



## Diagnostic Accreditation Program

# Accreditation Process

# Introduction



All new facilities, and some new services within an already accredited facility, must proceed through the initial assessment process prior to service delivery or patient testing.

Each program's accreditation standards for initial assessment can be found on their respective page on the College [website](#).

The following steps are for all programs: diagnostic imaging; laboratory medicine; neurodiagnostics; polysomnography; pulmonary function; and home sleep apnea testing.

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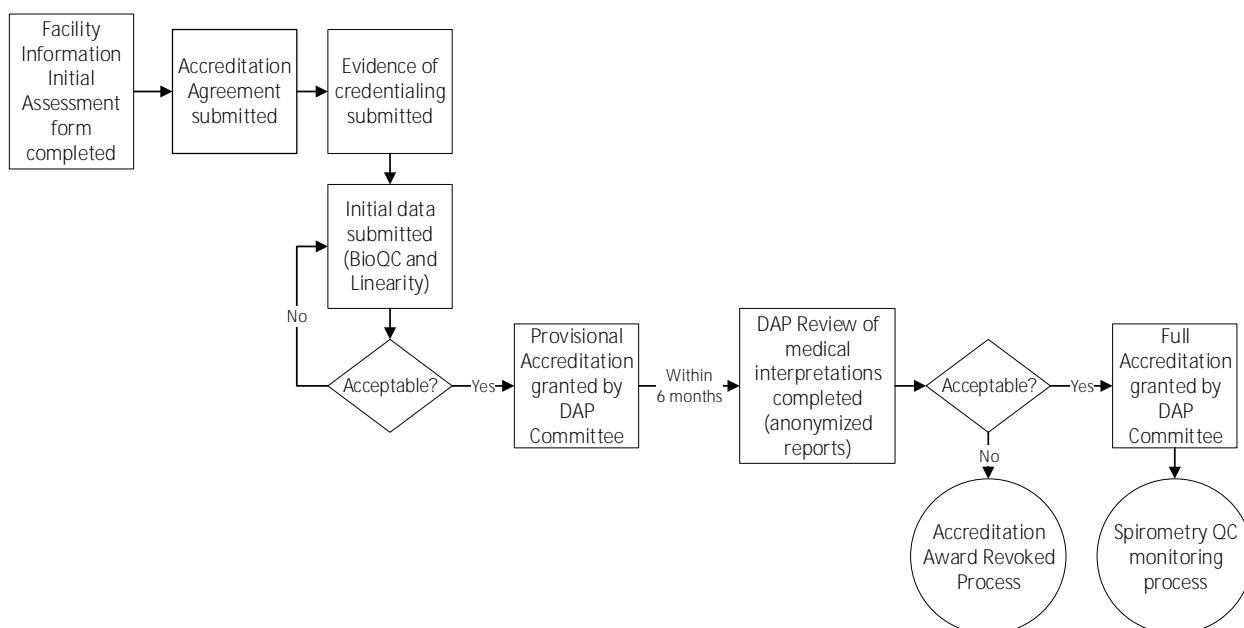
During the on-site assessment, the assessor will assess to accreditation standards for initial assessment and includes: review of the physical environment, discussion of processes with staff, and follow-up on any outstanding issues identified during the distance review of the evidence submission.

Following the on-site assessment, the facility/service will be issued an accreditation report. If the facility does

In all other diagnostic services, the accreditation award is granted by the DAP Committee based on review of the report generated from an on-site assessment.

However, pulmonary function facilities conducting spirometry testing are not assessed at their facility; they are assessed using a desktop audit of the quality control (QC) data. Successful QC performance will lead to the issuing of an accreditation award every four years for these facilities.

If the spirometer used exclusively is the COPD-6 Spirometer, as approved by the Medical Services Commission for case finding, DAP accreditation is not required.



Facility Information for Initial Assessment Form – Community Spirometry\*

Accreditation Agreement

Initial Assessment Data Submission Part 1: Technical Data

Initial Assessment Data Submission Part 2: Medical Review

Spirometry Acceptance Testing Worksheets

\*In addition to submitting this completed form, physicians affiliated with a health authority intending to provide spirometry services in the community must include a letter stating the applicant has the requisite credentials as outlined in the BC Medical Quality Initiative (BC MQI) Provincial Privileging Dictionaries. This letter is most often provided by the medical affairs department. Physicians who only work in a private facility should review and follow the credentialing section on the DAP section of the College's [website](#). Credentialing applications will be reviewed and a response sent in writing to the applicant with notification of credentialing status.

Spirometry is a useful diagnostic test commonly performed in a variety of settings; however accurate results are dependent on careful technique, and proper equipment calibration and

To achieve full accreditation the facility is scheduled for an accreditation assessment to the complete set of DAP standards for the specific diagnostic service. This assessment will be scheduled one year after the initial assessment of the facility. Facilities must address all nonconformances identified at the assessment, to the satisfaction of the DAP Committee, prior to the expiry of the provisional accreditation award.

Accreditation assessments are scheduled every four years and any nonconformances identified at the assessment must be addressed to ensure that facilities maintain continuing accreditation.

Accredited facilities and services participate in ongoing assessment activities throughout the accreditation cycle.

Additional information on ongoing accreditation is included in the DAP accreditation manual which is available to all accredited facilities.



All facilities relocating to a new address or within their existing building (e.g. facility is rebuilt on the same site) must proceed through the relocation assessment process to service delivery or patient testing.

The following four steps are for all programs: diagnostic imaging; laboratory medicine; neurodiagnostics; polysomnography; pulmonary function; and home sleep apnea testing.

Physicians, surgeons and facilities intending to provide a diagnostic service must first complete the appropriate Notification of Significant Change in Service form. Each program has a unique set of forms, which can be found on their respective sections on the College website.

After the DAP has received the Notification of Significant Change in Service form, an accredited specialist will contact the facility to confirm receipt of the form.

This step is not required for laboratory medicine.

The facility must complete the Evidence Submission for Distance Review form and submit it with the applicable evidence, prior to scheduling an on-site assessment.

It is strongly recommended that the appropriate program's accreditation standards for relocation assessment are reviewed and used in conjunction with the Evidence Submission for Distance Review form.

After the DAP has received and reviewed the evidence submission package, an accreditation specialist will contact the facility to schedule an on-site assessment. During the on-site assessment, the assessor will review the physical environment; discuss processes with staff and follow up on any outstanding issues identified during the distance review of the evidence submission.

Following the on-site assessment, the facility/service will be issued an accreditation report. If the facility is not meeting all of the requirements outlined in the accreditation standards for relocation assessment, these nonconformances will be outlined in the accreditation report and will need to be implemented prior to receiving an accreditation award for the new location/address. The expiration of the new accreditation award will remain the same as the previous accreditation award and the previously scheduled accreditation activities will not change.





All accredited diagnostic facilities/services are subject to annual fees. The annual fees are determined based on the type of facility, types of services and the number of services provided. The DAP does not invoice facilities for the costs associated with on-site assessments.

Fees are subject to change and a cancellation fee may also be applicable.

This fee accompanies an application for accreditation by a new non-accredited facility. The application fee includes conducting the on-site initial assessment. A new facility is not subject to annual fees for the current fiscal year in which they are accredited.

These assessments are usually conducted at the direction of the DAP Committee to gain additional information on specific area of activity in a facility.

This fee applies to an already accredited facility that has expanded service to provide another modality/discipline. For example, a diagnostic imaging department that has already received accreditation for radiology and ultrasound, and now decides to provide CT services would be subject to the initial assessment process and associated fee.

This fee applies to an already accredited facility that is relocating to another physical location. This applies to moves within the same facility (e.g. relocation to a different section of