

# Hospital/Ambulatory Surgery Center

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## **QUALITY PROGRAM REVIEW**

- Mission Statement
- DOH License is current

### **Quality Improvement**

- Written Plan, Policies, and Procedures
- Annual review/revision of written plan with evidence of oversight
- QA/QI Committee meets regularly and contemporaneous minutes are signed/dated
- Evidence of coordination/monitoring of activities throughout the facility; examples include: infection control, safety/maintenance, and pharmacy

### **Infection Control Plan**

- Written Policies and Procedures
- Documented monitoring of problems/trends with correction action plans
- Sterilization and re-use processes performed to appropriate standards; i.e. Autoclave use, Bio-testing with spore indicators, load indicators, and /or log books

### **Safety and Plant Management Program**

- Written policies and procedures
- Documented monitoring

## **EMPLOYEE REVIEW**

### **Medical Staff Bylaws**

- Written plan of medical staff responsibility(ies) with annual review

### **Medical Staff Credentialing Plan**

- Written plan, policies, and procedures

### **Professional Staff Licensure**

- Written Policy
- Documented monitoring of license renewals
- Documented monitoring of continued education/competency as required
- Nursing staff and/or ancillary staff members are CPR certified

### **Employee Orientation**

- Written Plan
- Orientation includes confidentiality/privacy training

### **Non-Professional Staff Oversight**

- Written policy
- Documented monitoring of certification renewals
- Documented monitoring of continued education as required