



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: HOSPITAL ACCREDITATION

Policy No.: A104.1

Supersedes: October 27, 2021

Reviewed: July 13, 2022

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PURPOSE:

To comply with and ensure readiness for all hospital accreditation surveys (The Joint Commission [TJC], State Department of Public Health, Medical Board of California, CARF [Commission on Accreditation of Rehabilitation Facilities], College of American Pathologist [CAP], American Dental Association [ADA] Accreditation for General Practice of Dentistry Residency Program, etc.)

POLICY:

1. Hospital department directors/chairs will:
 - a. Notify the Chief Executive Officer of pending accreditation/ licensure reviews/surveys as soon as the notification is received from the accrediting body.
 - b. Provide the Chief Executive Officer with a monitoring status of all accreditations/licensure preparation.
2. Re-accreditation/licensure procedures will be completed in advance of the expiration date.
3. All correspondence or applications materials required by any regulatory agencies are to be submitted in a timely manner and in advance of the established deadlines.
4. Results of all regulatory and accreditation visits will be reported to the Chief Executive Officer and to Health Services Administration (HSA).

AL:gg

EFFECTIVE DATE: June 1999

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY: