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**CCAPS:
COMISS Commission for the
Accreditation of Chaplaincy Services**

Accreditation Process Summary
Revised 2022

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INTRODUCTION:

The responsibility of the CCAPS (COMISS Commission for Accreditation of Chaplaincy Services) is to assess and evaluate the quality of Chaplaincy services to patients, clients, families, and employees of an organization. Accreditation of an organization's chaplaincy services (CCAPS Traditionally accredits and organization, not the chaplaincy services) by CCAPS is a voluntary procedure for consultation and evaluation of the organization. CCAPS will examine the ability of an organization to meet the Standards for Accreditation of Chaplaincy Services approved by the COMISS Network.

THE COMMISSION: See COMISS Network Guidelines (current)

ACCREDITATION PROCESS:

The accreditation process has three phases:

- I. Assessment And Evaluation (A & E)
- II. Accreditation (A)
- III. Periodic Accreditation Review (PAR)

The accreditation process begins with a letter and the completion of a formal application under the signature of the CEO and the submission of the appropriate fee. The letter is addressed to the Chair of CCAPS.

I. ASSESSMENT AND EVALUATION (A&E) CONSULTATION

An Assessment and Evaluation Consultation is designed to assist an organization's chaplaincy (spiritual care/pastoral care) program to meet current CCAPS Standards. Members of a CCAPS team perform the major evaluative work through document review and a site visit.

The organization must submit the following Self-Assessment Self-Study materials:

1. A response to each and all CCAPS Standards using the format of the Standards document.
2. Chaplaincy services goals and outcomes/objectives for the last five years.
3. Chaplaincy services budget for the last five years.
4. Job descriptions and curricula vitae for all chaplaincy (spiritual care/pastoral care) current employees and job descriptions for any vacant positions.
5. A summary and raw data from surveys with
 - a. Nurses employed by organization
 - b. Physicians affiliated with organization
6. Description of the organization including a mission statement.
7. History of Chaplaincy services department including any previous accreditation documents.
8. Organizational chart of facility/organization and Chaplaincy services department.
9. Narrative description of Chaplaincy services program including Scope of Service and Scope of Practice documents.
10. A description of how the institution meets each and all CCAPS standards.
11. Description of Chaplaincy services evaluation program/process improvement program.
12. Chaplaincy services policies and procedures.
13. Any other information requested by CCAPS.

Site Visit (A&E). The Chair of CCAPS will name a site team chair and members of the site team sufficient for a comprehensive review not to exceed a total of three members. These individuals will be identified to the organization in advance of the site visit. A typical single organization site visit involves two-three accreditation team members/two days but may vary according to the size/complexity of the organization.

All materials should be sent to the CCAPS Chair and each site visitor at least two months prior to the date of the site visit. The one exception is that the raw data from the surveys in No. 5 may be given to the site visitors upon arrival.

The Chair of the site team will negotiate the site visit schedule with the facility for the site visit. The site visitors will generally meet with the following people: Chief Executive Officer; Administrative Officers responsible for Nursing, Education, Social Services, Medical Staff, Ethics Committee Chair; Chaplaincy services staff; designated ancillary personnel to be determined by site visit team; and other people as may be requested. The site visit will include a tour of the physical plant.

The purpose of the A&E site visit is to evaluate how well the organization meets the Standards and to offer consultation for the organization to address any deficiencies.

The site visit will conclude with an exit interview to provide an immediate verbal report of impressions and recommendations formulated at that time. A complete written report will be sent to the CEO and Director of Chaplaincy Services within one month of the site visit. This report will also be forwarded to the CCAPS team.

The site visit report will describe the findings of the site visitors. It will identify strengths and limitations of the organization in relation to its Chaplaincy services. It will also note areas of compliance, partial compliance, or non-compliance with the COMISS Network Standards.

The organization will respond to the report within four weeks of its receipt. Copies of the response will be sent by the organization to CCAPS Chair.

The site visit team will make a written recommendation to CCAPS and CCAPS will provide timely notification of its deliberations with the organization's CEO and Chaplaincy services director.

In those instances where an organization has significant work required to substantially meet the COMISS Network Standards, an accreditation review will be set to occur not more than two years from the date the organization is reviewed by CCAPS.

Organizations requesting consideration for the use of the A & E site visit to also serve as an Accreditation site visit should identify that request in advance. In such instances, action will be taken in accordance with the procedure for Accreditation site visits as outlined below.

In most cases an organization will receive Accreditation as a result of the A & E visit if the Chaplaincy services are clearly in compliance with the CCAPS Standards. In that case, the organization's next date for Periodic Accreditation Review of chaplaincy services shall be set for five years.

The fire-year periodic accreditation review is a standards and document review. At ten years following the initial accreditation a site visit will be required as a part of the periodic accreditation review.

II. ACCREDITATION

Centers embarking on the Accreditation Phase of the process should begin by sending a written request to the CCAPS office along with the appropriate fee no less than six months prior to an anticipated site visit date. This correspondence should be directed to the Chair of CCAPS.

In preparation for Accreditation, the organization shall prepare a Self-Assessment Self-Study Report. The report will include the following: (Refer to I. Assessment and Evaluation)

1. A response to each and all CCAPS Standards using the format of the Standards document.
2. Chaplaincy services goals and outcomes/objectives for the last five years.
3. Chaplaincy services budget for the last five years.
4. Job descriptions and curricula vitae for all chaplaincy (spiritual care/Chaplaincy care) current employees and job descriptions for any vacant positions.
5. A summary and raw data from surveys with:
 - a. Nurses employed by organization
 - b. Physicians affiliated with organization
6. Description of the organization including a mission statement.
7. History of Chaplaincy services department including any previous final accreditation letters received from CCAPS.
8. Organizational chart of facility/organization and Chaplaincy services department.
9. Narrative description of Chaplaincy services program including Scope of Service and Scope of Practice documents.
10. Description of Chaplaincy services evaluation program/process improvement program.
11. List of Chaplaincy services policies and procedures.
12. Any other information requested by CCAPS.

For the initial accreditation, the Chair of CCAPS will name a site team chair and members of the site team sufficient for a comprehensive review not to exceed a total of three members. These individuals will be identified to the organization in advance of the site visit. A typical single organization site visit is two people/two days but may vary according to the size/complexity of the organization. The site visit may be conducted virtually, or by a combination of in-person and virtual means.

All materials should be sent to the CCAPS Chair and each site visitor at least two months prior to the date of the site visit. The one exception is that the raw data from the surveys in No. 4 may be given to the site visitors upon arrival.

III. PERIODIC ACCREDITATION REVIEWS (5 Year and 10 Year)

Once an organization's Chaplaincy services have been accredited, that organization may maintain accredited membership through a PERIODIC ACCREDITATION REVIEW every five years. The first Five-Year Review will be a paper review. The second Five-Year Review, called the Ten-Year Review, will be a document review and a site visit review.

Five Year Review: The periodic accreditation review that occurs at the five-year date is a standards and document review. The material and procedure required for the Five-Year Periodic Review is the same as that required for Accreditation. The Survey should be submitted with the other materials.

Ten Year Review: A CCAPS accreditation team will spend up to two days at the organization to make the Ten-Year Review site visit. They will meet with people described in the A&E and Accreditation site visits. The material and procedure required for the Periodic Review is the same as that required for Accreditation. The review may be made remotely with the mutual consent of the organization and the CCAPS chair.

IV. CCAPS ACTION following an Accreditation Review or a Periodic Accreditation Review

CCAPS will review the organization file for the purpose of accreditation of the Chaplaincy services (CCAPS accredits an organization, not the chaplaincy services) according to the COMISS Network CCAPS Standards. CCAPS will make one of the following recommendations to the COMISS Network Leadership, who make the final determination regarding accreditation:

- Grant a five-year Accreditation (or continued accreditation) to the organization and its chaplaincy (Chaplaincy care/spiritual care) services.
- Grant a five-year Accreditation (or continued accreditation) to the organization and its chaplaincy (pastoral care/spiritual care) services with notations of the organization's partial compliance with the Standards. Organizations will be given up to one year to become fully compliant.
- Defer accreditation with notations identifying those Standards requiring compliance in order to be accredited. CCAPS may require an additional site visit if the organization's non-compliance with Standards is significant.

Upon the granting of a five-year accreditation by the COMISS Network, CCAPS will set the date for the Periodic Accreditation Review. The review date means the month and year in which the organization must be reviewed by CCAPS. Organizations will be expected to report to CCAPS any significant changes in key personnel or programming in between accreditation review dates.

COST:

ITEM	COST
CCAPS Assessment and Evaluation Consultation	\$2,000
CCAPS Accreditation	\$1,000
CCAPS A&E + Accreditation (in one application/visit)	\$3,000
CCAPS Five Year Periodic Accreditation Standards and Document Review	\$1,250
CCAPS Ten Year Periodic Review and Site Visit	\$2,000
For Reviews requiring a Site Visit	Travel and per diem expenses (lodging, meals, parking, etc.)

Questions about the CCAPS Accreditation Process can be addressed to:

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