



International Accreditation  
Standards Manual  
*For Accreditation of Rehabilitation Facilities  
International*



*American Association for Accreditation of Ambulatory Surgery Facilities International  
Version 2.0*



# TABLE OF CONTENTS

---

<u>Rehabilitation Facility International Accreditation</u>	
The Accreditation Program	1
<b>100</b> Definitions	1
<b>200</b> Personnel Qualifications	2
<b>300</b> Compliance with Federal, State, Province or Local Laws	3
<b>400</b> Administrative Management	4
<b>500</b> Plan of Care and Physician Involvement	6
<b>600</b> Physical and Occupational Therapy Services	8
<b>700</b> Speech Pathology and/or Audiology Services	12
<b>800</b> Rehabilitation Program	13
<b>900</b> Clinical Records	14
<b>1000</b> Physical Environment	17
<b>1100</b> Infection Control	20
<b>1200</b> Disaster Preparedness	22
<b>1300</b> Program Evaluation	23

---

NOTES:

**AMERICAN ASSOCIATION FOR  
ACCREDITATION OF  
AMBULATORY SURGERY  
FACILITIES INTERNATIONAL, INC.**



**Standards and Checklist for Accreditation of  
Rehabilitation Facilities, International**

Version 2.0 • June 2012

© 2012

American Association for Accreditation of Ambulatory Surgery Facilities International, Inc.



## **The Accreditation Program**

The Rehabilitation Agency (RA) International Program was developed by the American Association for Accreditation of Ambulatory Surgery Facilities International, Inc. (AAAASFI). The program is available for participation nationwide. The AAAASFI RA Accreditation Program certifies that an accredited organization meets internationally recognized standards and is conducted by qualified subject matter experts experienced in the field, who determine the standards under the direction of the Board of Directors of AAAASFI. The AAAASFI RA Accreditation Program strives for the highest standards of excellence for its organizations by regularly revising and updating its requirements for patient safety and quality of care. AAAASFI requires 100% compliance of AAAASFI RA approved standards.

This program includes the following types of facilities referred to generically and collectively as “organizations”:

- **Clinic.** A facility that is established primarily to furnish outpatient physician services and that meets the following tests of physician involvement.
  - The medical services are furnished by a group of three or more physicians practicing medicine together.
  - A physician is present during all hours of operation of the clinic to furnish medical services, as distinguished from purely administrative services.
- **Public Health Agency.** An official agency established by a Provincial or local government, the primary function of which is to maintain the health of the population served by performing environmental health services, preventative medical services, and in certain cases, therapeutic services.
- **Rehabilitation Agency.** An agency that provides an integrated multidisciplinary rehabilitation program designed to upgrade the physical functioning of handicapped disabled individuals by bringing specialized rehabilitation staff together to perform as a team; and provides at least the following services: physical therapy or speech-language pathology services.

### **Basic Mandates**

- Changes in clinic ownership must be reported to the AAAASFI Office within thirty (30) days
- All qualified personnel practicing in an accredited organization must meet one of the following criteria:
  1. Physical Therapist
  2. Physical Therapist Assistants
  3. Occupational Therapist
  4. Certified Occupational Therapist Assistant - COTA
  5. Speech Language Pathologist (Audiologist) - SLP

## **Inspection**

An agency is inspected every three years. All RA Accreditation Program inspectors are trained by AAAASFI. Inspectors have a working familiarity with rehabilitation agency. The agency inspector will review any deficiencies with the agency director and forward the Standards and Checklist answer sheet to the AAAASFI Office. To be accredited by AAAASFI, an agency must meet every standard.

## **Self-Evaluation**

An agency is evaluated by the agency director each year between inspections and the Standards and Checklist answer sheet is sent to the AAAASFI Office. An agency's RA accreditation remains valid if it continues to meet every standard.

## **Denial or Loss of Accreditation**

The AAAASFI may deny or revoke accreditation of an agency if the agency fails to satisfy every standard. In addition, if any medical professional providing services at the agency;

(A) has had their privileges restricted or limited related to lack of clinical competence, ethical issues

(B) has been found to be in violation of the Code of Ethics of any professional society or association of which they are a member.

(C) has had their right to practice limited, suspended, terminated or otherwise affected by any state, province, or country, or if they have been disciplined by any licensing authority.

(D) non-reporting of any of the above to the AAAASFI.

## **Hearing**

Any agency whose accreditation has been revoked or denied by the AAAASFI has the right to a Hearing at which it may present such information as it deems advisable to show that it has satisfied the requirements for accreditation. The Hearing process is described in the AAAASFI Bylaws available from the AAAASFI Office.



## **Emergency Suspension or Emergency Probation**

The AAAASFI may place an agency on Emergency Suspension or Emergency Probation status upon receiving information that a state board has taken action, or begun formal proceedings which may result in it taking action against a license of a practitioner at the agency, or the Board of Directors determining that the agency may no longer meet AAAASFI standards for accreditation. An agency that has been placed on Emergency Suspension or Emergency Probation status will remain in such status pending an expedited investigation and possible Hearing conducted in accordance with AAAASFI procedures available from the AAAASFI Office.

### **Important Notice -**

Maximal patient safety has always been our guiding concern. We are proud that our Standards may be considered the strongest of any agency that accredits rehabilitation facilities and that many consider them to be the *Gold Standard*. We recognize, however, that they need to be part of a living document, and we continually re-evaluate and revise these Standards in the light of medical advances and changing legislative guidelines.

The AAAASFI RA Accreditation Program requires 100% compliance with each Standard to become and remain accredited. There are no exceptions. However, when a Standard refers to appropriate or proper or adequate, reasonable flexibility and room for individual consideration by the inspector is permitted as long as patient and staff safety remain uncompromised.

The following Standards are the property of the American Association For Accreditation of Ambulatory Surgery Facilities, Inc. Unauthorized use is prohibited.

Copyright 2010 American Association For Accreditation of Ambulatory Surgery Facilities, Inc. All rights reserved.

AAAASFI  
7500 Grand Avenue, Suite 200  
Gurnee, IL 60031-2986

Phone: 847-775-1970  
Fax: 847-775-1985  
Web: [www.aaaasf.org](http://www.aaaasf.org)  
International Email Contact: [Adriana@aaaasf.org](mailto:Adriana@aaaasf.org)

NOTES:



## RA PROGRAM

The clinic/agency director must attest that the clinic/agency meets all local, state, and federal regulations, since governmental regulations may supersede AAAASFI Outpatient Physical Therapy Facilities Accreditation Standards. Please note, however, that the stricter regulation applies, whether it is the federal, state, local, or AAAASFI/RA standard.

Please complete and sign the following Clinic/Agency Director's Attestation document and return it to the AAAASFI office.

### Clinic/Agency Director's Attestation

As director of the (name of clinic/agency)

\_\_\_\_\_ ,

located at

\_\_\_\_\_ ,

I attest that this clinic/agency meets all applicable local, state, and federal zoning and construction codes and regulations, including Certificate of Need requirements, and laboratory regulations if mandated. I further acknowledge that wherever governmental regulations or codes differ from AAAASFI/RA Standards, the stricter rule is applicable.

\_\_\_\_\_  
Clinic/Agency Director's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Clinic/Agency Director



# AAAASFI Rehabilitation Facilities 2.0

## 100 Definitions

### 100.10 Definitions

Organization: A clinic or rehabilitation agency.

#### 100.010.005

A clinic is a facility that is established primarily to furnish outpatient physician services and that meets the following test of physician involvement:

- A) The medical services are furnished by a group of three or more physicians practicing medicine together.
  - B) A physician is present during all hours of operation of the clinic to furnish medical services, as distinguished from purely administrative services.
- 

#### 100.010.010

Extension location:

A location or site from which a rehabilitation agency provides services within a portion of the total geographic area served by the primary site. The extension location is part of the rehabilitation agency. The extension location should be located sufficiently close to share administration, supervision, and services in a manner that renders it unnecessary for the extension location to independently meet the conditions of participation as a rehabilitation agency.

---

#### 100.010.015

A rehabilitation agency:

Provides an integrated interdisciplinary rehabilitation program designed to upgrade the physical functioning of handicapped disabled individuals by bringing specialized rehabilitation staff together to perform as a team.

---

#### 100.010.020

A rehabilitation agency:

Provides at least physical therapy, speech-language pathology, or audiology services.

---

# AAAASFI Rehabilitation Facilities 2.0

## **100**     **Definitions**

### **100.010.025**

Supervision - Authoritative procedural guidance that is for the accomplishment of a function or activity and that:

- A) Includes initial direction and periodic observation of the actual performance of the function or activity
  - B) Is furnished by a qualified person.
  - C) Is furnished by a qualified person whose sphere of competence encompasses the particular function or activity.
  - D) Is on the premises if the person performing the function or activity does not meet the practitioner qualifications.
- 

## **200.10**     **Personnel Qualifications**

### **200.010.005**

General qualification requirements:

All personnel who are involved in the furnishing of outpatient physical therapy, occupational therapy, speech-language pathology, and audiology services directly by or under arrangements with an organization must be legally authorized (licensed, certified or registered) to practice by the governing body (the County, State, Province or professional society) in which they perform the functions or actions, and must act only within the scope of their license, province certification, or registration.

---

### **200.010.010**

An administrator is a person who:

- A) Has experience or specialized training in the administration of health institutions or facilities.
  - or
  - B) Is qualified and has experience in one of the professional health disciplines.
-

## AAAASFI Rehabilitation Facilities 2.0

### **300 Compliance with Federal, State, Province or Local Laws**

#### **300.10 Compliance with Federal, State, Province or Local Laws**

##### **300.010.005**

The organization and its staff are in compliance with all applicable Federal, State or Province, and local laws and regulations.

---

##### **300.010.010**

Licensure of organization:

In any State or Province in which the State or Province, or applicable local law, provides for the licensing of organizations, a clinic, rehabilitation agency, or public health agency is licensed in accordance with applicable laws.

---

##### **300.010.015**

Licensure or registration of personnel:

Staff of the organization are licensed or registered in accordance with applicable laws.

---

# AAAASFI Rehabilitation Facilities 2.0

## **400 Administrative Management**

### **400.10 Administrative Management**

#### **400.010.005**

The clinic or rehabilitation agency has an effective governing body that is legally responsible for the conduct of the organization. The governing body designates an administrator, and establishes administrative policies.

---

#### **400.010.010**

Governing body:

There is a governing body (or designated person(s) so functioning) which assumes full legal responsibility for the overall conduct of the organization and for compliance with applicable laws and regulations. The name of the owner(s) of the organization is fully disclosed to AAAASFI. In the case of corporations, the names of the corporate officers are made known.

---

#### **400.010.015**

Administrator: The governing body:

- A) Appoints a qualified full-time administrator.
  - B) Delegates to the administrator the internal operation of the organization in accordance with written policies.
  - C) Defines clearly the administrator's responsibilities for procurement and direction of personnel.
  - D) Designates a competent individual to act during temporary absence of the administrator.
- 

#### **400.010.020**

Personnel policies:

Personnel practices are supported by appropriate written personnel policies that are kept current. Personnel records include the qualifications of all professional and qualified personnel, as well as evidence of regulating body (Country, State, Province, or professional society) licensure if applicable.

---



## **400 Administrative Management**

### **400.010.025**

Patient care policies:

Patient care practices and procedures are supported by written policies established by a group of professional personnel including one or more physicians associated with the organization, one or more qualified physical therapists (if physical therapy services are provided), one or more qualified speech pathologists (if speech pathology services are provided), and one or more qualified audiologists (if audiology services are provided). The policies govern the outpatient physical therapy, speech pathology, and/or audiology services and related services that are provided. These policies are evaluated at least annually by the group of professional personnel, and revised as necessary based upon this evaluation.

---

## **500 Plan of Care and Physician Involvement**

### **500.10 Plan of Care and Physician Involvement**

#### **500.010.005**

For each patient in need of outpatient physical therapy, speech pathology or audiology services, there is a written plan of care established and periodically reviewed by a physician, or by a physical therapist, speech pathologist, or audiologist respectively.

---

#### **500.010.010**

Medical history and prior treatment - the following are obtained by the organization before or at the time of initiation of treatment:

- 1) The patient's significant past history.
  - 2) Current medical findings, if any.
  - 3) Diagnosis(es), if established.
  - 4) Physician's orders, if any.
  - 5) Rehabilitation goals, if determined.
  - 6) Contraindications, if any.
  - 7) The extent to which the patient is aware of the diagnosis(es) and prognosis. (consent to treat).
  - 8) If appropriate, the summary of treatment furnished and results achieved during previous periods of rehabilitation services or institutionalization.
- 

#### **500.010.015**

Plan of care:

For each patient there is a written plan of care established by the physician or by the physical therapist, speech-language pathologist, or audiologist who furnishes the services.

---

## AAAASFI Rehabilitation Facilities 2.0

### 500 Plan of Care and Physician Involvement

#### 500.010.020

The plan of care for physical therapy, speech pathology or audiology services indicates anticipated goals and specifies for those services the -

- A) Type
  - B) Amount
  - C) Frequency
  - D) Duration
- 

#### 500.010.025

The plan of care and results of treatment are reviewed by the physician or by a qualified individual who established the plan at least as often as the patient's condition requires, and the indicated action is taken.

---

#### 500.010.030

Changes in the plan of care are noted in the clinical record. If the patient has an attending physician, the therapist, speech-language pathologist, or audiologist who furnishes the services promptly notifies him or her of any change in the patient's condition or in the plan of care.

---

#### 500.010.035

Emergency care:

The rehabilitation agency must establish procedures to be followed by personnel in an emergency, which cover immediate care of the patient, persons to be notified, and reports to be prepared.

---

## AAAASFI Rehabilitation Facilities 2.0

### **600 Physical and Occupational Therapy Services**

#### **600.10 Physical Therapy Services**

##### **600.010.005**

If the organization offers physical therapy services, it provides an adequate program of physical therapy and has an adequate number of qualified personnel and the equipment necessary to carry out its program and to fulfill its objectives.

---

##### **600.010.010**

The organization is considered to have an adequate outpatient physical therapy program if it can:

- A) Provide services using therapeutic exercise and the modalities of heat, cold, water, and electricity.
  - B) Conduct patient evaluations.
  - C) Administer tests and measurements of strength, balance, endurance, range of motion, and activities of daily living.
- 

##### **600.010.015**

A qualified physical therapist is present or readily available to offer supervision when qualified personnel furnish services.

---

##### **600.010.020**

If a qualified physical therapist is not on the premises during all hours of operation, patients are scheduled so as to ensure that the therapist is present when special skills are needed, for example, for evaluation and reevaluation.

---

##### **600.010.025**

When qualified personnel furnish services off the organization's premises, those services are supervised by a qualified physical therapist who makes an onsite supervisory visit at least once every 30 days.

---

## AAAASFI Rehabilitation Facilities 2.0

### **600 Physical and Occupational Therapy Services**

#### **600.010.030**

Facilities and equipment:

The organization has the equipment and facilities required to provide the range of services necessary in the treatment of the types of disabilities it accepts for service.

---

#### **600.010.035**

Personnel qualified to provide physical therapy services:

Physical therapy services are provided by, or under the supervision of, a qualified physical therapist. The number of qualified physical therapists and qualified personnel to assist is adequate for the volume and diversity of physical therapy services offered. A qualified physical therapist is on the premises or readily available during the operating hours of the organization.

---

#### **600.010.040**

Supportive personnel:

If personnel are available to assist qualified physical therapists by performing services incident to physical therapy that do not require professional knowledge and skill, these personnel are instructed in appropriate patient care services by qualified physical therapists who retain responsibility for the treatment prescribed by the attending physician.

---

### **600.20 Occupational Services**

#### **600.020.005**

If the organization offers occupational therapy services, it provides an adequate program of occupational therapy and has an adequate number of qualified personnel and the equipment necessary to carry out its program and to fulfill its objectives.

---

## AAAASFI Rehabilitation Facilities 2.0

### **600 Physical and Occupational Therapy Services**

#### **600.020.010**

The organization is considered to have an adequate occupational therapy program if it can:

- A) Provide services using therapeutic exercise and the modalities of heat, cold, water, and electricity.
  - B) Conduct patient evaluations.
  - C) Administer tests and measurements of strength, balance, endurance, range of motion, and activities of daily living.
- 

#### **600.020.015**

A qualified occupational therapist is present or readily available to offer supervision when qualified personnel furnish services.

---

#### **600.020.020**

If a qualified occupational therapist is not on the premises during all hours of operation, patients are scheduled so as to ensure that the therapist is present when special skills are needed, for example, for evaluation and reevaluation.

---

#### **600.020.025**

When qualified personnel furnish services off the organization's premises, those services are supervised by a qualified occupational therapist who makes an onsite supervisory visit at least once every 30 days.

---

#### **600.020.030**

Facilities and equipment:

The organization has the equipment and facilities required to provide the range of services necessary in the treatment of the types of disabilities it accepts for service.

---

## AAAASFI Rehabilitation Facilities 2.0

### **600 Physical and Occupational Therapy Services**

#### **600.020.035**

Personnel qualified to provide occupational therapy services:

Occupational therapy services are provided by, or under the supervision of, a qualified occupational therapist. The number of qualified occupational therapists and qualified personnel assistants is adequate for the volume and diversity of occupational therapy services offered. A qualified occupational therapist is on the premises or readily available during the operating hours of the organization.

---

#### **600.020.040**

Supportive personnel:

If personnel are available to assist qualified occupational therapists by performing services incident to occupational therapy that do not require professional knowledge and skill, these personnel are instructed in appropriate patient care services by qualified occupational therapists who retain responsibility for the treatment prescribed by the attending physician.

---

## AAAASFI Rehabilitation Facilities 2.0

### **700**    **Speech Pathology and/or Audiology Services**

#### **700.10**    **Speech Pathology and/or Audiology Services**

##### **700.010.005**

If speech pathology or audiology services are offered, the organization provides an adequate program of speech pathology or audiology and has an adequate number of qualified personnel and the equipment necessary to carry out its program and to fulfill its objectives.

---

##### **700.010.010**

Adequate program:

The organization is considered to have an adequate outpatient speech pathology or audiology program if it can provide the diagnostic and treatment services to effectively treat speech or audiology disorders.

---

##### **700.010.015**

Facilities and equipment:

The organization has the equipment and facilities required to provide the range of services necessary in the treatment of the types of speech or audiology disorders it accepts for service.

---

##### **700.010.020**

Personnel qualified to provide speech pathology or audiology services:

Speech pathology or audiology services are given or supervised by a qualified speech pathologist or audiologist and the number of qualified speech pathologists or audiologist is adequate for the volume and diversity of speech pathology or audiology services offered. At least one qualified speech pathologist or audiologist is present at all times when speech pathology or audiology services are furnished.

---



## AAAASFI Rehabilitation Facilities 2.0

### **700**    **Speech Pathology and/or Audiology Services**

#### **700.010.025**

Supportive personnel:

If personnel are available to assist qualified speech pathologist or audiologists by performing services incident to speech pathology or audiology services that do not require professional knowledge and skill, these personnel are instructed in appropriate patient care services by qualified speech pathologist or audiologists who retain responsibility for the treatment prescribed by the attending physician.

---

### **800.10**    **Rehabilitation Program**

#### **800.010.010**

Qualification of staff:

The rehabilitation agency's therapy services are furnished by qualified individuals as direct services and/or services provided under contract.

---

#### **800.010.015**

Arrangements for services:

If services are provided under contract, the contract must specify the term of the contract, the manner of termination or renewal and provide that the rehabilitation agency retains responsibility for the control and supervision of the services.

---

# AAAASFI Rehabilitation Facilities 2.0

## **900 Clinical Records**

### **900.10 Clinical Records**

#### **900.010.005**

Clinical records:

The organization maintains clinical records on all patients in accordance with accepted professional standards, and practices. The clinical records are completely and accurately documented, readily accessible, and systematically organized to facilitate retrieving and compiling information.

---

#### **900.010.010**

Protection of clinical record information:

The organization recognizes the confidentiality of clinical record information and provides safeguards against loss, destruction, or unauthorized use. Written procedures govern the use and removal of records and the conditions for release of information. The patient's written consent is required for release of information not authorized by law.

---

#### **900.010.015**

Content:

The clinical record contains sufficient information to identify the patient clearly, to justify the diagnosis(es) and treatment, and to document the results accurately. All clinical records contain the following general categories of data:

- 1) Documented evidence of the assessment of the needs of the patient, of an appropriate plan of care, and of the care and services furnished.
  - 2) Identification data and consent forms.
  - 3) Medical history.
  - 4) Report of physical examinations, if any.
  - 5) Observations and progress notes.
  - 6) Reports of treatments and clinical findings.
  - 7) Discharge summary including final diagnosis(es) and prognosis.
-

## AAAASFI Rehabilitation Facilities 2.0

### 900 Clinical Records

#### 900.010.020

Completion of records and centralization of reports:

Current clinical records and those of discharged patients are completed promptly. All clinical information pertaining to a patient is centralized in the patient's clinical record. Each physician signs the entries that he or she makes in the clinical record.

---

#### 900.010.025

Retention and preservation:

Clinical records are retained for at least:

A) 10 years

or

B) The period determined by the respective governing body (the Country, State, Province or Professional Society) statute

---

#### 900.010.030

Retention and preservation:

In the absence of a governing (Country, State, Province or Professional Society) body statute, clinical records are retained for at least:

A) Five years after the date of discharge

B) In the case of a minor, 3 years after the patient becomes of age under State or Province law or 5 years after the date of discharge, whichever is longer.

---

#### 900.010.035

Indexes:

Clinical records are indexed at least according to name of patient to facilitate acquisition of statistical medical information and retrieval of records for research or administrative action.

---

### **900 Clinical Records**

#### **900.010.040**

Location and facilities:

The organization maintains adequate facilities and equipment, conveniently located, to provide efficient processing of clinical records (reviewing, indexing, filing, and prompt retrieval).

---

# AAAASFI Rehabilitation Facilities 2.0

## **1000 Physical Environment**

### **1000.10 Physical Environment**

#### **1000.010.005**

The building housing the organization is constructed, equipped, and maintained to protect the health and safety of patients, personnel, and the public and provides a functional, sanitary, and comfortable environment.

---

#### **1000.010.010**

Safety of patients:

The organization satisfies the following requirements:

- A) It complies with all applicable Country, State, Province, local or Professional Society building, fire, and safety codes.
  - B) Permanently attached automatic fire-extinguishing systems of adequate capacity are installed in all areas of the premises considered to have special fire hazards. Fire extinguishers are conveniently located on each floor of the premises. Fire regulations are prominently posted.
- 

#### **1000.010.015**

Doorways, passageways and stairwells negotiated by patients are:

- A) Of adequate width to allow for easy movement of all patients (including those on stretchers or in wheelchairs)
  - B) Free from obstruction at all times
  - C) In the case of stairwells, equipped with firmly attached handrails on at least one side.
- 

#### **1000.010.020**

Lights are placed at exits and in corridors used by patients and are supported by an emergency power source.

---

## AAAASFI Rehabilitation Facilities 2.0

### **1000 Physical Environment**

#### **1000.010.025**

A fire alarm system with local alarm capability and, where applicable, an emergency power source, is functional.

---

#### **1000.010.030**

At least two qualified persons are on duty on the premises of the organization whenever a patient is being treated.

---

#### **1000.010.035**

No occupancies or activities undesirable or injurious to the health and safety of patients are located in the building.

---

#### **1000.010.040**

Maintenance of equipment, building, and grounds:

The organization establishes a written preventive-maintenance program to ensure that:

- A) The equipment is operative, and is properly calibrated.
  - B) The interior and exterior of the building are clean and orderly and maintained free of any defects that are a potential hazard to patients, personnel, and the public.
- 

#### **1000.010.045**

Other environmental considerations:

The organization provides a functional, sanitary, and comfortable environment for patients, personnel, and the public.

---

## AAAASFI Rehabilitation Facilities 2.0

### **1000 Physical Environment**

#### **1000.010.050**

Provision is made for adequate and comfortable lighting levels in all areas; limitation of sounds at comfort levels; a comfortable room temperature; and adequate ventilation through windows, mechanical means, or a combination of both.

---

#### **1000.010.055**

Toilet rooms, toilet stalls, and lavatories are accessible and constructed so as to allow use by nonambulatory and semiambulatory individuals.

---

#### **1000.010.060**

Whatever the size of the building, there is an adequate amount of space for the services provided and disabilities treated, including reception area, staff space, examining room, treatment areas, and storage.

---

## AAAASFI Rehabilitation Facilities 2.0

### **1100 Infection Control**

#### **1100.10 Infection Control**

##### **1100.010.005**

The organization that provides outpatient physical therapy services establishes an infection-control committee of representative professional staff with responsibility for overall infection control. All necessary housekeeping and maintenance services are provided to maintain a sanitary and comfortable environment and to help prevent the development and transmission of infection.

---

##### **1100.010.010**

Infection-control committee:

The infection-control committee establishes policies and procedures for investigating, controlling, and preventing infections in the organization and monitors staff performance to ensure that the policies and procedures are executed.

---

##### **1100.010.015**

All personnel follow written procedures for effective aseptic techniques. The procedures are reviewed annually and revised if necessary to improve them.

---

##### **1100.010.020**

Housekeeping:

The organization employs sufficient housekeeping personnel and provides all necessary equipment to maintain a safe, clean, and orderly interior. A full-time employee is designated as the one responsible for the housekeeping services and for supervision and training of housekeeping personnel.

---



## **1100 Infection Control**

### **1100.010.025**

#### Housekeeping:

An organization that has a contract with an outside resource for housekeeping services may be found to be in compliance with this standard provided the organization or outside resource or both meet the requirements of the standard.

---

### **1100.010.030**

#### Linen:

The organization has available at all times a quantity of linen essential for proper care and comfort of patients. Linens are handled, stored, processed, and transported in such a manner as to prevent the spread of infection.

---

### **1100.010.035**

#### Pest control:

The organization's premises are maintained free from insects and rodents through operation of a pest-control program.

---

### 1200 Disaster Preparedness

#### 1200.10 Disaster Preparedness

##### 1200.010.005

The organization has a written plan, periodically rehearsed, with procedures to be followed in the event of an internal or external disaster and for the care of casualties (patients and personnel) arising from a disaster.

---

##### 1200.010.010

Disaster plan:

The organization has a written plan in operation, with procedures to be followed in the event of fire, explosion, or other disaster. The plan is developed and maintained with the assistance of qualified fire, safety, and other appropriate experts and includes:

- A) Transfer of casualties and records.
  - B) The location and use of alarm systems and signals.
  - C) Methods of containing fire.
  - D) Notification of appropriate persons.
  - E) Evacuation routes and procedures.
- 

##### 1200.010.015

Staff training and drills:

All employees are trained, as part of their employment orientation, in all aspects of preparedness for any disaster. The disaster program includes orientation and ongoing training and drills for all personnel in all procedures so that each employee promptly and correctly carries out his assigned role in case of a disaster.

---

### **1300 Program Evaluation**

#### **1300.10 Program Evaluation**

##### **1300.010.005**

The organization has procedures that provide for a systematic evaluation of its total program to ensure appropriate utilization of services and to determine whether the organization's policies are followed in providing services to patients through employees or under arrangements with others.

---

##### **1300.010.010**

Clinical record review:

A sample of active and closed clinical records is reviewed twice a year by the appropriate health professionals to ensure that established policies are followed in providing services.

---

##### **1300.010.015**

Annual statistical evaluation:

An evaluation is conducted annually of statistical data such as number of different patients treated, number of patient visits, condition on admission and discharge, number of new patients, number of patients by diagnosis(es), sources of referral, number and cost of units of service by treatment given, and total staff days or work hours by discipline.

---

**1300 Program Evaluation**





AMERICAN ASSOCIATION FOR ACCREDITATION OF  
AMBULATORY SURGERY FACILITIES

AAAASF OFFICE MAILING ADDRESS:  
7500 GRAND AVENUE, SUITE 200  
GURNEE, IL 60031

TOLL FREE: 888-545-5222      PHONE: 847-775-1970  
FAX: 847-775-1985