



HOUSE BILL No. 4390

February 14, 1995, Introduced by Reps. Bennane, DeMars, Baird, Stallworth, Yokich, Saunders, Parks and Pitoniak and referred to the Committee on Health Policy.

A bill to amend section 20171 of Act No. 368 of the Public Acts of 1978, entitled as amended

"Public health code,"

as amended by Act No. 252 of the Public Acts of 1990, being section 333.20171 of the Michigan Compiled Laws.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Section 1. Section 20171 of Act No. 368 of the Public Acts
2 of 1978, as amended by Act No. 252 of the Public Acts of 1990,
3 being section 333.20171 of the Michigan Compiled Laws, is amended
4 to read as follows:

5 Sec. 20171. (1) The department, after obtaining approval of
6 the advisory commission, shall promulgate and enforce rules to
7 implement this article, including rules necessary to enable a
8 health facility or agency to qualify for and receive federal

1 funds available for patient care or for projects involving new
2 construction, additions, modernizations, or conversions.

3 (2) The rules PROMULGATED UNDER SUBSECTION (1) THAT ARE
4 applicable to health facilities or agencies shall be uniform
5 insofar as is reasonable.

6 (3) The rules PROMULGATED UNDER SUBSECTION (1) THAT ARE
7 APPLICABLE TO HEALTH FACILITIES OR AGENCIES shall establish stan-
8 dards relating to ALL OF THE FOLLOWING:

9 (a) Ownership.

10 (b) Reasonable disclosure of ownership interests in propri-
11 etary corporations and of financial interests of trustees of vol-
12 untary, nonprofit corporations and owners of proprietary corpora-
13 tions and partnerships.

14 (c) Organization and function of the health facility or
15 agency ~~—~~ AND OF THE owner, operator, and governing body OF THE
16 HEALTH FACILITY OR AGENCY.

17 (d) Administration.

18 (e) Professional and nonprofessional staff, services, and
19 equipment appropriate to implement section 20141(3).

20 (f) Policies and procedures.

21 (g) Fiscal and medical audit.

22 (h) Utilization and quality control review.

23 (i) Physical plant including planning, construction, func-
24 tional design, sanitation, maintenance, housekeeping, and fire
25 safety.

26 (j) Arrangements for the continuing evaluation of the
27 quality of health care provided.

1 (k) Other pertinent organizational, operational, and
2 procedural requirements for each type of health facility or
3 agency.

4 (l) A MINIMUM PLAN OF INFECTION CONTROL APPLICABLE TO ALL
5 HEALTH FACILITIES OR AGENCIES.

6 (m) THE PREVENTION AND CONTROL OF IATROGENIC ILLNESS OR
7 INFECTION. AS USED IN THIS SUBDIVISION, "IATROGENIC ILLNESS OR
8 INFECTION" MEANS AN ILLNESS OR INFECTION THAT OCCURS AS A RESULT
9 OF TREATMENT RECEIVED IN A HEALTH FACILITY OR AGENCY. THE RULES
10 PROMULGATED UNDER THIS SUBDIVISION SHALL REQUIRE EACH HEALTH
11 FACILITY OR AGENCY TO PROVIDE, AT A MINIMUM, ALL OF THE
12 FOLLOWING:

13 (i) ANNUAL TRAINING FOR STAFF IN THE IMPLEMENTATION OF PRO-
14 CEDURES REQUIRED BY THE RULES.

15 (ii) FREE OF CHARGE, INFORMATION TO EACH PATIENT UPON ADMIS-
16 SION, AND TO THE DEPARTMENT AND GENERAL PUBLIC UPON REQUEST, PER-
17 TAINING TO THE NUMBER OF LIFE THREATENING INFECTIONS, THE NUMBER
18 OF INFECTIONS THAT MAY CAUSE SERIOUS BODILY HARM, AND THE NUMBER
19 OF DEATHS DUE TO OR INVOLVING IATROGENIC ILLNESS OR INFECTION
20 OCCURRING IN THE HEALTH FACILITY OR AGENCY DURING THE YEAR IMME-
21 DIATELY PRECEDING THE YEAR IN WHICH THE INFORMATION IS GIVEN,
22 SUBJECT TO SUBPARAGRAPH (v). THE INFORMATION PROVIDED SHALL BE
23 SPECIFIC TO THE TYPE OF MEDICAL PROCEDURE ABOUT WHICH THE
24 PATIENT, DEPARTMENT, OR GENERAL PUBLIC IS INQUIRING. THE INFOR-
25 MATION SHALL CONTAIN, AT A MINIMUM, THE NUMBER OF TIMES THE PAR-
26 TICULAR MEDICAL PROCEDURE WAS PERFORMED IN THE HEALTH FACILITY OR
27 AGENCY DURING THE PREVIOUS YEAR, THE AGGREGATE NUMBER OF

1 INFECTIONS DESCRIBED IN THIS SUBPARAGRAPH RESULTING FROM THAT
2 MEDICAL PROCEDURE IN THE HEALTH FACILITY OR AGENCY, EXPRESSED AS
3 A PERCENTAGE, AND THE AGGREGATE NUMBER OF DEATHS RESULTING FROM
4 THAT MEDICAL PROCEDURE IN THE HEALTH FACILITY OR AGENCY,
5 EXPRESSED AS A PERCENTAGE. THE INFORMATION MAY ALSO INCLUDE THE
6 NUMBER OF INFECTIONS OR DEATHS RELATED TO IATROGENIC ILLNESS OR
7 INFECTION RESULTING FROM THE PARTICULAR MEDICAL PROCEDURE SPE-
8 CIFIC TO THE PROVIDER THAT WILL BE PROVIDING THE MEDICAL TREAT-
9 MENT TO THE PATIENT. THE INFORMATION SHALL BE PROVIDED ON A FORM
10 PRESCRIBED BY THE DEPARTMENT.

11 (iii) INFORMATION TO THE DEPARTMENT REGARDING INFECTION CON-
12 TROL MEASURES IMPLEMENTED BY THE HEALTH FACILITY OR AGENCY IN
13 ADDITION TO THE INFECTION CONTROL MEASURES REQUIRED UNDER SUBDI-
14 VISION (l).

15 (iv) THAT EACH INCIDENCE OF IATROGENIC ILLNESS OR INFECTION
16 BE REFERRED TO AN EMPLOYEE OR AGENT OF THE HEALTH FACILITY OR
17 AGENCY WHO IS SKILLED IN EPIDEMIOLOGY TO DETERMINE IF ANY CHANGE
18 IN THE HEALTH FACILITY'S OR AGENCY'S INFECTION CONTROL PROCEDURE
19 IS NECESSARY.

20 (v) AN UPDATE AT LEAST EVERY 6 MONTHS OF THE INFORMATION
21 REQUIRED UNDER SUBPARAGRAPH (ii).

22 (4) The rules promulgated under section 21563 for the desig-
23 nation of rural community hospitals may also specify all of the
24 following:

25 (a) Maximum bed size.

26 (b) The level of services to be provided in each category as
27 described in section 21562(2).

1 (c) Requirements for transfer agreements with other
2 hospitals to assure efficient and appropriate patient care.