Standard 1: Governance, Liability, and Accountability.

This standard is intended to provide a minimum baseline for every learner to understand the scope of their respective role in the overall governance structure of the organization. At a minimum, every learner will understand the requirement for specific governance policies, structure, liability, and his or her respective role in leadership and oversight of hospital planning and operations.

Learners who master this standard will be able to recognize and avoid:

- Lack of knowledge of personal liability as a member of hospital leadership
- Violations of the Georgia Open Records Act and similar local, state, and federal regulations
- Conflicts of interest such as close ties to hospital contractors or other relationships that may have a perceived or real bearing on decision making
- Lapses in professional behavior while representing the hospital including violations of duty of care, civil discourse, and preparedness
- Confidentiality violations such as sharing of privileged information relating to hospital operations or patient care
- Improper governance and oversight including imbalanced governance and administrative reporting
- Violations to the hospital’s gifts and gratuities policy such as accepting gifts from vendors and contractors
- Boards that are not representative of the served population or disregard certain categories of diversity in preference to others

Standard 2: Responsibility to Regulatory Agencies and Legal Considerations.

This standard is intended to familiarize learners with necessary local, state, federal, and other external reporting and regulatory responsibilities required of the hospital. In addition, this standard will educate learners on the required internal structures and policies to legally protect the organization and its representatives, employees, and patients. Learners will understand both their individual role and responsibility as well as the organization's role and responsibility.

Learners who master this standard will be able to recognize and avoid:

- Structures and policies that do not support appropriate risk management and create potential for liabilities in hospital operation
- Violations of HIPAA including improper storage of patient records and release of protected information
- Malpractice such as violations to legal scope of coverage for different types of clinicians and other local, state, and federal regulations
- Incorrect reporting as it relates to the hospital’s regulatory requirements particularly regarding physician and clinician performance and financial reports
- Limited options for discipline of impaired or disruptive providers therefor expanding the options and resources available for violations including, but not limited to: substance abuse, ethical violations, disruptive behavior, and violation of hospital protocol
• Violating the terms of the employer-employee relationship between the hospital and its staff
• Stark Law violations such as physician self-referral to other entities in which they may have a financial relationship
• Violations to the hospital’s nepotism policy which may include hiring or contacting with family members
• Sharing protected information within electronic health records
• Lapses in secured data throughout the hospital’s IT infrastructure that could open the hospital to cybersecurity risks

**Standard 3: Finances and Fiduciary Responsibility.**

In this standard the learner will understand how to utilize the variety of tools, resources, and terminology used in financial reporting and planning as well as his or her role in providing financial oversight to the hospital. Learners will also understand the requirement for fiduciary responsibility in all decision making.

Learners who master this standard will be able to recognize and avoid:

- Fiduciary infractions and improper financial oversight due to inability to utilize and interpret financial reports and tools such as balance sheets, profit and loss statements, contract evaluation, operating revenues, predictive analytics of hospital data, and cost reporting
- Breaches in obligation to act in the best interest of the hospital as a representative of the organization
- Uninformed decision making due to lack of knowledge of the components of revenue stream and payer mix

**Standard 4: Compliance.**

This standard is intended to provide scope for hospital leadership’s role in achieving and maintaining compliance with all internal and external reporting structures. In addition, learners will understand the role of the Board to provide leadership and oversight of the hospital.

Learners who master this standard will be able to recognize and avoid:

- Mismanagement of compliance reporting such as compliance reports not provided directly to the Board from the hospital compliance office
- Improper planning for future compliance adherence
- Hospital structures that do not allow for the independent role of the compliance officer and office

**Standard 5: Ethics.**

This standard is intended to provide every learner with a minimum baseline of knowledge to implement ethically sound decision making for hospital oversight, policy, and leadership. In addition, this standard will educate learners on the required components for internal ethics structures.

Learners who master this standard will be able to recognize and avoid:
• Ethical implications of implicit bias that can affect behaviors toward and care of members of specific identity groups
• Ethical breaches in end of life care including lack of use or misuse of “do not resuscitate” orders, living wills, advance directives, declaration of brain death, and other quality of life considerations
• Ethical violations relating to both the donor and the recipient in organ transplant cases
• Nonobservance of scope of practice and qualifications for employees based on clinician classification
• Violations of the hospital’s conscience objection policy for both patients and employees such as refusal of care or refusal to treat
• Violation of the hospital’s conflict resolution policies and procedures such as improper resolution of employee disputes
• Improper formation and use of a hospital ethics committee and adjudication process in cases of ethical ambiguity
• Unsuitable balance of short-term and long-term deployment of resources particularly in situations of resource scarcity

**Standard 6: Continuum of Care.**

This standard is intended to impress upon learners the obligation and requirement for physicians and other clinicians to provide a continuum of care, specific discharge communication, as well as to ensure and confirm access to medications, medical devices, and follow up care. The learner will also understand the requirement of the hospital and its leadership to create and implement policies and procedures to ensure this implementation to prevent rehospitalization.

Learners who master this standard will be able to recognize and avoid:

• Consequences of recurring rehospitalization including financial, regulatory, and health impacts
• Patient care that is isolated in scope and does not take into consideration the relationship between primary care, inpatient care, and specialty care as part of an overall continuum
• Ineffective patient discharge that disregards the designated caregiver as a valuable member of the patient’s care team and lacks clear and thorough verbal and written communication with the patient and their caregiver regarding post-discharge care, medications, and demonstration of medical devices
• Lapse in medical care that results from lack of confirmation of medication and device access and confirmation of necessary follow up appointments
• Rehospitalization as a result of ineffective communication with patient and caregiver regarding emergences after discharge

**Standard 7: Strategic Planning and Accountability.**

This standard is intended to provide a minimum baseline for every learner to understand the necessity and process of strategic planning and long-term resource planning. Learners will also understand the requirements of planning based on proper assessment of the served community and its health needs.
Learners who master this standard will be able to recognize and avoid:

- Improper long-term and strategic planning due to lack of guiding statements such as mission, vision, and value propositions
- Ineffective and inefficient strategic planning caused by poor structure and lack of strategic planning framework
- Fiscal mismanagement caused by inefficient and ineffective budgeting and allocation processes for long-term resource deployment
- Improper community health needs assessments that are too narrow in scope or improperly executed and cannot or are not used in long-term strategic planning

**Standard 8: Grants.**

This standard is intended to provide a minimum baseline for every learner to understand the purpose and process of grant funding as a means of supplementary revenue for initiatives and activities outside of the scope of standard hospital operations.

Learners who master this standard will be able to recognize and avoid:

- Undertaking grant funding that does not support the strategic needs of the hospital and its strategic plan
- Mismanagement of grant funding related to fiscal oversight and reporting