Arlington Urgent Care is a family business begun by Molly's father, Dr. Michael Rankin, a longtime emergency room doctor who wanted to return to his hometown and saw an opportunity in the burgeoning urgent care field.

“There was a need for after hours, non-emergency care in Arlington,” Molly remembers. “Our community has many family practice doctors, but many are not accepting new patients and it’s often hard to get an appointment,” she says.

Soon, the plans became a family affair. Molly, a dietician and medical administrator was looking for a job around that time. “My dad and I had always worked well together and he needed a manager so I said let’s try it and see what happens,” she said. They brought in her brother Matthew, a medical assistant, who is now the lead medical assistant, and her mother Carol as a receptionist.

Arlington Urgent Care opened its doors in October of 2011. Today, there is a staff of 13 and they plan to open two additional clinics near Columbus, very soon.

Molly notes that Arlington Urgent Care is in a community tailor-made for urgent care, especially since the facility is able to do more than many primary care offices in the area with on-site radiology, suture and laceration repair, wound and burn treatment, and a CLIA waived lab. As it turned out, 60 percent of their patients have primary care physicians, but come to Arlington Urgent Care for the things they do best.

When Arlington Urgent Care first opened, they sought and won certification from UCA. Accreditation was not yet offered. Then Molly herself went through the UCA Urgent Care Management Certificate Program (UCMC). “At that point, I didn’t yet have my master’s, which I now do, and it was important to me to further my knowledge,” she said.

It was in spring of 2014, that Molly and the center began to consider full accreditation for the clinic. “We started thinking of it when it was discussed at one of the UCA conferences,” she remembers.

There was a lot to consider. “We were a small clinic, so we weighed the pros and cons,” she said. On the pros side “We wanted something that would set us apart,” she remembered. “No other urgent care clinics in the state are UCA accredited.”
On the other hand, "I'm the only manager; I have a lot of responsibilities. I knew it would take some time. There was also the expense, because we assumed we'd have to take certain steps to meet the standards."

What won Arlington Urgent Care over was, in part, the desire to be the best clinic they could be for their patients and community. The catalyst that prompted their decision to begin the accreditation process was when, Molly said, "We received a letter from our malpractice agency offering a big discount if we were accredited."

Once they decided to go forward, Molly discovered that it wasn't as difficult as she'd thought.

"After I read through the policies and information, it was helpful for me to know that we were already following many of the policies. It was validation that we weren't flying by the seat of our pants, so we wanted to follow the process through."

UCA Accreditation calls on a facility to demonstrate that it meets nationally standardized criteria in eight areas: governance, human resources, patient care processes, physical environment, quality improvement, health records management, patient privacy and rights, and scope of care.

At Arlington Urgent Care, standards were already in place in many of these areas. "Luckily," said Molly, "When we were first created, we had a consulting company help us open. That company had policies and procedures written out and we were able to adapt them. In addition, I'd had staff training in my previous job, which gave me experience with areas like OSHA and fire safety and I was able to copy many standards and procedures from my previous employers. At the same time, Dr. Rankin had worked for urgent care clinics in the past, so we were able to call on those contacts for advice as well."

In addition, Arlington Urgent Care staff already maintained OSHA, HIPAA, fire safety, and hand hygiene training.

Molly soon discovered that, other than her own time and the accreditation fee, there were few added expenses.

"That surprised me, I thought it would be very expensive, but once I got the manual, I realized it wouldn't be. We didn't have to make many purchases, did not have to add staff training time, and didn't have to bring in anyone from outside."

In fact, it turned out that with the malpractice insurance discount, "we pretty much made up the accreditation expenses during the year," she said, underscoring, however, that that was not their primary motivation.

Once Arlington Urgent Care decided to go for accreditation, "we had three or four weeks to complete the process," Molly said.

It was much more involved than UCA Certification. "There were 70 or 80 questions we had to answer, and there was an on-site survey," she explained.

"I needed to go through the forms line by line about aspects of our business in each of the eight categories," she noted. For those several weeks, that did call for long hours. She discovered that, even where they lacked formal policies, they were carrying out most of the standards.

She also notes that "We were lucky as we'd developed good policy and procedure manuals in the first place. Anyone who hasn't done that, will, of course, need more time than we spent."

Then there was the site survey.

Molly admits she was nervous. "The surveyor was very nice though. She came in, we gave her a tour, she looked through our policy and procedure manuals, and we spoke for a few hours. She then did her own survey of the clinic. She looked in drawers, examined expiration dates on medicines, did an audit of about 10 of our charts and checked off various things on her list. She checked our certificate that said we were a CLIA waived lab and we had to show we could do labs. She also checked that we had correct tax forms, such as I-9s on employees. She also needed to make sure we had an operable X-ray and I was able to show her a copy of our X-ray certification."

"The whole visit only took a day," Molly said, although she noted that "if we were a bigger clinic, it would have taken longer."

After the survey, within two weeks we received a letter. It told us what we did well, as well as which standards we needed to correct. Among the issues we needed to fix was that UCA asked for a policy that outlined requisite skill sets for each position, as well as a compliance mechanism for both orientation and ongoing rechecks. We were already doing direct supervision of new hires until those new hires were proficient—we just didn't have a policy that said so. So, we created a policy that stated all new hires would have direct supervision, as well as a checklist mechanism to carry it out," Molly explained.

"In addition, we didn't have a company that came in every year to certify each piece of equipment. I did, however, have logs that we keep for temperatures of the different refrigerators and data on the autoclaves. So, once alerted, I was able to provide proof that these are checked regularly."

Molly points to her staff as making a big difference in the process. "I'm so fortunate to have a good staff under me. We never would have become accredited if we didn't have a knowledgeable staff that understood the value of accreditation and what it was going to do for our clinic," she said.

She also notes that when Arlington Urgent Care opens their new clinic, it too will be included on their current accreditation. When the site survey is next carried out (site visits are good for three years), the new site will need to be surveyed as well.

In the end, Molly and everyone else at Arlington Urgent Care is overwhelmingly positive about the process and the results. They've realized savings, and they can claim to be the first UCA accredited clinic in Ohio. Yet "it's more than the savings, and definitely more than a marketing tool," she says. "It really is about peace of mind."

Molly also has advice to those thinking about going forward: "Don't be afraid of accreditation," she says. "A lot of times people think it will be a lot of money and a lot of work. And yes, it did take time. But we're all in this field to help our patients. Any time we can find a guideline to follow that lets us treat patients as well as we can treat them—that's worthwhile."