Preparing for (and Surviving) an ACR On-Site Accreditation Inspection

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Do you suddenly wake up in the middle of the night with a cold sweat and a resonating fear of being critiqued by people you don't even know? Are you looking over your shoulder every minute of every day, just to make sure that an über-squad of radiology gurus isn't sneaking up behind you? Have you been receiving strange glances from colleagues every time you rant exhaustively about "phantoms" and "image submission"? You must be expecting an ACR site survey! Worry not, friends—help has finally arrived.

For surveys performed within the last several years, the ACR has generally provided a time frame in which sites can expect an on-site review of their accredited imaging modalities. Now, under the Medicare Improvements for Patients and Providers Act (MIPPA), the ACR will soon begin performing unannounced site surveys of MRI and CT programs to ensure that facilities are truly complying with accreditation criteria (nuclear medicine/PET programs will still be given prior notice due to the impact on isotope ordering). Additionally, the inspections will take on a greater significance now that the accreditation requirement is tied to federal regulations. While it is reasonable to expect the actual inspections themselves to otherwise be very similar to the announced inspections from years past, some uncertainty still surrounds the new process. This uncertainty contributes to an overall feeling of unease for many. What can you do to help calm the nerves of your fellow colleagues and employees (along with your own nerves, for that matter)? As someone whose company has helped thousands of clients become ACR-accredited and also helped prepare many of those for an ACR site inspection, I can tell you definitively that adequate preparation is the key to success.

Gearing Up

For the well-prepared accredited facility, a visit from the ACR should be welcomed as an educational opportunity as well as a chance to verify the effectiveness of your overall quality assurance program. Having said that, the process can be naturally stressful and since ACR surveyors may now show up at your doorstep on any given day and with limited or no notice, it is more important than ever to have all of the required elements in place at all times. Having a number of items readily available for the surveyors will quickly demonstrate your facility's adherence to ACR standards and dedication to quality. To get you started, the following is a list of articles and documents that you must be able provide:

- Federal, state, and personnel licenses
- Continuing medical education and personnel qualification records
- Documentation of any personnel changes and any equipment changes

- Up-to-date accreditation application information
- Policies and Procedures manual for the modality of interest
- Routine quality control records
- Most recent medical physicist report
- Service and repair logs

At minimum, the items listed above should be kept current and organized such that, when the ACR survey team does arrive, it will be able to evaluate your documentation much more quickly and easily. Once you have all of the above plus any other modality-specific requests from the ACR put together, it's time to start thinking about what to anticipate during the site visit.

Survey Time

The day has come! You should expect to have either one, or three, ACR members show up at your site and spend a few hours out of the day conducting the on-site survey. For validation site visits, a single ACR staff member will be your inspector and they will focus exclusively on verifying that all of the information presented in your ACR accreditation application is correct and that any deviations or changes meet the ACR standards. For random site visits, the team will include a radiologist, a medical physicist, and an ACR staff technologist and will be much more comprehensive. For a random site visit, here is what you need to know about the general roles of each inspection team member during the visit:

Radiologist

- Team leader
- Evaluates clinical image quality of randomly-selected images
- Consults with site radiologist regarding scan techniques and clinical interpretation
- Reviews clinical techniques with the site's supervising radiologist
- Evaluates follow-up logs

Medical Physicist

- Equipment verification
- Reviews annual physicist report
- Reviews and scores phantom images. May perform phantom scanning and image analysis, as well
- Reviews and evaluates all quality control logs

ACR accreditation staff technologist

- Verifies application data
- Ensures that any deviations or changes meet the ACR Standards
- Reviews federal, state & local licensure or certification

The ACR surveyors will also look to reference the data that was submitted on your facility's initial accreditation application. The purpose of this check is to verify that equipment and personnel listed on the application correspond to the current status of the site and remain up to date. At the end of the survey, the team may discuss some recommendations for improvement. The final results, however, will not be given at the time of the survey but, instead, will be provided in writing at a later date, along with additional comments and recommendations.

When the Dust Settles

After the survey is over, expect to wait a few weeks to receive the final results package. The ACR summary report may include the following sections:

- Clinical Image Evaluation
- Phantom Evaluation
- Policy and Procedure Manual
- Equipment Verification
- Quality Control and Annual System Performance Evaluation
- Quality Control Logs
- Personnel Verification
- Other General Recommendations

In addition to the details under each of the sections above, the ACR will provide you with an itemized listing of recommended actions. It is, then, the job of your facility to implement this plan of action and to keep the ACR updated on any changes in personnel or site information that might occur. It is highly important that the recommendations are taken seriously and acted upon in order to maintain your accreditation status.

Helpful Tools

From learning about accreditation program requirements to information on how to perform quality control testing, the ACR website is the go-to resource to address the majority of your questions and concerns. To help you get you started on preparing for a visit from the ACR, navigate directly to your specific modality of interest and scroll down to "Toolkit for Site Visits". As an example, here is a link to the accreditation toolkit from the MRI page (this toolkit can actually be used for all ACR modalities at your facility): http://www.acr.org/accreditation/mri.aspx#toolkit.
The documents under this section are like your very own GPS system—filling out the information accurately and completely will surely point you in the right direction (with fewer potholes, too).

The key to maintaining good standing in your ACR accreditation is in demonstrating that quality and safety in your imaging procedures takes the highest priority. Thus, your medical physicist can also be an invaluable resource to help prepare you for a successful on-site visit. He or she is the individual most familiar with the details of all the quality control being done on your imaging systems, and should have full support from your management team to affect changes that will improve quality. In many cases, your medical physicist is the person who has, in fact, designed much of your technical quality assurance program and tailored it to your facility's particular needs. In most hospitals and imaging sites, he or she should really be the "glue" that holds the entire ACR accreditation process together.

Finally, remember to reach out to your colleagues who have actually gone through one or more of these on-site surveys. They will be able to pass their own recommendations for improvement on to you. Sharing such information about maintaining and improving quality standards can only work to benefit all diagnostic imaging facilities and the patients that they serve every single day.

Good luck! 

Bibliography

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