Initial Ambulatory Surgery Center (ASC) Licensure Survey Preparedness Checklist (09/18/19)

Facility Name:

Project ID number:

For an initial Birthing Center license to be issued, the facility must be completely ready to offer patient care, and be able to demonstrate full compliance with all regulations. This compliance must be verified by an onsite licensure survey by the Bureau of Ambulatory Care (BAC) prior to the facility being legally permitted to provide any patient services as a Birthing Center. The BAC office must be notified and updated regularly with realistic completion dates of any construction prior to arranging the initial survey. The facility must be fully prepared to demonstrate compliance with all licensure rules as described at the following link: http://sos.mo.gov/adrules/csr/current/19csr/19c30-30.pdf.

For all items below, before an onsite survey can be scheduled, the facility should indicate readiness by noting the date each item is complete, as well as the initials of the facility staff member responsible for assuring compliance. The dates may be estimated.

◊ _____/______ The facility has completed all reviews required by the DHSS Engineering Consultation Unit (ECU) to determine compliance with construction standards as described at 19 CSR 30-30.100, including a final plan approval and typically two site visits by ECU staff. ECU phone number is 573-526-8610. ECU@health.mo.gov

Date of ECU onsite visit(s) _____/______

◊ _____/______ The facility has completed and mailed to BAC its licensure application to be a Birthing Center, including submission of a $200 licensure fee: http://health.mo.gov/safety/asc/pdf/AmbulatorySurgicalCenterLicenseApplication.pdf Send the application to BAC@health.mo.gov.

◊ _____/______ if the facility is to stock controlled substances regulated under state and federal rules, the facility can apply for a Bureau of Narcotics and Dangerous Drugs (BNDD) registration for the facility. One issued not for the individual physicians but for the facility itself, as well as proper registration with the DEA. Controlled substances may not be onsite during the initial but the facility should have all secure storage areas and documentation as if they were onsite. Be aware that processing of these registrations can take several weeks, and will be issued only after the ASC license has been issued. BNDD can be reached at 573-751-6321, or online at http://health.mo.gov/safety/bndd

◊ _____/______ For any laboratory tests performed, the facility has obtained a Clinical Laboratory Improvement Act (CLIA) certificate.

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◊ **Processing of this certificate can take several weeks.** The CLIA program can be contacted at 573-751-6318 or BDS@health.mo.gov

◊ Date/_____ The facility has obtained and has appropriately stocked *all* routine (non-controlled substances) and emergency medications, and *all* necessary supplies.

◊ Date/_____ All needed equipment and furnishings have been delivered, installed, and checked/inspected as ready for use in patient care, including documentation *in writing* that all clinical equipment, including sterilizers, has been checked/inspected as ready for use, including:
  o Sterilizers
  o Emergency/ Crash carts
  o All equipment and instruments used routinely in procedures or for patient and infant care.

◊ Date/_____ Complete and comprehensive bylaws and rules have been developed, *specific to your facility*, and approved *in writing* for:
  o Medical Staff (including new appointments recommended by Medical staff and approved by the Governing Body for both membership and privileges) and
  o Governing Body

◊ Date/_____ Complete and comprehensive policies, *specific to your facility* (not adopted from another facility) *in writing* have been approved by the Governing Body for:
  o Nursing services
  o Medical Records (including what elements need to be included)
  o Infection Control
  o Cleaning & Housekeeping
  o Medication administration
  o Emergency preparedness
  o Surgical procedures
  o Anesthesia
  o Emergency transfer agreement/protocol
  o Laboratory services (including which tissues are to be sent to a pathologist)
  o QAPI (Quality Assurance & Performance Improvement) Program, including proper identification of problems, collection of necessary data, routine data analysis and assessment of progress.
  o Overall facility operations not included above.

◊ Date/_____ Facility has documentation available *in writing* that ALL staff have been oriented and had the necessary in-service education related to routine facility operations and locations of both emergency and routine equipment. Staff is able to demonstrate familiarity with policies and procedures for their position.
◊ Facility has complete personnel files for all nursing and support staff, and all credentialing files for medical staff. All job descriptions have been developed in writing and included in each packet. Both criminal background checks and Missouri Employee Disqualification List (EDL) checks have been completed for each employee. For additional information on these requirements see: http://health.mo.gov/safety/edl/index.php
Note: your facility can meet both parts of this requirement by utilizing the DHSS Family Care Safety Registry. You can reach FCSR by phone at 573-526-1974. For additional information including online access, please see http://www.health.mo.gov/safety/fcsr/about.php

◊ Facility has an established staffing schedule in writing to demonstrate that the center will be fully staffed when open and how on call staff will be notified.

◊ **Fire, Life Safety, and Mechanical Systems**: Facility has documentation in writing for each of the following:
  - Fire and smoke ratings for carpet, curtains, flooring and interior finish.
  - Test and balance for the heating and air conditioning to ensure that all areas are receiving the necessary air exchanges per hour and have necessary pressure relationships.
  - Temperature and humidity monitoring.
  - Mechanical systems, demonstrating that the systems are in service, tested, and ready for use. Systems as needed to include:
    - Medical gasses,
    - Fire alarm system,
    - Generator, including a list of the items that are supplied by emergency power
    - Sprinkler system, and
    - Electrical system-

For additional questions contact the Bureau of Ambulatory Care (BAC) at 573-751-1588 or BAC@health.mo.gov.