

**INTERNATIONAL SURGICAL DENTAL ACCREDITATION PROGRAMS
STANDARDS CHANGE LOG v 4.2**

Previous Requirement		QUAD A - Standard v4.2	
N/A	No current requirement.	11B17	<i>Each personnel file has evidence of general facility-specific orientation and training related to the individual's job duties.</i>
N/A	No current requirement.	1E5	<i>All adverse events which occur in the facility or as a result of care provided at the facility must be communicated to the affected patient(s) and/or facility staff.</i>
N/A	No current requirement.	5F2	<i>Facilities must conduct a biennial review and test of its disaster preparedness plan.</i>
N/A	No current requirement.	8B32	<p><i>The facility must implement a policy related to patient health needs that are noted during the health assessment conducted preoperatively. The policy must include providing and documenting relevant patient education related to identified areas of need as applicable, such as:</i></p> <ol style="list-style-type: none"> <i>1. Smoking cessation;</i> <i>2. Importance of good nutrition;</i> <i>3. Importance of exercise; and</i> <i>4. Substance abuse resources in the medical record.</i>
N/A	No current requirement.	10C13	<i>The facility must have a written policy to make their complaint process publicly available, via posting within the facility, on the website, by distribution to patients, or through other means that eliminates barriers to patient awareness of such process.</i>

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Current Requirement		AAAASF Standard	
N/A	No current requirement.	1B8	<p><i>The facility must perform a self-survey review of compliance with all Quad A standards annually prior to the expiration date of its accreditation in each of the two years between Quad A onsite surveys. The self-survey documentation must be retained for a minimum of 3 years and include:</i></p> <ol style="list-style-type: none"> <i>1. A completed Self-Survey checklist</i> <i>2. A Plan of Correction for any standard identified as non-compliant</i> <i>3. Evidence that each plan of correction has been carried out to establish compliance with standards</i> <i>4. Evidence that findings from the self-survey have been reviewed, included in the facility's Quality Improvement Plan, and discussed in the facility's Quality Improvement meetings.</i>