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## POLICY MANUAL

### State Board of Behavioral Health and Developmental Services Department of Behavioral Health and Developmental Services

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#### POLICY 5008(FAC)87-12 Accreditation or Certification of State Facilities

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**Authority** Board Minutes Dated: December 16, 1987  
Effective Date: January 27, 1988  
Approved by Board Chairman: /s/ Lindsay B. West

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**Supercedes** STATE BOARD POLICY 5005 (FAC) 85-15

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**References** Federal Register of Regulations, February 25, 2011, Medicare and Medicaid Programs: Approval of the Joint Commission for Deeming Authority for Psychiatric Hospitals  
House Joint Resolution 301, 1987.

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**Background** The Department operates 10 state hospitals and five training centers, hereafter referred to as state facilities, that provide inpatient behavioral health and developmental services to individuals with mental health or substance use disorders, intellectual disability, or co-occurring disorders. In this policy, state facilities do not include the Virginia Center for Rehabilitative Services, which provides only rehabilitative services to individuals admitted involuntarily as sexually violent predators. In operating these state facilities, the Department is committed to maintaining an environment of continuous quality improvement that is focused on treatment, care, and positive outcomes for individuals receiving services. The Joint Commission, hereafter referred to as the TJC, is the nationally recognized accrediting body for psychiatric facilities and the Centers for Medicare and Medicaid Services establishes quality of care regulations that long-term care facilities must meet for federal reimbursement. In 1987, the Board established a policy that all state facilities were to be CMS certified or, under a deemed status agreement, TJC accredited by 1992, and they were to maintain their accreditation or certification status. This was done to reflect the intent of House Joint Resolution 301 (1987). There are five purposes for seeking and maintaining certification or accreditation:

1. Quality of Care

Accreditation and certification requirements ensure that state facilities establish

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processes to systematically monitor, analyze, and improve their performance in order to provide excellent services and positive outcomes for the individuals receiving services in a manner that is sensitive to and respectful of those individuals.

**2. Staff Credentials and Performance**

Accreditation and certification require the establishment of processes to ensure staff have the requisite knowledge and skills to provide high quality care services and there is ongoing monitoring of the quality of care and treatment provided to individuals.

**3. Objective Review**

The external review process associated with accreditation or certification provides an objective and unbiased assessment of the quality of services being provided to individuals.

**4. Reimbursement**

Accreditation and certification help to ensure that state facilities are eligible for maximum reimbursement from potential sources such as Medicaid, Medicare, and private insurers.

**5. Credibility**

National accreditation and certification gives the public, individuals receiving services and their families, advocacy groups, and funding sources confidence in the services provided in state facilities.

Beginning in 1987, all state facilities have attained the level of accreditation or certification that satisfied the requirements of House Joint Resolution, which prescribed a plan for achieving accreditation or certification of all state facilities by 1992.

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**Purpose**

To assure that each state facility continually provides high quality services, maintains the applicable accreditation or certification by a nationally recognized accrediting or certifying body, and maximizes federal and private payor reimbursement for covered services.

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**Policy**

It is the policy of the Board that each state facility shall be accredited or certified through compliance with recognized standards such as those of the TJC, or the CMS, as appropriate. Each state facility that provides applicable services, i.e., intensive psychiatric, skilled nursing, medical/surgical, chronic disease or intermediate care, shall be certified by the CMS.

It is also the policy of the Board that each state facility shall maintain its

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applicable accreditation or certification through ongoing monitoring and management of the quality of services by the facility and the Department.

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