



SAFETY: UHMS ACCREDITATION

by Kenneth Capek RRT, CHT, MPA

Many of us have experienced the joy of going through the accreditation process by The Joint Commission. This is usually a process that encompasses the entire hospital or facility but there are other more specific department accreditations available from various organizations. For example, the College of American Pathologists accredits the hospital laboratory and the American Academy of Sleep Medicine accredits sleep centers. More recently the Undersea and Hyperbaric Medical Society (UHMS) established a voluntary accreditation process for hyperbaric centers. This organization, founded in 1967, is an international, non-profit organization and functions as the primary source of information regarding hyperbaric medicine and diving information. Its membership is composed of hyperbaric physicians and research scientists, nurses, respiratory therapists and others working in the field. One of the main responsibilities for the UHMS is to improve the scientific basis for hyperbaric oxygen therapy (HBOT) through patient treatment protocols and standards of practice. Since the most important benefit of the accreditation process is in improving patient care, it fits perfectly within the mission of the UHMS. The accreditation process establishes measured benchmarks of performance that a center must meet in order to be approved as an accredited hyperbaric center. In general, the process involves looking at important indicators considered to be necessary for the provision of high quality patient care such as physician and technical staff education, training and credentialing, the quality and maintenance of equipment, safety and risk management and overall operational procedures.

The advantages of participating in and achieving this status are many. In addition to improved patient care, the center can find improvement in all areas of its operations such as improved efficiency of service, environment of safety, and staff development. It is like having your own objective, expert consultant reviewing your service to make it the best it can be. There is also the benefit of being able to proclaim and market your service as a "fully accredited hyperbaric center". This gives a center the acceptance and credibility of a service that prides itself on high quality patient care services as confirmed by a "credible outside" entity.

The accreditation process can be applied to various types of HBOT services. For example, the center can be a stand-alone hyperbaric-only service or operate in combination with full wound care services. The operation can be one that is hospital-based, hospital-affiliated or neither. The criteria used to become

eligible for the hyperbaric accreditation survey is that the center must be providing HBOT for at least one year prior to the site visit. Additional requirements include that it be a legally constituted organizational entity, provide care under the direction or supervision of a physician or group of physicians and the center must conform to all applicable federal, state and local laws and regulations. Once all of these requirements are met all that remains is completing an application, a quite extensive pre-survey questionnaire, and of course the payment of the fee.

The content and areas covered by the survey are all detailed in the "Clinical Hyperbaric Facility Accreditation Manual" obtained from the UHMS. This manual contains standards and guidelines, most of which were adopted from other organizations. Many are from the Joint Commission standards and follow the general structure of that process. Additional standards used are from organizations such as the National Fire Protection Association (NFPA), the Compressed Gas Association (CGA), and the Accreditation Association for Ambulatory Healthcare (AAAH). The survey also includes applicable laws pertaining to HBOT operations such as the Safe Medical Devices Act of 1976.

There are three categories (levels) of hyperbaric accreditation based on hospital affiliation and services rendered. Level One: hospital-based HBOT program offering a full scope of services including 24/7 emergency availability, Level Two: provides reduced scope of services (not usually in hospital or provide for emergency cases) and Level Three: services rendered are not within nor affiliated with a hospital.

The survey itself is usually a two-day process although may be extended. It consists of document review, on-site inspection of operations and equipment and personnel interviews. Typically the survey team consists of three surveyors; an experienced hyperbaric physician, the Team Chief, a Certified Hyperbaric Registered Nurse (CHRN), and a Certified Hyperbaric Technologist (CHT). The final decision for accreditation is based on the HBOT centers "substantial conformance" to the standards and guidelines as listed in the Survey Manual. At the conclusion of the survey the Survey Team will meet separately with the physician director and then hospital administrator. In a third meeting they will present observations and recommendations to the entire hyperbaric staff. Since the survey

About patient care providers such as nurses and therapists

The literature suggests that many nurses and other allied health care professionals are codependent. So much so that one is led to believe that codependency is a requirement for entry into a health care profession. In my mind that's going too far, but I do believe that health care professionals - just as all other people - can be hurt and that they too, need healing. It would be wonderful, of course, if we could support one another through the process. Perhaps understanding what is going on can help us help ourselves, help one another and eventually help our patients/clients to heal. The healing has to start somewhere. Why not with ourselves?

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process is solely for gathering information, neither a preliminary nor final accreditation decision will be rendered at its conclusion. The facility should receive notice within 30 to 40 days of its final status. There are three levels of accreditation awarded; full accreditation, full accreditation with distinction, both of which are for a period of three years, and deferred accreditation, which is good for up to 12 months, in which time the center must successfully address specific issues identified during the survey. As with any accreditation survey, there is a great deal of preparation time and energy spent to achieve a successful outcome. There is also the satisfaction and pride received when the goal of accreditation is achieved. For the next article I will examine the specifics in the survey process in more detail and discuss my own survey experience.

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Pro's and Con's...continued from previous page

gram. Although closed for new patients in 1991, it still supplies about 300 marijuana cigarettes monthly to each of the seven seriously ill patients remaining in the program.") Moving from the left-hand column to the main section of the page you find the topic broken down into a list of headings and sub-headings. By clicking on a sub-heading you will be taken to a list of pertinent questions. Using this Q & A format materials are presented, both pro and con, in tables with credibility rankings for each item. You can always navigate back to the main page or to another heading. Each Q & A pops up in a new window, so be sure to close the windows when you are done. I find this to be a nice feature so you don't lose your way.

The information is extensive. ProCon uses a staff of researchers and senior researchers to collect, rank, and compile the data. I think you will find this a very interesting and informative site to visit for what ever controversy you may be interested in. They are very open to feedback, criticism, support and comments so as to improve the site.

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