



2024 ASC SURVEY WATCH REPORT

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SURVEYORS

An overview of most frequently cited deficiencies from these organizations.

CMS

*(Centers for
Medicare
and Medicaid
Services)*

ACCREDITING ORGANIZATIONS

TJC

(The Joint Commission)

AAAHC

(Accreditation Association for Ambulatory Health Care)

ACHC

(Accreditation Commission for Health Care)

QUAD A

(American Association for Accreditation of Ambulatory Surgery Facilities)

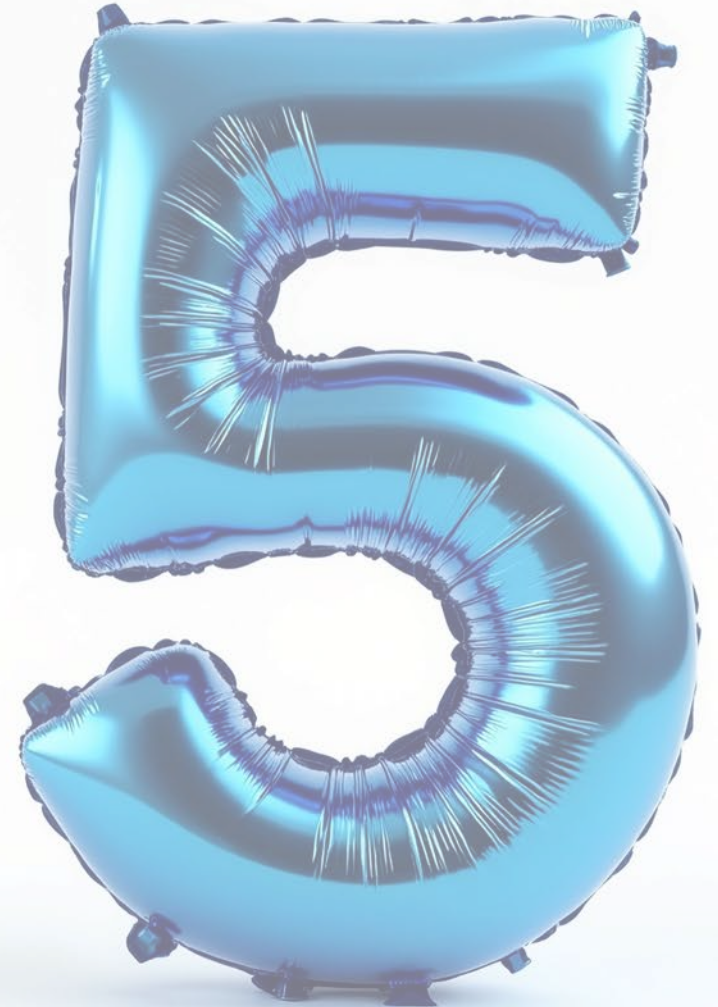


TOP 5 DEFICIENCIES

CMS Conditions for Coverage

1. Sanitary Environment (Q-0241)
2. Infection Control Program (Q-0242)
3. Environment (Q-0100)
4. Administration of Drugs (Q-0181)
5. Infection Control (Q-0240)

3 of the **top 10** ASC citations
fall under §416.51 Conditions for Coverage
Infection Control



CMS 1 | Sanitary Environment

§416.51(a) Standard: Sanitary Environment

The ASC must provide a functional and sanitary environment for the provision of surgical services by adhering to professionally acceptable standards of practice

- Ventilation and water quality control issues, especially during internal or external construction/renovation
- Safe air handling systems in areas of special ventilation, such as operating rooms
- Food sanitation
- Cleaning and disinfecting environmental surfaces, carpeting, and furniture
- Disposal of regulated and non-regulated waste
- Pest control



CMS 2 | Infection Control Program

§416.51(b) Standard: Infection Control Program

The ASC must maintain an ongoing program designed to prevent, control, and investigate infections and communicable diseases

- Must include documentation that the ASC has considered, selected, and implemented nationally recognized infection control guidelines

The program is ...

- Under the direction of a designated and qualified professional who has training in infection control
- An integral part of the ASC's QAPI Program
- Responsible for providing a plan of action for preventing, identifying, and managing infections and communicable diseases and for immediately implementing corrective and preventive measures that result in improvement



CMS 3 | Environment

§416.44 Condition for Coverage: Environment

The ASC must have a safe and sanitary environment, properly constructed, equipped, and maintained to protect the health and safety of patients

- Must comply with requirements governing the construction and maintenance of a safe and sanitary physical plant, safety from fire, emergency equipment and emergency personnel
- Includes both Life Safety Code and Health standards



CMS 4 | Administration of Drugs

§416.48(a) Standard: Administration of Drugs

Drugs must be prepared and administered according to established policies and acceptable standards of practice

- Must be a physician's order on file
- Following manufacturer's label
- Not preparing too far in advance
- Any pre-filled syringes must be:
 - initialed by the person who draws it
 - dated and timed to indicate when they were drawn
 - labeled as to both content and expiration date
- Infection control practices



CMS 4 | Administration of Drugs, Controlled Substances

§416.48(a) Standard: Administration of Drugs

There must be records of receipt and disposition of all drugs listed in Schedules II, III, IV, and V

The ASC's policies and procedures should also address the following:

- Accountability **procedures** to ensure control of the distribution, use, and disposition of all scheduled drugs
- **Records** of the receipt and disposition of all scheduled drugs must be current and must be accurate
- **Records** to trace the movement of scheduled drugs throughout the ASC (entry to departure)
- The **licensed health care professional** who has been designated responsible for the ASC's pharmaceutical services is responsible for keeping all records current
- All drug records are in order and an account of all scheduled drugs is maintained and any **discrepancies** in count are **reconciled promptly**
- The ASC's system is capable of readily and quickly **identifying loss or diversion**



CMS 5 | Infection Control

§416.51 Conditions for Coverage – Infection Control

The ASC must maintain an infection control program that seeks to minimize infections and communicable diseases

The infection control program must:

- Provide a functional and sanitary environment for surgical services, to avoid sources and transmission of infections and communicable diseases
- Be based on nationally recognized infection control guidelines
- Be directed by a designated health care professional with training in infection control
- Be integrated into the QAPI program
- Be ongoing
- Include actions to prevent, identify, and manage infections and communicable diseases
- Include a mechanism to immediately implement corrective actions and preventive measures that improve the control of infection



TOP 5 DEFICIENCIES

Life Safety Code

1. Building Safety (Q-0108)
2. Electrical Systems – Essential Electric System (K918)
3. Sprinkler System – Maintenance and Testing (K353)
4. Fire Alarm System – Testing and Maintenance (K345)
5. Fire Drills (K712)



LSC 1 | Building Safety

§416.44(c) Standard: Building Safety

The ASC must meet the applicable provisions and must proceed in accordance with the 2012 edition of the Health Care Facilities Code

- NFPA 99, and Tentative Interim Amendments TIA 12-2, TIA 12-3, TIA 12-4, TIA 12-5 and TIA 12-6
- Chapters 7, 8, 12, and 13 of the adopted Health Care Facilities Code do not apply to an ASC
- If application of the Health Care Facilities Code would result in unreasonable hardship for the ASC, CMS may waive specific provisions of the Health Care Facilities Code, but only if the waiver does not adversely affect the health and safety of patients



LSC 2 | Electrical Systems – Essential Electric System

- The generator or other alternate power source and associated equipment is capable of supplying service within 10-seconds
- If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches
- Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110
- Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for four continuous hours



LSC 2 | Electrical Systems – Essential Electric System

Continued

- Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads and are conducted by competent personnel.
- Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements
- Written records of maintenance and testing are maintained and readily available
- EES electrical panels and circuits are marked and readily identifiable



LSC 3 | Sprinkler System – Maintenance & Testing

- Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems
- Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available
 - Date sprinkler system last checked
 - Who provided system test
 - Water system supply source
- Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system



LSC 4 | Fire Alarm System – Testing & Maintenance

- A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code
- Records of system acceptance, maintenance and testing are readily available



LSC 4 | Fire Drills

- Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions
- Fire drills are held at expected and unexpected times under varying conditions, at least quarterly
- The staff is familiar with procedures and is aware that drills are part of established routine
- Fire drills vary by at least one hour each quarter



References

CMS Releases Top Citations from 2023, ASC Focus, June 2024

Survey Reports submitted to VMG for 2023-2024



Compliance & Operations > Survey Watch

Real Survey Reports in Real Time

Available to eSupport Members



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SURVEY WATCH

Progressive Surgical Solutions has the advantage of working with scores of facilities across the country deemed status agencies. As an eSupport member you can benefit from our experience. Check out our reports on various types of surveys.

[Quality Certification & Oversight Reports for ASCs](#)

[ASC Complaint 2567](#)

[CLICK LINKS BELOW TO DOWNLOAD](#)

2024

- TJC SURVEY SEPTEMBER 2024 (2)
- TJC SURVEY SEPTEMBER 2024 (1)
- TJC SURVEY AUGUST 2024
- TJC SURVEY MAY 2024
- Quad A (OBS) SURVEY APRIL 2024
- CMS SURVEY MARCH 2024
- AAHC SURVEY APRIL 2024

2023

2022

2021

2020



Compliance & Operations > Infection Control

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INFECTION CONTROL: OVERVIEW

CMS Conditions for Coverage require that ASCs comply with the following standards:

416.51 Standard: Infection Control

The ASC must maintain an infection control program that seeks to minimize infections and communicable disease.

416.51 (a) The ASC must provide a functional and sanitary environment for the provision of surgical services by adhering to professionally acceptable standards of practice.

416.51 (b) The ASC must maintain an ongoing program designed to prevent, control, and investigate infections and communicable diseases. In addition, the infection control and prevention program must include documentation that the ASC has considered, selected, and implemented nationally recognized infection control guidelines. The program is:

- (1)** Under the direction of a designated and qualified professional who has training in infection control
- (2)** An integral part of the ASC's quality assessment and performance improvement program; and
- (3)** Responsible for providing a plan of action for preventing, identifying, and managing infections and communicable diseases and for immediately implementing corrective and preventive measures that result in improvement.

SEARCH

INFECTION CONTROL

Infection Control Overview

[Infection Control Coordinator](#)
[Infection Prevention & Investigation](#)
[Hand Hygiene](#)
[Surgical Eye Prep](#)
[Instrument Decontamination and Sterilization](#)
[Environmental Sanitation](#)
[Tuberculosis Control Program](#)
[Vaccine Storage and Handling](#)
[Scope Processing](#)
[Infection Control Resources](#)
[COVID-19](#)

Compliance & Operations > Medication Management

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MEDICATION MANAGEMENT: OVERVIEW

CMS Conditions for Coverage require ASCs to comply with the following standards:

§416.48 Condition for Coverage: Pharmaceutical Services

The ASC must provide drugs and biologicals in a safe and effective manner, in accordance with accepted professional practice, and under the direction of an individual designated responsible for pharmaceutical services.

§416.48(a) Standard: Administration of Drugs

Drugs must be prepared and administered according to established policies and acceptable standards of practice

- (1)** Adverse reactions must be reported to the physician responsible for the patient and must be documented in the record.
- (2)** Blood and blood products must be administered only by physicians or registered nurses.
- (3)** Orders given orally for drugs and biologicals must be followed by a written order and signed by the prescribing physician.

SEARCH



MEDICATION MANAGEMENT

Medication Management Overview

- Compounding
- Controlled Substances
- Eye Drops
- Formulary
- Infection Control
- Medication Labeling
- Medication Safety
- CA Board of Pharmacy
- Resources

Compliance & Operations > Fire Safety

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FIRE SAFETY: OVERVIEW

CMS Conditions for Coverage require all ASC's to comply with the following standard:

416.44(b) Standard: Safety From Fire

- (1)** Except as otherwise provided in this section, the ASC must meet the provisions applicable to Ambulatory Healthcare Centers of the 2000 edition of the Life Safety Code of the National Fire Protection Association, regardless of the number of patients served...
- (2)** In consideration of a recommendation by the State survey agency, CMS may waive, for periods deemed appropriate, specific provisions of the Life Safety Code which, if rigidly applied, would result in unreasonable hardship upon an ASC, but only if the waiver will not adversely affect the health and safety of the patients.
- (3)** The provisions of the Life Safety Code do not apply in a State if CMS finds that a fire and safety code imposed by State law adequately protects patients in an ASC.
- (4)** An ASC must be in compliance with Chapter 21.2.9.1, Emergency Lighting, beginning on March 13, 2006.
- (5)** Notwithstanding any provisions of the 2000 edition of the Life Safety Code to the contrary, an ASC may place alcohol-based hand rub dispensers in its facility if.... (see requirement below)

This form is used by CMS when conducting a Life Safety Code Survey:

[Fire Safety Survey Report-2012 Life Safety Code Ambulatory Health Care](#)

SEARCH



FIRE SAFETY

Fire Safety Overview

[Requirements](#)

[Resources](#)

[Videos](#)

Compliance & Operations > Compliance Calendar

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ASC COMPLIANCE CALENDAR: LIFE SAFETY CODE

NOTE: This Facility Compliance Calendar addresses CMS and accrediting agency requirements ONLY. You must research your state and local regulations for different/additional requirements.

		The documentation you must complete to prove compliance	RESPONSIBLE PARTY	Where to find a form or log template on eSupport
FREQUENCY	REQUIREMENT	REQUIRED DOCUMENTATION		eSUPPORT RESOURCES
D	Fire Safety	Ensure exit pathway, lines of egress, fire extinguishers, and fire alarm pull stations are unobstructed. Ensure fire-rated doors and self-closing doors latch and aren't damaged. Track on a log.	Trained Facility Personnel	eSupport > Compliance & Operations > Form Samples > Life Safety Code
D	Medical Gas	Ensure a reserve supply of at least two cylinders is connected to the manifold. Track on a log.	Trained Facility Personnel	

ASC COMPLIANCE CALENDAR: CLINICAL OPERATIONS

NOTE: This Facility Compliance Calendar addresses CMS and accrediting agency requirements ONLY. You must research your state and local regulations for different/additional requirements.

		The documentation you must complete to prove compliance	RESPONSIBLE PARTY	Where to find a form or log template on eSupport
FREQUENCY	REQUIREMENT	REQUIRED DOCUMENTATION		eSUPPORT RESOURCES
D	Biological Indicator Test	Log for sterilizers in use. Track in a log book. Typically they come with indicator system.		
D	Blanket and/or Fluid Warmer	Log temperature. Include acceptable range for per manufacturer DFUs for fluids stored, and action/resolution if temperature is out of range.		eSupport > Compliance & Operations > Policies and Procedures > Nursing > Warmed Blankets and Intravenous/Irrigation Solutions and Logs
D	Bowie-Dick Test	Log for prevac sterilizers in use.		
D	Controlled Substances Perpetual Inventory	Log opening and closing counts, additions/deletions to inventory, wasted drug quantities; inventory counts and waste documentation require 2 RN signatures.		eSupport > Compliance & Operations > Medication Management > Controlled Substances > Perpetual Inventory Sheet
D	Controlled Substance Administration Sheet	Record of patient, medication, dose administered, and administered by.		eSupport > Compliance & Operations > Medication Management > Controlled Substances > Narcotic Control Sheets
D	Crash Cart Inspection	Log AED/Defibrillator test, external cart inspection including suction, oxygen supply, drug outdated list, etc.		eSupport > Compliance & Operations > Form Samples > Nursing > Crash Cart Checklist Example (Daily)
D	Environmental Sanitation	Log daily housekeeping performed including terminal cleaning of operating /procedure rooms.		eSupport > Compliance & Operations > Infection Control > Environmental Sanitation > Terminal Cleaning Log (Housekeeping)
D	Medication Lot Numbers	Log lot #'s of all meds used in preop/PACU/OR in case of recall (OPTIONAL). Create daily log for lot #'s of all medications used. In OR also document lot #'s for other sterile items and equipment that may be part of an infection investigation.		
D	Refrigerator Temperature	Log temperature using a 24/7 thermometer, including action and resolution if the temperature is out of range. Refrigerator range 36 – 46°F Freezer range 4 – 14°F (or manufacturers recommendations of frozen item).		
D	Surgical Log	Log patient ID, date, procedure, physician, anesthesia type, at a minimum. May be electronic.		
D (IA)	State-mandated SSI (and other) Reporting	Report to NHSN: Colorado, Massachusetts, Nevada, New Hampshire, and New Jersey Requires reporting by ASCs using NHSN SSI definitions, but to their state-based database. Missouri Check your state regulations regarding additional state-mandated reporting.		
D (IA)	Cidex OPA	Log patient ID, date, time, operator, items soaked, and monitoring strip results.		
D (IA)	DEA 222	Log upon receipt of controlled substances, per facility policy.		
D (IA)	Equipment Repair	Log equipment, malfunction description, date out, out to whom, date in.		
D (IA)	Exceptions	Track exceptions that do not rise to the severity of an incident to identify trends and take action as appropriate.		eSupport > Compliance & Operations > Quality Management > Risk Management > Near Miss Log
D (IA)	IUSS Sterilization	Log patient ID, date/time, load #, items, cycle length, operator, chemical indicator, reason. (IUSS is reserved for specific circumstances and criteria).		
D (IA)	Incident Report	Document description of occurrence (without opinion) and to whom/when it was reported so it can be investigated and analyzed.		eSupport > Compliance & Operations > Quality Management > Risk Management > Incident Report
D (IA)	Incident Report Log	Log date, incident #, brief description and action taken.		eSupport > Compliance & Operations > Quality Management > Risk Management > Incident Report Log
D (IA)	Infection Control Tracking Log (ACHC only)	Date, patient, procedure, condition of patients with increased risk for infection due to intravascular device, immunocompromised, medical instability, morbidly obese, etc.		
D (IA)	Sharps Injury	Log sharps injury using approved facility sharps injury log form.		eSupport > Compliance & Operations > Bloodborne Pathogen Plan > Sharps Injury Log
D (IA)	Specimen/Tissue	Log at a minimum, date, patient name, diagnosis, requesting MD, tissue sent and verify path report received.		
M	ASC-20 NHSN COVID-19 Vaccination Reporting	Report COVID-19 vaccination information to the NHSN monthly and by quarterly deadline. Track vaccination and booster information for staff.		eSupport > Compliance & Operations > Quality Reporting > ASC-20 Reporting
M	Complete Crash Cart Inspection	Break lock and check every drawer for supplies per approved inventory. Replace expired supplies.		eSupport > Compliance & Operations > Form Samples > Nursing > Crash Cart Inventory
M	Credentials Expiration Dates	Track expiration dates for physician credentials and facility staff licensure/certification, etc. Update expired documents and online verifications, as needed.		

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Compliance & Operations > Form Samples > Life Safety Code



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FORM SAMPLES: LIFE SAFETY CODE

If you have any questions regarding compliance with Life Safety Code requirements, please contact us to inquire about consulting services with our Life Safety Code expert courtney@pss4asc.com

 [CLICK LINKS BELOW TO DOWNLOAD](#)

PHYSICAL ENVIRONMENT CHECKLIST







MONTHLY REQUIREMENT

Designated Personnel, appointed by the facility, shall conduct an environmental tour every month of all patient care areas in an effort to provide a safe and sanitary environment for patients, staff and visitors. The overall objective is to identify and eliminate any risks in the physical environment of care.

May 2023: Updated to reflect more detailed Life Safety Code requirements for inspection, testing, and maintenance of fire systems and additional physical plant safety items. Surveyors are hyper-focused on Life Safety requirements. Make sure you have the most current version of this form.

 [Physical Environment Checklist \(updated May 2023\)](#)

LIFE SAFETY CODE FORMS AND LOGS

-  [Emergency Call System Testing Log](#)
-  [Emergency Exit Signs Log](#)
-  [Fire Extinguisher Monthly Check](#)
-  [Fire Systems and Safety Inspection Log](#)
-  [Operating Room Emergency Lights Testing Log](#)
-  [Generator Monthly Load Test](#)

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FORM SAMPLES

- [Form Samples Overview](#)
- [Medical Record Forms](#)
- [Laser Procedures \(Ophthalmology\)](#)

Life Safety Code

[Nursing](#)



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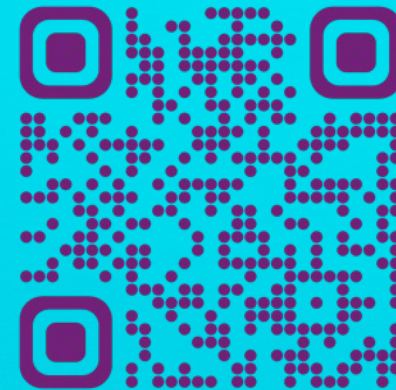
RUNNING AN ASC CAN BE OVERWHELMING





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ASC

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Upcoming Webinars

DATE		CE	WEBINAR TOPIC	SPEAKER
DEC 13	60	RN, CASC CAIP	Infection Control Risk Assessment: A Guided Review	Crissy Benze

www.ProgressiveSurgicalSolutions.com/webinars



2025 PSS WEBINAR CALENDAR *coming soon!*

JAN 6 |

ASC Quality Reporting Update

Gina Throneberry, ASC Association

*Stay tuned for registration
details in the New Year.*