

## Quality Assurance Activity 2020

### Self-Assessment for Ambulatory Surgery Centers Resuming Elective Surgeries and Procedures

Source: N.J.A.C 8:34A \*

Purpose: To ensure Compliance with NJDOH Guidelines for Patient and Staff Safety Precautions from Coronavirus 2019 (COVID-19) in Ambulatory Surgery Centers

Section 1: Reopening Requirements (Administrative)	Yes	No
1. Adherence with State and CDC guidelines to prevent further spread of COVID-19 (a1)		
2. Preparedness plans in place for potential future COVID-19 surges		
3. Prioritization policy in place for care provision and scheduling (c)		
4. Documented evidence for: equipment up-to-date, preventative maintenance, and testing per manufacturer's guidelines before reopening/use (d3,iii)		
5. Hospital Transfer Agreement: Documentation that hospital has been notified in writing of date for resuming services (d,4)		
6. Policy that procedures will not be performed on COVID-19 positive patient (d,e)		
7. Policy in place for requiring patients to wear mask (except for procedures that do not allow for mask use (a,4)		
8. Policy in place that visitors are not permitted into the ASC (with exceptions g1, i-iii). <i>Subject to change per NJ DOH guidelines.</i>		
9. Discharge policies are not changed (d,h)		
10. Comply with Executive Order 111 (2020) for reporting data metrics (d,l, 1-2)		
11. Policy in place for removal of symptomatic employees (a,2)		
12. Screening process in place for health care personnel (HCP) for COVID-19 symptoms (a1)		
13. Social distancing policy and processes for personnel in place (per CDC) (a1)		
14. Documented evidence of staff education & training for planned procedures, patient population, and facility resources (d2,i)		
15. Daily staffing processes assure that qualified personnel are present to perform procedures, provide direct care, and needed follow-up (d2,iii)		



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<b>Section 2: PPE and Cleaning</b>	<b>Yes</b>	<b>No</b>
16. COVID-19 Policy in place for Personal Protective Equipment (PPE) per CDC & DOH recommendations for patients & patient support person (d1,i)		
17. Policy in place for HCPs requirement to wear PPE per CDC & DOH (d1,ii)		
18. COVID-19 PPE policy in place for non-direct care employees (d1,iii)		
19. COVID-19 policy addresses availability of PPE for a seven-day minimum supply (d1,iv)		
20. Process in place for staff training in the use of PPE (d1,iv)		
21. Policy in place that cleaning & disinfecting supplies are COVID-19 compatible (d3,i)		
22. Process to ensure adequate supply of: hand sanitizers, tissues, non-touch receptacles with disposable liner in restrooms & patient areas (d3,ii)		

Completed by (Signature) \_\_\_\_\_

Date: \_\_\_\_\_



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Date: \_\_\_\_\_

Initials \_\_\_\_\_

Section 3: Daily Checks	Yes	No
1. Daily hospital capacity monitoring for increased COVID-19 trajectory (with hospital(s) that ASC has an existing transfer agreement) (b) <a href="https://nj.gov/health/cd/topics/covid2019_dashboard.shtml">https://nj.gov/health/cd/topics/covid2019_dashboard.shtml</a>		
2. Expiration dates checked for all supplies and medications (d3,v)		
3. Social distancing practiced for patients per CDC guidelines (d,f1): • Staggered scheduling, Wait in car, removal of all magazines, entrance signage re COVID-19 (d,f,i-iv)		
4. Documentation that validates every patient is COVID-19 RT-PCR and COVID-19 negative per NJDOH guidelines (f,2).		
5. Documented evidence that every patient was screened for COVID-19 exposure		
6. Documented evidence that every patient has received COVID-19 education in the pre-op assessment (d,f3, i-v) (d,f4 i-ii)		
7. Health care personnel screened for COVID-19 symptoms (a1)		
8. Adequate supply available for: hand sanitizers, tissues, & disposable liners in restrooms & patient areas (d3,ii)		
9. Adequate supply of PPE available for all staff		
10. Qualified personnel are present to perform procedures, provide direct care, and needed follow-up (d2,iii)		

