

Accreditation of French health organizations (HCO): a method for estimating the auditor ressources necessary for the multiplication of tracer investigations

Anne CHEVRIER, Sophie OLLIVIER, Patrick MECHAIN
French National Authority for Health – La Plaine Saint-Denis – France | www.has-sante.fr

GOAL

To address a key focus of the 5th iteration of Healthcare Quality and Safety Accreditation, which emphasizes medicalization and the consideration of care outcomes, the French National Authority for Health (HAS) has opted to significantly increase the number of patient tracers in its visits. A modeling tool was developed to estimate the required surveyor resources for implementing these tracers in accreditation surveys of healthcare organizations (HCOs).

METHODOLOGY

3 STEPS TOOL



Calculating required patient-tracer investigations in accreditation survey

- Allocate tracers based on activity sectors and HCO size.
- Aimed for at least 1 patient tracer and 1 pathway tracer per sector.
- Max limits: 20 tracer pathways, 80 tracer patients per HCO.



Sizing the surveyor team per survey

- Duration based on previous iteration.
- Calculated surveyors per profile and survey.
- Daily capacity: 4 patient tracers, 2 pathway tracer per doctor.
- Up to 3 doctors for major visits.
- TPD profile and occasional reinforcement used.
- 1 manager per visit.
- Small structures capped at 2 EVs for 3 days.



Sizing staffing requirements

- Calculated surveyors based on HCO sizing.
- Planned 2400 visits in 4 years.
- 4 visits/year per surveyor, 2 days/year per TPD.

FOCUS ON 1ST STEP

The overview of the tracer calculation grid

HCO Profile	Decile 1		...	Decile 10	
	Nb of beds/ places/visits*	SAE data**		SAE data**	
	1. Activity sector	Nb of Tracer Patients	1 to 2		1 to 18
		Nb of Tracer pathways	1 to 2	...	1 to 2
...	...	...	...	...	...
9. Activity sector					

* Nb of beds/places/visits: the unit depends on the activity sector.

** Data from the SAE 2016 (the annual statistics of healthcare establishments).

Example of application: Projected number of tracers for a psychiatric facility visits 427 beds and places

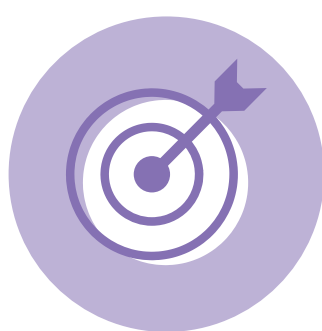
- 1 - Collecting data on activity sectors and the size of the organization
- 2 - Consulting the tracer calculation grid:

		D1	D2	D3	D4	D5	D6	D7	D8	D9	D10
Psychiatry Complete hospitalization	Nb of beds	30	43	52	65	80	96	120	175	258	803
	Tracer patients	2	2	2	3	3	3	6	7	9	12
	Tracer pathways	1	1	1	1	1	1	2	2	2	2
Psychiatry Day hospitalization	Nb of places	10	12	15	20	25	35	45	72	112	318
	Tracer patients	1	1	1	1	2	2	4	5	7	12
	Tracer pathways	1	1	1	1	1	1	2	2	2	2

- 3 - Calculating the required number of tracers:
- 16 Tracer patients, 4 Tracer Pathways = 20 Tracers needed for this visit

Areas of activity	Nb of beds/ places/passages	Decile	Tracer patients	Tracer pathways	Total Tracers
Psychiatry Complete hospitalization	385	10 ^e	12	2	14
Psychiatry Day hospitalization	42	7 ^e	4	2	6
TOTAL	427		16	4	20

RESULTS



Tool enabled early quantification and qualification of massive recruitment needs



Facilitated reliable, secure, and shared actions for recruitment, surveyor training, mentoring, and visit launch



Increased staff of 801 surveyors, including 565 new recruits (294 doctors and 200 caregivers)



Achieved 856 surveys, involving 7,052 tracer patients and 3,425 tracer pathways, 1 ½ years after initial surveys

CONCLUSION

This modeling identified the significant gap between available and necessary resources at an early stage, leading to a large-scale recruitment campaign. It underwent validation by high authorities of the HAS, a crucial preliminary step for its success. The modeling served as the basis, with necessary adjustments, for determining the actual sizing of the visits, resulting in shared satisfaction among the teams.