



JAG accreditation scheme

Stage two: deferral pathway - service guidance



Introduction

Following a site assessment, services are ‘accredited’ if they meet the JAG standards or ‘deferred’ if there are standards that have outstanding requirements and more time is required to achieve them. Services will receive their report outlining the key actions that must be met to achieve accreditation. This document summarises the deferral pathway and the actions services must take to gain accreditation.

Types of deferral assessments

The assessment report and letter will detail the type of deferral assessment the service must undertake:

Site reassessment: this is a physical assessment on site by at least one member of the original assessment team. This is normally recommended where (this list is not exhaustive):

- Physical changes to the environment that need to be observed and validated by the assessment team
- Multiple key actions that require remote evidence review and service staff interviews
- Where interviews with service personnel is needed.

All site reassessments will be accompanied by an online submission of documentation to support all the key actions in the report.

Documentation review: this is an online submission of evidence to meet the key actions in the report. The assessment team will not physically re-attend the service but review evidence remotely and/or have a teleconference with the service. This is normally recommended where (this list is not exhaustive):

- There are minor physical changes to the environment that can be supported by photographic evidence and a description
- Waiting times targets need to be met or audits need to be updated
- Policies, guidelines and processes need to be updated
- Business cases or plans need to be presented

Following the site assessment

A new assessment will be opened on the webtool containing the deferred standards. This can be viewed on the assessment dashboard. Services should upload the evidence requested in the report to the dashboard. The assessment team will review the evidence uploaded at the end of the deferral period.

Action plans

During the full 6 month deferral period the service must upload two action plans to show their progress towards meeting the key actions. This will happen at 3 and 5 months, and the assessment team will agree the deadlines for this. The aim of this is to support the service in meeting the key actions and to provide feedback on any further actions required to meet the standards.

Services must upload the action plans as specified or the assessment team may end the deferral period ahead of the 6 months and move the service to 'accreditation not awarded'.

A service that can meet their outstanding requirements before 6 months (ie 3 months) should only provide one action plan.

Teleconference

Following the submission of the action plans the lead assessor may wish to have a teleconference with the service. Services will have the opportunity to ask any questions and receive guidance from the assessment team. However, it is not possible for the assessment team to provide a quality improvement service. The administrator for your assessment will organise the teleconference with you, and it is suggested that clinical, nursing and managerial leads are present on the call.

Deferral assessment

The deferral period will finish 6 months after the site assessment

If the assessment is a documentation review then the assessment team will review the evidence remotely through the web tool. The assessment team may clarify aspects of the evidence but they will not provide online commentary as with the initial assessment. The final decision will be made on the submitted evidence.

If the assessment is a site reassessment then your assigned administrator will contact you to organise a suitable date for the reassessment. This date will need to be within two weeks of the checklist deadline. Usually only one assessor is required to return to the site, however this will depend on the nature of the key actions. A timetable to support the reassessment will be agreed between the service and the assessment team. The timetable will outline the relevant service personnel who need to be present on the day of the reassessment.

Service is deferred and is provided with report containing key actions



Service submits action plan at 3 months



Assessors review action plan and provide guidance to service



Service submits action plan at 5 months



Assessors review action plan and provide guidance to service



Service submits final evidence for review



Assessment team reviews evidence



Service is accredited or not awarded

Outcomes

Following the documentation review or site reassessment, the assessment team will aim to send the final report within one week of the assessment. The outcome of this will be:

Accredited: if the key actions are met and the service has continued to adhere to the JAG standards then accreditation will be granted. To maintain accreditation services must complete the annual review and undergo a reaccreditation assessment after five years.

Accreditation not awarded: if the key actions are not met within 6 months, accreditation will not be awarded. The service will be offered the option of a call with the assessment team to discuss the reasons for accreditation not being awarded and the actions required. To gain accreditation, services will be required to undergo a full assessment. Some services may be eligible for a bespoke assessment (see the bespoke assessment policy).

Further information

For further information please see www.thejag.org.uk/support.