

Quality, Safety and Regulatory Requirements

Practical Recommendations for the Hospital Board

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Purpose and Objectives



Purpose: to provide practical recommendations for Boards to meet the quality and patient safety requirements as defined by regulatory bodies and accrediting organizations



Objectives: at the end of the program, participants will be able to identify topics to discuss with leadership regarding:

- Healthcare quality and safety
- Regulatory and accreditation requirements
- Board responsibilities

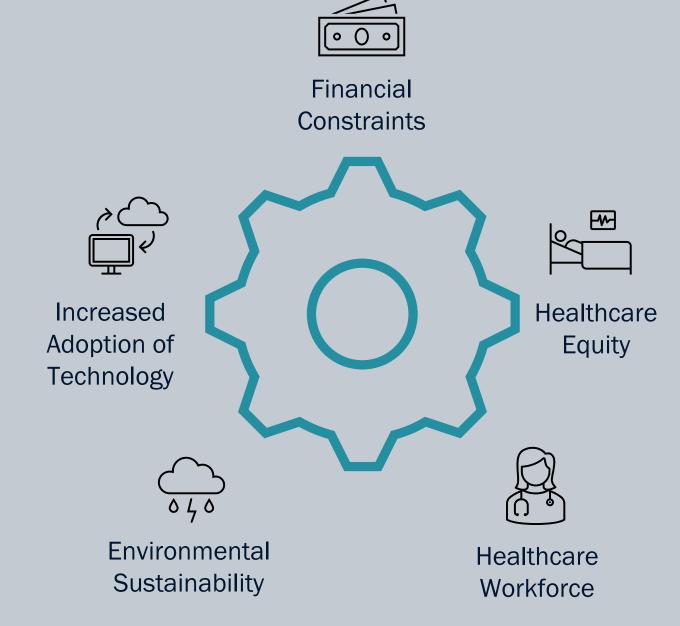




Quality and Patient Safety

Where are we – and where are we going?

Major Global Trends in Healthcare



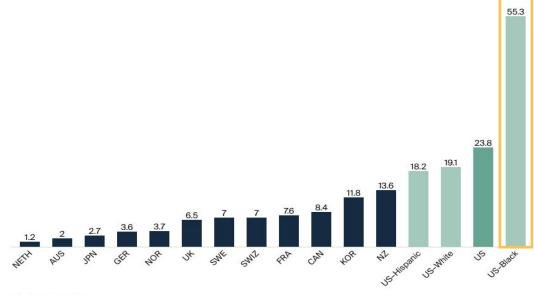


Healthcare Equity

Black women are 2 to 4 times more likely to die from pregnancy-related complications than White women.

New Data Shows U.S. Maternal Mortality Rate Exceeds That in Other High-Income Countries

Deaths per 100,000 live births



[+] Download data

Notes: The maternal mortality ratio is defined by the World Health Organization as the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management but not from accidental or incidental causes. 2015 data for FRA; 2017 data for UK; 2018 data for NZ; 2019 data for SWIZ; 2020 data for AUS, CAN, GER, JAP, KOR, NETH, NOR, SWE, and US.

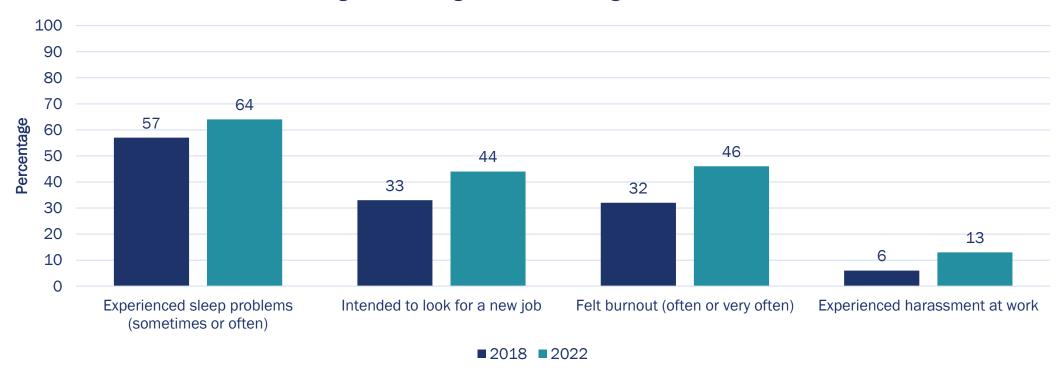
Data: Data for all countries except US from OECD Health Statistics 2022. Data for US from Donna L. Hoyert, Maternal Mortality Rates in the United States, 2020 (National Center for Health Statistics, Feb. 2022).

Source: Munira Z. Gunja, Evan D. Gumas, and Reginald D. Williams II, "The U.S. Maternal Mortality Crisis Continues to Worsen: An International Comparison," To the Point (blog), Commonwealth Fund, Dec. 1, 2022. https://doi.org/10.26099/8vem-fc65



Healthcare Workforce

Mental Health, Well-Being, and Working Conditions among US Health Workers, 2018-2022





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Environmental Sustainability

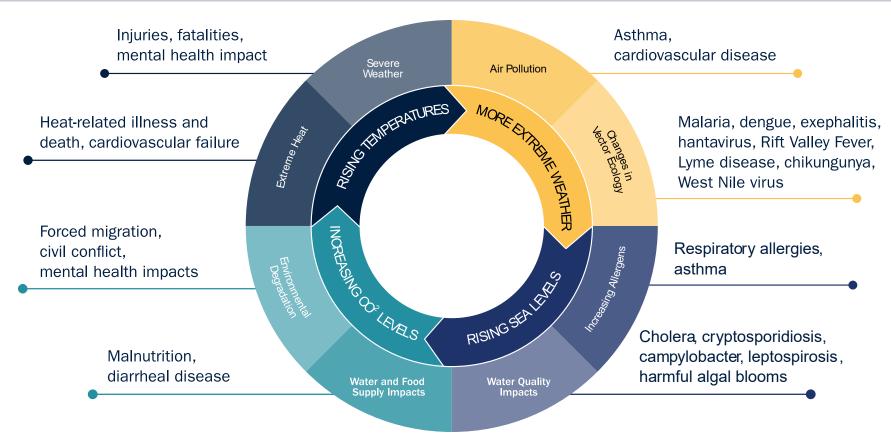




Figure 1: Impact of climate change on human health (Source: U.S. Centers for Disease Control and Prevention)

Digital Transformation

Approximately 30% of the world's data volume is being generated by the health care industry.



An overview of the digital healthcare landscape

Adapted from Pall. The Shift to Digital Healthcare. World Healthcare Journal. 2019 World Economic Forum. January 2024





Growing Expectations of Boards in Quality

CMS Statement of Deficiencies

Governing Body

- Based on review of documentation, meeting minutes, observation, and interviews with staff, the Governing Body failed to ensure:
 - Physical environment and infection control
 - A screening test performed on newborns
 - Contracted services provide quality care
 - Patient's family had been notified about a medication error
 - Development, implementation, and maintenance of an effective, ongoing, hospital-wide, data-driven quality assessment and performance improvement program



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Board Recommendations

Discussion Points

WHAT do we need to know?

 What is the hospital doing to address health equity, healthcare workforce well-being, sustainability?

WHERE are we today?

• What does our data show us about outcomes of care by race, ethnicity, gender? What are staff telling us about engagement and satisfaction with their job?

HOW can the Board help?

 Should we allocate resources for a new sustainability program?



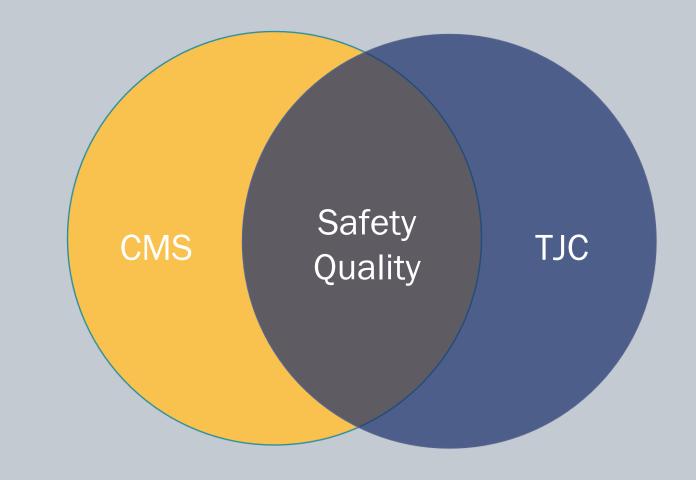


The Joint Commission, CMS, QAPI

What are these and why are they important?

Definitions and Relationships

- CMS Centers for Medicare and Medicaid Services
 - Conditions of Participation (CoP) & Standards
- ▶ TJC The Joint Commission
 - Standards & Elements of Performance





CMS CoP Why Are They Important

To receive payment from Medicare & Medicaid programs, hospitals must comply with the CoPs.

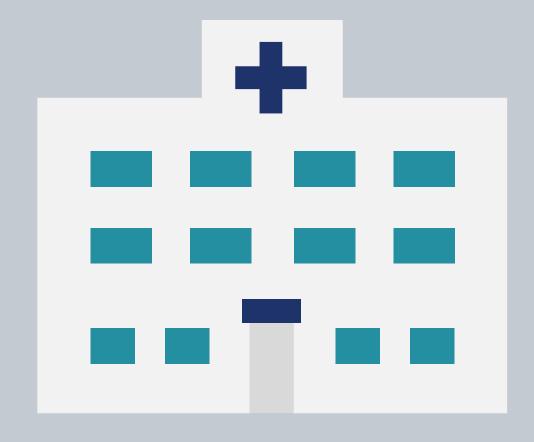




CMS Requirements

Quality and Safety

- ▶ §482.21 CoP: Quality
 Assessment and Performance
 Improvement Program (QAPI)
- ▶ The hospital must develop, implement, and maintain an effective, ongoing, hospital-wide, data-driven quality assessment and performance improvement (QAPI) program and demonstrate evidence of its program for review by CMS

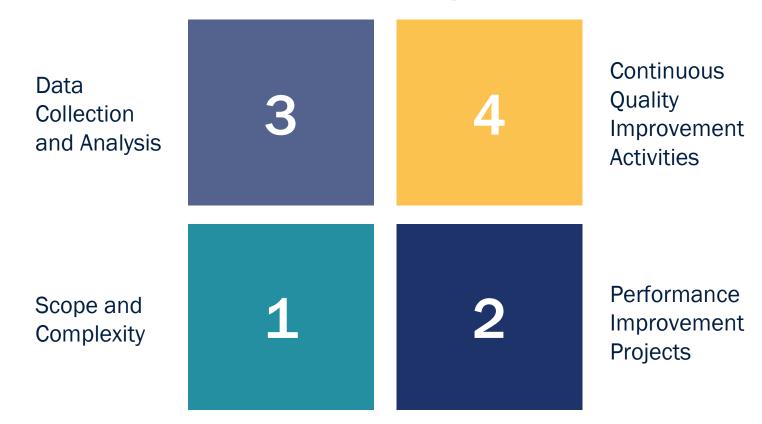




CMS Requirements

QAPI Foundation

Board & Executive Leadership



Safe High-Quality Care, Treatment & Services



Board Recommendations

Discussion Points

WHAT do we need to know?

- What is included in our QAPI program?
- Who is our accrediting organization?

WHERE are we today?

 Do our QAPI metrics encompass external mandates (CMS, payors, accreditation, etc.), the scope and complexity of our organization, contracted service and our organization's strategic initiatives?

HOW can the Board help?

- What are the Board's roles and responsibilities for quality?
- How does QAPI information flow to and from our Board?





Role of the Board

What should the Board do?

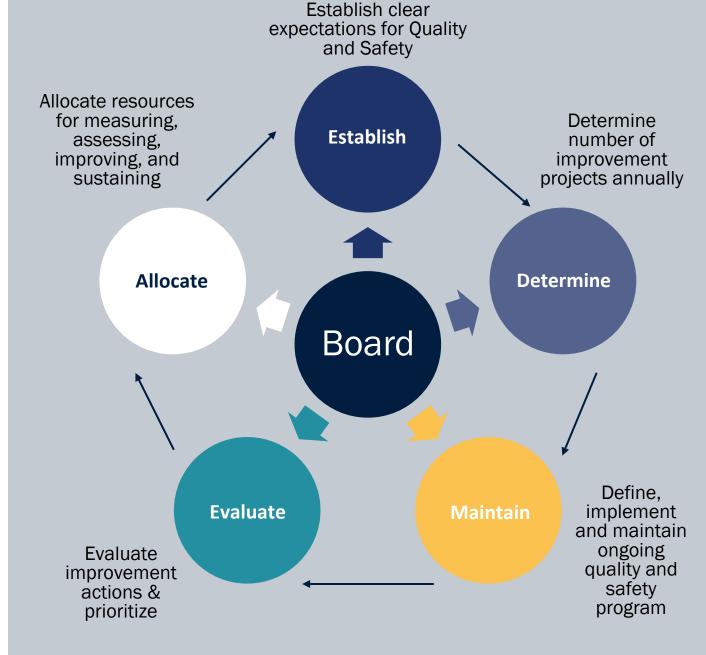
CMS Requirements

Resources

Board Accountability for Quality

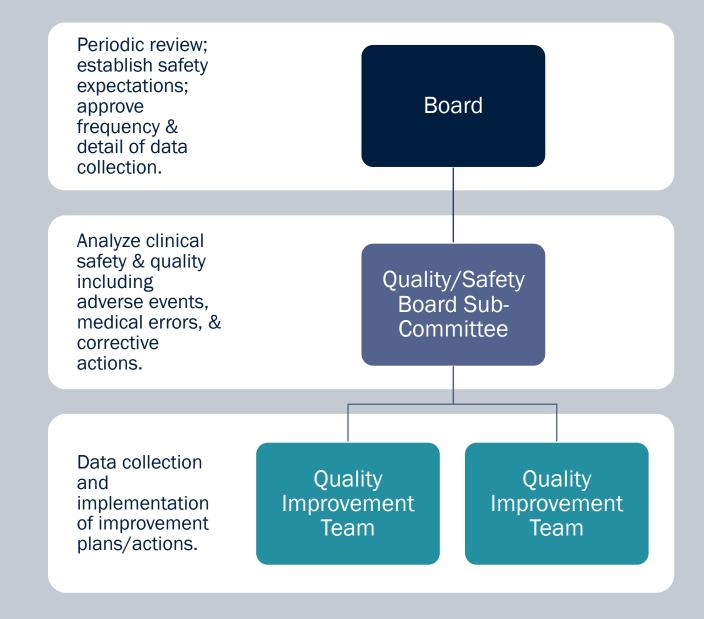


CMS Requirements Board Responsibilities





Diffusion of QAPI Information

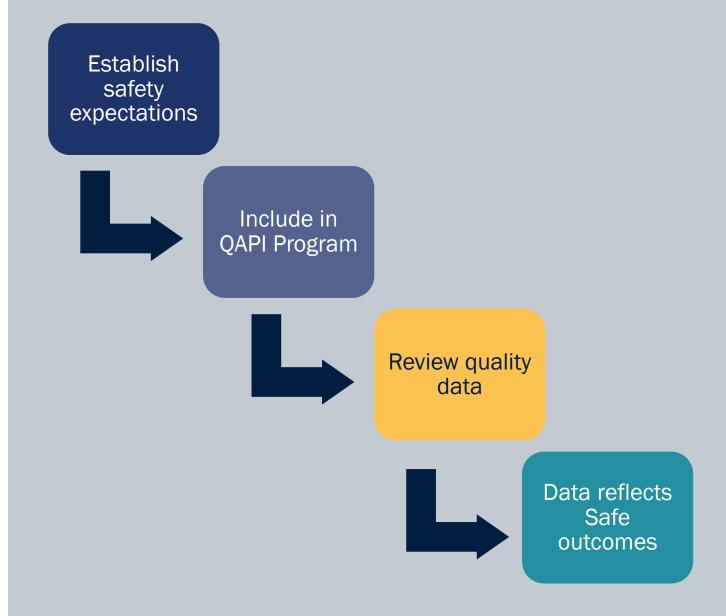




CMS Requirements Contracts & Agreements

Services performed under contract or agreement provided in a safe and effective manner.

42 CFR 482.12(e)(1)





CMS Requirements

Board Evidence of Compliance

Annual QAPI Program

Review & approve

Approval signatures/reflected in meeting minutes

Meeting Minutes

QAPI standing agenda item & attendance rosters

QAPI program performance review & decisions

Supporting Documents

Budget or other documents indicating resources available to QAPI



CMS Requirements

Surveyor Questions for Board or Leaders

- Give an examples of how specific data has identified opportunities for improvement.
- When and how do you review QAPI data and outcomes?
- Who oversees the QAPI program? Give an example of QAPI activities that affect health outcomes through improving quality of care or patient safety?
- What QAPI activities are initiated based on data reported through the medical error/adverse event tracking system?
- Explain how the selection (number and scope) of the specific projects is in alignment with the hospital's complexity and the scope of services it provides.



TJC Requirements

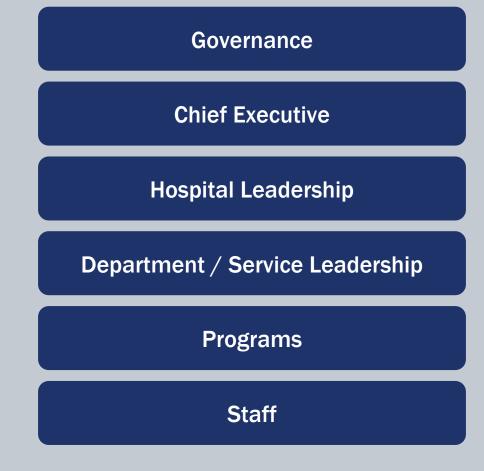
Board Accountability for Quality

The **governing body** has responsibilities for:

- CULTURE
- RESOURCES
- MEDICAL STAFF
- PRIORITIES
- CONTRACTED SERVICES
- PATIENT SAFETY
- WORKPLACE SAFETY
- STAFFING

Resources

Joint Commission





Board Recommendations

Discussion Points

WHAT do we need to know?

 What performance improvement projects are being conducted?

WHERE are we today?

Does the data reflect improvements?

HOW can the Board help?

- Do our meeting minutes reflect the actions we have taken including:
 - Reviewed data on quality measures
 - Discussed safety events
 - Allocated additional resources





Resources and References

Where to get additional information

The Joint Commission Our Priorities

What we are Doing

Health Equity	National Patient Safety GoalsHealth Care Equity Certification
Environmental Sustainability	Resources CenterSustainable Health Certification
Learning	Responsible Use of Health Data Certification
Performance Integration & Improvement	 Reducing Workforce Burden by Retiring Obsolete Standards National Quality Forum – Measurement Alignment Safe Environment: Preventing Workplace Violence







Framework for Effective Governance





Governance of Quality and Safety." AHA Trustee Insights. January 2024

JCR Publications





What Your Board Needs to Know About Quality and Patient Safety:

A Joint Commission Guide



Foreword by Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI

President and Chief Executive Officer, The Joint Commission and Joint Commission Resources

Important role of the Board in fostering quality and safety

Summary

Clear responsibilities are defined by CMS QAPI program as well as accrediting organizations

Ask your leaders:

WHAT is the quality issue?

WHERE are our results now?

HOW can the Board help?



Thank you.

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