Certification and Accreditation Standards in Allied Health

Emergency and Disaster Preparedness for Health Professionals, 2e, meets or exceeds the standards for professional preparedness for the varied allied health professions as can be seen by the list of standards below.

Each profession has a different way of outlining their standards. The standards that are related to emergency and disaster preparedness have been pulled out of their full lists, so the numbers and letters are out of their contexts. However, you can use the links to access the original documents to see where these noted standards can be found.

American Society of Health-System Pharmacists (ASHP)

Pharmacy Technicians

Model Curriculum Goals, 4th Edition (2015)

Patient and Medication Safety
39. Demonstrate skills required for effective emergency preparedness

Pharmacists

"The Role of Health-System Pharmacists in Emergency Preparedness" (2003)

American Pharmacists Association (AphA)

"Preparing for Emergency Response in Mass Casualty Events" (2016)

National Council for Prescription Drug Programs (NCPDP)

"NCPDP Emergency Preparedness Information" (2017)

American Health Information Management Association (AHIMA)

Long-Term Facility Disaster Plans

"Long-Term Care Health Information Practice and Documentation Guidelines Security Section" (which includes disaster preparedness and recovery)

AHIMA Long-Term Care Facility HIM STANDARDS:

- A disaster plan for recovering health records damaged by fire, flood, or other destructive events in is place.
- The disaster plan includes revisions for recovering healthcare records on different types of storage media.
- The disaster plan includes provisions for a backup system, off site access such as hosting, corporate storage and retrieval, to provide the healthcare organization's staff necessary access to health records during emergency situations.
- The disaster plan must outline alternative procedures to be utilized for continuity of care during the emergency and the procedure when there is restoration of the automated system.

Registered Health Information Technician (RHIT)

Since each healthcare facility and HIM department is required to have emergency and disaster policies, procedures, regulations, and accreditation standards, then health information technicians need to be able to accomplish their certified responsibilities within an emergency or disaster context, following their department and facility guidelines. Certification standards apply to emergency and disaster preparedness.

Registered Health Information Administrator (RHIA)

Emergency and disaster preparedness for a health information department and administrator involves all of the following certification standards:

Domain 2: Information Protection: Access, Disclosure, Archival, Privacy & Security

A. Health Law

A1. Maintain healthcare privacy and security training programs

A2. Enforce and monitor organizational compliance with healthcare information laws, regulations and standards (e.g., audit, report and/or inform)

B. Data Privacy, Confidentiality, and Security

B1. Design policies and implement privacy practices to safeguard Protected Health Information

B2. Design policies and implement security practices to safeguard Protected Health Information

B3. Investigate and resolve healthcare privacy and security issues/breaches

C. Release of Information

C1. Manage access, disclosure, and use of Protected Health Information (PHI) to ensure confidentiality

C2. Develop policies and procedures for uses and disclosures/redisclosures of Protected Health Information

Domain 3: Informatics, Analytics & Data Use

A. Health Information Technologies

A1. Implement and manage use of, and access to, technology applications

A2. Evaluate and recommend clinical, administrative, and specialty service applications (e.g., financial systems, electronic record, clinical coding)

F. Consumer Informatics

F1. Identify and/or respond to the information needs of internal and external healthcare customers

F2. Provide support for end-user portals and personal health records

G. Health Information Exchange

G1. Apply data and functional standards to achieve interoperability of healthcare information systems

G2. Manage the health information exchange process entity-wide

H. Information Integrity and Data Quality

H1. Apply data/record storage principles and techniques associated with the medium (e.g., paper-based, hybrid, electronic)

H2. Manage master person index (e.g., patient record integration, customer/client relationship management)

H3. Manage merge process for duplicates and other errors entity-wide (e.g., validate data sources)

Domain 4: Revenue Management

B. Regulatory

B1. Prepare for accreditation and licensing processes [e.g. Joint Commission, Det Norske Veritas, Medicare, state regulators]

C. Coding

C1. Manage and/or validate coding accuracy

E. Clinical Documentation Improvement

E1. Query physicians for appropriate documentation to support reimbursement

E2. Educate and train clinical staff regarding supporting documentation requirements

Domain 5: Leadership

A. Leadership Roles

A1. Develop, motivate, and support work teams and/or individuals

A2. Organize and facilitate meetings

A3. Advocate for department, organization and/or profession

E. Training & Development

E1. Conduct training and educational activities (e.g. HIM systems, coding, medical and institutional terminology, documentation and regulatory requirements)

The Joint Commission

Emergency Management Standards Supporting Collaboration Planning 2016

This applies to hospitals, ambulatory care settings, home care, nursing homes, behavioral health care programs, and laboratories.

Resources on Emergency Management

American Association of Medical Assistants (AAMA)
Advanced Practice Certification Standards

Emergency preparedness and response capabilities and leadership cover a number of standards (2016):

General

Risk management and safety procedures

    3. Emergency preparedness planning

III. Supervisory functions

    1. Train/orient employees

    3. Maintain personnel records

    4. Perform personnel supervision

    5. Lead/motivate employees

    6. Plan and conduct staff meetings

V. Leadership skills (workplace)

    1. Plan community health projects

    2. Participate in and/or plan board functions, task forces, and committees

    3. Mentor colleagues

    4. Plan, develop, and conduct continuing education activities

Administrative

I. Financial Management

    11. Obtain accurate claims submission through coding

II. Develop and implement marketing, communication, and education

    9. Generate communications (including press releases, news/feature stories, newsletters)

Commission on Accreditation of Allied Health Education Programs (CAAHEP)

Medical Assisting

"Standards and Guidelines for the Accreditation of Educational Programs in Medical Assisting" (2015)

Appendix B: Core Curriculum for Medical Assistants

Content Area XII: Safety and Emergency Practices

C. Cognitive Knowledge: Protective Practices

1. Identify:
   a. safety signs
   b. symbols
   c. labels

2. Identify safety techniques that can be used in responding to accidental exposure to:
   a. blood
   b. other body fluids
   c. needle sticks
   d. chemicals

3. Discuss fire safety issues in an ambulatory healthcare environment

4. Describe fundamental principles for evacuation of a healthcare setting

6. Discuss protocols for disposal of biological chemical materials

8. Identify critical elements of an emergency plan for response to a natural disaster or other Emergency.

P. Psychomotor (Skills) Protective Practices

1. Comply with:
   a. safety signs
   b. symbols
   c. labels

2. Demonstrate proper use of:
   a. eyewash equipment
   b. fire extinguishers
   c. sharps disposal containers

4. Participate in a mock exposure event with documentation of specific steps

A. Affective (Behavior): Protective Practices

1. Recognize the physical and emotional effects on persons involved in an emergency situation

2. Demonstrate self-awareness in responding to an emergency situation

Diagnostic Medical Sonography (2011)

"Standards and Guidelines for the Accreditation of Educational Programs in Diagnostic Medical Sonography" (2011)

C. Curriculum for Diagnostic Medical Sonographers

3. Learning Competencies Common to Each Concentration

b. Provide basic patient care and comfort.

1. Maintain infection control and utilize standard precautions;

2. Anticipate and be able to respond to the needs of the patient; Demonstrate age related competency (i.e., neonates, pediatric patients, adolescents, adults, and Obstetric patients) Respond appropriately to parental needs

3. Identify life-threatening situations and implement emergency care as permitted by employer procedure, including the following:

   Pertinent patient care procedures

   Principles of psychological support

   Emergency conditions and procedures

   First aid and resuscitation techniques

Surgical Technologist

"Standards and Guidelines for the Accreditation of Educational Programs in Surgical Technology" (2013)

Appendix B: Curriculum for Surgical Technologists

5. Professional Practice

b. Healthcare facility information

2. *Physical environment

   e) Describe the environmental systems and controls within the operative environment.

   f) State the proper ranges for temperature and humidity controls.

   g) Describe the various components of the operating room ventilation system.

   h) Describe the principles of environmental safety controls and guidelines.

   i) Discuss the potential hazards in the operating environment.

3. All-hazards preparation

   a) Describe disasters or public health emergencies that impact public health including the different types (e.g. natural, unintentional, & terrorist events) along with the general health, safety or security risks.

   b) Describe the all-hazards framework.

   c) Explain key components of regional, community, institutional, family, and personal disaster preparation and planning as related to the following:

i. Available informational resources

ii. Special needs of individuals

iii. Precautions and actions for protection

iv. Detection

v. Immediate response

vi. Short-term interventions

vii. Long-term interventions

d) Describe communication strategies and procedures used in a disaster including barriers to communicating and disseminating health information, reporting systems and procedures for contacting family, coworkers, and local authorities.

e) Describe the purpose & relevance of disaster support services including rationale for integration and coordination of all systems:

i. National Response Framework (NRF)

ii. National Incident Management Systems (NIMS)

iii. Hospital Incident Command System (HICS)

f) Describe the potential impact of mass casualties on the clinical and public health resources including infection control precautions, personal protective equipment, and decontamination procedures.

g) Explain the role of triage as a basis for prioritizing or rationing health care services for victims.

h) Describe the possible medical and mental health consequences, interventions, and solutions for managing those affected including the psychological, emotional, cultural, religious, and forensic considerations for management of mass fatalities and the resources, supplies and services available.

i. Immediate care

ii. Mass fatality management

iii. Mass evacuation

iv. Mass Sheltering

v. Prolonged Sheltering

i) Explain both the basic life-saving and life-support principles and procedures that can be used at a disaster scene.

j) Describe issues relevant to the management of individuals of all ages, populations, & communities affected by a disaster or public health emergency.

i. Moral

ii. Ethical

iii. Legal

iv. Regulatory

k) *Describe the support roles of the surgical technologist in a disaster.

Sources for Learning More

Centers for Disease Control and Prevention

"Public Health Preparedness Capabilities: National Standards and Local Planning"

National Disaster Interfaiths Network

"Religious Literacy Primer for Crises, Disasters, and Public Health Emergencies Field Guide: Primer"