



STATE OF NEW YORK
DEPARTMENT OF HEALTH

433 River Street, Suite 303, Troy, New York 12180-2299

Richard F. Daines, M.D.
Commissioner

Wendy Saunders
Executive Deputy Commissioner

May 18, 2009

DCS: 09-07

RE: HFAP/AOA Collaborative Agreement

Dear Chief Executive Officer:

The purpose of this letter is to notify you that the New York State Department of Health has recently signed a collaborative agreement with the Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association (AOA) for the surveillance of hospitals. The collaborative agreement runs through January 31, 2013.

Similar to the collaborative agreement the Department has with The Joint Commission, DOH will waive routine onsite surveys of a facility if that facility requests that its accreditation by the HFAP be utilized in lieu of surveys by the New York State Department of Health. If a hospital accredited by HFAP chooses not to participate with the collaborative agreement, they will be subject to routine onsite surveys performed by DOH staff. While hospital participation with the collaborative agreement is voluntary, it is strongly recommended as a way to reduce the duplication of hospital survey activity.

Should you have any questions regarding the information provided, please contact Barbara DelCogliano at (518) 402-1003.

Sincerely,

A handwritten signature in black ink that reads "Mary Ellen Hennessy".

Mary Ellen Hennessy
Director
Division of Certification & Surveillance

Enclosure

COLLABORATIVE AGREEMENT

BETWEEN

THE NEW YORK STATE DEPARTMENT

AND

**THE HEALTHCARE FACILITIES ACCREDITATION PROGRAM (HFAP)
OF THE AMERICAN OSTEOPATHIC ASSOCIATION (AOA)**

I. INTRODUCTION

The New York State Department of Health (the Department) and the Healthcare Facilities Accreditation Program (HFAP) of the American Osteopathic Association (AOA) are committed to a collaborative relationship with the expressed intent to reduce duplication of effort with respect to routine surveys of acute care hospitals and critical access hospitals.

II. THE NYSDOH/HFAP COLLABORATIVE SURVEY PROCESS

Definition of Terms

For the purposes of this agreement, “hospital” pertains to acute care hospitals and critical access hospitals licensed pursuant to Article 28 of the New York State Public Health Law.

Survey Schedule/ Hospital Authorization

The HFAP will provide the Department with a list of the hospitals that are due for an accreditation survey at least one month prior to the survey.

All hospitals due for an initial HFAP accreditation survey will receive a letter from the Department that will briefly describe the collaborative survey process and a copy of this agreement whereby the hospitals will determine their participation in the collaborative survey process. All hospitals currently accredited by the HFAP will be similarly contacted to determine their participation in the collaborative survey process.

Pre-Survey Information Sharing

In accordance with all applicable confidentiality provisions of Public Health Law, Section 2805-m, the Department will share with the HFAP information regarding Department identified systemic concerns. A Systemic Concern is defined as a failure in the health care delivery process that resulted in patient harm or injury or had significant potential for patient harm or injury. Healthcare delivery process failures can include, but are not limited to, inadequate safeguards to prevent serious medication errors, untimely or incomplete emergency triage systems, ineffective infection control systems, poor credentialing of medical staff, ineffective management of clinical data, or unsafe physical plant or environment. Information relating to a single case or a small number of cases will be so noted. Beginning on the date of this Agreement, the Department will share such information with the HFAP regarding hospitals accredited by the HFAP or seeking accreditation from the HFAP in accordance with the following criteria:

1. hospitals in which the Department has identified systemic concerns and verification of corrective actions has not been completed; or
2. hospitals which have signed a Department stipulation and order to resolve a recent (within the monitoring duration of the stipulation and order) enforcement action initiated by the Department.

The Department's central office will coordinate and distribute the pre-survey information to the HFAP. Pre-survey information concerning a specific hospital will be shared in summary form with the HFAP and the hospital at approximately the same time. Such sharing of pre-survey information does not, however, preclude ongoing communication between the Department and the HFAP that is not specifically related to triennial survey activity.

Reports

The HFAP will provide the Department with the decision letters and accreditation survey reports pertaining to participating hospitals in New York State at approximately the same time as it provides said reports to those hospitals. This information will be provided in a report format to be agreed upon by the Department and the HFAP ("Reports"). The Department will review the Reports and a determination will then be made regarding the need, if any, for follow-up survey activity by the Department.

The HFAP will immediately notify the Department in writing when the Bureau of Healthcare Facilities Accreditation (BHFA) of the AOA makes the determination of Interim Accreditation, Denial/Withdrawal of Accreditation, or Accreditation Alert. This notification will include a substantive description of the HFAP's concerns as well as its assessment of any jeopardy to the safety of patients or the public.

Potential HFAP Accreditation Actions include:

- Accreditation (for three-years) no further action required.
- Accreditation (for three years) Interim Progress Report required.
- Provisional Accreditation- an accreditation decision that results when a hospital has demonstrated satisfactory compliance with a subset of standards during a preliminary on-site evaluation. This decision remains in effect until one of the other official HFAP categories is assigned based on a complete survey against all applicable standards approximately six-months later.
- Interim Accreditation – Interim Progress Report required, may also require a Mandatory Consultation. Interim Accreditation indicates that a facility generally meets the standards, but that certain areas have been identified

which need additional work to be compliant. The facility is required to complete the additional work within a specified period of time, as defined by the BHFA that will not exceed twelve months, in order to remain accredited.

- Denial or Withdrawal of Accreditation – indicates that a healthcare facility has been denied accreditation because:
 1. it does not meet the HFAP Standards, or
 2. it has failed to meet its financial obligations to the HFAP.

Accreditation Alert – Though this is not a separate decision, Accreditation Alert is an attribute of an organization's existing accreditation status. An organization is placed on Accreditation Alert if it experiences a critical incident (sometimes referred to as a sentinel event). The facility will remain on Accreditation Alert until the AOA Bureau of Healthcare Facilities Accreditation or its Executive Committee determines that an appropriate response has been taken by the facility to reduce the likelihood of such an incident in the future.

Freedom of Information Law

HFAP reports received by the Department will be subject to public disclosure pursuant to the Public Officers Law, Article 6, Freedom of Information Law (FOIL). The Department will notify hospitals and HFAP if requests for their HFAP documents are received by the Department.

Follow-up Surveys

The HFAP will provide written notification to the Department when the HFAP has determined that follow-up monitoring compliance assessment through an onsite focused survey is necessary. In those instances when the Department determines that there is a need for follow-up monitoring, the Department will conduct the onsite follow-up of the HFAP triennial survey collaboratively with the HFAP, to the extent possible. However, the Department and the HFAP shall retain their rights to conduct follow-up surveys independently.

Administrative Issues

To facilitate communication and understanding between the Department and the HFAP in the operational aspects of the HFAP survey process, the HFAP will provide training sessions for Department staff as needed or requested. In addition, Department staff dedicated to the oversight of this agreement will be invited to attend HFAP's periodic education and training conferences. HFAP staff will be invited to attend the Department's (annual/periodic) training conference/programs.

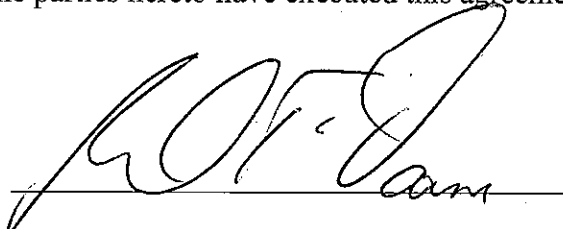
The HFAP will provide the Department with copies of all HFAP manuals, newsletters and directives. The Department will provide the HFAP with copies of all Department manuals, newsletters and directives pertaining to Department surveillance standards.

This Agreement is effective January 31, 2009, through January 31, 2013, but shall be reassessed periodically. It may only be amended in writing by both parties. Either party to this agreement may terminate this agreement by providing the other party with 90 days prior written notice to the other party by means of certified mail (return receipt requested), hand delivery or by overnight courier.

III. CONFIDENTIALITY

All medical and personal records, files and information obtained by the HFAP on survey or otherwise under this Agreement shall be accessible by the Department and shall otherwise be kept confidential and shall be maintained in a manner consistent with all legal requirements regarding personal privacy and patient confidentiality, including but not limited to, the Personal Privacy Protection Law, the Public Health Law, Health Insurance Portability and Accountability Act of 1996 (HIPAA), and the regulations of the Department; provided, however, information may be disclosed in summary or statistical form which does not identify any particular individual.

IN WITNESS WHEREOF, the parties hereto have executed this agreement the 21 day of Feb 2009.



Richard F. Daines, M.D.
Commissioner
New York State Department of Health



George A. Reuther
Director COO
Healthcare Facilities Accreditation Program (HFAP)
American Osteopathic Association (AOA)