



# ASC GOVERNANCE— EXCEEDING THE STANDARD

*Regina Boore, RN, BSN, MS, CASC*

**M**edicare regulations place a heavy emphasis on governing body management and oversight. In particular the governing body is responsible for oversight of the ASC Quality Assessment and Performance Improvement (QAPI) program, which includes infection control and development and maintenance of the

disaster preparedness plan, in addition to the overall quality and safety of services rendered and environment of care. The gravity of this responsibility is obvious: condition-level citations in other areas typically result in an additional citation in governing body management and oversight. In other words, deficiencies and failures in operational standards are a reflection on the governing body's failure

to effectively manage and oversee its operation.

#### **DELEGATIONS MUST BE SPECIFIC**

It is the prerogative of the governing body to delegate various day-to-day operational responsibilities; however, doing so does not relieve it of the ultimate responsibility for the quality and safety of the overall operation. Delegations should be specific. Governance meeting

*... condition-level citations in other areas typically result in an additional citation in governing body management and oversight. In other words, deficiencies and failures in operational standards are a reflection on the governing body's failure to effectively manage and oversee its operation.*

minutes must specify the responsibility delegated and to whom. Delegations must be reapproved or revised annually, or sooner as needed. Typical delegations include management of the QAPI and infection control programs, medical records management, hazardous communications program, human resources, nursing services, pharmacy services, lab and radiology services, HIPAA program, compliance program, and anesthesia services. There may be others depending on the scope of care of the facility.

Operational responsibilities are also delegated to ancillary service providers such as linen service, housekeeping, and facility maintenance. Again, the governing body maintains its responsibility to oversee a safe and sanitary environment. It must do so by overseeing that such services are delivered safely and effectively.

#### **MEETINGS ESTABLISH TRACK RECORDS**

The ASC establishes a track record of an engaged governing body through a regular meeting schedule, at least quarterly, as well as management delegations and contract assessment and approval. Annually the governing body is responsible for evaluating the results and efficacy of critical programs, such as the QAPI, infection control, and disaster preparedness programs.

In the case of the QAPI program, the evaluation should contain a summary of activities and results by quarter. At a minimum, this includes peer review, risk management, infection control, performance improvement, patient safety, patient satisfaction, and quality assurance. When the facility failed to meet expected quality thresholds or standards, the actions taken and results of those efforts are included in the report. Analysis of the overall effectiveness of the program and recommendations for change and focus for the coming year should be brought to the governing body for consideration and approval. The result of this process is the QAPI plan with specific activities identified by month and quarter for the coming year.

Likewise, the governing body must reconsider the disaster preparedness plan annually. Throughout the year, each activation of the disaster preparedness plan must be documented along with an evaluation of the effectiveness of its implementation. The composite of those evaluations must be analyzed and presented to the governing body with recommendations for change.

It is notable that state licensing requirements and all the accrediting bodies, such as AAAHC, TJC, AAAASF, HFAP, and IMQ, also place a significant emphasis on governing body

and management with overlapping standards and regulations.

#### **LEADERSHIP MAKES THE DIFFERENCE**

Since regulatory and accreditation standards regarding governance mandate certain activities and documentation to support compliance efforts, an ASC could take a perfunctory approach. By ticking the right boxes and stamping the meeting minutes, you could in fact meet the requirements sufficient to successfully pass inspection or survey. But that approach would be cheating your organization.

The difference between average-performing ASCs and top-performing ASCs is leadership. A robust and engaged governing body makes all the difference in the world. The choice of engagement over indifference sets the tone for the entire staff. Everything is easier to accomplish, more disciplined, more effective. Turnover is reduced; cohesion and teamwork are enhanced. And ultimately our patients benefit from the highest standard of care in the safest possible environment. Why settle for mediocrity when excellence is within your grasp? **AE**



*Regina Boore, RN, BSN, MS, CASC (rboore@PSS4ASC.com), is president of Progressive Surgical Solutions, LLC, an ASC development and consulting firm based in San Diego, Calif.*