

# ELECTRONIC CODE OF FEDERAL REGULATIONS

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## Title 42: Public Health

### PART 482—CONDITIONS OF PARTICIPATION FOR HOSPITALS

#### Subpart C—Basic Hospital Functions

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#### **§482.21 Condition of participation: Quality assessment and performance improvement pro**

The hospital must develop, implement, and maintain an effective, ongoing, hospital-wide, data and performance improvement program. The hospital's governing body must ensure that the program involves all hospital departments and services (including those under contract or arrangement); and focuses on indicators related to improved health outcomes and reduction of medical errors. The hospital must maintain and demonstrate evidence of its QAPI program.

(a) *Standard: Program scope.* (1) The program must include, but not be limited to, an ongoing measurable improvement in indicators for which there is evidence that it will improve health outcomes and reduce medical errors.

(2) The hospital must measure, analyze, and track quality indicators, including adverse patient performance that assess processes of care, hospital service and operations.

(b) *Standard: Program data.* (1) The program must incorporate quality indicator data including relevant data, for example, information submitted to, or received from, the hospital's Quality Improvement Committee.

(2) The hospital must use the data collected to—

(i) Monitor the effectiveness and safety of services and quality of care; and

(ii) Identify opportunities for improvement and changes that will lead to improvement.

(3) The frequency and detail of data collection must be specified by the hospital's governing body.

(c) *Standard: Program activities.* (1) The hospital must set priorities for its performance improvement program.

(i) Focus on high-risk, high-volume, or problem-prone areas;

(ii) Consider the incidence, prevalence, and severity of problems in those areas; and

(iii) Affect health outcomes, patient safety, and quality of care.

(2) Performance improvement activities must track medical errors and adverse patient events, implement preventive actions and mechanisms that include feedback and learning throughout the program.

(3) The hospital must take actions aimed at performance improvement and, after implementing

must measure its success, and track performance to ensure that improvements are sustained.

(d) *Standard: Performance improvement projects.* As part of its quality assessment and performance program, the hospital must conduct performance improvement projects.

(1) The number and scope of distinct improvement projects conducted annually must be proportional to the complexity of the hospital's services and operations.

(2) A hospital may, as one of its projects, develop and implement an information technology system to improve patient safety and quality of care. This project, in its initial stage of development, does not require measurable improvement in indicators related to health outcomes.

(3) The hospital must document what quality improvement projects are being conducted, the results of the projects, and the measurable progress achieved on these projects.

(4) A hospital is not required to participate in a QIO cooperative project, but its own projects must be of comparable effort.

(e) *Standard: Executive responsibilities.* The hospital's governing body (or organized group or legal authority and responsibility for operations of the hospital), medical staff, and administrative staff are accountable for ensuring the following:

(1) That an ongoing program for quality improvement and patient safety, including the reduction of risk, is defined, implemented, and maintained.

(2) That the hospital-wide quality assessment and performance improvement efforts address patient safety and quality of care and patient safety; and that all improvement actions are evaluated.

(3) That clear expectations for safety are established.

(4) That adequate resources are allocated for measuring, assessing, improving, and sustaining quality of care and reducing risk to patients.

(5) That the determination of the number of distinct improvement projects is conducted annually.

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