

AAAASF Revised Standards - Director Role Clarification

Standard ID	REVISED Standard Language, effective March 1, 2022			Change Summary	Previous Standard Language	Applicable Programs						
						Surgical	Procedural	CMS ASC	OMS	Pediatric Dentistry	International Surgical	International Dental
Section 1: Basic Mandates												
Sub-section B: Basic Mandates												
1	B	2	Onsite AAAASF surveys typically involve the attention of the Medical Director, the Facility Director , an anesthesia provider, and the facility staff working intensely with the AAAASF surveyor(s). The survey process must remain focused, and therefore, AAAASF has directed that equipment representatives not be present during AAAASF surveys. Accreditation consultants may be present during the surveys; however, AAAASF asks that consultants remain silent during the survey process until it is completed. All AAAASF surveyor(s) have the authority to request any participants to leave the survey process if interference becomes a problem. AAAASF greatly appreciates the cooperation of all concerned parties by complying with this directive.	Added Facility Director to the list of people to be involved with the onsite survey.	Onsite AAAASF surveys typically involve the attention of the Medical Director , an anesthesia provider, and the facility staff working intensely with the AAAASF surveyor(s). The survey process must remain focused, and therefore, AAAASF has directed that equipment representatives not be present during AAAASF surveys. Accreditation consultants may be present during the surveys; however, AAAASF asks that consultants remain silent during the survey process until it is completed. All AAAASF surveyor(s) have the authority to request any participants to leave the survey process if interference becomes a problem. AAAASF greatly appreciates the cooperation of all concerned parties by complying with this directive.	Y	Y	Y	Y	Y	N/A	N/A
Sub-section E: AAAASF-Mandated Reporting												
1	E	3	Any action affecting the current professional license of the Medical Director , a member of the medical staff, a member of the physician's pain management staff or other licensed facility staff must be reported in writing to the AAAASF Central Office within ten (10) days of the time the Facility Director becomes aware of such action.	Clarified verbiage - professional license of Medical Director must be reported, but the Facility Director can report these actions to AAAASF.	Any action affecting the current professional license of the facility director , a member of the medical staff, a member of the physician's pain management staff or other licensed facility staff must be reported in writing to the AAAASF Central Office within ten (10) days of the time the facility director becomes aware of such action.	Y	Y	Y	Y	Y	Y	Y
Section 6: Medications												
Sub-section G: Malignant Hyperthermia												
6	G	3	All operating surgeons and anesthesia providers must be aware of genetic and/or CHCT (Caffeine-Halothane Contracture Testing) for MH and refer patients for appropriate testing if there is a suspicious history as above prior to permitting surgery to take place in the facility.	Removed the Medical Director from the equation - staff training would be overseen as appropriate by maintenance of personnel files.	The Medical Director and all operating surgeons and anesthesiology providers should be aware of genetic and/or CHCT (Caffeine-Halothane Contracture Testing) for MH and refer patients for appropriate testing if there is a suspicious history as above prior to permitting surgery to take place in the facility.	Y	Y	Y	Y	Y	Y	Y
6	G	4	All operating surgeons and anesthesia providers must be able to demonstrate familiarity with the early recognition of impending MH crisis as defined by MHAUS.	Removed the Medical Director from the equation - staff training would be overseen as appropriate by maintenance of personnel files.	The Medical Director should be able to demonstrate that all operating surgeons and anesthesia providers have familiarity with the early recognition of impending MH crisis as defined by MHAUS.	Y	Y	Y	Y	Y	Y	Y
6	G	5	All staff must be trained: annual drills are conducted for MH crisis and management including actual dilution of at least one vial of actual Dantrolene (expired OK). Staff should be assigned roles prior to drills and a written protocol outlining those personnel and their roles is on file. Documentation of drills is required.	Removed the Medical Director from the equation - staff training would be overseen as appropriate by maintenance of personnel files.	The Medical Director will insure that all staff is trained; annual drills are conducted for MH crisis and management including actual dilution of at least one vial of actual Dantrolene (expired OK). Staff should be assigned roles prior to drills and a written protocol outlining those personnel and their roles is on file. Documentation of drills is required.	Y	Y	Y	Y	Y	Y	Y
Section 10: Quality Assessment/Quality Improvement/Risk Management												
Sub-section B: Quality Improvement Program												
10	B	5	The facility has a written quality improvement program implemented which includes surveys or projects that alerts the facility's QI program to identify, track, trend, evaluate, and resolve problems.	Removed the Medical Director from the equation - QI program should be self-sustaining.	The facility has a written quality improvement program implemented which includes surveys or projects that alert the medical director to identify, track, trend, evaluate, and resolve problems.	Y	Y	Y	Y	Y	Y	Y



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Section 11: Personnel												
Sub-section B: Medical Director & Facility Director			Sub-section title amended to add Facility Director	Sub-section B: Medical Director								
11	B	1	The Medical Director must have an MD, DO, DPM, DMD, or DDS degree. A DPM may serve as the Medical Director only for facilities exclusively practicing podiatry. A DDS or DMD may serve as the Medical Director only for facilities exclusively practicing dentistry or oral maxillofacial surgery.	No change in standard text, but this standard now applies to all programs (previously only applied to CMS ASC as non-Medicare facilities could have CRNAs as the "Medical Director").	The Medical Director must have an M.D., D.O., D.P.M, D.M.D., or D.D.S. degree. A D.P.M. may serve as the Medical Director only for facilities exclusively practicing podiatry. A D.D.S. or D.M.D. may serve as the Medical Director only for facilities exclusively practicing dentistry or oral maxillofacial surgery.	Y	Y	Y	Y	Y	N/A	N/A
11	B	2	The Facility Director must have an MD, DO, DPM, DMD, DDS, or CRNA degree. <i>One person may fill both the Medical Director and Facility Director roles, or the roles can be filled by two separate people.</i>	Previous standard removed to identify new position of Facility Director who is more of an administrative oversight role. To be fleshed out more in Overhaul.	The Medical Director must have an M.D., D.O., D.P.M, D.M.D., D.D.S., or C.R.N.A. degree. A D.P.M. may serve as the Medical Director only for facilities exclusively practicing podiatry. A D.D.S. or D.M.D. may serve as the Medical Director only for facilities exclusively practicing dentistry or oral maxillofacial surgery.	Y	Y	Y	Y	Y	N/A	N/A
11	B	3	The Medical Director and Facility Director must be a provider currently licensed by the state in which the facility is located.	Added Facility Director to this requirement.	The Medical Director must be a provider currently licensed by the state in which the facility is located.	Y	Y	Y	Y	Y	N/A	N/A
11	B	4	The Medical Director and Facility Director must be certified or eligible for certification by one of the following boards: -American Board of Medical Specialties (ABMS) -American Osteopathic Association Bureau of Osteopathic Specialists (AOABOS) -American Board of Foot and Ankle Surgery (ABFAS) -American Board of Podiatric Medicine (ABPM) -National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) (<i>Facility Director only</i>) -American Board of Pediatric Dentistry (ABPD) -American Board of Oral and Maxillofacial Surgery (ABOMS)	Added Facility Director to this requirement.	The Medical Director must be certified or eligible for certification by one of the following boards: -American Board of Medical Specialties (ABMS) -American Osteopathic Association Bureau of Osteopathic Specialists (AOABOS) -American Board of Foot and Ankle Surgery (ABFAS) -American Board of Podiatric Medicine (ABPM) -National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) -American Board of Pediatric Dentistry (ABPD) -American Board of Oral and Maxillofacial Surgery (ABOMS)	Y	Y	Y	Y	Y	N/A	N/A
11	B	5	The Medical Director/Pediatric Dentist/Owner of practice must have the appropriate state dental board facility permit if required (for low-flow nitrous oxide/oxygen analgesia, minimal sedation, moderate sedation, or deep sedation/general anesthesia).	No change in standard text.	The Medical Director/Pediatric Dentist/Owner of practice must have the appropriate state dental board facility permit if required (for low-flow nitrous oxide/oxygen analgesia, minimal sedation, moderate sedation, or deep sedation/general anesthesia).	N/A	N/A	N/A	N/A	Y	N/A	N/A
11	B	6	The Medical Director/Pediatric Dentist/Owner must have the appropriate individual state dental board sedation/anesthesia permit. The anesthesia provider must have the appropriate state board deep sedation/general anesthesia permit.	No change in standard text.	The Medical Director/Pediatric Dentist/Owner must have the appropriate individual state dental board sedation/anesthesia permit. The anesthesia provider must have the appropriate state board deep sedation/general anesthesia permit.	N/A	N/A	N/A	N/A	Y	N/A	N/A
11	B	7	The Facility Director must be actively involved in the direction and management of the facility.	Changed from Medical Director to Facility Director as this is an administrative component.	The Medical Director must be actively involved in the direction and management of the facility.	Y	Y	Y	Y	Y	Y	Y
11	B	8	The Facility Director is responsible for establishing and enforcing policies that protect patients. The Facility Director monitors all members of the medical and facility staff for compliance with this policy.	Changed from Medical Director to Facility Director as this is an administrative component.	The Medical Director is responsible for establishing and enforcing policies that protect patients. The Medical Director monitors all members of the medical and facility staff for compliance with this policy.	Y	Y	Y	Y	Y	Y	Y
11	B	9	The Medical Director must be involved in the organization's direction, objectives and policy development and implementation.	No change in standard text, but added this standard across all programs.	The Medical Director must be involved in the organization's direction, objectives and policy development and implementation.	Y - Added	Y - Added	Y - Added	Y - Added	Y - Added	Y	Y



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Section 11: Personnel											
Sub-section B: Medical Director & Facility Director		Sub-section title amended to add Facility Director	Sub-section B: Medical Director								
11	B 10	The Medical Director must be involved in planning and budgeting for the facility's range of services.	No change in standard text.	The Medical Director must be involved in planning and budgeting for the facility's range of services.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 11	The Medical Director signs an Attestation that the direction and management of the facility is under his/her management.	No change in standard text.	The Medical Director signs an Attestation that the direction and management of the facility is under his/her management.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 12	The Medical Director must ensure that the facility meets all local, regional and country regulations including those relating to employment health and safety, building, environmental protection, reportable diseases, and waste management.	No change in standard text.	The Medical Director must ensure that the facility meets all local, regional and country regulations including those relating to employment health and safety, building, environmental protection, reportable diseases, and waste management.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 13	The Medical Director shall document the strategic plan for the facility.	No change in standard text.	The Medical Director shall document the strategic plan for the facility.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 14	The Medical Director should document the staffing levels and what qualifications are required for each position based on the services offered at the facility.	No change in standard text.	The Medical Director should document the staffing levels and what qualifications are required for each position based on the services offered at the facility.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 15	The Medical Director should review credentialing and performance for all practitioners, staff and volunteers annually.	No change in standard text.	The Medical Director should review credentialing and performance for all practitioners, staff and volunteers annually.	N/A	N/A	N/A	N/A	N/A	Y	Y
11	B 16	The Medical Director should review and maintain a record of the performance of all practitioners, staff and volunteers at least annually. This should include record of corrective actions and educational activities.	No change in standard text.	The Medical Director should review and maintain a record of the performance of all practitioners, staff and volunteers at least annually. This should include record of corrective actions and educational activities.	N/A	N/A	N/A	N/A	N/A	Y	Y

