



TEXAS HOSPITAL ASSOCIATION

## **What Hospitals Are Doing to Enhance Patient Safety**

### ***Medicare Requirements***

The Medicare Conditions of Participation regulating each hospital that serves Medicare patients require an active program for the prevention, control and investigation of infections and communicable diseases. This regulation requires the hospital to develop, implement and maintain an infection control program for the prevention, control and investigation of infections (which includes, but is not limited to health care-associated infections) and communicable diseases. The hospital must have an active surveillance program that includes specific measures for prevention, early detection, control, education and investigation of infections and communicable diseases in the hospital. There must be a mechanism to evaluate the effectiveness of the program and take corrective action when necessary. The program must include implementation of nationally recognized systems of infection control guidelines to avoid sources and transmission of infections and communicable diseases (e.g., the Centers for Disease Control and Prevention's Guidelines for Prevention and Control of Nosocomial Infections, etc.)

In 2004, CMS issued data submission requirements for an initiative entitled *Hospital Quality Alliance*. Full Medicare payment to hospitals is contingent on reporting the mandated data. These tools are designed to prevent certain known problems in hospitals, deemed by CMS to be sufficiently important as to link the reporting with the payment of federal funds. Fully 100 percent of hospitals in Texas eligible to participate in the program have agreed to comply and have submitted data. Additionally, CMS is scheduled to include surgical infection prevention measures in the next set of quality measures. While all of the data suggested by the Consumers' Union's model legislation is not required to be reported at this time, the CMS national initiative to standardize quality data is a good start.

### ***Joint Commission Accreditation Requirements***

The accrediting body that reviews most Texas hospitals – the Joint Commission on the Accreditation of Healthcare Organizations – convened an expert panel last year to revise its infection control standards, with the goal of reducing the risk of health care-associated infections. The revised standards, which became effective Jan. 1, 2005, raise the expected performance of hospital leadership in this area and of the hospital infection control program itself.

In addition, several years ago the Joint Commission began announcing National Patient Safety Goals. Effective January 2003, compliance with the goals and associated recommendations was incorporated into the accreditation survey process. Effective January 2004, a new goal was added: Reduce the risk of health care-associated infections. This goal requires hospitals to: 1) comply with current CDC hand washing guidelines; and, 2) manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a health care-associated infection.

In addition, as part of its ORYX initiative – which integrates outcomes and other performance measurement data into the hospital accreditation process – the Joint Commission has developed a new measure set on surgical infection prevention. These measures became available for data collection this past summer. The data will be made available to the public late next year.

### ***Hospital Report Cards***

The Texas Health Care Information Council already has been charged with providing hospital-specific information to the public via hospital report cards. As part of this effort, the Texas Hospital Association and Texas hospitals have been working with state regulators to identify and make available valid, reliable and consistent measures that are meaningful to consumers. The council releases annually the *Indicators of Inpatient Care in Texas Hospitals*, a report on the performance by Texas hospitals on 25 measures of quality. The report provides consumers of health care with reliable and comparable data on hospitals throughout the state. In addition to bar charts and tables for each of the measures, the database also can be searched by hospital or metropolitan area for any of the procedures or conditions included in the report, allowing the reader to observe a hospital's improvement over time.

### ***New Texas Patient Safety Law and Regulations***

With the passage of a new state patient safety law in 2003, Texas is taking a good first step to address medical errors and make hospitals more accountable to the public. As a result of the passage of House Bill 1614 by the Texas Legislature in 2003, hospitals and ambulatory surgery centers must report aggregate numbers of nine specific medical errors. The law also requires hospitals to have a comprehensive patient safety program in place. While all of the data suggested by the Consumers' Union model legislation is not required to be reported at this time, this state initiative to standardize quality data is a good start.

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