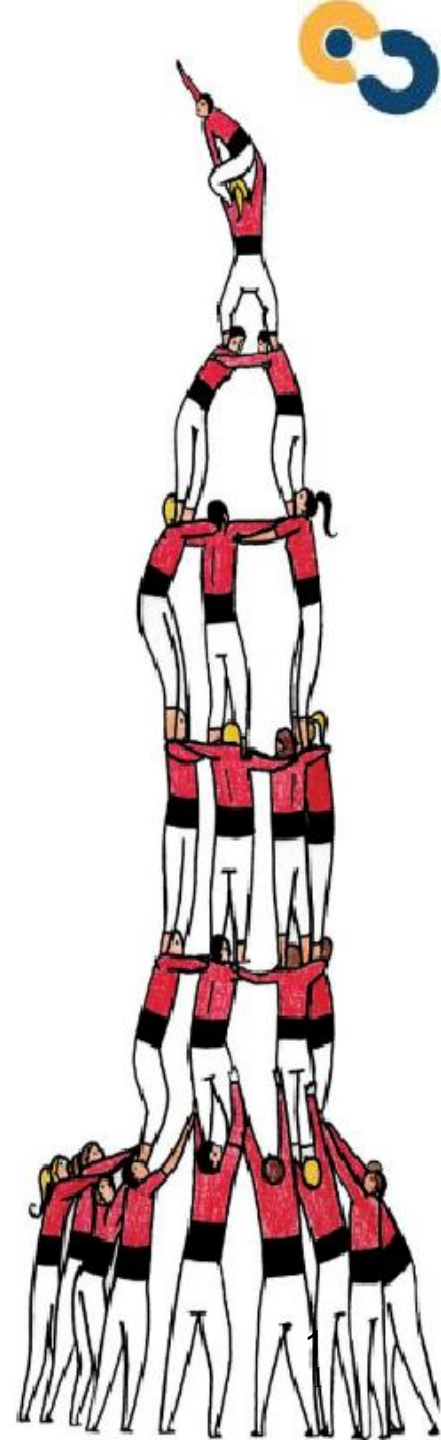


The JACIE Accreditation Process

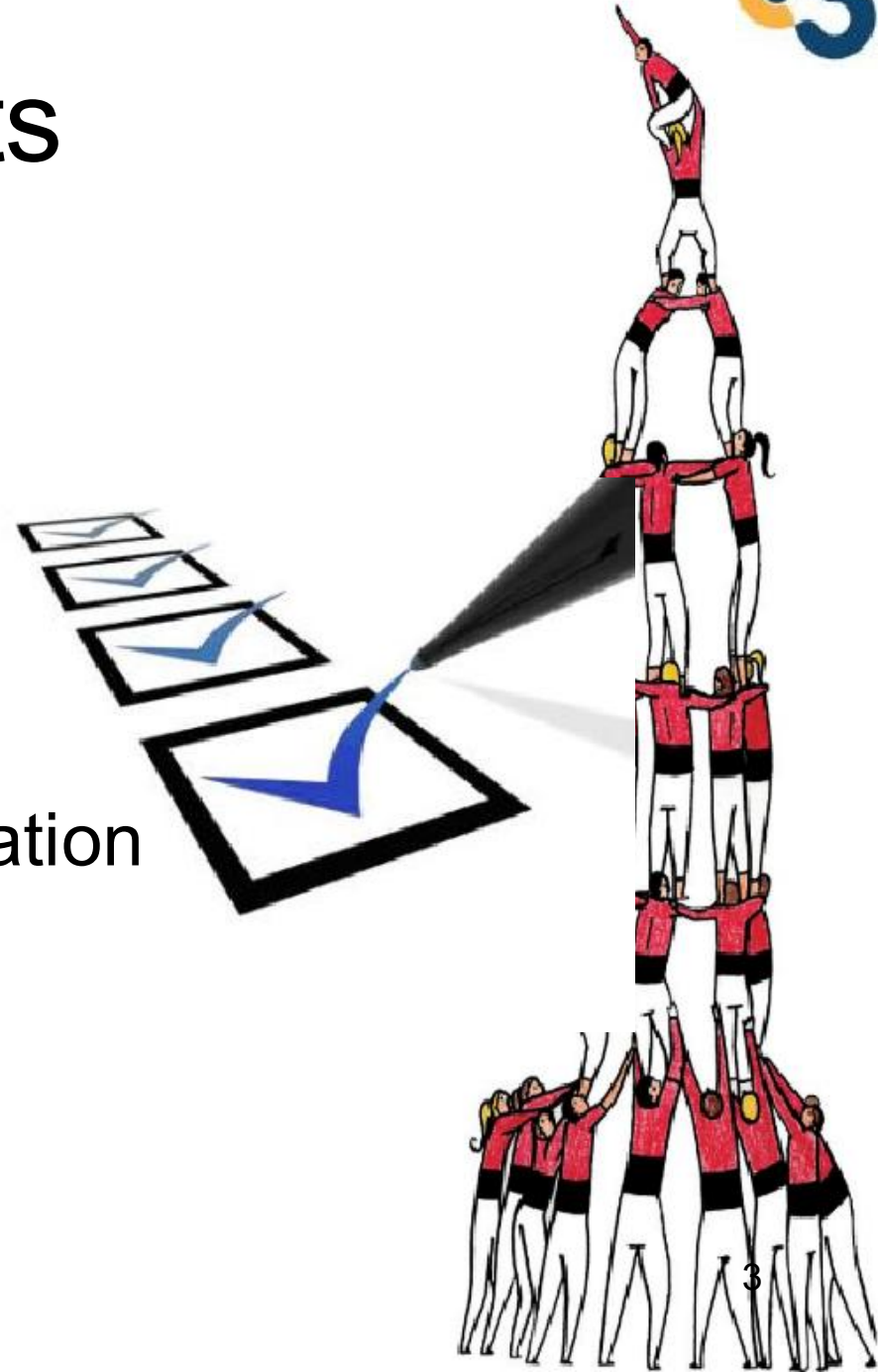
JACIE Office,
Barcelona, Spain



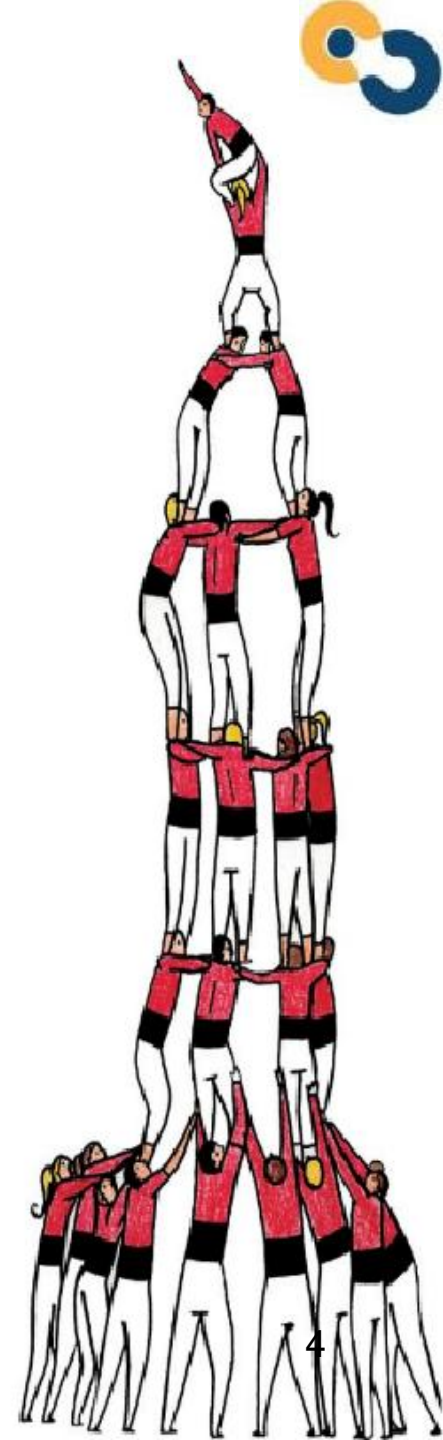


Contents

- Phases
- Preparation by the centre
- Application
- Inspection Checklist
- Pre-inspection documentation
- Inspection



Phases



Process

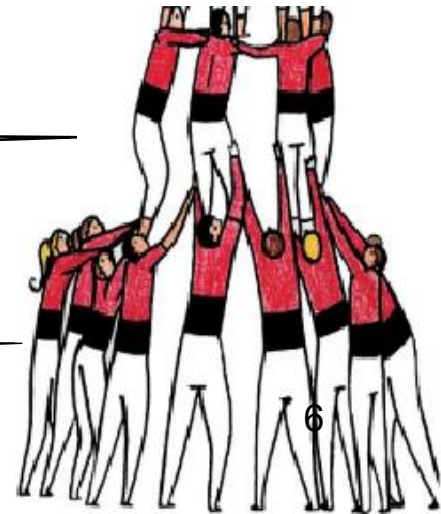
Decision to work according to the
Standards



Process

Preparations, working with quality

Decision to work according to the
Standards

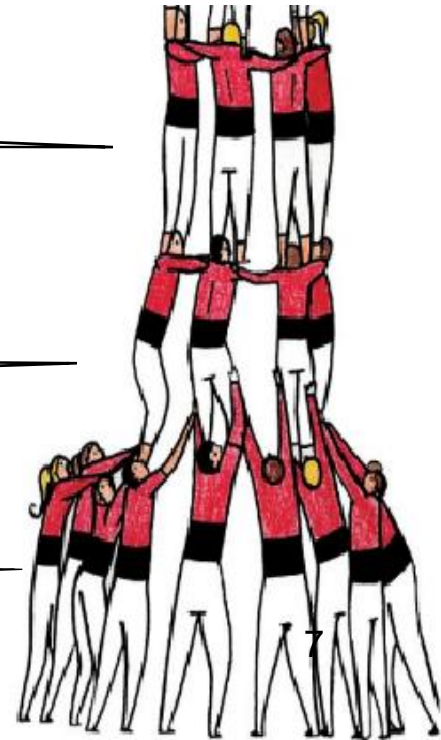


Process

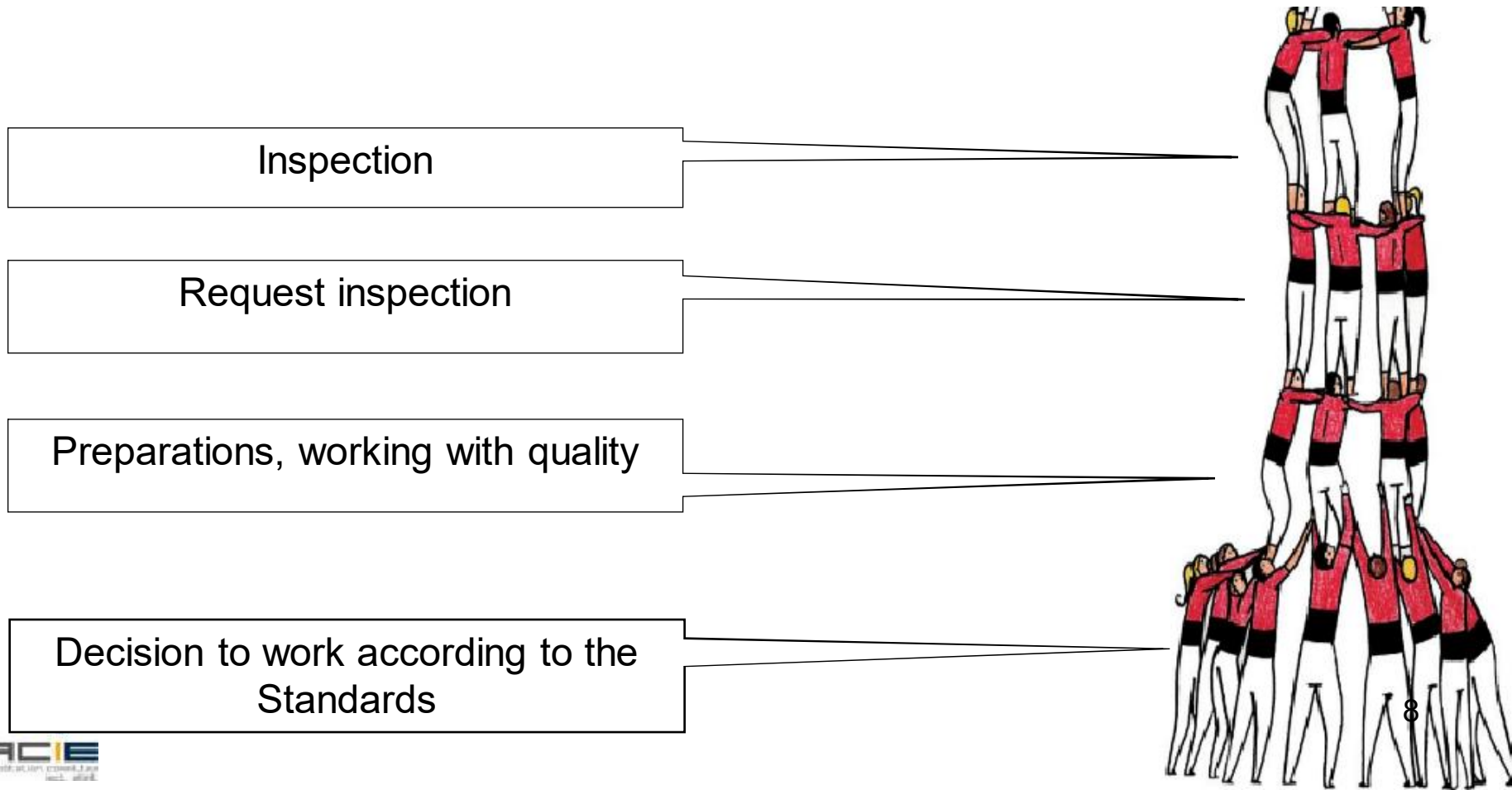
Request inspection

Preparations, working with quality

Decision to work according to the
Standards



Process



Process

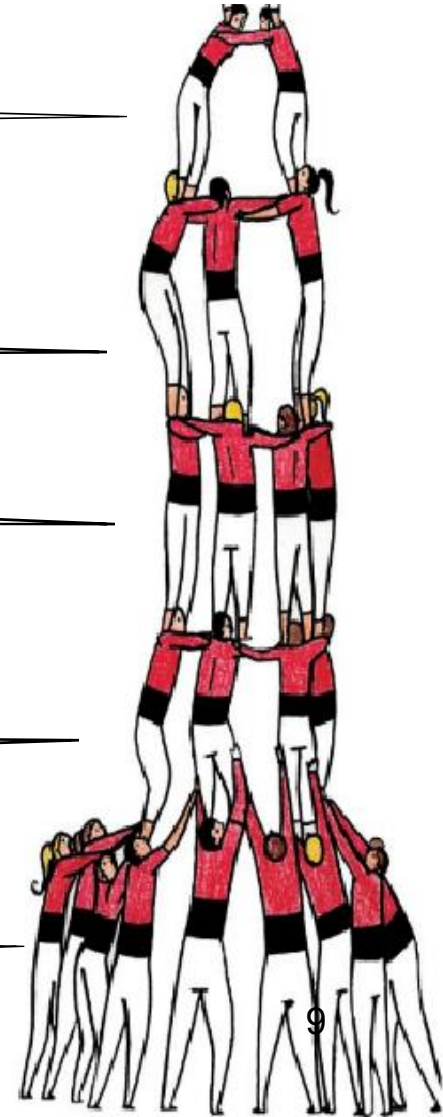
Corrections

Inspection

Request inspection

Preparations, working with quality

Decision to work according to the
Standards



Accreditation

Corrections

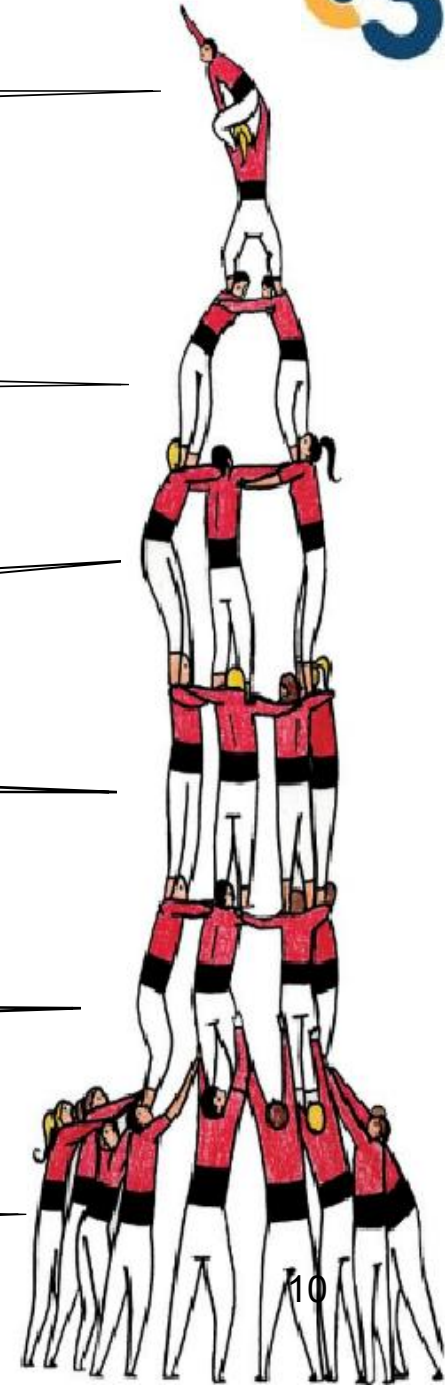
Inspection

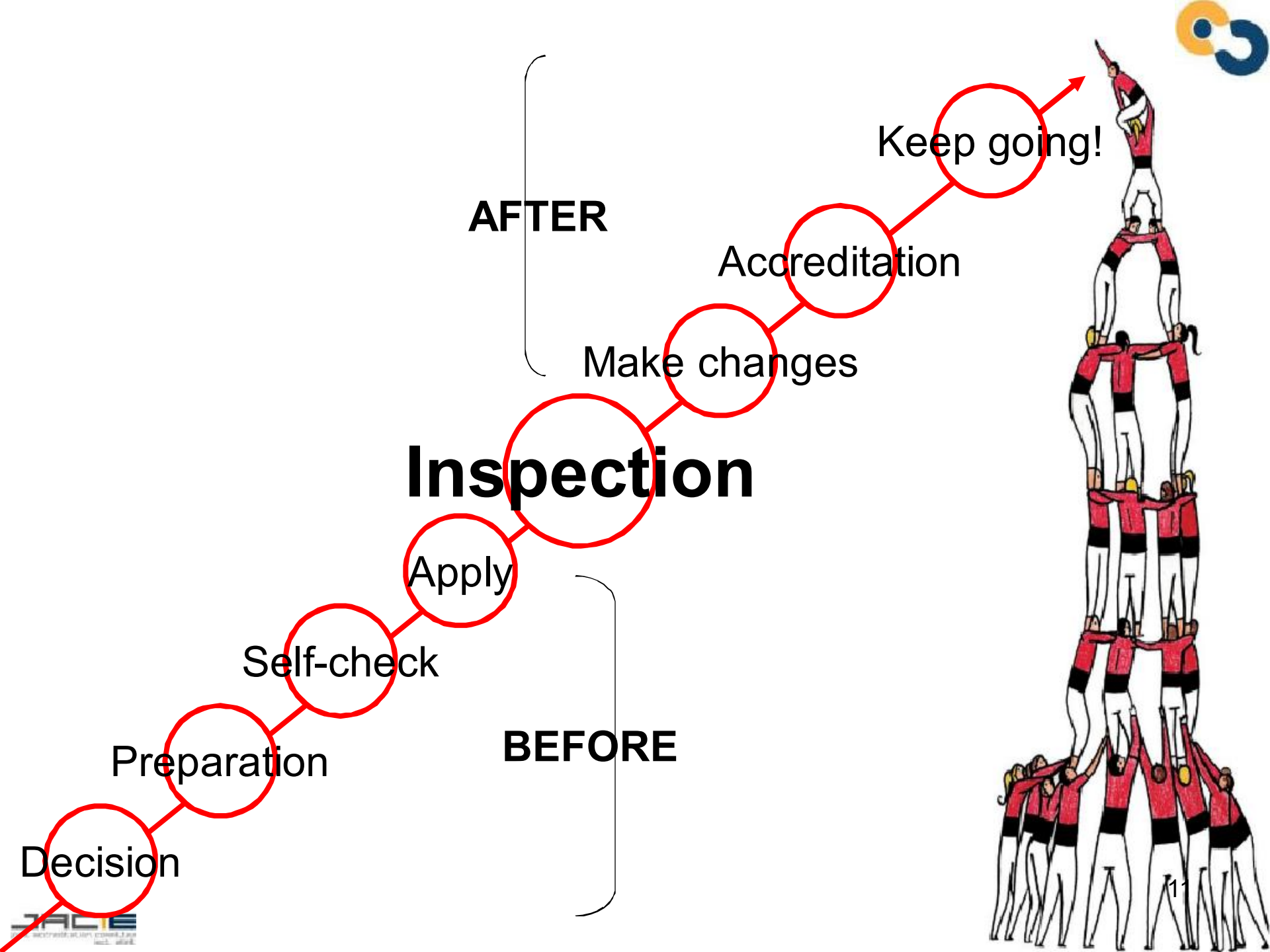
Request inspection

Preparations, working with quality

Decision to work according to the Standards

ESS





Preparation by the centre



- Create a Quality Management Group



- Write QM, SOPs Instructions



- Establish Indicators

- Perform Audits



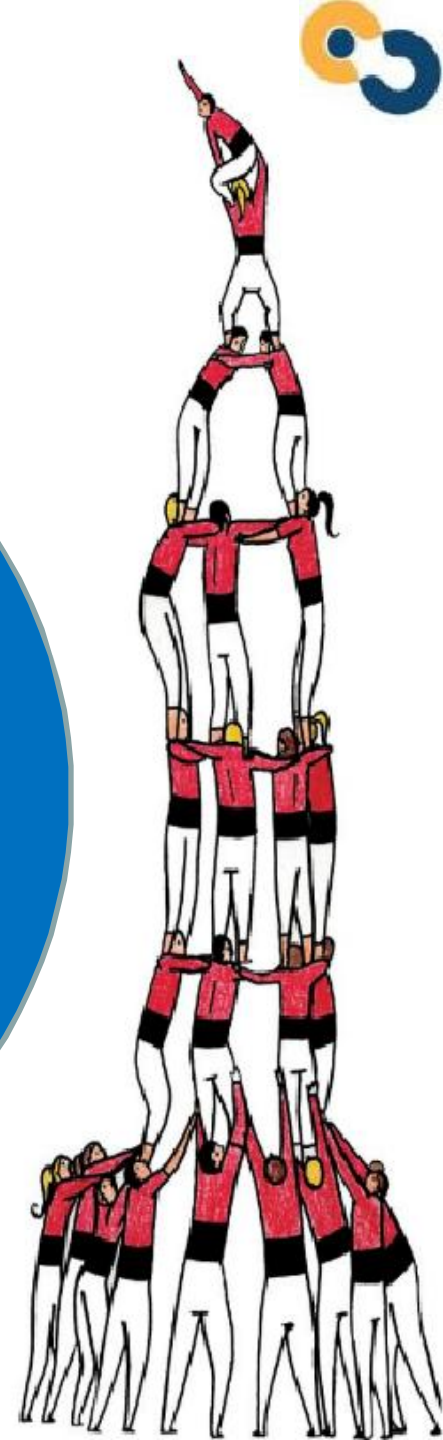
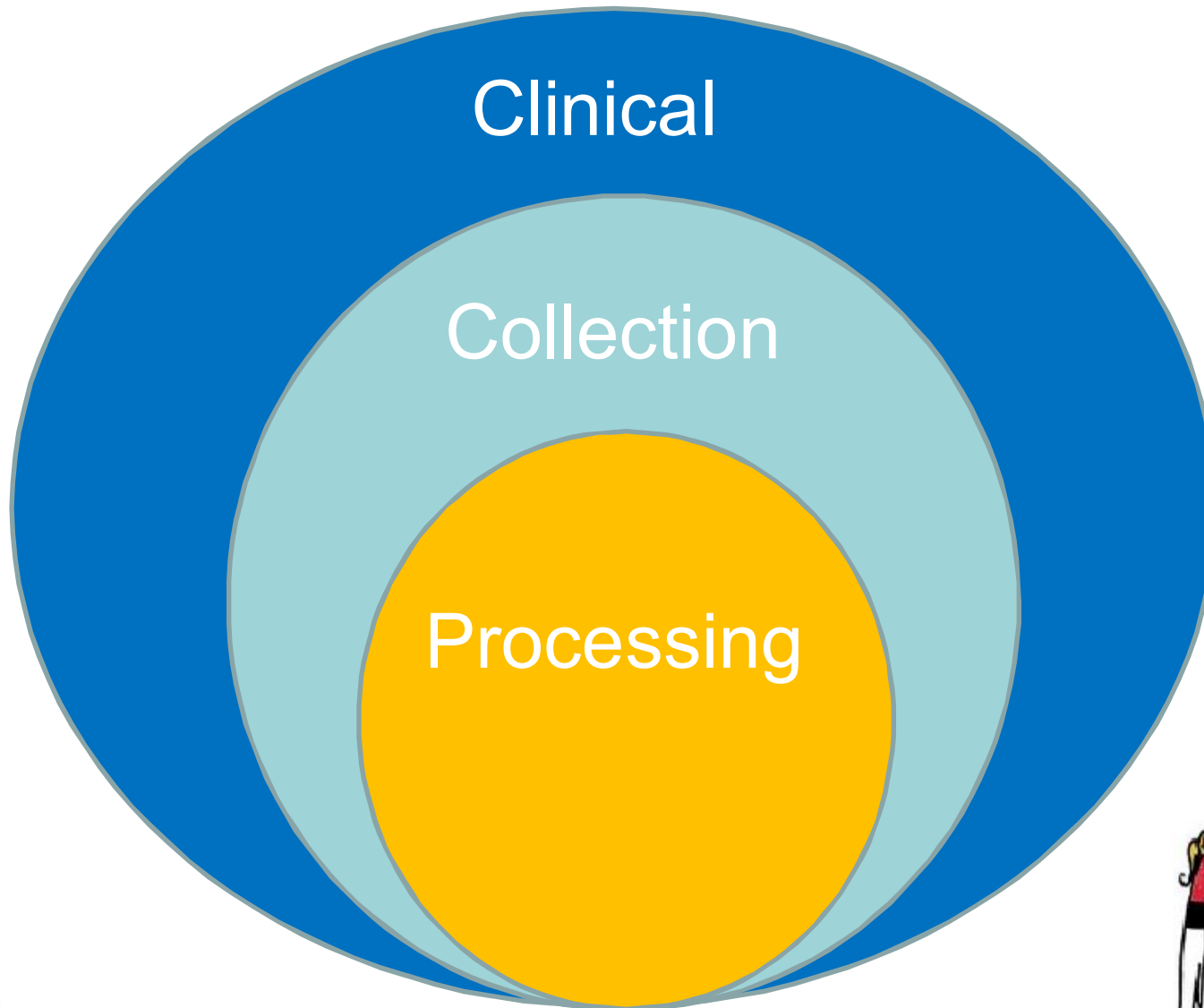
- Document Training



Remember to provide evidence



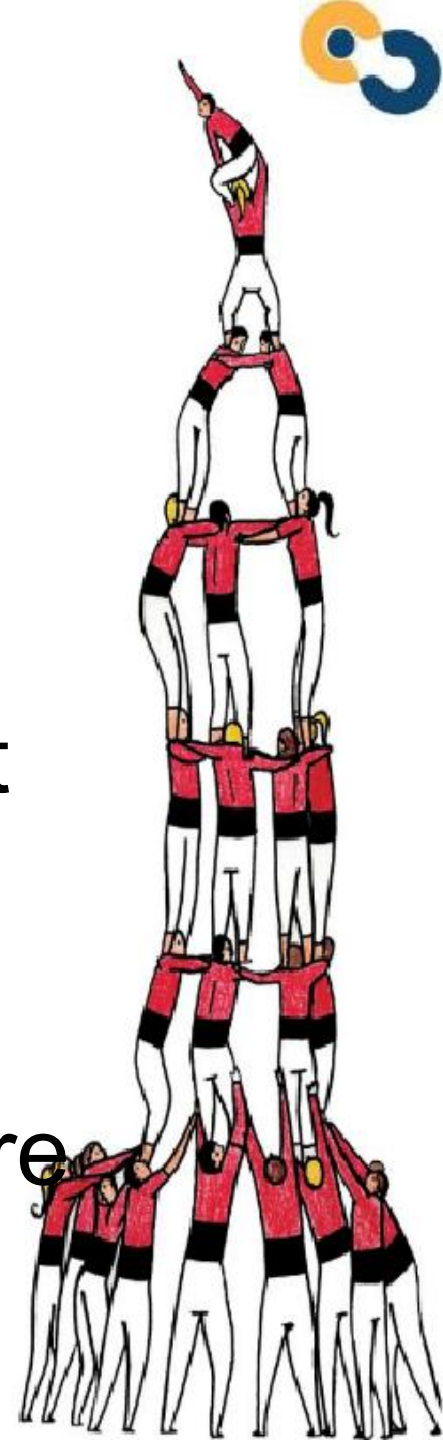
Accreditation

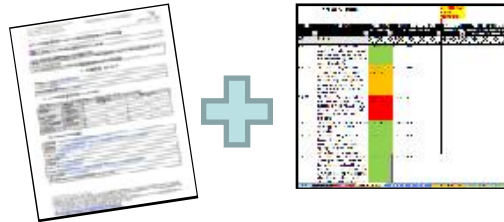


Application Form

The image shows a tilted view of the JACIE Application Form for Accreditation. The form is titled 'APPLICATION FOR FIRST-TIME ACCREDITATION JACIE-ACCREDITATION' and includes a section for 'GENERAL DETAILS'. Below this, there are sections for '1.1 Accreditation year' and '1.2 Incoming information'. The form also contains a table for 'Activities for which accreditation is requested' with columns for 'Activity', 'Type of activity', 'Frequency', 'Number of participants', and 'Number of staff'. The form is filled out with various details, including the name of the institution, the accreditation year, and the incoming information.

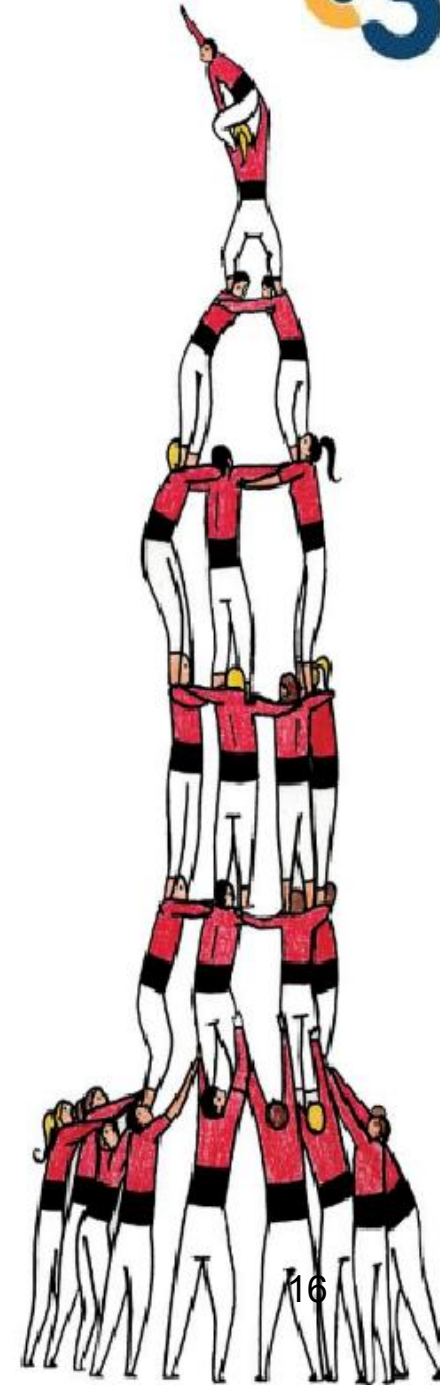
- Word Document
- JACIE Website/
Document Centre





Inspection Checklist

Part B: Clinical				Inspector's All items compliance?	Inspector's Comments (support your answers with additional information)
Ref.	Standard	Applicant's assessment	Source of evidence and explanatory text	Inspector's Assessment	
R-01	GENERAL				
D-01-01	The Clinical Program shall consist of an Interrelated medical team that includes a Clinical Program Director(s) housed in a defined location(s).	Compliant	no evidence		
D-01-02	The Clinical Program shall demonstrate common staff training, protocols, procedures, quality management systems, clinical outcome analysis and regular interaction among all clinical sites.	Partially compliant	no evidence		
F-01-01	The Clinical Program shall use call collection and processing facilities that meet FACT/JC-01 Standards with respect to their interactions with the Clinical Program.	Non-compliant	no evidence		
D-01-03	The Clinical Program shall abide by all applicable laws and regulations.	Compliant	no evidence		
E-01-02.01	The Clinical Program shall be licensed, registered, or accredited as required by the appropriate governmental authority for the services.	Compliant	no evidence		
D-01-04	The Clinical Program shall have a designated transplant team. This includes a Clinical Program Director, a Quality Manager, and a minimum of one (1) additional attending transplant physician. The designated transplant team	Compliant	no evidence		

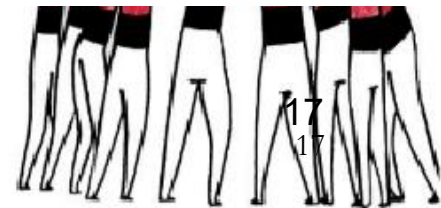
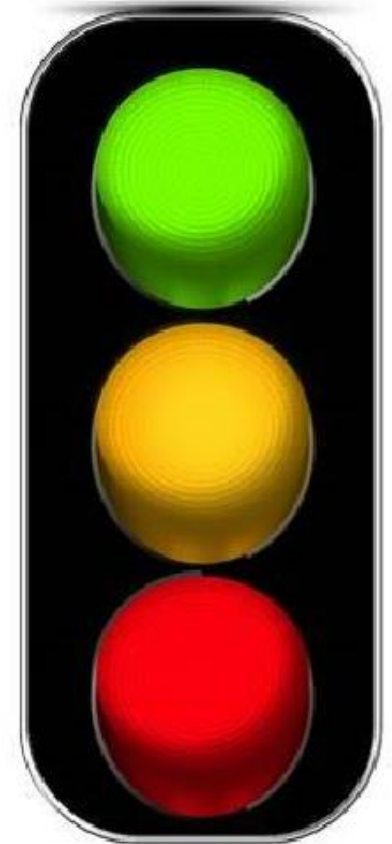


Inspection Checklist



- Based on Traffic Light system

- Compliant →
- Partially Compliant →
- Non-compliant →
- Not Applicable (N/A)





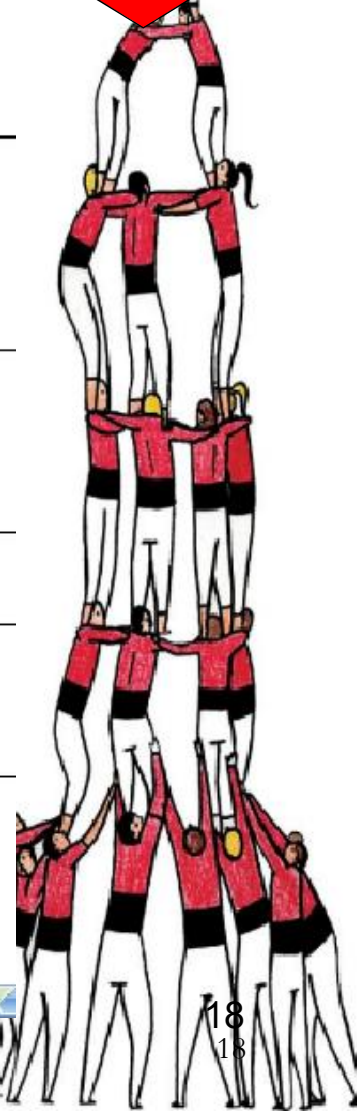
Part B: Clinical

Inspector: All items compliant?

No

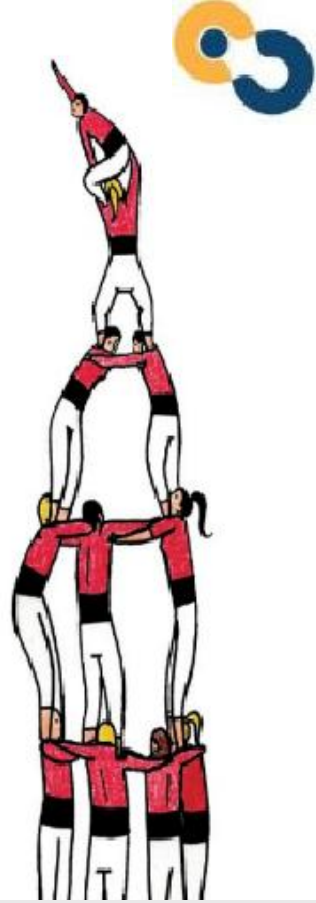
Ref.	Standard	Applicant's assessment	Source of evidence and explanatory text	Inspector's Assessment	Inspector's Comments (support your answers with additional information)
B.01	GENERAL	BLANK CELL	BLANK CELL	BLANK CELL	BLANK CELL
B.01.01	The Clinical Program shall consist of an integrated medical team that includes a Clinical Program Director(s) housed in a defined location(s).	Compliant	No evidence		
B.01.01.01	The Clinical Program shall demonstrate common staff training, protocols, procedures, quality management systems, clinical outcome analysis, and regular interaction among all clinical sites.	Partially compliant	No evidence		
B.01.02	The Clinical Program shall use cell collection and processing facilities that meet FACT-JACIE Standards with respect to their interactions with the Clinical Program.	Non-compliant	No evidence		
B.01.03	The Clinical Program shall abide by all applicable laws and regulations.	Compliant	No evidence		
B.01.03.01	The Clinical Program shall be licensed, registered, or accredited as required by the appropriate governmental authorities for the activities	Compliant	No evidence		
B.01.04	The Clinical Program shall have a designated transplant team that includes a Clinical Program Director, a Quality Manager, and a minimum of one (1) additional attending transplant physician. The designated transplant team	Compliant	No evidence		

Inspector's comments



Accreditation Agreement

- Approval of application
- Quotation
- **2 Weeks** to submit the JACIE Accreditation Agreement Signed



Submit documentation before inspection



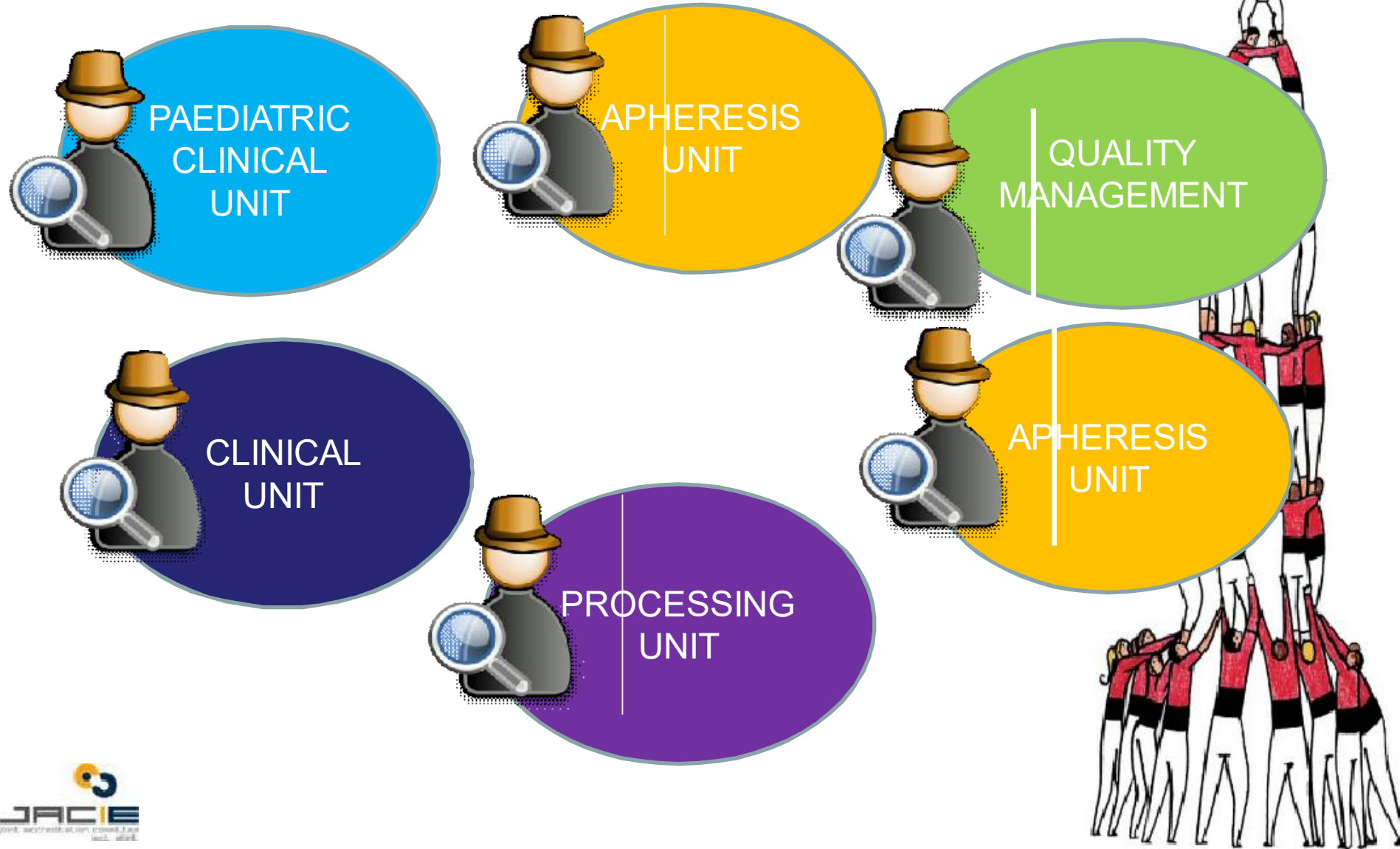
- **30 days** to submit documentation
- Labels
- List of SOPs
- Donor / patient consent information
- Evidence of audits performed....



Documentation in the
language of the Centre



Inspection Team



Inspection Team



- Language of the centre
- Language facilitator can be added to the team

- Centre is invited to look at the JACIE list of inspectors, public in JACIE website
 - Centre & Inspector shall inform of potential conflicts of interest



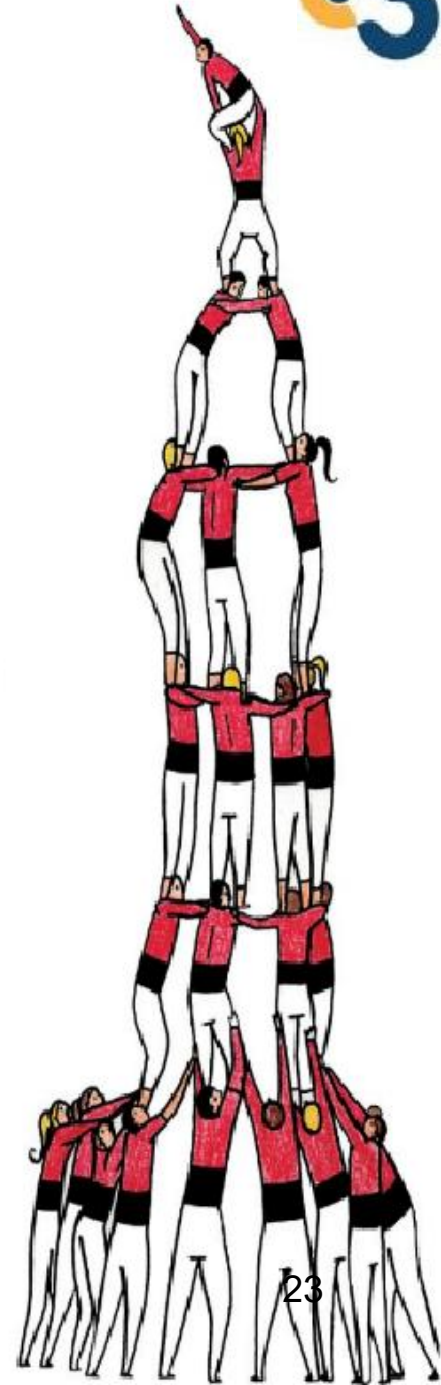


Inspection Team

- 1 team leader

In addition, possible inclusion of:

- Observer e.g. JACIE National Representative, regulatory agency
- Trainee



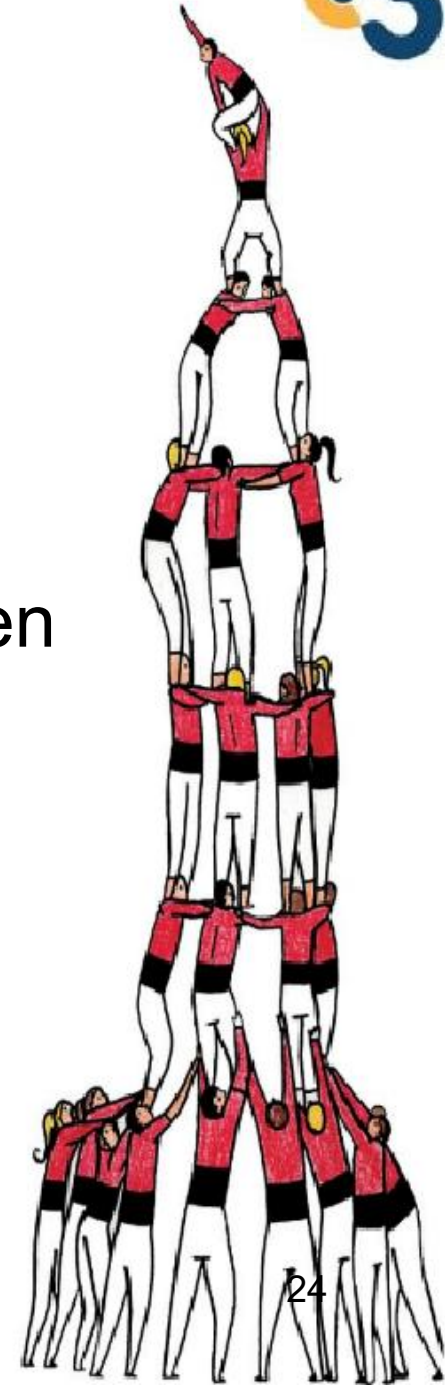
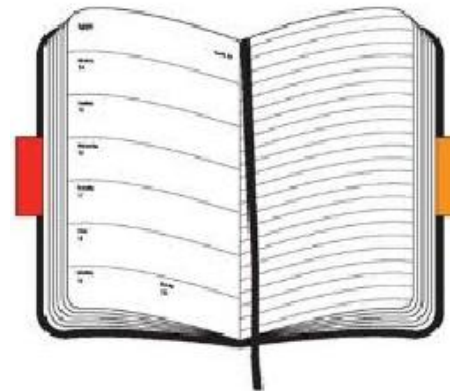
Team Leader

- Usually Clinician

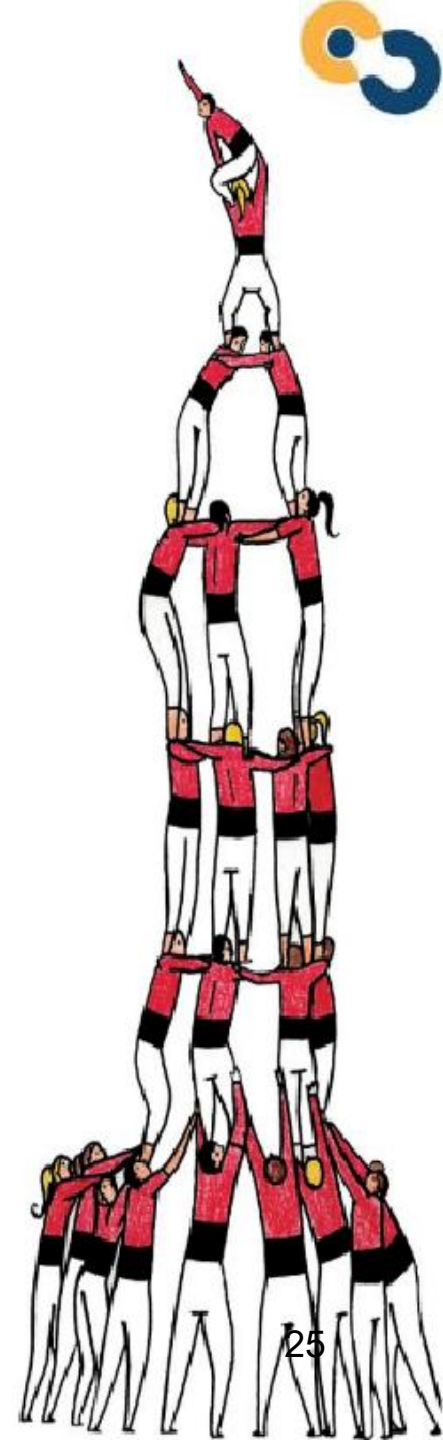


- Point of contact between Team, Centre and JACIE Office

- Arranges timetable with programme director

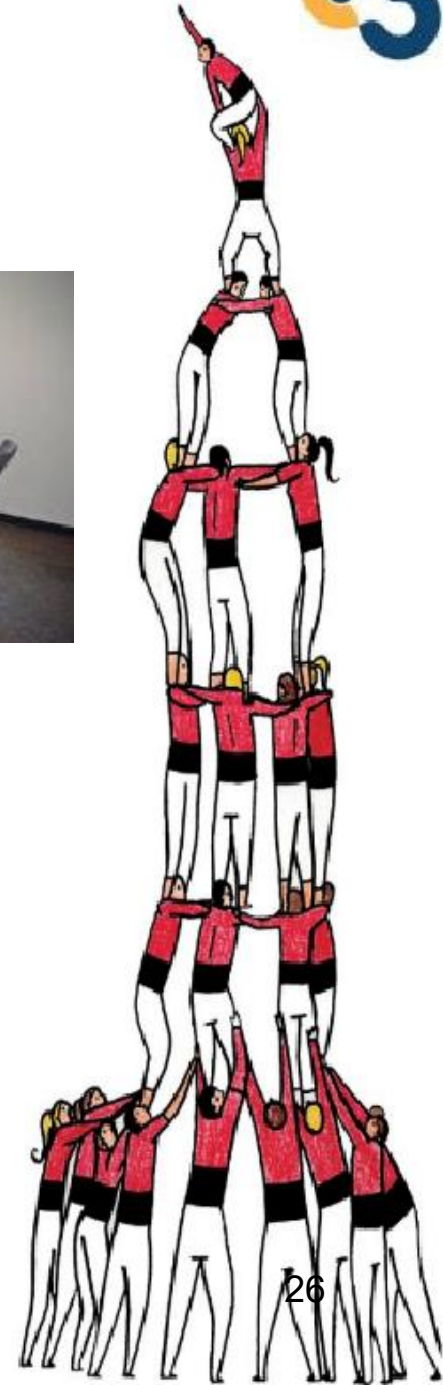


Inspection: Preparation





Applicant: Preparation



Inspector: Preparation

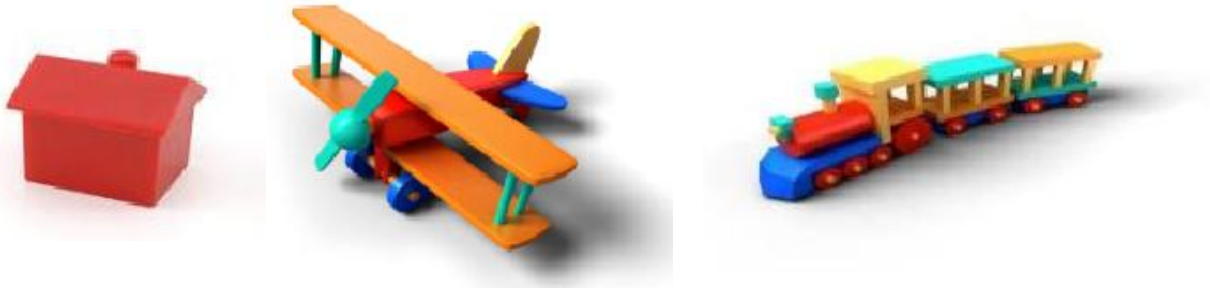


Part B: Clinical

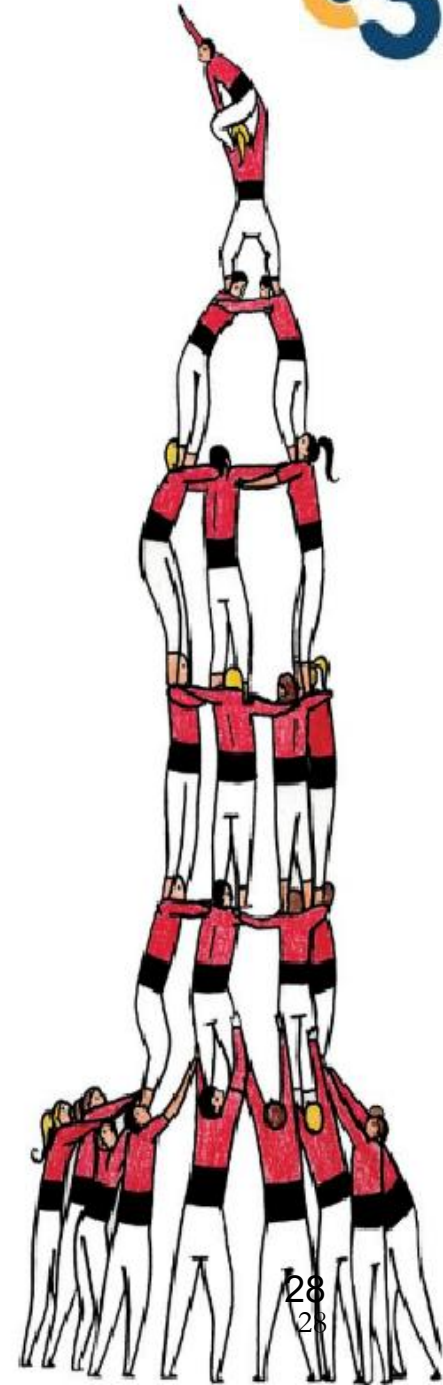
Ref	Criteria	Applicable environment	Overall compliance	Inspector's comments
REF 1	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 2	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 3	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 4	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 5	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 6	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 7	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	
REF 8	The Clinical Practice should ensure that all staff are aware of the current clinical practice and are able to access the necessary resources.	Compliant	100%	



Travel & Hotel



- Inspectors make travel arrangements with JACIE Travel Agency
 - No big payments in advance for the inspector - JACIE pays directly
 - *Per diem* allowance €80





Time-Line



Application

JACIE

Agreement

Pre-audit
documentation
Submission

Inspection

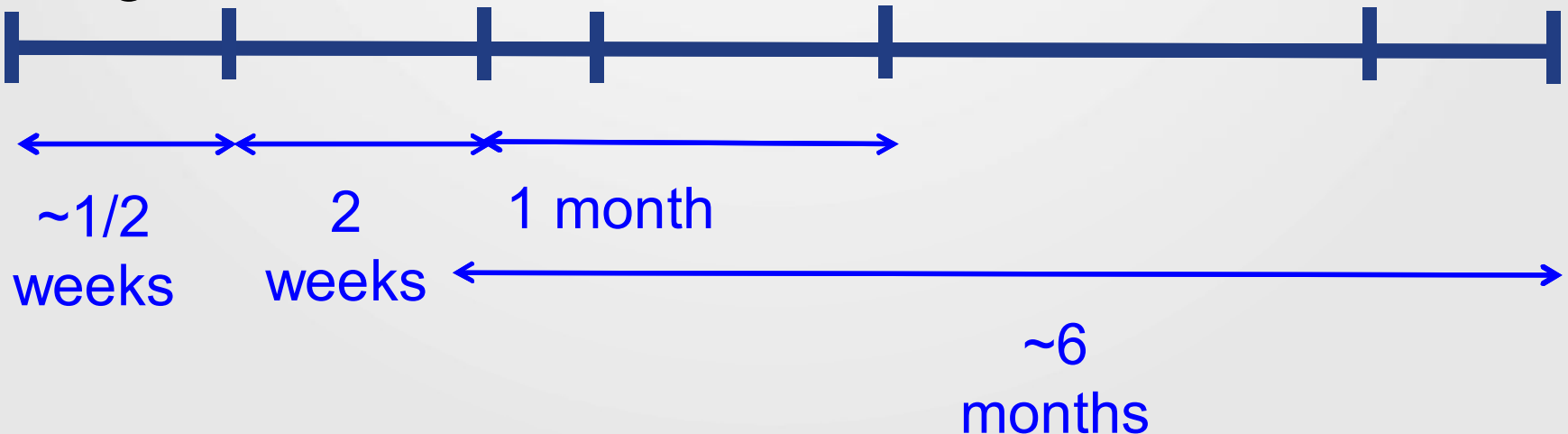
Approval
Quotation
JACIE

Signed

Invitation

Teleconference

Agreement



- Thank you for listening
- Any questions?

