

IP 101

Class 6: Regulations, Accreditations, and Rules- OH MY!

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Syllabus

- Centers for Medicare and Medicaid Services (CMS)
 - Conditions of Participation (CoPs)
- Office of Inspector General (OIG)
- Accreditation & deemed organizations
- Specialty infection prevention standards
- Occupational Safety & Health Administration

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Kentucky Hospital Association

- Nurse since 2014
 - PCU, pediatrics, ED
- Quality since 2021



Why Accreditation and Surveys?

When it comes to health care, accreditation refers to the official review process that allows organizations like yours to demonstrate their ability to meet official regulatory requirements and standards. Requirements differ per accreditation organization, but the intent remains the same: to prove that your healthcare organization's commitment to meeting accreditation standards results in a higher level of performance and a greater focus on patient care.

-ACHC

Standards

- *“A standard is a statement about performance expectations, structures, process, and outcomes that must be in place. These standards are developed based on evidence for practice, expert opinion and consensus, or research.”* - HQ Solutions
- Conditions of Participation (CoP)
 - For Medicare/Medicaid
- Insurance
- Office of Inspector General (OIG)

CMS Conditions of Participation (CoP) Webinar Series

- All hospitals that accept payment for Medicare and Medicaid patients must comply with the Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (CoP). The CoP Manual has interpretive guidelines that must be followed for all patients treated in the hospital or hospital owned departments. Facilities accredited by the Joint Commission (TJC), HFAP, CIHQ and DNV Healthcare must follow these regulations
- These series cover the full manual in 1-hour webinars and are a fantastic way to educate everyone in your hospital on all the sections of the CMS hospital manual, especially ones that apply to their specific department
- [**View Full Acute Series**](#)
- [**View Full CAH Series**](#)

Deeming Authority

- The Joint Commission (TJC)
- Det Norske Veritas (DNV)
- The Center for Improvement in Healthcare Quality (CIHQ)
- Accreditation Commission for Health Care (ACHC)
- Healthcare Facilities Accreditation Program

The Joint Commission

- 2024 TJC Standards for Infection Control
 - IC.04.01.01 IPC program
 - IC.05.01.01 accountabilities of governing body
 - IC.06.01.01 implementation of IPC activities
 - IC.07.01.01 preparedness for high consequence infectious diseases (HCIDs)
- [2024 Joint Commission Standards for Infection Control Q&A | NETEC](#)

Center of Excellence...

- Infection prevention and control program (IPCP) in place
- Reprocessing of surgical instruments, implants, and medical equipment

IPs and Surveys

- “Continuous readiness”
- Infection Control Assessment and Response (ICAR) tool
 - [Infection Control Assessment and Response \(ICAR\) Tool for General Infection Prevention and Control \(IPC\) Across Settings | HAIs | CDC](#)
 - [Healthcare-Associated Infection Prevention Program - Cabinet for Health and Family Services \(ky.gov\)](#)

IPs and Surveys

- What does an IP do during:
 - Survey preparation
 - The survey



CMS Star Ratings






- Hospitals - Overall hospital quality star rating
| Provider Data Catalog ([cms.gov](https://www.cms.gov))
- Unplanned hospital visits/readmissions
 - Pneumonia
 - Hip/knee replacement (readmissions)

Leapfrog Group

- CLABSI
- UTI
- C. diff
- MRSA
- COLO SSI

[Search Leapfrog's Hospital and Surgery Center Ratings | Hospital and Surgery Center Ratings | Leapfrog Group](#)

Healthcare-Associated Infections

Measure name	Leapfrog's Standard	Hospital's Progress
C. difficile Infection	<p>Hospitals should have fewer than expected colon infections from C. diff bacteria.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections that actually happened at this hospital to the number of infections expected for more</p>	 <p>CONSIDERABLE ACHIEVEMENT</p>
<p>▲ SHOW LESS ▲</p>		
Infection in the Blood	<p>Hospitals should have fewer than expected central-line associated blood stream infections.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections more</p>	 <p>SOME ACHIEVEMENT</p>
<p>▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼</p>		
Infection in the Urinary Tract	<p>Hospitals should have fewer than expected catheter-associated urinary tract infections.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections more</p>	 <p>CONSIDERABLE ACHIEVEMENT</p>
<p>▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼</p>		
MRSA Infection	<p>Hospitals should have fewer than expected antibiotic resistant bacterial infections.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections more</p>	 <p>SOME ACHIEVEMENT</p>
<p>▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼</p>		
Surgical Site Infection After Colon Surgery	<p>Hospitals should have fewer than expected surgical site infections after major colon surgery.</p> <p>Leapfrog uses a standardized infection ratio (SIR) calculated by the CDC's National Healthcare Safety Network (NHSN) to compare the number of infections more</p>	 <p>CONSIDERABLE ACHIEVEMENT</p>

OSHA

- [Home | Occupational Safety and Health Administration \(osha.gov\)](#)
- Part of US Department of Labor
- Mission is to “...assure America’s workers have safe and healthful working conditions free from unlawful retaliation.”

OSHA

- Healthcare - Infectious Diseases
 - 1910.1030 - Bloodborne pathogens
 - 1910.132 - Personal Protective Equipment
 - 1910.134 - Respiratory protection

Bloodborne Pathogens 1910.1030

- Exposure Control Plan
 - who, what, methods of compliance, post-exposure evaluation, hazard communication, recordkeeping
 - controls to minimize exposure
- Regulated waste
- Specific requirements for HIV/HBV research labs and production facilities
- Information and training (annual)

PPE 1910.132

- Determine hazards and what PPE needs to be available
- PPE training

Respiratory Protection 1910.134

- Respiratory protection program
 - Medical evaluations, fit testing
 - When to use respirators
 - Procedures:
 - cleaning, storing, inspecting, disposing, etc
 - air quality/quantity, and flow
 - Training
 - Regular evaluation of the program

Assignments

- Email a difficult education/communication scenario/situation you have experienced either as an IP or with an IP
 - Send to Rochelle Beard at rbeard@kyha.com

References and Resources

- [About Accreditation – ACHC](#)
- [The impact of hospital accreditation on the quality of healthcare: a systematic literature review | BMC Health Services Research | Full Text \(biomedcentral.com\)](#)
- HQ solutions: Resource for the Healthcare Quality professional 5th edition - Section 3 regulatory and accreditation, Pelletier and Beaudin
<https://bookshelf.vitalsource.com/#/books/9781284265149>