



Applying for Urgent Care Center Accreditation – A Step-By-Step Guide

Starting the Accreditation Process

Congratulations! You have decided to take the important step to have your Urgent Care Center Accredited. Accreditation is a measure of professional achievement and a symbol to your patients that your Urgent Care Center is committed to providing high-quality care.

Submitting Your Application

Once your application has been received by NUCCA, you will receive an email to confirm that we have received your application. We will then make arrangements with one of our reviewers for your on-site review. Your on-site review will take place any time from two to six weeks from receipt of your application (depending on reviewer availability). When a reviewer becomes available, NUCCA will arrange a date and time with the reviewer for your on-site review to take place. You will receive an email indicating the date and time of your on-site review and the name of your reviewer, and, if multiple locations are to be reviewed, the locations to be reviewed.

If you are submitting an application but would like to postpone your on-site review, please make a note on your application indicating that you would like to wait to schedule your on-site review. You are responsible for contacting NUCCA to alert us when you are ready to schedule your on-site review.

Preparing for Your On-Site Review

Clinics are encouraged to utilize the Self-Assessment Guideline to prepare for the on-site review. The Self-Assessment Guideline is a comprehensive overview of all the standards of compliance for Accreditation. The Self-Assessment Guideline can help you prepare for your Accreditation review.

Alert your staff that a representative of NUCCA will be visiting the clinic. Designate a point-of-contact (such as the medical director or office manager) for the reviewer who can help facilitate the review. This person should be knowledgeable about the location of records and other important documents, be able to answer questions, and provide access to any electronic documents (for

example, the EMR system). Ensure your documentation (e.g., employee records, Policy and Procedure Manuals, etc.) are available prior to the reviewer's arrival.

The On-Site Review

The on-site review places emphasis on the educational and consultative benefits of Accreditation. The primary objective is not only to evaluate your practice but to aid in the education of your practice in its day-to-day functions. The on-site review is designed to be a learning experience for the clinic. Your reviewer is happy to provide guidance and answer any questions you may have.

The on-site review is assessment of your medical practice's compliance with applicable standards and adherence to the policies and procedures of the UCCA program. During your on-site visit the reviewer will be reviewing the following areas:

➤ ***Rights of Patients***

The clinic recognizes the basic human rights of patients.

➤ ***Governance***

The clinic has a governing body that sets policy and is responsible for the facility.

➤ ***Administration***

The clinic is administered in a manner that ensures the provision of high-quality health services and that fulfills the organization's mission, goals and objectives.

➤ ***Quality of Care Provided***

An accreditable clinic provides high-quality health care services in accordance with the principles of professional practice and ethical conduct, and with concern for the costs of care and for improving the community's health status.

➤ ***Quality Management and Improvement***

In striving to improve the quality of care and to promote more effective and efficient utilization of facilities and services, an accreditable organization maintains an active, integrated, organized, peer-based program of quality management and improvement that links peer review, quality improvement activities, and risk management in an organized, systematic way.

- **Peer Review:** An accreditable organization maintains an active, integrated, and organized process of peer review as a part of its peer-based quality management and improvement program.
- **Quality Improvement Program:** An accreditable organization maintains an active, integrated, organized, peer-based quality improvement (QI) program.
- **Risk Management:** The clinic develops and maintains a program of risk management, appropriate to the organization, designed to protect the life and welfare of an organization's patients and employees.

➤ ***Clinical Records and Health Information***

The clinic maintains clinical records and a health information system from which information can be retrieved promptly. Clinical records are legible, documented accurately in a timely manner, and readily accessible to health care practitioners.

➤ ***Professional Improvement***

The organization strives to improve the professional competence and skill, as well as the quality of performance, of the health care practitioners and other professional personnel it employs.

➤ ***Facilities and Environment***

The clinic provides a functionally safe and sanitary environment for its patients, personnel, and visitors.

➤ ***Immediate/Urgent Care Services***

The clinic implies by its activities, advertising, or practice that it provides medical care of an urgent or immediate nature on a routine or regular basis such care meets the needs of the patients and is provided in accordance with ethical and professional practices and legal requirements.

➤ ***Pharmaceutical Services***

Pharmaceutical services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

➤ ***Pathology and Medical Laboratory Services***

Pathology and medical laboratory services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

➤ ***Diagnostic Imaging Services***

Diagnostic imaging services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

After Your Review

Following the on-site review, the reviewer will complete a survey report for NUCCA which will include any recommendations (if any) and/or other pertinent information (if applicable), and make a recommendation pertaining to your Accreditation. Your clinic will be invoiced for the travel expenses incurred by the reviewer. To avoid any delays to the Accreditation process payment of this invoice is due upon receipt.

If the reviewer has noted any areas of improvement, you will receive a letter from NUCCA indicating which items need to be corrected and instructions for submitting documentation. NUCCA typically allows 90 days for an organization to submit any and all documentation required to reach compliance with the standards of Accreditation.

If the reviewer has recommended Accreditation you will receive an Accreditation packet that contains a letter indicating that your organization has been Accredited, your Accreditation certificate(s), stickers for your entrances and stickers for the reception area. You will also receive signage indicating your clinic's designated Urgent Care Center classification level according to the Classification of Urgent Care Centers. To view the Classification of Urgent Care Centers, please visit <http://ucaccreditation.org/classification-of-uccs.html>.

You will also receive a follow-up email with additional resources for publicizing your achievement of Accreditation, such as a logo for your web site and a press release to announce your Accreditation.

If you have any questions about Urgent Care Center Accreditation, please call 407-521-5789.

You may also refer to the Handbook for Urgent Care Center Accreditation for additional information.