
  - Corporate and site (branch office) responsibilities and accountabilities
  - Corporate monitoring and oversight of site (branch office) operations
  - Centralized and decentralized operations
  - Communication between main site (corporate) and other site (branch office) management and operations
  - Reporting of data between main site (corporate) and other sites (branch offices)
  - Main site (corporate) and other site (branch office) performance improvement processes

Part two:
An HCSS reviewer conducts reviews of sampled sites (branch offices). Sites (branch offices) are selected by Joint Commission central office staff. Sites selected for review are not revealed until the reviewer needs to interact with or requires information from the site.

Reviewers will conduct site reviews using a video meeting platform. If the site performs its own credentialing and contracting functions and maintains its own records, the reviewer and the site (branch office) staff will identify a sample of contracts/formal agreements and a sample of clinical staff whose records will be reviewed. Site (branch office) staff and the reviewer will be interacting during this scheduled review time. See

Part three:
The Final Exit Conference takes place following the conclusion of the last site (branch office) review. The reviewer will take a short break to review the main site and other site observations and prepare the report. The reviewer will reconnect, if necessary, with the main site (corporate office) review coordinator and leaders for the Multi-Site Review Exit Conference to present the Summary of Review Findings Report.

The final certification report is processed in the Joint Commission central office and is posted to the organization's secure extranet site within ten business days.

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Organization Review Preparation Guidelines

Your certification review will be conducted by a Joint Commission, Health Care Staffing Services field representative using a remote meeting platform for interacting with you and your organization's staff. The off-site review requires the availability of electronic devices with a built-in or external camera that allow the staffing firm's representatives to participate in the certification review. Following are some important steps for you to take in order to participate in the certification review process.

Signing the Amendment to Permit a Virtual Survey

To proceed with scheduling a Health Care Staffing Services certification review for your organization, The Joint Commission requires you to electronically sign the contract entitled, "Amendment to Permit Off-Site Surveys." This grants The Joint Commission permission to perform your review off-site as opposed to onsite. This contract can be signed under the Contracts section of your organization's secure Joint Commission *Connect* site. Once logged into the *Connect* site please go to the Survey Process tab and select Contracts on the far right side of the screen. You will find the contract entitled, "Amendment to Permit Off-Site Survey" there for signature.

Review Agenda

Template agendas for the three possible configurations of Health Care Staffing Services reviews can be found later in this guide. An agenda specific to your organization's event will be provided by the assigned Joint Commission reviewer soon after your certification review has been scheduled.

Requested Documentation

All documents required by the standards must be available electronically for viewing using screen-sharing capabilities. This includes items such as contracts and personnel files. Any paper documents needed for the review must be scanned for viewing electronically.

Organizations must upload required documentation to the secure Joint Commission *Connect* extranet site no later than 45 days prior to the staffing firm's due date. The secure Joint Commission *Connect* extranet site will prompt the organization to upload their documents starting at 60 days prior to the staffing firm's due date and all documents must be uploaded by 45 days prior to the staffing firm's due date. This secure location will be accessible only to the organization and the assigned Joint Commission reviewer. Please note that only contacts given security rights to document upload will be able to view and/or make edits to this section on the secure Joint Commission *Connect* extranet site. In addition, a list of required documentation will be provided on the secure Joint Commission *Connect* extranet site.

Review Activity Preparation and Participation Tips

- Group activity participants should be limited, if possible, to key individuals who can provide insight on the topics of discussion. It is the organization's discretion as to who will participate.

- The reviewer will be talking with staff about the day-to-day operations of the organization. The reviewer will rely on organization staff to find locations where video meeting discussions

can take place that allow confidentiality and privacy to be maintained and that will minimize disruption to operations.

- The review agendas found later in this guide offer the suggested order of activities and timeframes for each. Discuss any need for changes to the proposed agenda with the reviewer.

- Organizations should use this review process guide and the agendas as a planning tool for the review by identifying key participants for various activities.

- Consider planning for how and who will participate in the Individual Clinical Staff Tracer Activity; present the reviewer with your recommendations.

Questions about Standards

If you have a question about a standard or element of performance, please consider reviewing the Standards Interpretation FAQs page: https://www.jointcommission.org/standards_information/jcfaq.aspx prior to submitting a question. To submit a question, Login to your organization's Joint Commission extranet site, *Connect*: https://customer.jointcommission.org/TJCPages/TJCHomeEmpty.aspx and click on Resources - Standards Interpretation, to submit your question. If you do not have access to *Connect*, please go to the Standards Interpretation Page: https://www.jointcommission.org/standards_information/jcfaq.aspx to submit a question.

If you have questions about the review process, agenda, scheduling, or other subjects – Call your Joint Commission Account Executive.

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Requested Documentation for Certification Reviews

Following is the list of documents that organizations are asked to upload to a secure Sharepoint folder for review during the certification event. Documents must be uploaded at least 72 hours prior to the scheduled event date.

If this is a Multi-Site Review, and any of the following documentation is unique to each site, the firm is asked to provide site-specific documentation to the reviewer.

- Leadership:
  - Organization chart
    - **NOTE:** If this is a Multi-Site Review, a chart or diagram displaying the reporting structure between the main site (corporate office) and other sites (branch offices) if applicable
  - List of current customers with approximate number of placements in the past 12 months
    - **NOTE:** If this is a Multi-Site Review and each site (branch office) works with a separate and unique group of customers, the firm is asked to provide a customer list for each site (branch office) selected for review.
  - List of currently placed staff organized by discipline with an indication of the assignment setting (for example, hospital, clinic), and if traveler, an indication of the state
    - **NOTE:** If this is a Multi-Site Review and each site (branch office) works with a separate and unique group of clinical staff, the firm is asked to provide a list of clinical staff for each site selected for review.
  - Business license, if applicable
  - Written code of business ethics
  - Conflict of interest policy with indication of annual review
  - Customer contract template if one is used
  - Firm's standard contract addendum if one exists
  - Written description of the complaint process for customers
  - Written description of the complaint process for staff
  - Emergency Management Plan, including a hazard vulnerability analysis (HVA)
    - **NOTE:** If this is a Multi-Site Review, the firm is asked to provide a site-specific HVA and Emergency Management Plan for each site selected for review.
  - Emergency Management Plan annual testing record—test date and any identified opportunities for improvement

- **NOTE:** If this is a Multi-Site Review, the firm is asked to provide Emergency Management Plan annual testing records for each site selected for review.

- Human Resource Management:
  - Credentialing policies and procedures, including competency assessment
  - Written procedures for clinical professionals' involvement in competence assessment-related activities, including required qualifications for these clinical professionals, description of roles and responsibilities (for example, job description or contract language outlining performance expectations)
  - Clinical staff handbook or documents given to staff upon hire
  - Policy on presentation of proof of identity
  - Copy of the performance evaluation tool for client feedback
  - Copy of the performance evaluation tool conducted by the firm which extends beyond customer feedback

- Information Management:
  - Written policy to address privacy, confidentiality, and security of information
  - Written policy to address who has access to information
  - Process to follow when confidentiality or security of information is breached
  - Emergency management plan (business continuity plan), including disaster recovery for information systems

- Performance Measurement and Improvement:
  - Any performance measure data graphs, displays, action plans, improvement projects, reports prepared for leaders', etc.

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Certification Review Notification and Postponement Policies

Notice of Initial Certification Review

If this is your program's first time through the certification process you will receive a thirty (30) day advance notice of your review date(s). Notice will be provided via e-mail to the individuals identified on your account as the Primary Certification Contact and CEO. Also thirty (30) days prior to your review, the Notification of Scheduled Events section on your organization's extranet site, The *Joint Commission Connect*, is populated with the event along with a link to the reviewer(s) name, biographical sketch and photograph.

Notice of Re-Certification Review

Your organization will receive notice from The Joint Commission seven (7) business days prior to the first day of the scheduled review date(s) for Health Care Staffing re-certification. The notice will be emailed to the individuals identified on your account as the Primary Certification Contact and CEO and will include the specific review date(s) and the program(s) being reviewed. Additionally, at 7:30 a.m. in your local time zone on the morning of the review, the Notification of Scheduled Events section on your organization's extranet site, The *Joint Commission Connect*, is populated with the review event including a link to the reviewer(s) name, biographical sketch and photograph.

Review Postponement Policy

The Joint Commission may not certify a staffing firm if the firm does not allow The Joint Commission to conduct a review. In rare circumstances, it may be appropriate to request a review postponement. An organization should direct a request for postponement to its Account Executive. A request to postpone a review may be granted if a major, unforeseen event has occurred that has totally or substantially disrupted operations, such as the following:

- A natural disaster or major disruption of service due to a facility failure
- The organization's involvement in an employment strike

The Joint Commission may, at its discretion, approve a request to postpone a review for an organization not meeting any of the criteria listed above.

Your organization's Certification Account Executive can answer questions about these policies, or put you in contact with other Joint Commission staff that can assist you.

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Opening Conference and Staffing Firm Overview

Duration
Approximately 40 minutes

Overview of Activities

The Opening Conference will include the following:

- Introduction of reviewer
- Introductions of organization review coordinator and leaders
- Reviewers will provide
    - A brief overview of The Joint Commission and Certification if this is an initial review; if this is a re-certification review, the discussion will focus on any changes or updates to the Certification process since the last review
    - Agenda review with discussion of any needed changes
    - If this is a Multi-Site (corporate) review, reviewers will discuss the site review agenda and preparations
    - Brief overview or refresher on the SAFER™ portion of the Summary of Certification Review Findings Report
    - Answer any questions about the review process
- Confirm that requested documentation will be available for the Reviewer Planning Session

During the Staffing Firm Overview, the reviewer will facilitate the discussion to:

- Learn about the firm's organizational structure and scope of operations
- Review and discuss information provided by the organization in their certification application and any changes since the application was submitted
- If this is a Multi-Site (corporate) Review,
    - Confirm the site (branch office) information provided in the application
    - Determine if each site works with a separate and unique group of customers and clinical staff
    - Determine at a high-level what activities, resources, and operations are universal across sites, and unique to each site

The reviewer will use the information provided by the firm to plan for the remainder of review activities.

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Reviewer Planning Session

Organization Participants

- Firm's review coordinator or individual familiar with office operations
- Firm's review coordinator, other internal staff familiar with clinical staff and matching/placement processes and with contracts/formal agreements

Reviewer Planning (30 minutes)

The reviewer, with the assistance of internal staff, will identify the sample of clinical staff whose personnel files they would like to examine. Clinical staff rosters will be used to guide and facilitate this selection. The number of personnel files selected will vary based on the characteristics of each organization. A **minimum of 20** clinical staff personnel files will be reviewed per day.

The reviewer will identify from the list of customers where clinical staff are currently placed those customers whose contracts/formal agreements the reviewer would like to see. A **minimum of six contracts/agreements** will be identified for review per day. The number selected will vary based on the number and types of customers. Reviewers will look at these contracts/agreements during the time designated on the agenda.

Multi-Site (Corporate) Review-Specific Planning

The reviewer will

- Inform the firm's review coordinator of the sites (branch offices) selected to participate in the review.
- Ask for assistance in determining the best order in which to review/engage the sites.
- Collaborate with the review coordinator to provide selected sites with information needed to participate using the video meeting platform.
- Request site-specific (branch office) clinical staff and customer lists, if applicable, to select the sample of personnel files and contracts/agreements for review

Please Note: It will be important that this activity conclude at the designated time, unless otherwise negotiated. The Orientation to the Staffing Firm and Data Use activity immediately follows.

Any activity scheduled for this session that has not been completed will be covered later in the review at a time agreed upon by the firm and reviewer.

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Orientation to the Staffing Firm and Data Use

Joint Commission standards address various aspects of a staffing firm's performance. The Orientation session is an opportunity for the organization and reviewer to discuss some specific topics covered in the standards, and more importantly, agreed to by the industry as key indicators of staffing firm performance. The Data Use discussion will focus on how the staffing firm is using data to improve the quality of services provided to health care organizations by the clinical staff assigned by the firm.

Duration
Approximately 60-minutes

Organization Participants
- Leader(s) of the staffing firm
- Individuals who can answer questions and explain the topics being discussed
- Others at the discretion of organization leaders

Overview
The reviewer will want to explore and learn about a variety of topics from those individuals most knowledgeable about the staffing firm's processes and operations in these areas. The standards-based topics cross all functions and include:

Business Functions
- Management and day-to-day operations
- On-call structure and service, if applicable
- Marketing activities (strategy and practice)
- Information management
  - Cyber security and protection systems
- Code of business ethics
- Emergency management (risk assessment, planning, testing)

Customer/Client Functions
- Contracting/formal agreement processes
  - MSPs and vendor management
  - Subcontracting
- Conflict of interest policies
- Customer reassignment of clinical staff (floating)
- Tracking and fulfillment of customer/client staff requirements

Staffing Functions
- Recruitment, retention and competency (strategies)
- Clinical staff performance evaluation (strategies)
- Clinical staff health (strategies, customer requirements)
- Tracking law and regulation requirements for staffing
- Processes for reporting and investigating work-related illness or injuries
- Firm's expectations regarding orientation to and knowledge of National Patient Safety Goals

Data Use
- Approach to performance improvement

- Monitoring performance – What is being monitored (for example, customer satisfaction and complaints, clinical staff satisfaction and complaints)
- Data collection processes
- Data quality and maintaining integrity
- Data analysis processes -- Type of analyses being conducted – approach to trending data over time, graphical data displays, comparing data to an expected level of performance, and looking at data in combination for potential cause and effect relationships
- Data reporting and dissemination, when it occurs and who receives
- Strengths and weaknesses in the processes used to obtain data and meet internal and external information needs
- Selection and prioritization of performance improvement activities
- Actions taken as a result of using data

The depth of discussion and questioning on each topic will vary. If a topic is better explained through demonstration or a review of documentation, indicate this to the reviewer.

Multi-Site (Corporate) Review

If this is a Multi-Site (Corporate) review, all discussion topics will be explored from the perspective of the main site (corporate)-to-site (branch office) relationship. It is important for the reviewer to understand this relationship and the expectations before beginning the review of sites (branch offices). For example, when talking about each of the subjects noted above, the firm should be prepared to provide details about:

- Site direction, oversight, and reporting
- Centralized and decentralized processes
    - Operations performed at main site (corporate office) for the other sites (branch offices)
    - Operations delegated to the sites (branch offices)

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Multi-Site (Corporate) Review Monitoring and Oversight System Tracer

Staffing firms subject to the Multi-Site Review option will need to demonstrate that their operations include an ongoing, rigorous process for monitoring site (branch office) performance.

Organization Participants

- Individuals responsible for oversight of site (branch office) performance
- Individuals responsible for monitoring site performance
- Individuals responsible for day-to-day interactions with sites

Overview

The staffing firm should be prepared to provide reviewers with details of their process to identify sites (branch offices) that may exceed or may not be performing according to the quality expectations established by the firm. Specifically, the reviewers will want to understand the:

- Frequency of monitoring and oversight
- Criteria and performance expectations for sites (branch offices)
- Aspects of site performance (e.g., financial, number of placements, completeness of clinical staff data collected and analyzed) that are monitored
- Individuals responsible for ongoing monitoring and oversight
- Data gathered and used to monitor site performance
- Procedures and tools for overseeing sites
- Procedures for providing performance feedback to sites
- Requirements and time frames for site corrective action

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Contract/Formal Agreement Review

The content of contracts and agreements is clearly a considerable influence on a staffing firm's performance. These agreements spell out what a customer can expect in terms of staffing firm services and may additionally outline the staffing firm's expectations of its customers in terms of treatment of clinical staff and feedback on clinical staff performance. Joint Commission standards require some specific elements be contained in the staffing firm's formal agreements, and the purpose of this activity is to determine that the formal agreements meet standards expectations.

Organization Participants

- Individuals responsible for establishing, fulfilling and monitoring compliance with contracts and formal agreements
- Individuals familiar with the contracts/formal agreements who can facilitate the review
- Others at the discretion of organization

Materials Needed for this Session

The selected sample of contracts identified during the Opening Conference and Orientation to the Organization sessions

Preparation

The reviewer will gather information from the staffing firm's application for certification as well as during the Staffing Firm Overview and Orientation to the Staffing Firm activities to help determine the contracts he or she will select for review.

The reviewer will be asking about the different types of contracts the staffing firm has in place, the types of health care entities and their size, and the type and number of staff placed per contract. The following criteria may be considered in the reviewer's selection of a sample of specific contracts and formal agreements.

- Smallest health care entity
- Largest health care entity
- Contract in place for the longest duration
- Contract in place for the shortest duration
- Vendor management contracts (if applicable)
- Subcontracts with other staffing firms (if applicable)

One contract can satisfy multiple criteria. A minimum of six contracts/formal agreements will be examined per review day. The reviewer may request more if necessary.

The reviewer will make an effort to complete his or her selection of contracts during the Reviewer Planning Session so that the firm's staff may pull them in advance of this activity. However, reviewers may request additional contracts or formal agreements as the day progresses if there is a need to validate standards compliance.

Overview

The staffing firm is requested to have an individual available who has authorized access to and is familiar with the contracts, formal agreements, and customers. This individual should be able to answer reviewer questions and facilitate and expedite the review.

Reviewers will discuss the entire contracting process while they are engaged in a review of the contracts. Specifically, they will trace the contracting process, including:

- Sales and marketing securing a customer for the firm's staffing services
- Negotiation and establishment of a formal agreement
- Monitoring the firm's ability to meet contractual obligations
- The firm's customer service operations, including satisfaction, complaints, new needs/expectations
- Renewal or termination of a contract

Reviewers will be using the Contract Review Checklist (Appendix A) to record their findings and note any questions for follow-up. If a reviewer is unable to locate an item in the contract that is required by the standards he or she will seek help from the firm's staff.

Information gathered through the contract and formal agreement review will be considered in all subsequent review activities.

At the conclusion of the designated time for this session, the reviewer will identify any contracts/formal agreements that can be returned to file and those that still require review. The reviewer will identify the time that contract/formal agreement review activity will be completed and if he or she will require the assistance of firm staff.

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Competence Assessment & Credentialing Session

Health care staffing firms are in the business of providing human resources to health care organizations looking for temporary staff to fulfill assignments. A crucial industry function is checking credentials and competency of individuals recruited to fill positions.

Organization Participants

- Individual(s) responsible for the recruitment of clinical staff
- Individual(s) responsible for collecting credentials information
- Individual(s) responsible for evaluating applicant credentials and making hiring decisions
- Individual(s) responsible for evaluating clinical staff performance
- Individual(s) responsible for customer communication
- Others at the discretion of organization

Materials Needed for this Session

- Samples of competency tests or other evaluation methods

Preparation

None required

Overview

Staffing firm representatives attending this session should be prepared to explain all aspects of the credentialing and competency assessment processes in their day-to-day operations. Tracing the process from the internal perspective, through every step, identifying individuals (that is, positions) that play a role from collecting, filing, and data entry to making decisions that impact further activity, is the goal of this session. Reviewers will want to explore standards-based topics such as:

- Application process
- Employment history checks
- Credentials verification process
- Hiring criteria
- Tracking of regulatory requirements for health care staff
- Orientation of clinical staff
- Placement criteria
- Clinical staff to customer matching process
- Clinical staff supervision
- Clinical staff performance evaluation, including use of customer feedback
- Maintaining competency of clinical staff

This session is most effectively conducted as a group discussion.

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Personnel File Review

The review of personnel files provides an opportunity to see how consistently the staffing firm is complying with its own internal procedures, the requirements of its customers, and Joint Commission standards in terms of data it collects and uses to make hiring decisions and evaluate performance of clinical staff. While primarily a review of files, this session can reveal areas for improvement in human resources data collection, evaluation, and use in decision-making and reporting.

Organization Participants

- Individual(s) with authorized access to personnel files and familiarity with content and layout who can participate for the duration of this activity
- Others at the discretion of organization

Materials Needed for this Session

The selected sample of personnel files identified during the Reviewer Planning session.

Preparation

The reviewer will gather information from the staffing firm's application for certification as well as during the Staffing Firm Overview and Orientation to the Staffing Firm activities to help determine the number and types of disciplines that will be included in the selection of clinical staff personnel files. The reviewer will be asking about the different types and sizes of health care customers, and the type and volume of clinical staff placed at each. Selection of clinical staff for tracer activity and file review will be based on customer information and the following selection criteria which apply to all disciplines:

- Highly specialized health care providers (e.g., ICU, NICU, OR)
- Health care providers placed in areas not highly supervised (e.g., occupational nurse, school nurses, community service nurses [flu shots, blood pressure checks])
- New clinical staff member
- Long term clinical staff member
- Clinical staff member with greater working frequency
- Clinical staff member who works infrequently
- Clinical staff member who crosses state lines to practice

The reviewer will:

- Select a sample of three (3) clinical staff from each discipline
- Include per diem and travel clinical staff in the sample
- If applicable, select and examine a minimum of ten (10) credentials files that cross the specialties within the discipline of licensed independent practitioners (physicians, podiatrists, advance practice nurses, etc.); this selection will include placements in a variety of settings (inpatient, outpatient, emergency room, clinics)
- Complete the Personnel File Review Checklist (Appendix B) for each file reviewed

The minimum number of personnel files that will be reviewed for clinical staff is 20. There is no maximum number of human resource files that can be reviewed. The reviewer will make every effort to make his or her initial selections of clinical staff for whom they would like to review files during the Reviewer Planning Session so that the firm's staff may gather them in advance of this

activity. However, reviewers may request additional files as the day progresses if there is a need to validate compliance with standards.

Additionally, the reviewer will select several internal staff (supervisory staff, individuals responsible for collecting and evaluating credentials) for whom they would like to review personnel files. These are in addition to the clinical staff selected.

Overview
The staffing firm is requested to have available an individual(s) who has authorized access to personnel data and who is familiar with the clinical staff and internal staff file layout and contents. This individual should be able to both facilitate and participate in the file review process.

Files will be reviewed using the Personnel File Review Checklist (Appendix B) that lists the items of information required by the standards. Reviewers will look through each file identifying:

- The presence or absence of the items, and
- Any interactions the individual has had with staffing firm supervisory staff

If a reviewer is unable to locate information in a file, firm staff will be asked to locate the material. Inform the reviewer of any information maintained in locations other than the personnel file.

There are several blocks of time on the agenda for file review activity, both in the morning and afternoon.

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Individual Clinical Staff Tracers

A tracer is a review method that is used to evaluate the staffing firm's performance as viewed by the individual clinical staff member and the customer at which a clinical staff member is placed. During tracer activity the reviewer will:

- Follow a clinical staff member's experience with the firm from the point of first contact to the point of his or her first performance evaluation and all steps in between
- Assess the relationship of the clinical staff member with the firm and with the customer at which he or she is placed
- Assess the relationship between the staffing firm and the customer
- Evaluate the firm's performance of processes related to recruiting, retaining, evaluating, and placing individual clinical staff members

Organization Participants
Staffing firm representative(s) to guide the reviewer through clinical staff member experience – see the overview below

Preparation
None required

Overview
The reviewer will evaluate processes from the perspective of the health care professional who is seeking clinical work assignments through the staffing firm. Tracer activity in a health care staffing firm will follow a clinical staff member's entire experience from the point of first contact to the present. A clinical staff tracer will focus on hand-offs and clinical staff communication.

The reviewer will conduct the clinical staff tracer by interacting with the individuals responsible for:

- Recruiting clinical staff
- Initial interaction with clinical staff (phone calls, interviews)
- Gathering data on potential clinical staff applicants
- Verifying credentials information on applicants
- Hiring decisions
- Orientation to the staffing firm, customers and assignments
- Developing and implementing the initial and ongoing competency assessment process
- Customer interaction
- Scheduling and placement decisions
- Receiving and responding to clinical staff questions, concerns, and complaints
- Receiving and responding to customer requests, questions, concerns, and complaints
- Clinical staff performance evaluation

The reviewer will conduct a group discussion with individuals that includes:

- Introductions
- A brief statement about how they play a role in the firm's certification
- Asking staff members to describe: What they do, their responsibilities, and how they interact (directly or indirectly) with clinical staff or customers
- Asking about the hand-offs or coordination points with other firm staff members
- Asking the staff member any clarifying questions or for more details

- Asking the staff member if they have any questions about The Joint Commission certification or the review process
- Thanking the staff members for their time

Reviewers will look to the firm's staff members to participate in the discussion in the order that a clinical staff member would interact with them. At the end of all the discussions with staff the reviewer should have a clear picture of the process that a clinical staff member would experience.

Aspects of the staffing firm's operations and procedures that will be explored through the clinical staff tracer activity include:

- Screening clinical staff
- Clinical staff application process
- Credentials verification process
- Hiring decision process
- Competency assessment process, initially and ongoing
- Orientation to staffing firm, customers, assignments
- Clinical staff to customer matching process
- Clinical staff feedback process (concerns/complaints)
- Clinical staff and on-call, after hours, and weekend internal staff communication
- Customer feedback process (concerns/complaints)
- Customer and on-call, after hours, and weekend internal staff communication
- Clinical staff performance evaluation process
- Clinical staff ongoing education, in-service
- Clinical staff retention

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On-Call Contact

When a staffing firm has committed to providing 24 hour service to customers and clinical staff, there is an expectation that service will be available.

Organization Participants
None required

Materials Needed for this Session
The on-call phone number

Preparation
The reviewer will check the application for certification to determine if the firm provides for on-call services. If the staffing firm provides on-call services, the reviewer will check the phone number and hours of operation.

Overview
Reviewers will usually place a call to the on-call phone number before the certification review begins. The call will range anywhere from 5-10 minutes. The focus will be on the challenges presented by "outside of business hours" activity. Discussion will include:

- Introductions
- Asking the individual if they have a moment to talk
- Providing a brief statement about how he or she plays a role in the firm's certification
- Assuring the individual that if he or she needs to take a phone call or take care of any business he or she should feel free to interrupt the discussion
- Asking the individual to describe what he or she does, his or her responsibilities, and how he or she interacts (directly or indirectly) with clinical staff or customers
- Asking the individual about the resources available to him or her for doing his or her job after traditional business hours
- Asking about the challenges of his or her job and how the firm supports him or her in this role
- Asking about the hand-offs or coordination points with other firm staff members
- Asking any clarifying questions or for more details
- Asking the staff member if he or she has any questions about Joint Commission certification or the review process
- Thanking the individual for his or her time

Any follow-up from the phone call will take place during the course of the review.

Health Care Staffing Services Certification

Multi-Site (Corporate) Review – Individual Site (Branch Office) Review

Staffing firms subject to the Multi-Site (corporate) Review option will have a sample of sites (branch offices) selected to participate in the review. The site's performance will be evaluated by the reviewer through video meetings with the site staff and through review of clinical staff personnel files and health records and customer contracts/agreements.

Organization Participants

- Site (branch office) manager
- Staffing coordinator(s)
- Supervisory staff
- Staff responsible for collecting/verifying application data
- Others at the discretion of the site manager

Overview

Reviewers will first conduct a 45-60 minute video meeting with site (branch office) staff. Reviewers will want site staff to participate in a *Clinical Staff Tracer* which covers the

- First contact (recruitment)
- Data gathering (application process)
- Discussion related to file review
  - Licensure
  - Credentials
  - Competency
  - Continuing education
  - Orientation
  - Health status
- Hiring decision
- Orientation/Assignment Availability
- First placement
  - How data is provided to customer
  - Clinical staff to customer matching process
  - Customer reassignment of clinical staff (floating)
  - Registering concerns/complaints
  - Performance evaluation process

  During the clinical staff tracer, the reviewer will be exploring the relationship between the site and main site (corporate office) covering such topics as:
  - Site structure & place within the corporate structure
  - Corporate systems to support sites
  - Corporate/site responsibilities and accountabilities
  - Centralized and decentralized processes
  - Communication between corporate and sites
  - Data reporting between corporate and sites
  - Organization-wide performance improvement

At the conclusion of the site (branch office) video meeting, the reviewer may advise site staff to have someone on stand-by during the issue resolution time frame in the event the reviewer has questions or needs clarification based on the results of the file review.

Following the site video meeting, the reviewer will turn their attention to the evaluation of the clinical staff personnel files and health records selected for the site. This activity will take approximately 45-60 minutes. It is important that these files and records be available at the designated time of this session in order to complete the activity within the noted timeframe.

The above noted process will be repeated for each site selected to participate in the review. At the conclusion of the site reviews for a given day, time is allotted for issue resolution and reviewer report preparation for each of the sites. These activities will be followed by either reviewer planning for additional site reviews or an Interim Exit Conference to report on any findings from the site reviews.

The Interim Exit Conference will be conducted with corporate office staff. Individual site staff are invited to participate, however, findings for all sites reviewed that day will be covered in the same session. Reviewers will not be able to conduct separate exit conferences with each site.

Health Care Staffing Services Certification

Issue Resolution

Issue resolution time provides an opportunity for the reviewer to follow-up on potential findings that could not be resolved in other review activities.

Organization Participants
Will vary depending upon the issue

Materials Needed for this Session
Will vary depending upon the issue

Preparation
None required

Overview
The reviewer may have identified issues during review activities that require further exploration or follow-up with staff. This follow-up may include a variety of activities such as:

- Review of policies and procedures
- Review of personnel files
- Review of performance improvement data
- Discussions with selected staff

The reviewer will work with the staffing firm's review coordinator to organize and conduct all issue resolution activity in a timely fashion.

Health Care Staffing Services Certification

Reviewer Report Preparation

The reviewer will use this time to compile, analyze and organize the data he or she has collected throughout the review into a report reflecting the organization's compliance with standards.

Organization Participants
None required

Preparation
None required

Overview
This time is reserved on the agenda for the reviewer to reflect on his or her observations and activities and determine if there are any findings that reflect issues of standards compliance. The reviewer will prepare a Summary of Certification Review Findings Report and plan for the Organization Exit Conference.

Health Care Staffing Services Certification

Organization Exit Conference

During the Organization Exit Conference the reviewer will:

- Review the Summary of Certification Review Findings report, including the new SAFER™ matrix feature, if desired by the CEO
- Discuss any standards compliance issues that resulted in Requirements for Improvement (RFIs)
- Allow the organization a final opportunity to discuss the review findings
- Review required follow-up actions as applicable

Organization Participants

- Chief executive officer (CEO)
- Other senior leaders identified by the CEO
- Other staff at the discretion of the CEO

Preparation

None required

Overview

This is a 30-minute activity that takes place on the last day of the review. The CEO, organization leaders, and other organization staff as invited by the CEO will be presented with a verbal report of the review observations. The certification review findings and report are shared with participants ONLY with the permission of the CEO.

The reviewer will use the Summary of Certification Review Findings report as the basis for conducting the Organization Exit Conference.

During the Organization Exit Conference, the reviewer will:

- Explain the session format and approach
- Reiterate that performance observations have been communicated and discussed throughout the review
- Indicate that questions and comments are encouraged during this session.
- Comment on areas in which the staffing firm is performing well
- will provide a verbal report of review findings, requirements for improvement, and where these are appearing on the SAFER™ matrix.
- Respond to questions and comments about findings.
- Recap the Joint Commission follow-up process including the Evidence of Standards Compliance procedures

Health Care Staffing Services Certification

Intra-cycle Evaluation Process

All organizations participating in the certification process are required to collect, report, and monitor their performance relative to the standardized measures on an ongoing basis. The Certification Measure Information Process (CMIP) tool assists certified organizations with the data collection, reporting and monitoring requirements associated with the standardized measures. The CMIP tool is available on your organization's secure extranet site, The Joint Commission *Connect*. The Performance Measure (PM) Data Report portion of the CMIP tool is available for all staffing organizations to perform an annual analysis of their performance relative to each performance measure.

For all staffing organizations that participated in an initial or recertification review in 2009, a mid-point (intra-cycle) evaluation of the performance measurement activities and standards compliance will be conducted via conference call with a Joint Commission reviewer.

Prior to the Intra-cycle Event
Your organization will receive an automated email to the primary certification contact and the CEO approximately 3 months in advance of the anniversary date of your last certification review. You will have 30 days to enter any missing monthly data points for any of the four standardized measures, complete the performance measure (PM) data report for each measure, and review your performance improvement plan for any updates. Once everything has been entered or updated, please use the submission checklist section of the CMIP tool to formally submit the CMIP tool to The Joint Commission for the intra-cycle event. If the tool is not submitted on time, your organization will receive an email reminder to submit the tool or risk having your certification decision changed.

Intra-cycle Evaluation Logistics
The intra-cycle evaluation conference call will take place as close as possible to the one year mid-point of the current two year certification cycle. The call will be scheduled by a Joint Commission reviewer with the person identified in the "Intra-cycle Conference Call Contact Information" section of the CMIP tool for a time that is convenient to both parties involved. Participation in the intra-cycle conference call is mandatory for all staffing organizations.

Overview
During the conference call, the reviewer will discuss

- The results of your organization's performance against the four standardized measures (monthly data),
- Your analysis of your performance (PM Data Report),
- Your organization's ongoing approach to performance improvement (PI Plan)
- Your questions regarding compliance with Joint Commission standards

This call is your organization's opportunity to have an interactive discussion with the Joint Commission reviewer to assure you are on the right track relative to performance measurement and ongoing performance improvement and standards compliance.

There are no negative outcomes to the intra-cycle event, unless the reviewer identifies that your organization has not actively engaged in performance measurement and improvement activities since the time of the most recently completed initial or recertification review.

Health Care Staffing Services Certification

Agenda Templates

One Reviewer, One Day	Pages 35-37
One Reviewer, One Site, Multiple Days	Pages 38-42
Multi-Site (Corporate), Multi-Day Review	Pages 43-46

Health Care Staffing Services Certification

One Reviewer for One Day – Review Agenda

Time	Activity	Organization Participants
40 minutes starting at 8:00 a.m.	**Opening Conference** - Introductions - Joint Commission & Certification overview - Agenda review **Staffing Firm Overview** - Organizational structure - Customer base - Review and discuss information provided on certification application	Certification review coordinator Leader(s) Others at the discretion of the organization
20 minutes	**Reviewer Planning Session** *Please note: The reviewer needs a list of customers where clinical staff are currently working or have worked.* - Reviewer selection of contracts/agreements for review—A **minimum of six contracts/ agreements** will be identified ▪ Selected contracts/agreements need to be available for the Contract/Formal Agreement Review activity *Please Note: The reviewer needs a roster of clinical staff that are currently placed or available for placement, sorted by discipline.* - Reviewer selection of clinical staff records and tracers--A **minimum of 20** clinical staff will be identified ▪ Files for these individuals need to be available for the Personnel File Review activity	Certification review coordinator (at the reviewer's request)
60 minutes	**Orientation to Staffing Firm and Data Use** **Business Functions** - Management and operations - On-call structure, if applicable - Marketing activities - Emergency management - Information management ▪ Cyber security and protection systems - Code of business ethics **Customer/Client Functions** - Contracting/formal agreement processes ▪ MSPs and vendor management ▪ Subcontracting - Conflict of interest policies - Customer reassignment of clinical staff (floating)	Leader(s) and individual(s) responsible for these functions

Time	Activity	Organization Participants
	- Tracking and fulfillment of customer/client staff requirements **Staffing Functions** - Performance of recruitment, retention, and competency evaluation processes - Clinical staff performance evaluation processes - Setting clinical staff health requirements - Expectations regarding National Patient Safety Goals **Data Use** - Approach to performance improvement ▪ Data collection processes ▪ Data quality and maintaining integrity ▪ Data analysis processes - Priorities for improvement ▪ Certification standardized performance measures ▪ Customer satisfaction data ▪ Clinical staff satisfaction data ▪ Customer complaint reporting ▪ Clinical staff complaints, exit interview data	
30 minutes	**Review of Firm's Uploaded Documents**	
30 minutes	**Contract/Formal Agreement Review** - Discussion of contracting/formal agreement process - Facilitated review of a select sample of contracts and formal agreements	Individual(s) familiar with content and responsible for formal agreements/ contracts
60 minutes	**Competence Assessment & Credentialing Session** - Application process - Employment history checks - Credentials verification process - Hiring criteria - Orientation - Placement criteria - Clinical staff to customer matching process - Clinical staff supervision - Clinical staff performance evaluation, including customer feedback - Maintaining competency of clinical staff	Individuals responsible for managing and performing these processes
30 minutes	**Reviewer Lunch**	
120 minutes	**Personnel File Review** - Facilitated review of the selected sample of files begins in this activity - Discussion during this activity will focus on the firm's	Individual(s) with authorized access to files Individual(s) who can facilitate the file review

Time	Activity	Organization Participants
	internal credentials quality assurance audit process, including ▪ Reporting audit results ▪ Compiling and analyzing the audit data for trends ▪ Identifying opportunities to improve the credentialing process ▪ Planned improvements or changes already implemented to the credentialing process ▪ Efforts to maintain and sustain improved performance	Individual(s) that performs credentials audits for the firm
30 minutes	**Individual Clinical Staff Tracers** - First contact (recruitment) - Data gathering (application process) - Discussion related to file review ▪ Licensure ▪ Credentials ▪ Competency ▪ Continuing education ▪ Orientation ▪ Health status - Hiring decision - Orientation/assignment availability - First placement ▪ How data is provided to customer ▪ Clinical staff to customer matching process ▪ Customer reassignment of clinical staff (floating) ▪ Registering concerns/complaints - Performance evaluation process	Individual(s) who can step the reviewer through a clinical staff person's experience with the firm from point of first contact through recruitment, hiring, orientation and first placement, through initial performance evaluation Should involve individuals responsible for the day-to-day performance of activities
60 minutes	**Issue Resolution & Reviewer Report Preparation**	Certification review coordinator, if requested by reviewer
30 minutes ending at approximately 4:30 p.m.	**Organization Exit Conference**	Program and clinical leadership Others at the discretion of the organization

Health Care Staffing Services Certification

Multi-Day – Review Agenda

First Day

Time	Activity	Organization Participants
40 minutes starting at 8:00 a.m.	**Opening Conference** - Introductions - Joint Commission & Certification overview - Agenda review **Staffing Firm Overview** - Organizational structure - Customer base - Review and discuss information provided on certification application	Certification review coordinator Leader(s) Others at the discretion of the organization
20 minutes	**Reviewer Planning Session** *Please note: The reviewer needs a list of customers where clinical staff are currently working or have worked.* - Reviewer selection of contracts/agreements for review—A **minimum of six contracts/ agreements** will be identified per day for review. ▪ Selected contracts/agreements need to be available for the Contract/Formal Agreement Review activity *Please Note: The reviewer needs a roster of clinical staff that are currently placed or available for placement, sorted by discipline.* - Reviewer selection of clinical staff records and tracers--A **minimum of 20** clinical staff will be identified per day for review. ▪ Files for these individuals need to be available for the Personnel File Review activity	Certification review coordinator (at the reviewer's request)
60 minutes	**Orientation to Staffing Firm and Data Use** **Business Functions** - Management and operations - On-call structure, if applicable - Marketing activities - Emergency management - Information management ▪ Cyber security and protection systems - Code of business ethics **Customer/Client Functions** - Contracting/formal agreement processes ▪ MSPs and vendor management	Leader(s) Individual(s) responsible for these functions

Time	Activity	Organization Participants
	▪ Subcontracting - Conflict of interest policies - Customer reassignment of clinical staff (floating) - Tracking and fulfillment of customer/client staff requirements **Staffing Functions** - Performance of recruitment, retention, and competency evaluation processes - Clinical staff performance evaluation processes - Setting clinical staff health requirements - Expectations regarding National Patient Safety Goals **Data Use** - Approach to performance improvement ▪ Data collection processes ▪ Data quality and maintaining integrity ▪ Data analysis processes - Priorities for improvement ▪ Certification standardized performance measures ▪ Customer satisfaction data ▪ Clinical staff satisfaction data ▪ Customer complaint reporting ▪ Clinical staff complaints, exit interview data	
30 minutes	**Review of Firm's Uploaded Documents**	
30 minutes	**Contract/Formal Agreement Review** - Discussion of contracting/formal agreement process - Facilitated review of a select sample of contracts and formal agreements	Individual(s) familiar with content and responsible for formal agreements/ contracts
60 minutes	**Competency Assessment & Credentialing Session** - Recruitment - Application process - Employment history checks - Credentials verification process - Hiring criteria/decision - Orientation/assignment availability - Health status requirements - Placement criteria - Clinical staff to customer matching process - Clinical staff supervision - Clinical staff performance evaluation, including customer feedback - Maintaining competency of clinical staff	Individuals responsible for managing and performing these processes
30 minutes	**Reviewer Lunch**	
120 minutes	**Personnel File Review**	Individual(s) with

Time	Activity	Organization Participants
	- Facilitated review of the selected sample of files begins in this activity - Discussion during this activity will focus on the firm's internal credentials quality assurance audit process including ▪ Reporting audit results ▪ Compiling and analyzing the audit data for trends ▪ Identifying opportunities to improve the credentialing process ▪ Planned improvements or changes already implemented to the credentialing process ▪ Efforts to maintain and sustain improved performance	authorized access to files Individual(s) who can facilitate the file review Individual(s) that performs credentials audits for the firm
60 minutes	**Individual Clinical Staff Tracers** - First contact (recruitment) - Data gathering (application process) - Discussion related to file review ▪ Licensure ▪ Credentials ▪ Competency ▪ Continuing education ▪ Orientation ▪ Health status - Hiring decision - Orientation/assignment availability - First placement ▪ How data is provided to customer ▪ Clinical staff to customer matching process ▪ Customer reassignment of clinical staff (floating) ▪ Registering concerns/complaints - Performance evaluation process	Individual(s) who can step the reviewer through a clinical staff person's experience with the firm from point of first contact through recruitment, hiring, orientation and first placement, through initial performance evaluation Should involve individuals responsible for the day-to-day performance of activities
30 minutes ending at approximately 4:30 p.m.	**Reviewer Planning**	Certification review coordinator

Last Day

Time	Activity	Organization Participants
90 minutes starting at 8:00 a.m.	**Personnel File Review** …*continued*	
60 minutes	**Contract/Formal Agreement Review** - Facilitated review of a select sample of contracts and formal agreements	Individual(s) familiar with content and responsible for formal agreements/ contracts

60-120 minutes	**Individual Clinical Staff Tracers**
	- First contact (recruitment)
	- Data gathering (application process)
	- Discussion related to file review
	  ▪ Licensure
	  ▪ Credentials
	  ▪ Competency
	  ▪ Continuing education
	  ▪ Orientation
	  ▪ Health status
	- Hiring decision
	- Orientation/assignment availability
	- First placement
	  ▪ How data is provided to customer
	  ▪ Clinical staff to customer matching process
	  ▪ Customer reassignment of clinical staff (floating)
	  ▪ Registering concerns/complaints
	- Performance evaluation process
		Individual(s) who can step the reviewer through a clinical staff person's experience with the firm from point of first contact through recruitment, hiring, orientation and first placement, through initial performance evaluation
		
		Should involve individuals responsible for the day-to-day performance of activities; if possible, a different group of internal staff should be accessed

30 minutes	**Reviewer Lunch**	
120 minutes	**Personnel File Review** …*continued* Note: Reviewers may conduct additional Clinical Staff Tracers if time is available.	
60 minutes	**Issue Resolution & Reviewer Report Preparation**	Certification review coordinator, if requested
30 minutes ending at approximately 4:30 p.m.	**Organization Exit Conference**	Program and clinical leadership Others at the discretion of the organization

Multi-Day Review Agenda for all days between the First and Last

Time	Activity	Organization Participants
150 minutes (2.5 hours) starting at 8:00 a.m.	**Personnel File Review** …*continued* Note: Reviewers may conduct additional Clinical Staff Tracers if time is available.	
60 minutes	**Contract/Formal Agreement Review** - Discussion of contracting/formal agreement process - Facilitated review of a select sample of contracts and formal agreements	Individual(s) familiar with content and responsible for formal agreements/ contracts
30 minutes	**Reviewer Lunch**	
60 minutes	**Individual Clinical Staff Tracers** - First contact (recruitment) - Data gathering (application process) - Discussion related to file review ▪ Licensure ▪ Credentials ▪ Competency ▪ Continuing education ▪ Orientation ▪ Health status - Hiring decision - Orientation/Assignment Availability - First placement ▪ How data is provided to customer ▪ Clinical staff to customer matching process ▪ Customer reassignment of clinical staff (floating) ▪ Registering concerns/complaints - Performance evaluation process	Individual(s) who can step the reviewer through a clinical staff person's experience with the firm from point of first contact through recruitment, hiring, orientation and first placement, through initial performance evaluation Should involve individuals responsible for the day-to-day performance of activities; of possible, a different group of internal staff should be accessed each day
150 minutes (2.5 hours)	**Personnel File Review** …*continued* Note: Reviewers may conduct additional Clinical Staff Tracers if time is available.	
30 minutes ending at approximately 4:30 p.m.	**Reviewer Planning**	As requested by the reviewer

Health Care Staffing Services Certification

Multi-Site (Corporate) Review Agenda

Day 1

Time	Activity	Organization Participants
45 minutes starting at 8:00 a.m.	**Opening Conference** - Introductions - Joint Commission & Certification overview ▪ Slide presentation - Agenda review - Site selection **Multi-Site Staffing Firm Overview** - Organizational structure - Customer base - Review and discuss information provided on certification application	Certification review coordinator Leader(s) Others at the discretion of the organization
30 minutes	**Reviewer Planning Session** The firm is asked to have available: 1. A roster of clinical staff that is currently on assignment or available for assignment, sorted by discipline for each of its sites. 2. A list of customers where clinical staff is currently working or has worked in the past 12 months. **NOTE:** If each site works with a separate and unique group of customers, the firm is asked to have a customer list available for each of its sites.	Certification review coordinator Staff familiar with sites and that can orient the reviewer to the roster or list(s) Staff familiar with customers and contracts that can orient the reviewer to the list(s)

60 minutes	**Orientation to Staffing Firm and Data Use**
	
	Business Functions
	- Management and operations
	  ▪ Centralized and decentralized systems and processes
	- On-call structure, if applicable
	- Marketing activities
	- Emergency management
	- Information management
	  ▪ Cyber security and protection systems
	- Code of business ethics
	
	Customer/Client Functions
	- Contracting/formal agreement processes
	  ▪ MSPs and vendor management
	  ▪ Subcontracting
	- Conflict of interest policies
	- Customer reassignment of clinical staff (floating)
	- Tracking and fulfillment of customer/client staff requirements
		Leader(s)
		
		Staff responsible for these functions
		
		Others at the discretion of the organization

Time	Activity	Organization Participants
	Staffing Functions - Performance of recruitment, retention, and competency evaluation processes - Clinical staff performance evaluation processes - Setting clinical staff health requirements - Expectations regarding National Patient Safety Goals **Data Use** - Approach to performance improvement - Centralized or decentralized ▪ Data collection processes ▪ Data quality and maintaining integrity ▪ Data analysis processes - Priorities for improvement - Organization-wide and/or site-specific ▪ Certification standardized performance measures ▪ Customer satisfaction data ▪ Clinical staff satisfaction data ▪ Customer complaint reporting ▪ Clinical staff complaints, exit interview data	
45 minutes	**Multi-Site Monitoring and Oversight System Tracer** Review systems for monitoring and oversight including: ▪ Frequency of monitoring and oversight ▪ Criteria and performance expectations for sites ▪ Individuals responsible for monitoring and oversight ▪ Data gathered and used to monitor site performance ▪ Procedures and tools for overseeing sites ▪ Procedures for providing performance feedback to sites ▪ Requirements and timeframes for site corrective action	Staff responsible for site monitoring and oversight Leader(s) Others at the discretion of the organization
30 minutes	**Review of Firm's Uploaded Documents**	
30 minutes	**Reviewer Lunch**	
60 minutes	**Contract/Formal Agreement Process** ▪ Centralized or decentralized ▪ Review of contracting or formal agreement process ▪ Facilitated review of a select sample of contracts and formal agreements	Individual(s) familiar with content and responsible for formal agreements/ contracts

Time	Activity	Organization Participants
60 minutes	**Competence Assessment & Credentialing Process** ▪ Centralized or decentralized processes ▪ Recruitment ▪ Application process ▪ Employment history checks ▪ Credentials verification process ▪ Hiring criteria/decision ▪ Orientation/assignment availability ▪ Health status requirements ▪ Placement criteria ▪ Clinical staff to customer matching process ▪ Clinical staff supervision ▪ Customer reassignment of clinical staff (floating) ▪ Clinical staff performance evaluation, including customer feedback ▪ Maintaining competency of clinical staff	Individuals responsible for designing, managing, and overseeing the performance of these processes at sites
60 minutes	**Issue Resolution and Reviewer Report Preparation**	Individual coordinating review activity
30 minutes	**Reviewer Planning for Site Review Activity**	Individual coordinating review activity
30 minutes, ending at approximately 4:30 p.m.	**Multi-Site Review Interim Exit Conference**	Leader(s)and others at the discretion of the organization

Agenda for Multi-Site (Corporate) Review Days beyond Day 1

Time	Activity	Organization Participants
180 minutes (3 hours) starting at 8:00 a.m.	**Site (Branch Office) Review** (times are approximate) Video meeting with site staff (45-60 minutes) includes: *Clinical Staff Tracer* - First contact (recruitment) - Data gathering (application process) - Discussion related to file review ▪ Licensure ▪ Credentials ▪ Competency ▪ Continuing education ▪ Orientation ▪ Health status - Hiring decision - Orientation/assignment availability - First placement ▪ How data is provided to customer ▪ Clinical staff to customer matching process ▪ Customer reassignment of clinical staff (floating) ▪ Registering concerns/complaints ▪ Performance evaluation process *Site Support System Tracer* ▪ Site leadership structure ▪ Site placement within multi-site organization structure ▪ Systems to support sites ▪ Site responsibilities and accountabilities ▪ Centralized and decentralized processes ▪ Communication between corporate organization and site ▪ Data reporting between corporate organization and site ▪ Organization-wide performance improvement *Clinical staff personnel file review* (90-120 minutes)	Site staff including Site manager Staffing coordinator(s) Supervisory staff Staff responsible for collecting and verifying application data Others at the discretion of the site manager
30 minutes	**Reviewer Lunch**	
180 minutes (3 hours) starting at mutually agreed upon time	**Site (Branch Office) Review** (times are approximate) Repeat of above activity with another office	
30 minutes	**Issue Resolution**	Certification review coordinator, if requested by reviewer
60 minutes	**Reviewer Report Preparation**	
30 minutes ending at approximately 4:30	**Reviewer Planning, or Interim Exit, or Multi-Site Review Exit Conference**	Per reviewer recommendation

Contract/Formal Agreement Review Checklist

Look for the following items in staffing firm customer agreements/contracts.

- Subcontractors - The use of subcontractors
- Competency Review - Defined responsibilities for the establishment of staff competency for the assignments staff are designated for
- Floating - Reassignment (floating) of personnel
- Employees or Independent Contractors - Whether staff are employees of the firm or independent contractors working through the firm
- Incident, Error Tracking System - The firm's system for reporting, tracking, and documenting unexpected incidents, including errors, unanticipated deaths and other events, injuries, and safety hazards related to the care and services provided
- Requirements for Staff Specified - Were the requirements for the staff placed specified in the contract/formal agreement?
- Staff Matched Requirements - Were the contract expectations met? (Confirmed on phone calls with customers)

Customer Name	Subcontractors	Competency	Floating	Employees or Ind. Contractors	Incident, Error, Tracking System	Communicating Occupational Safety Hazards	Orientation of Employees	Requirements for Staff Specified	Staff Matched Requirements?

Customer Name	Subcontractors	Competency	Floating	Employees or Ind. Contractors	Incident, Error, Tracking System	Communicating Occupational Safety Hazards	Orientation of Employees	Requirements for Staff Specified	Staff Matched Requirements?

Personnel File Review Checklist

	Standards and Elements of Performance										Organization Requirements							
Name	B. Discipline	C. Licensure Certification	D. Advance Practice Verifications	E. Education Training	F. Experience	G. Competency Eval	H. Performance Evaluation	I. Criminal Background	J. Orientation		L. CPR	M. TB Test or Questionnaire	N. MMR	O. Flu Immunization or Declination	P. Health Statement	Q. Hep B	R. Drug Screen	Notes
1 Date of Hire																		
2 Date of Hire																		
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Name	B. Discipline	C. Licensure Certification	D. Advance Practice Verifications	E. Education Training	F. Experience	G. Competency Eval	H. Performance Evaluation	I. Criminal Background	J. Orientation		L. CPR	M. TB Test or Questionnaire	N. MMR	O. Flu Immunization or Declination	P. Health Statement	Q. Hep B	R. Drug Screen	Notes
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Name	B. Discipline	C. Licensure Certification	D. Advance Practice Verifications	E. Education Training	F. Experience	G. Competency Eval	H. Performance Evaluation	I. Criminal Background	J. Orientation		L. CPR	M. TB Test or Questionnaire	N. MMR	O. Flu Immunization or Declination	P. Health Statement	Q. Hep B	R. Drug Screen	Notes
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25 Date of Hire																		
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27 Date of Hire																		
28 Date of Hire																		
29 Date of Hire																		
30 Date of Hire																		

Column Key

C. Current licensure, certification, or registration required by the state, the firm, or customer from primary sources

D. MD and Advanced Practitioners - includes NPDB, DEA, NPI, relinquishment of license, privilege termination and professional liability actions from primary sources

E. Education and training associated with residency or advanced practice, experience, and competency appropriate for assigned responsibilities

F. Clinical work history/references

G. Initial and ongoing evaluation of competency

H. Performance evaluation according to organization requirements

I. Information on criminal background according to law, regulation, and customer requirements

J. Documentation that the clinical staff person has received orientation from the organization

L. CPR according to organization requirements

M, N, O, P and Q. Compliance with applicable health screening and immunization requirements established by the firm or customer

R. Drug screen according to organization or customer requirements