



10th Annual Orthopedic, Spine and Pain Management-Driven ASC Conference: Improving Profitability and Business and Legal Issues

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Westin Michigan Avenue

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Most Common Accreditation Problems in Orthopedic, Spine and Pain-Driven ASCs

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First Steps to preventing problems

- Obtain an appropriate AAAHC handbook
- Conduct a self assessment
- Identify what needs to be put in place to address the Standards



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Achieve an understanding of what is being surveyed

- Involves every aspect of the facility
- Policies and procedures should provide an initial understanding of how the organization operates
- Policies and procedures, written and non-written should reflect day to day operations
- Direct observation provides the actual linkage

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Core Chapters

- Not *if*, but *how* the core chapters are applicable
 - Identify policies and procedures and daily life of the organization for compliance
 - Achieve awareness of your organization's day to day operations
 - Be able to demonstrate a history of compliance with standards
- Rights of Patients
 - Governance
 - Administration
 - Quality of Care Provided
 - Quality Management and Improvement
 - Clinical Records and Health Information
 - Infection Prevention and Control and Safety
 - Facilities and Environment

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Adjunct Chapters

- Identify the Adjunct Chapters applicable to your organization
 - Correlate policies and procedures and daily life of the organization for compliance
 - Achieve awareness of your organization's day to day operations
 - Be able to demonstrate a history of compliance with standards
- Anesthesia Services
 - Surgical and Related Services
 - Pharmaceutical Services
 - Pathology and Medical Laboratory Services
 - Diagnostic and Other Imaging Services
 - Other Professional and Technical Services

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Adjunct Chapters cont.

- Frequently overlooked
- Standards are specific to organization and services provided
- **Health Education and Health Promotion**
- **Teaching and Publication Activities**
- **Research Activities**
- **Overnight Care and Services**

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Standards that frequently prove to be problematic



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Rights of Patients

- **Providing appropriate patient privacy**
- **After hour and emergency care**
- **Advance Directives, as required by state and federal law**
- **Patient Responsibilities > living will, medical power of attorney or other directives**
- **Patients informed > expressing suggestions, complaints and grievances**

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Governance *(General Requirements)*

- Fully and legally responsible
- Effective organization-wide communication
- Compliance with CMS requirements
- Fulfill applicable obligations under local, state and federal laws and regulations
- Risk Management, Safety and Infection
- Control and Quality Program
- Minimum annual review



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Governance *(Credentialing and Privileging)*

- Initial application – information required
- Verification of information
- Peer evaluation, initial
- NPDB
- Solo practice
- Privileges (specific to organization and specific time period)
- Reappointment



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Administration

- Long and short range planning
- Collection of unpaid accounts
- Confidentiality, security, physical safety of data
- Initial orientation and training, documentation
- Periodic review of employee compensation
- Compliance, federal and state laws
- Employee health records
- Students and postgraduate trainees



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Quality of Care

- Ongoing, comprehensive self assessment of quality of care provided
- Current H&P and appropriate diagnosis
- Updating medications at each visit
- Timely follow up of findings and tests
- Clinical record entries

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Quality Management and Improvement

- Peer Review Program
- Ongoing monitoring of important aspects of care
- Data collection in an ongoing manner and evaluation
- Quality improvement activities including benchmarking
- Ten elements of QI activities (studies)
- Evaluation of QM&I Program annually

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Quality Management and Improvement (cont.)

- Incapacitated health care professional
- Impaired health care professional
- Persons allowed in patient care areas
- Education in risk management activities, infection control and safety policies and processes, orientation and annually

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Clinical Records and Health Information

- Confidentiality and protection of clinical records
- Continuity of care, facilitation
- Presence or absence of allergies and untoward reactions to drugs and materials, verified at each encounter
- Authentication and verification of contents by health care professionals

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Infection Prevention and Control and Safety

- Approved by Governing Body
- Designated and qualified health care professional
- Nationally recognized guidelines
- Functional and sanitary environment
- Employee orientation and annual
- Safe environment
- Responsibility for Safety Program

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Facilities and Environment

- Life Safety Code 2000 Edition and other state and federal fire regulations
- Operated in a safe and secure manner
- Emergency drills including written evaluation
- Food services
- Adequate space allocation
- Fire alarm and fire suppression systems
- Temperature monitoring for items that are frozen, refrigerated, and/or heated

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Anesthesia Services

- Governing Body approval/anesthesia services
- Supervision of anesthesia services
- Approval of anesthesia providers
- Assessment and management of acute pain
- Safe environment including safe use of injectables and single-use syringes
- Malignant Hyperthermia protocols
- Privileges for drugs without antagonist medications
- Protocol for response/deeper than intended level of sedation occurs

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Surgical and Related Services

- Privileges
- History and physical within 30 days, or according to local or state requirement
- Medication instructions
- Surgical hand antisepsis (scrub)
- Tissue exemption list or examination
- Personnel attire in operating or procedure rooms including laundering
- Sterilization process
- Surgical site and surgical procedure identification

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Pharmaceutical Services

- Control and safe dispensing including samples
- Expiration dates
- Labeling of syringes
- Safe use of injectables and single use syringes
- Look-alike or sound-alike medications

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Pathology and Medical Laboratory Services (CLIA Waiver)

- **Quality control procedures including calibration and validating test results**
- **Staff training and competence**
- **Test results are reviewed and documented**



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Diagnostic and Other Imaging Services

- **Appropriate records or reports of services provided**
- **Privileges granted**
- **Proper warning signs, pregnant females**



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Other Professional and Technical Services

- **Identification of services and provider**
- **Credentialing/privileging**



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Teaching and Publication Activities

- **Formal relationship and responsibilities between the organization and the training institution and its trainees**

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Overnight Care and Services

- **Scope of services**
- **Privileges approved**
- **Eligibility for admission**
- **Food service compliance with local, state and federal guidelines**
- **All applicable standards**
- **Quality improvement program**

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**Planning, self assess
and understanding can
prevent accreditation
problems.**



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Thank you!



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