Medical Board of California and Outpatient Surgery Center Accreditation Agencies

SB 100 Price (Chapter 645 Statutes 2011) Implementation Update



- The Board estimates 700 Outpatient Surgery Centers in California
- The Board approves the Accreditation Agencies
- The Board does not approve the Outpatient Settings.
- The Board has adopted the regulations for the approval criteria for the outpatient settings.

Background

- American Association for Accreditation of Ambulatory Surgery Facilities Inc. (AAAASF) - Illinois
- Accreditation Association for Ambulatory Health Care (AAAHC) Illinois
- The Joint Commission Illinois
- The Institute for Medical Quality (IMQ) California

SB 100 (Price – 2011): Requirements

For the Medical Board of California

For Outpatient Settings

For Accreditation Agencies

 Maintain a listing of information on Outpatient Settings on its Internet Web site [HSC 1248.2 (b)(c)]

- Adopt standards, as necessary, for Outpatient Settings that offer in vitro fertilization [HSC 1248.15 (e)]
- Authorizes the Board to adopt regulations to specify procedures that should be performed in an accredited setting that are outside the definition of an outpatient setting
 [HSC 1248.15 (f)]

- Evaluate accreditation agencies every three years; ensure agencies inspect Outpatient Setting
 - Evaluate responses to complaints against an agency
 - Evaluate complaints against the accreditation of outpatient settings

[HSC 1248.5; HSC 1248.35 (a)]

- Inspection results be kept on file with the Board including plan of correction and comments
 - Final reports are public documents
 - Listing deficiencies/ plans of correction
 - Requirements for improvement
 - Notes regarding completion of corrective action
 [HSC 1248.35 (g)]

- Authorizes Board to take appropriate actions, as necessary, if an outpatient setting's accreditation is suspended, revoked, or denied [HSC 1248.35 (j)]
- Investigate all complaints concerning a violation of this chapter
 [HSC 1248.7]

- Post plan of correction for public view; remove certificate of accreditation if suspended, revoked, or denied
 [HSC 1248.35 (d)(1), (i)(3)]
- Disclose full report of denial if applying for accreditation with a different agency
 [HSC 1248.35 (h)]

- Adds in vitro fertilization facilities to definition of "outpatient setting"
 [HSC 1248 (b)(2)]
- Subject to adverse event reporting requirements and associated penalties
 [HSC 1248.15 (h)]

- Submit for approval by agency at the time of accreditation, a detailed plan, standardized procedures, and protocols to be followed in the event of serious complications
 [HSC 1248.15 (a)(2)(D)]
- All sites to be inspected; no longer a sample [HSC 1248.15 (a)(7)]

Comply with corrective action within a timeframe specified by agency. If setting does not comply, the agency shall issue a reprimand, and may place on probation, or suspend or revoke
 [HSC 1248.35 (d)(1),(d)(2)]

- Conduct a reasonable investigation of the prior history of the outpatient setting, as part of the accreditation process [HSC 1248.15 (g)]
- Periodically inspect outpatient settings; No less than once every three years; Inspections must be on-site [HSC 1248.35(a)(b)]

• Upon receipt of a complaint from the Board, that a setting poses an immediate risk to public safety, the agency shall inspect and report its findings within five business days; Any other complaints received by the Board, the agency shall report its findings to the Board within 30 days. [HSC 1248.35(f)]

- Notify and update the Board on all outpatient settings that are accredited [HSC 1248.2(d)]
- Notify Board within 24 hrs when setting's accreditation is reprimanded, suspended, revoked, or placed on probation, within three business days if accreditation is denied [HSC 1248.35(e), HSC 1248.25]

- When setting's accreditation is revoked, requires a notification letter be sent, stating that it is no longer allowed to perform procedures requiring accreditation [HSC 1248.35(i)]
- Specifies that if one agency denies, revokes, or suspends accreditation, the setting must re-apply and disclose the full accreditation report to the new agency
 - The new accrediting agency shall ensure that all deficiencies have been corrected and conduct a new onsite inspection consistent with the standards specified in this chapter.
 [HSC 1248.35(h)]



STATUS