

**Welcome to the 17th Annual Ambulatory
Surgery Centers Conference, "Improving
Profitability and Business and Legal Issues"**

Session D : General Management and Accreditation

3:10 – 3:45 pm The Most Common Accreditation Problems

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IMPROVING HEALTH CARE QUALITY THROUGH ACCREDITATION

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**Chapter 1 Patient Rights
Common Problem:
No Policy/Procedures for Advanced Directives**

Solution:

- Add to Statement of Patient Rights
- Inform Patients prior to admission on your policy to suspend A.D. while in ASC
- Develop procedures for identifying A.D. at admission and for placing A.D. on patient chart upon request

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Chapter 2 Governance

Common Problem:

**Governing Body not ensuring organization is in
compliance with all local, state, federal laws,
statutes, rules & regulations.**

Solution:

- Develop a Corporate Compliance Plan to identify all applicable regulations and how these will be met.

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Chapter 2 Governance – Credentialing

Common Problem:

Failure to privilege surgeons for administration of anesthesia and interpretation of imaging studies.

Solution:

Add levels of anesthesia allowed and interpretation of imaging studies to list of privileges.

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Chapter 4 Quality of Care

Common Problem:

Inadequate system for ensuring patients are notified for follow-up of abnormal results of lab/imaging studies.

Solutions:

- Assign responsibility for notifying patients to the ordering physician in your Medical Staff Rules & Regulations
- Notify patients of pending lab/imaging results and who will inform them of results on their written discharge instructions, and who/where to call if not informed of results
- Monitor your system for compliance

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Chapter 5 Quality Improvement – Peer Review

Common Problem:

No link between Peer Review and re-credentialing activities.

Solution:

- Ensure Medical Staff Bylaws state results of Peer Review to be included in re-credentialing,
- Keep Peer Review log in each credential file
- Minutes of Medical Executive and Board meetings reflect Peer Review results reviewed

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Chapter 5 Quality Improvement

Common Problem:

Failure to produce meaningful quality IMPROVEMENT studies vs. quality monitoring activities.

Solutions:

- use benchmark results to establish measurable performance goal(s)
- follow the 10 elements
- look for opportunities to improve performance in clinical and administrative activities

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Chapter 7 Infection Control and Safety

Common Problem:

Lack of detailed Infection Prevention and Control Program and Plan.

Solutions:

- follow the standards
- select a set of nationally recognized guidelines (eg: CDC, APIC)
- directed by qualified health care professional with training/competence

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Medicare Deemed Status – Life Safety

Common Problem:

Failure to provide, test & record, appropriate Egress Lighting and Exit Signs.

Solutions:

- Complete the AAAHC Physical Environment Checklist (PEC) with/by qualified individual
- Perform monthly/yearly testing and log results
- Don't assume local/state inspections have you covered (NFPA 101, NFPA 99 = 1,800+ pages)

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Facility regulations Standards B.1 - 4:

- Appropriate portable fire extinguishers
- Illuminated emergency exit signs
- Emergency exit pathway lighting
- Fire-protected stairwell exits



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Medicare Deemed Status – Life Safety *Common Problem:* Penetrations in fire rated walls.

Solutions:

- Complete the AAAHC Physical Environment Checklist (PEC) with/by qualified individual
- Perform above-the-ceiling inspections on all rated walls after all new work
- Don't assume local/state inspections have you covered

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