



National

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National Urgent Care Center Accreditation

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National

INTRODUCTION

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The idea of quality in medical care encompasses many things. A compassionate attitude; a broad, up-to-date base of knowledge; aptitude in diagnostics, procedures, and selecting appropriate treatment; and good communication skills are all important

attributes for healthcare providers. Health care facilities similarly have characteristics that reflect quality of care. Cleanliness, safety, adequate staffing, and appropriate policies and procedures are just a few of these.

The assurance that healthcare providers and facilities maintain adequate levels of quality is of vital importance to patients and those who pay for their care. Most patients and payers, however, do not have the time or expertise to formally evaluate this. While state medical licensing boards assure appropriate levels of provider quality, various independent surveying agencies have been established to assess the quality of healthcare facilities. For many years, such agencies as the Joint Commission for Accreditation of Health Care Organizations (JCAHO) and the Accreditation Association for Ambulatory Health Care (AAAHC) have been providing in-depth examination of a variety of facilities, including hospitals, healthcare networks, outpatient surgery, endoscopy, and diagnostic imaging centers, medical group practices, and some Urgent Care centers.

National Urgent Care Center Accreditation (NUCCA) has developed a program of survey and Accreditation specially designed for Urgent Care centers. The **National Urgent Care Center Accreditation** process is based on standards similar to those used by JCAHO and AAAHC. **National Urgent Care Center Accreditation** has been able to refine previously proven survey criteria and methods and have created a separate program of Accreditation that is more streamlined, emphasizing the most important elements of quality for Urgent Care providers and facilities. Accreditation is meant

to be a learning process for those who undertake it. Once successfully completed, the Accreditation is to symbolize – to patients, payers, and colleagues – the highest level of commitment to one’s patients and the practice of Urgent Care Medicine.

DIFFERENCES IN ACCREDITATION PROCESSES

Organizations like JCAHO and AAAHC have provided comprehensive surveys of Urgent Care facilities for many years. These surveys usually take several days and review organizational structure, governance, and various administrative functions, as well as the quality of medical care, *at a cost of several thousand dollars per survey*. Due to the time and expense, very few Urgent Care centers sought Accreditation through these organizations. Yet, patients are using Urgent Care centers in increasing numbers, and the number of centers is progressively increasing.

In 2000, Urgent Care providers realized that these trends mandated a simpler, more focused approach to certify the quality of care provided at these facilities. Many Urgent Care physicians sought a venue for recognition of what they felt were outstanding facilities. Insurers and other third-party payers desired an assessment of the quality of care provided at all of the facilities that their beneficiaries might utilize. Of course, patients would ultimately benefit from a system that would assure them that the Urgent Care center they use had been independently surveyed and approved.

A panel of physicians reviewed the survey processes of JCAHO and AAAHC noting the most important aspects with information from the medical literature regarding the essential determinants of quality medical care. The result was a process that emphasizes crucial facility and provider characteristics of quality with less emphasis on organizational attributes. The **National Urgent Care Center Accreditation** survey takes approximately four hours for the average-sized center and is *substantially less expensive*. The survey is ideally suited for individual Urgent Care centers and can be applied to networks of Urgent Care facilities.

STANDARDS FOR ACCREDITATION

The standards for Urgent Care Center Accreditation can be divided into two main categories: medical practice and facility quality. Medical practice assessment involves examination of the qualifications of all of the facility's practitioners and the quality of the medical care they provide. Facility assessment involves an evaluation of the Urgent Care center itself. **National Urgent Care Center Accreditation** standards have been refined from proven survey methods that have been used by other organizations for more than twenty years. General areas of evaluation are listed on the next page.

MEDICAL PRACTICE STANDARDS

- Board preparation/certification for physicians
- Certification for other practitioners
- Current practitioner licensure
- Referral policies
- Practitioner continuing education
- Medical and ancillary staffing levels
- Supervision of ancillary staff
- Emergency care procedures
- Chart review for documentation and quality of care (AHCPR Standards) [No data is copied or transmitted]
- Continuity of care practices
- Quality improvement activities
- Medication dispensing practices
- ECG and X-ray over-reading policies

FACILITY STANDARDS

- Cleanliness
- Safety for patients and staff
- Laboratory and radiology practices
- Infection control
- Patients' rights
- Organization and maintenance of medical records
- Medical devices and equipment
- Human Resources/Employee Records

THE ACCREDITATION PROCESS (THE MECHANICS)

Once the operators of an Urgent Care center decide to become Accredited, they can begin the Accreditation process by downloading the necessary documents from [ucaccreditation.org/important-documents.html](https://www.iaacc.org/important-documents.html). These documents include the Application for Accreditation, Applying for Urgent Care Center Accreditation - A Step-By-Step Guide, Handbook for Urgent Care Center Accreditation and the Self-Assessment Guideline. The Self-Assessment Guideline is a comprehensive overview of all the standards of compliance for Accreditation. Centers applying for Accreditation are encouraged to utilize the Self-Assessment Guideline to prepare for the on-site review.

Preparing for the survey is important because it is meant to be as much a learning experience as a preparation for assessment. Preparation time may be as little as one month or may require six months or more. Some facilities will need to institute new policies and procedures or train personnel in additional duties, responsibilities or skills. This will enhance quality before the survey takes place. During this time, members of the Accreditation team will be available by phone or email to help answer questions and facilitate preparation.

On the survey date, a surveyor will examine the facility, personnel qualifications, and pre-selected as well as randomly selected medical charts. In all situations, the specific finding of the survey as well as recommendations for improvements will be given to each facility that undergoes a survey.

THE ACCREDITATION SURVEYOR

The Accreditation surveyor is an *advocate* for the Urgent Care center, providing advice, knowledge and guidance for the center to improve quality and achieve Accreditation. The on-site survey is meant to be as much a learning experience as an assessment of the standards of Accreditation.

CONSULTATION SERVICES

Consultation services with an Accreditation surveyor are available for any Urgent Care center that needs assistance preparing for their on-site Accreditation review. Because the review is meant to be as much a learning experience as an assessment of the clinic's operations, a consultation prior to the official review is a great way for clinics to learn first-hand from the surveyors. The surveyor will outline what the clinic can anticipate during the assessment, providing advice and insight, identify common pitfalls and pinpoint any areas where the center may be deficient. The surveyor will also provide suggestions and recommendations for areas of improvement. This will assist with preparation for the official review.

Consultation services are available for \$800 per day (plus travel expenses).

If a clinic needs minor guidance prior to their on-site review, but is not in need of a consultation visit, phone consultations with the surveyor are available. Phone consultations are available for \$150 per hour (price will be pro-rated if a full hour is not used or needed).

BENEFITS OF ACCREDITATION

The benefits of Accreditation are many. The process itself should prompt the operators of an Urgent Care center to closely examine their facility and the way in which they care for patients. Areas needing improvement can be identified and addressed during the preparation period. Knowledge of and close adherence to the survey standards provide basic assurances to patients and payers that the care provided at a center is state of the art and that a center's policies and practices provide for adequate safety and privacy. Accreditation demonstrates the highest level of commitment to providing the highest quality medical care and symbolizes medical practice that is consistent with the highest ideals of the specialty of Urgent Care Medicine.

DURATION OF ACCREDITATION

The Accreditation Committee awards an organization Accreditation for *three years* when it concludes that the organization is in substantial compliance with the standards, and the committee has no reservations about the accuracy of the survey findings or the organization's commitment to continue providing high-quality care and services as reflected in the standards. Urgent Care centers applying for Accreditation under the Early Survey Program are eligible for up to a maximum of a one-year term of Accreditation. Please see information about the Early Survey Program at the end of this brochure.

The Accreditation Committee awards an organization Accreditation for one year when a portion of the organization's operations are acceptable, however other areas need to be addressed and the organization

requires sufficient time to achieve compliance. The organization must have an on-site review one year from the previous survey date to avoid a lapse in Accreditation. Such an on-site review will be conducted by the surveyor in a visit to the organization at the prevailing fee (see Accreditation fees).

Organizations seeking Accreditation that are owned by a solo practitioner whose medical license is on probationary status will be eligible only for a maximum of a one-year term of Accreditation. All solo practitioner organizations that are currently accredited must advise **National Urgent Care Center Accreditation** within 30 days of any change in their medical license status. From the time of the change in status, the term of the organization's Accreditation will become one year or until the end of their term of Accreditation, whichever is less.

ADDING NEW LOCATIONS TO YOUR ACCREDITATION

For clinics that are already Accredited through the NUCCA program, new clinics added (newly built) by the Accredited Urgent Care group ***within the first six months of initial Accreditation is awarded*** will be grandfathered into the initial Accreditation; these new clinic locations will not require an on-site review.

Any clinic locations ***acquired*** by the Accredited Urgent Care group ***within the first six months of initial Accreditation*** will be grandfathered into the initial Accreditation; these acquired clinic locations may require an on-site review based on informatics submitted to **National Urgent Care Center Accreditation**. Informatics shall include (but not be limited to): former name of the clinic, location, square footage, number of years in operation prior to acquisition, number of doctors, staffing model, hours of operation, type of center acquired (Family Practice, Urgent Care, Pediatric clinic, etc.), procedures performed, equipment, self-dispensing, etc. The Accredited Urgent Care group will be required to complete a Statement of Attestation (provided by NUCCA) which acknowledges that the additional clinic locations are in compliance with the standards of Accreditation. There shall be no additional charge for clinics (either newly built or acquired) which are added within the first six months of Accreditation.

New clinics ***added*** (newly built) by the Accredited Urgent Care group ***six months or more after initial Accreditation*** is awarded may be grandfathered into the initial Accreditation; these additional locations may not require a physical on-site review provided that the policies and procedures of the new locations are similar to the initial Accreditation group. The Accredited Urgent Care group will be required to complete

a Statement of Attestation (provided by NUCCA) which acknowledges that the additional clinic locations are in compliance with the standards of Accreditation. Current Accreditation fees will apply.

Any clinic locations **acquired** by the Accredited Urgent Care group **six months or more after initial Accreditation** is awarded may be grandfathered into the initial Accreditation; these acquired clinic locations may require an on-site review based on informatics submitted to the **National Urgent Care Center Accreditation**. Informatics shall include (but not be limited to): former name of the clinic, location, square footage, number of years in operation prior to acquisition, number of doctors, staffing model, hours of operation, type of center acquired (Family Practice, Urgent Care, Pediatric clinic, etc.), procedures performed, equipment, self-dispensing, etc. Current Accreditation fees (plus travel expenses for the surveyor) for these new locations will apply.

The Accredited Urgent Care group is responsible for alerting **National Urgent Care Center Accreditation** when a new clinic location becomes operational. **National Urgent Care Center Accreditation** reserves the right to review any clinic location at our discretion. **National Urgent Care Center Accreditation** will provide advance notice to the Accredited Urgent Care group if an on-site review is required.

All clinic locations (the initial group of clinics as well as all grandfathered clinic locations) will be re-accredited on the three-year anniversary of Accreditation.

ACCREDITATION FEES

1 clinic	\$1,950
2-5 clinics	\$1,050 per location
6-10 clinics	\$710 per location
11 -15 clinics	\$640 per location
16-20 clinics	\$445 per location
21 or more clinics	Call or email for pricing

The application fee should accompany the Accreditation application. The clinic is also responsible for travel expenses for the surveyor (airfare, hotel, car rental and meals, as applicable) [to be invoiced to the clinic after completion of the site review(s)].

Any clinic that submits an application for Accreditation has 30 days to request a refund of their application fee (less \$250 processing fee to be retained by the National Urgent Care Center Accreditation) if they elect not to seek Accreditation. After 30 day all fees are non-refundable. Any/all documents/publications purchased are non-refundable.

When a survey is conducted and **National Urgent Care Center Accreditation** determines that the medical practice does not meet certain criteria and a re-survey is deemed necessary, there will be a re-survey fee of \$1,000 per clinic location (plus travel expenses).

National Urgent Care Center Accreditation has several documents available to help you prepare for your on-site review. **Applying for Urgent Care Center Accreditation - A Step-By-Step Guide** and the **Handbook for Urgent Care Center Accreditation** are available at no charge. Each of these documents can be downloaded from ucaccreditation.org/important-documents.html.

The **Self-Assessment Guideline** is a comprehensive overview of all the standards of compliance for Accreditation. Centers applying for Accreditation are encouraged to utilize the **Self-Assessment Guideline** to prepare for the on-site review. The cost is \$150 for Urgent Care centers in the Accreditation process; otherwise the cost is \$250. An order form to purchase the **Self-Assessment Guideline** can be downloaded from ucaccreditation.org/important-documents.html.

An Operations Manual Template and an Urgent Care Center Quality Assurance Checklist are available to assist with Accreditation. The cost of the Operations Manual Template is \$200 for Urgent Care centers in the Accreditation process, otherwise the cost is \$400. The cost of the **Urgent Care Center Quality Assurance Checklist** is \$50 for Urgent Care centers in the Accreditation process; otherwise the cost is \$100. Order forms to purchase the **Operations Manual Template** and/or the **Urgent Care Center Quality Assurance Checklist** can be downloaded from ucaccreditation.org/important-documents.html.

RE-ACCREDITATION FEES

1 clinic	\$1,250
2-5 clinics	\$850 per location
6-10 clinics	\$500 per location
11-15 clinics	\$375 per location
16-20 clinics	\$250 per location
21 or more clinics:	Call or email for pricing

When a clinic is due for re-accreditation, the Accreditation Coordinator will send a renewal notice and invoice via email to the clinic 60 days ahead of the renewal date. The on-site re-accreditation review will take place within six weeks from receipt of payment of the invoice. The Accreditation Coordinator will coordinate with the clinic and the reviewer to schedule which locations will be reviewed and the dates of each review to ensure a smooth review process. If a re-accreditation survey is conducted and NUCCA determines that the medical practice does not meet certain criteria and a re-survey is deemed necessary, there will be a re-survey fee of \$500 per clinic location (plus travel expenses). Re-Accreditation fees are non-refundable.

FAQS

What is Accreditation?

Accreditation is a voluntary process through which an Urgent Care center is able to measure the quality of its services and performance against nationally recognized standards. The Accreditation process involves self-assessment by the organization, as well as a thorough review by **National Urgent Care Center Accreditation** expert surveyors. The Accreditation certificate is a symbol to others that an organization is committed to providing high-quality care and that it has demonstrated its commitment by measuring up to **National Urgent Care Center Accreditation** high standards. The true value of Accreditation, however, lies in the consultative and educational process that precedes the awarding of the certificate. It is the self-analysis, peer review, and consultation that ultimately help an organization improve its care and services.

What does National Urgent Care Center Accreditation use to evaluate an Urgent Care Center for Accreditation?

National Urgent Care Center Accreditation standards, outlined in the Self-Assessment Guideline, describe organizational characteristics that **National Urgent Care Center Accreditation** has determined are essential to high-quality patient care. They are related to such areas as clinical records, environmental safety, governance, administration, quality of care, and professional development. The standards are considered to be dynamic and reflect the evolving changes in medicine and the health care industry overall. By constantly updating the standards, they are current, relevant and practical to the Urgent Care center.

What is the Early Survey Program (ESP)?

It is not uncommon these days that many insurance carriers mandate Accreditation of a medical practice before that entity may begin any dialogue for providing coverage or reimbursement. The Early Survey Program (ESP) is a survey program developed for medical practices that are newly constructed and require Accreditation for health insurance, managed care, or third-party reimbursement and/or require Accreditation for the purposes of state regulations that mandate some form of Accreditation before a facility can legally begin operations. An Urgent Care center may apply for Accreditation up to eight

months before the clinic becomes operational. The clinic will need to have all policies and procedures in place in order to meet the standards of Accreditation. Urgent Care centers applying for Accreditation under the ESP are eligible for up to a maximum of a one-year term of Accreditation from the initial on-site review. An Urgent Care center applying for Accreditation under the ESP submits an Application for Accreditation, application fee, and all supporting documentation and indicates to the Accreditation Coordinator that the center is applying for ESP.

Why is Accreditation important?

Urgent Care organizations value Accreditation as a measure of professional achievement and quality of care. Urgent Care centers welcome the **National Urgent Care Center Accreditation** survey as a constructive learning experience. The NUCCA certificate of Accreditation is a benchmark of quality, not only to those involved in the health care industry, but to the general public as well. Because of the excellence of **National Urgent Care Center Accreditation** standards and the thoroughness of its survey procedures, many third-party payers, commercial insurance carriers, local and state agencies will recognize Accreditation as a value and/or a requirement. In addition, professional liability carriers acknowledge that Accreditation is a valuable indication of quality and frequently consider it in evaluating an organization applying for coverage.

Why National Urgent Care Center Accreditation?

National Urgent Care Center Accreditation is the preeminent organization representing health care providers in Urgent Care Medicine. Our surveyors have experience in Urgent Care Medicine and understand the issues related to working in this industry. They provide consultative feedback on what each organization does well and methods of improvement. This type of survey brings qualified, expert leaders in the industry to work with each organization to educate and counsel them on how to achieve the highest levels of quality in Urgent Care Medicine.

The information contained in this booklet is accurate as of the date of publication. Clinics are reminded that requirements, policies and fees may change and are encouraged to contact National Urgent Care Center Accreditation for more information.

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