How to Conduct a Mock Tracer

The main activity during a Joint Commission or Joint Commission International (JCI) survey of any type of health care organization is the tracer (see the sidebar “Tracers at a Glance,” at right). A mock tracer is a practice tracer meant to simulate an actual tracer. During a mock tracer, one or more people may play the role of a surveyor. Some organizations develop teams of such “surveyors” and repeatedly conduct mock tracers as part of an ongoing mock tracer program.

Mock tracers are done for several reasons:
• To evaluate the effectiveness of an organization’s policies and procedures
• To engage staff in looking for opportunities to improve processes
• To be certain the organization has addressed compliance issues and is ready for survey at any time

What follows is a 10-step primer for how to conduct a mock tracer. It addresses the process in four phases:
• Planning and preparing for the mock tracer
• Conducting and evaluating the mock tracer
• Analyzing and reporting the results of the mock tracer
• Applying the results of the mock tracer

Each step within these phases includes suggested approaches and activities. You might want to use the “Mock Tracer Checklist and Timeline” on page 3 to guide you through the phases. Note that the primer can be modified to suit any health care organization.

Tracers at a Glance

Duration: A Joint Commission individual tracer (see “Individual tracers” on page 2) is scheduled to take 60 to 90 minutes but may take several hours. During a typical three-day survey, a surveyor or survey team may complete several tracers; during a single-day survey, it may be possible to complete only one or two tracers. Tracers constitute about 60% of the survey.

Survey team: A typical Joint Commission survey team includes one or more surveyors with expertise in the organization’s accreditation program. For domestic (not international) hospitals and critical access hospitals, a Life Safety Code® Specialist is also part of the team. A team leader is assigned for any survey with more than one surveyor. A surveyor typically conducts a tracer on his or her own and later meets up with the rest of the team to discuss findings.

Tracer activity: During tracer activity, surveyors evaluate the following:
• Compliance with Joint Commission standards and National Patient Safety Goals and, JCI for international organizations, JCI standards and International Patient Safety Goals
• Consistent adherence to organization policy and consistent implementation of procedures
• Communication within and between departments/programs/services
• Staff competency for assignments and workload capacity
• The physical environment as it relates to the safety of care recipients, visitors, and staff

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Planning and Preparing for the Mock Tracer

Step 1: Establish a Schedule for the Mock Tracer

Careful planning is necessary for any successful activity, including a mock tracer. Consider the following when establishing a schedule for mock tracers in your organization:

- **Schedule by phase:** Allow adequate time for each phase of a mock tracer. The focus of each phase outlined in this primer is shown in the checklist “Mock Tracer Checklist and Timeline” (see page 3) with suggested time frames, some of which may overlap. Suggested approaches and activities for each phase comprise the remainder of this primer.
Make it part of your regular PI program: Make mock tracers part of your ongoing performance improvement (PI) program. Schedule mock tracers for different departments/programs/services several times a year.

Share the plan with everyone: Let everyone in your organization know about the mock tracers being planned. No set dates need to be given if the mock tracers are to be unannounced, but communication about planned and ongoing mock tracers is necessary for recruitment of those who will play the roles of surveyors and for cooperation from all departments/programs/services.

Understand the Joint Commission survey agenda: A mock tracer typically simulates only the tracer portion of a survey, which constitutes the foundation of the survey. By understanding the survey activities, however, those who are playing the roles of surveyors can better simulate tracers to help your organization prepare for a survey. Joint Commission surveys follow a tight agenda. Check the Survey Activity Guide (SAG) for your accreditation program(s). The guide outlines what happens in each survey activity. All accreditation program SAGs are posted on the web site for The Joint Commission. They are also available on your Joint Commission Connect™ extranet site if yours is an accredited health care organization or an organization seeking Joint Commission accreditation. International organizations should consult the International Survey Process Guide (SPG), which is sent to applicants seeking international accreditation and is also available to order on the JCI Web site.

Relate it to the date of the last survey: Joint Commission surveys are typically conducted on a regular, triennial basis. For most accredited organizations, the survey will occur:

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Mock Tracer Checklist and Timeline

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Note: To follow up on findings and sustain the gains, periodically repeat mock tracers on the same subjects.
within 18 to 36 months after an organization's last survey, although laboratory surveys and certification program reviews are on a two-year cycle. With the exception of office-based surgery practices, organizations accredited by The Joint Commission must conduct a Focused Standards Assessment (FSA) between full surveys. The FSA is a management tool that helps the organization incorporate Joint Commission standards as part of routine operations and ongoing quality improvement efforts, supporting a continuous accreditation process. A mock tracer can help by giving the organization more insight into compliance issues. Conducting the mock tracer before a survey date allows time to address compliance issues prior to the deadline; conducting a mock tracer shortly after the last survey is helpful for assessing compliance with problems highlighted in that recent survey. JCI For international organizations, the survey will occur within 45 days before or after the accreditation expiration date. International certification programs are on a three-year review cycle. Also, although international organizations are not required to complete FSAs, JCI recommends that organizations do a self-assessment of compliance between surveys. (International certification programs have a required intra-cycle review process.)

Step 2: Determine the Scope of the Mock Tracer
Assess your organization to determine where to focus attention. By listing problems and issues in your organization, the scope of the mock tracer—whether comprehensive or limited—will become clear. One or more of the following approaches may be used to determine a mock tracer’s scope:

- **Follow the Intracycle Monitoring flow:** Intracycle Monitoring (ICM) is a process that helps organizations maintain continuous compliance through use of various tools, including the FSA, available in an organization’s ICM profile. The ICM profile is accessible on the Joint Commission Connect site for domestic organizations and provides organizations with the same information that surveyors have when they conduct on-site evaluations. Address all or some of the areas generated in that report. JCI International organizations do not have the ICM; however, it may be helpful and important to look at your last survey results and target areas of greatest concern.

- **Reflect your organization:** Start with your organization’s mission, scope of care, range of treatment or services, and population(s) served. Choose representative tracers that support and define your organization. You might want to use an assessment tool to gather this data.

- **Target the top compliance issues:** Review the Joint Commission’s top 10 standards compliance issues, published regularly in The Joint Commission Perspective® (available for subscription and provided free to all accredited organizations). Also check any issues highlighted in Sentinel Event Alerts, which are available on the Joint Commission web site, at http://www.jointcommission.org/sentinel_event.aspx. Address compliance issues that are also problem prone in your organization. Be especially mindful to note if any of these top compliance issues are also FSA risk-related. JCI International organizations can request top compliance issues from this address: JCAccreditation@jcrinc.com.

- **Review what is new:** Address any new Joint Commission or JCI standards that relate to your organization. New standards and requirements are highlighted in the print version (although not in the spiral-bound book version) of the most recent update of the Comprehensive Accreditation Manual for your program. Check “New/Changed EPs” in the E-dition. Also focus on any new equipment or new programs or services in your organization. Consider mock tracers that will allow opportunities to evaluate newly implemented or controversial or problematic organization policies and procedures and how consistently they are being followed.

- **Start with the subject:** Look at typical tracers from any past surveys and choose several common or relevant examples for the types of tracers defined in the Introduction to this workbook. Or, if your organization has never had a survey, consider the guidelines described in the sidebar “Choosing Tracer Subjects” on pages 5–6.

- **Cover the highs and lows:** Focus on high-volume/high-risk and low-volume/high-risk areas and activities. Ask questions about demographics for those areas or activities to help determine whether care, treatment, or services are targeted to a particular age group or diagnostic/condition category. Then pick corresponding tracer subjects.

- **Target time-sensitive tasks:** Look at time-sensitive tasks, such frequency of staff performance evaluations, critical result reporting, and the signing, dating, and timing of physician orders, including whether they are present and complete. These are often challenging compliance areas.

- **Examine vulnerable population(s):** Review the risks in serving particularly vulnerable, fragile, or unstable populations in your organization. Select tracer subjects (care recipients,
systems, or processes) that might reveal possible failing outcomes. Address related processes of care, treatment, or services that are investigational, new, or otherwise especially risky.

Step 3: Choose Those Playing the Roles of Surveyors

If your goal is to conduct more than one mock tracer, either concurrently or sequentially, you will want to develop a mock tracer team. Careful selection of those playing the roles of surveyors is critical. A general guide for a mock tracer team is to follow the number and configuration of your last Joint Commission or JCI survey team (see the sidebar “Tracers at a Glance” on pages 1–2). However, you might want to involve more people or have multiple mock tracer teams; try to allow as many people as possible to be exposed to the tracer process and to learn more about the surveyors’ angle on the process. If your organization has not had a survey yet, aim for five to eight team members, or select one team member for each department/program/service in your organization plus one for each type of system tracer and one for the environment of care. Consider the following when choosing those who will play the roles of surveyors:

- **Include administrators:** Administrators, managers, and other leadership should be not only supportive of mock tracers but also involved. Include at least one administrator or manager on the team. Include executive-level leaders in the early stages to provide input and model team leadership. Also, staff may need time off from their regular duties to participate in various phases of a mock tracer, so team members should be sure to get the approval of their managers.

- **Select quality-focused communicators:** Sharp, focused professionals with excellent communication skills are needed to play the roles of surveyors. Recruit people who are observant, detail oriented, and committed to quality and professionalism. Those playing the roles of surveyors should be articulate, polite, personable, and able to write clearly and succinctly. They should be comfortable talking to frontline staff, administrators, and care recipients and families.

- **Draw from committees:** Often the best choices for those who will play the roles of surveyors have already been identified and serve on various committees in your organization. Draw from committee members to find top-notch candidates.

- **Don’t forget physicians:** Because they are a critical part of any health care organization, physicians should be involved in mock tracers—and not always just as interview subjects.

Choosing Tracer Subjects

**Individual tracers:** For individual mock tracers, adopt the way actual surveyors choose care recipients. In U.S. health care organizations, select them based on criteria such as (1) whether their experience of care, treatment, or services allows the surveyor to access as many areas of the organization as possible; (2) whether they qualify under the criteria for any accreditation program–specific tracer topic areas; or (3) whether they move between and receive care, treatment, or services in multiple programs, sites, or levels of care within your organization. Also, consider tracing care recipients who have been recently admitted or who are due for discharge. In international organizations, use information provided in your organization’s accreditation survey application to select tracer care recipients from an active list that shows who has received multiple or complex services.

**System tracers:** Care recipients selected for tracing a system typically reflect those who present opportunities to explore both the routine processes and potential challenges to the system. For example, to evaluate medication management systems, select care recipients who have complex medication regimens, who are receiving high-alert medications, or who have had an adverse drug reaction. To evaluate infection control, select someone who is isolated or who is under contact precautions due to an existing infection or compromised immunity. These same care recipients could be the subjects for data management system tracers, as each might be included in performance measurement activities such as infection control surveillance or adverse drug-reaction monitoring data. In international organizations, data system tracers are called “improvement in quality and patient safety” tracers and are not individual based.

**Program-specific tracers:** The focus for these tracers may include programs such as foster care, patient flow, continuity of care, fall reduction, and suicide prevention. For example, to evaluate a
Recruit physicians to perform the roles of surveyors. This angle of participation will not only allow them to apply their expertise and experience but will also allow them to add to that expertise and experience.

**Environment of care tracers:** Subjects for an EC mock tracer may include systems and processes for safety, security, hazardous materials and waste, fire safety, utilities, and medical equipment. For example, an EC mock tracer might examine the security in the neonatal intensive care unit, the safety of hazardous materials that enter through the loading dock, or the installation of and maintenance for new medical equipment. Be sure also to include emergency management and life safety issues as topics for mock tracers. In international organizations, EC is referred to as “facility management and safety.”

**Second generation tracers:** Subjects for second generation tracers grow naturally out of tracers involving high-risk areas because this type of tracer is a deeper and more detailed exploration of the tracer subject. Areas subject to second generation tracers include cleaning, disinfection, and sterilization (CDS); patient flow across care continuum; contracted services; diagnostic imaging; and ongoing professional practice evaluation (OPPE)/focused professional practice evaluation (FPPE).

- **Draft from HR, IM, and other departments or services:** Those playing the roles of surveyors may also be drafted from among the staff and managers of nonclinical departments, including human resources (HR) and information management (IM). Housekeeping and maintenance staff are often valuable as “surveyors” for their unique perspective of daily operations.

**Step 4: Train Those Playing the Roles of Surveyors**

All staff trained to portray surveyors need to have both an overview and more detailed knowledge of tracers as part of their training. Even those who have been through a survey need training to play the role of a surveyor. Those who will be acting as surveyors should do the following as part of their training:

- **Get an overview:** Take some time to learn the basics of tracers. The Introduction to this workbook provides a good overview. As a next step, read the *Survey Activity Guide* for your program, which is posted on the web site for The Joint Commission and on *Joint Commission Connect*. The guide explains what surveyors do in each part of the different types of tracers. In international organizations applying for accreditation and are also for sale on the JCI web site.

- **Learn the standards:** Challenging as it may be, it is essential that those who are playing surveyors become familiar with current Joint Commission requirements related to the targeted tracer. They must gain a solid understanding of the related standards, National Patient Safety Goals, and Accreditation Participation Requirements. To learn about changes and updates to Joint Commission standards and how to interpret and apply them, they should read the monthly newsletter *Joint Commission Perspectives* (available for subscription and provided free to all domestic accredited organizations). Be particularly careful to give those who are playing surveyors sufficient time to learn the standards for the department or area in which they will conduct a mock tracer. At least one month is advised (see the sidebar “Mock Tracer Checklist and Timeline” on page 3). International organizations should be familiar with JCI standards and International Patient Safety Goals, as outlined in the current relevant JCI accreditation manual. Updates, tips, and more are provided free via the online periodical *JCInsight*.

- **Welcome experience:** Staff and leaders who have been through a tracer can be valuable resources. Invite them to speak to the tracer team about their experiences with tracers and with surveys in general.

- **Examine closed medical records:** Closed medical records are an excellent practice tool for individual tracers and individual-based system tracers. Examine closed (but recent) records and then brainstorm the types of observations, document review, and questions that a surveyor might use to trace the subject of the record.
• **Study mock tracer scenarios:** Tracer scenarios, like those in the tracer workbooks available from Joint Commission Resources, will help familiarize team members with the general flow of a tracer as well as the specific and unique nature of most tracers. The questions that follow each tracer scenario in these workbooks can be used to populate a form for a mock tracer on a similar subject in your organization.

• **Practice interviewing:** Since a large part of a tracer is spent in conversation, people who are filling the roles of surveyors should practice interviewing each other. Although these people should already be good communicators, a review of common interview techniques may be helpful (see the sidebar “Interviewing Techniques” at right).

### Conducting and Evaluating the Mock Tracer

#### Step 5: Assign the Mock Tracer

A mock tracer team may have one member play the roles of surveyor in a specific mock tracer, or the team members may take turns playing the role during the tracer. With repeated mock tracers, every team member should have the opportunity to play a surveyor. Consider these options when assigning role-playing surveyors to mock tracers:

• **Match the expert to the subject:** Match a “surveyor” who is an expert in a department/program/service to a mock tracer for a similar department/program/service—but for objectivity, do not assign them to the same specific department/program/service in which they work.

• **Mismatch the expert to the subject:** Match a “surveyor” to a department/program/service that is new to him or her. This may enhance the objective perspective. Of course, that person will have to prepare in advance to become familiar with the requirements for that new department/program/service.

• **Pair up or monitor:** Pair “surveyors” so they can learn from and support each other, or allow one “surveyor” to follow and monitor the other for additional experience. One of those in the pair might be the mock tracer team leader.

#### Step 6: Conduct the Mock Tracer

All departments/programs/services in your organization should already have been notified about the possibility of staff conducting mock tracers. Unless mock tracers are announced, however, there is no need to notify interview subjects when the tracer is scheduled to occur. During the mock tracer, team members should do the following:

• **Collect data:** Like real surveyors, those playing the roles of surveyors must collect data that help to establish whether your organization is in compliance with applicable accreditation requirements. They should do this by taking notes on their observations, conversations, and review of documents. Notes may be entered on an electronic form (using a laptop computer) or on a paper form.

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**Interviewing Techniques**

- Take your time. Speak slowly and carefully.
- To help set the interview subject at ease, try mirroring: Adjust your volume, tone, and pace to match those of the person to whom you are speaking. (If the subject is nervous or defensive, however, use a quiet and calm approach to encourage that person to match your example.)
- Use “I” statements (“I think,” “I see”) to avoid appearing to challenge or blame the interview subject.
- Ask open-ended questions (to avoid “yes/no” answers).
- Pause before responding to a subject’s answer to wait for more information.
- Listen attentively, gesturing to show you understand.
- Listen actively, restating the subject’s words as necessary for clarification.
- Manage your reactions to difficult situations and avoid using a confrontational tone, even if your subject sets such a tone. Take a deep breath and wait at least three seconds before responding.
- Always thank your interview subject for his or her time and information.
• **Be methodical and detail oriented:** To help establish and simulate an actual tracer, those portraying surveyors should strive to be as methodical and detail oriented as actual surveyors. The following techniques may be useful:

  ◦ Map a route through the mock tracer, showing who will be interviewed in each area. It is helpful to interview the person who actually performed the function targeted by the tracer, but any person who performs the same function can be interviewed.

  ◦ Identify who will be interviewed in each area, using specific names (if staffing schedules are available) or general staff titles. For example, if you have singled out a particular care recipient to trace, identify which staff members cared for that care recipient. Of course, this may not be possible to do because staff to be interviewed may depend on what is found in the targeted area, where the care recipient travels within the organization, and what procedures are performed.

  ◦ Note the approximate amount of time to be spent in each department/program/service. That will help keep the tracer on schedule. Notwithstanding any tentative scheduling of the tracer, however, you may uncover unexpected findings that will necessitate either spending more time in a particular location or going to locations that were unforeseen at the time the tracer started. Flexibility is a key attribute of a good surveyor doing tracers.

  ◦ Take notes on a form, worksheet, or chart developed by the team for the purpose of the mock tracer.

  ◦ Surveyors are directed to be observant about EC issues. Some EC issues may be photographed for the record, provided that no care recipients are included in the photos.

• **Share the purpose:** Whenever possible, remind tracer interview subjects of the purpose of tracers and mock tracers: to learn how well a process or system is functioning (not to punish a particular staff member or department/program/service).

• **Maintain focus:** Keep the process on track and continually make connections to the broader issues affecting care recipient safety and delivery of care, treatment, or services.

• **Be flexible and productive:** If a person playing the role of a surveyor arrives in an area and has to wait for a particular interview subject, that time can be filled productively by interviewing other staff and making relevant observations and notes. If more than one mock tracer is scheduled for the same day—as in a real survey—“surveyors” may cross paths in an area. One “surveyor” should leave and return at a later time.

• **Address tracer problems:** Be prepared to identify and address any problems with the mock tracer process encountered during the mock tracer, including practical arrangements (such as the logistics of finding appropriate staff), department/program/service cooperation, team dynamics, and staying on schedule. Decide in advance whether to address such problems in an ad hoc fashion (as they are encountered) or as part of a debriefing after the mock tracer to prepare for subsequent mock tracers.

### Step 7: Debrief About the Mock Tracer Process

After each mock tracer, and particularly after the first few, meet as a team as soon as possible to evaluate and document how it went. (Note: This debriefing session should focus on the mock tracer process, not what the mock tracer revealed about your organization’s problems or issues. That will be done in Step 8: “Organize and Analyze the Results of the Mock Tracer”; see page 9.) You may choose to use one of the following approaches:

• **Hold an open forum:** An open forum should allow all team members to discuss anything about the tracer, such as methods, logistics, and conflict resolution. For a broader perspective, invite interview subjects from the mock tracer to participate.

• **Let each member present:** In a direct, focused approach, team members can present their feedback to the rest of the team, one at a time. Each person playing the role of a surveyor can be given a set amount of time to present, with questions to follow at the end of each presentation.

• **Fill out a feedback form:** Team members and mock tracer participants can complete a feedback form in which they record their impressions of the mock tracer and suggestions for improvement of the process. These can be vetted and then discussed at the next team meeting to plan for the next mock tracer.
Analyzing and Reporting the Results of the Mock Tracer

Step 8: Organize and Analyze the Results of the Mock Tracer

Conducting a mock tracer is not enough; the information gained from it must be organized and analyzed. The problems and issues revealed in the mock tracer must be reviewed, ranked, and prioritized. You might want to use one or more of the following suggested methods to do this:

- **File the forms:** If the mock tracer team used forms—either electronic or paper, those can be categorized for review. The forms might be categorized by types of problems/issues or by department/program/service.

- **Preview the data:** Those who played the roles of surveyors should be the first to review the data (notes) they collected during the mock tracer. They should check for and correct errors in the recording of information and highlight what they consider to be issues of special concern.

- **Rank and prioritize the problems:** The team, led by the team leader, must carefully evaluate all of the team's data. Critical issues or trends can be identified and then ranked by severity/urgency with regard to threats to life or safety, standards noncompliance, and violations of other policies. Prioritizing is the next step and will require considerations such as the following:

  - What is the threat to health or safety? What is the degree of threat posed by the problem—immediate, possible, or remote?

  - What is the compliance level? Is the problem completely out of compliance? That is, does the problem relate to a standard that always requires full compliance (that is, Category A standards) or one for which you may be scored partially compliant or insufficiently compliant (that is, Category C standards)?

  - What resources are required? How much staff time and resources will likely be needed to correct the problem? Depending on the threat to health or safety and compliance level, there may be a time limit imposed on how soon the problem must be corrected (for example, immediately or within 45 or 60 days).

Step 9: Report the Results of the Mock Tracer

An organization's reaction to a mock tracer will depend largely on the results of the mock tracer, including how—and how well—the results are reported. In all reports, it is important to avoid having the tracer appear punitive or like an inspection, so do not include staff names or other identifying information. Following are several ways to report results effectively:

- **Publish a formal report:** Compile all documents and carefully edit them. Determine which documents most clearly summarize the issues. Submit a copy of the report to the appropriate leadership.

- **Present as a panel:** Invite leadership to a panel presentation in which team members present the results of the tracer—by department/program/service or by other arrangement (for example, problems with staffing, infection control, handoff communication, or transitions in care, treatment, or services).

- **Call a conference:** Set up an internal conference event in which you present the results. They could be presented on paper, delivered by speakers from a podium, and/or delivered using audiovisual formats. Invite leadership and everyone who participated in the mock tracer. Keep the conference brief (no more than two hours), being considerate of attendees' time. Make the content easier to digest by color-coding the level of priority and using other keys to signal the types of problems and their severity. Open up the conference to feedback with breakout brainstorming sessions on how to address the problems.

- **Post for feedback:** Post the results on a secure organization intranet and ask for feedback and suggestions from participants and others in your organization. A bulletin board in the lunchroom works, too. After a week, remove the report and incorporate any new information to present to leadership.

- **Report in a timely way:** One goal of a mock tracer is survey preparedness via standards compliance, so addressing problems before a survey is vital. All reports should therefore be made within one month after completion of a mock tracer to allow plenty of time to correct compliance problems.

- **Accentuate the positive:** Remember to pass on positive feedback that comes to light during the mock tracer and data analysis. To encourage continued success as well as future positive interactions with the mock tracer process, reward or acknowledge departments and individuals that participate or are especially cooperative and responsive.
Applying the Results of the Mock Tracer

Step 10: Develop and Implement Improvement Plans

Your reports should indicate which problems must be addressed immediately and which can wait, which require minimal effort to correct and which require extensive effort. Employ one or more of the following improvement plan approaches to help address corrective actions:

• **Hand off to managers:** Hand off any easily addressed corrective actions that are particular to one department/program/service to the relevant managers. Inform them of your estimates of time and resources necessary to address the problem. Offer to work with them on more complex corrective actions. Offer to repeat mock tracers to confirm findings.

• **Work with PI:** Most of what will need to be done will require integration into your organization’s PI program. Follow the required approach in addressing corrective actions.

• **Check your compliance measures:** Be sure to check which elements of performance (EPs) for a Joint Commission standard require a Measure of Success (MOS). These are marked with an 📌. At least one measure demonstrating the effectiveness of recommended changes should be included in the Plans of Action addressing compliance for those EPs with an 📌, and it must be included if the findings will be integrated into the FSA. JCI

There is no MOS for JCI standards. Standards are Fully Met, Partially Met, Not Met, or Not Applicable. JCI requests that a Strategic Improvement Plan (SIP) be developed by the organization for any Not Met standard(s)/measurable element(s) and/or International Patient Safety Goal(s) cited in the survey report when the organization meets the conditions for accreditation.

• **Share the plans:** Make sure the entire organization is aware of the corrective actions proposed as a result of the mock tracer. Cooperation and support during future mock tracers depend on awareness of their value and follow-through. Activities and results can be shared in internal newsletters or staff meetings.

• **Monitor the plans:** The mock tracer team is not responsible for completing all the corrective actions, but it is responsible for working toward that goal by monitoring any plans based on findings from the mock tracer. Give deadlines to heads of departments/programs/services and others involved in corrective actions (in accordance with any PI policies). Check regularly on progress and make reports to leadership and the PI program on progress and cooperation.

• **Prepare for the next round:** After a few mock tracers, most organizations discover the exponential value of such exercises. They then develop a mock tracer program that allows for periodic mock tracers, sometimes with several running at one time.