

MAINTAINING COMPLIANCE: QUAD A STANDARDS REVISIONS

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Chief Executive Officer

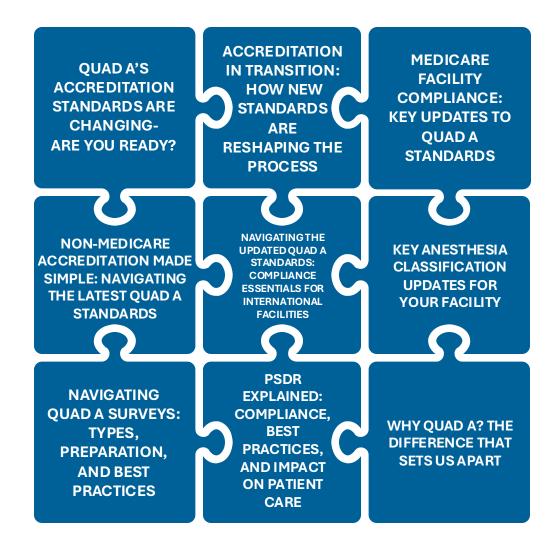
DISCLAIMER

The requirements in the current version of the QUAD A standards supersedes previous versions including any interpretive guidance provided in past newsletters and responses to standards-related questions.

PRESENTATION OUTLINE



EVERY PIECE HAS A PURPOSE: EXPLORING THE SERIES STRUCTURE



LUNCH & LEARN SERIES SCHEDULE

LUNCH & LEARN TITLE	DATE	TIME
QUAD A'S ACCREDITATION STANDARDS ARE CHANGING- ARE YOU READY?	WEDNESDAY, APRIL 2, 2025	12:00 – 1:00 PM CT
ACCREDITATION IN TRANSITION: HOW NEW STANDARDS ARE RESHAPING THE PROCESS	WEDNESDAY, APRIL 9, 2025	12:00 – 12:30 PM CT
MEDICARE FACILITY COMPLIANCE: KEY UPDATES TO QUAD A STANDARDS	WEDNESDAY, APRIL 16, 2025	12:00 – 12:30 PM CT
NON-MEDICARE ACCREDITATION MADE SIMPLE: NAVIGATING THE LATEST QUAD A STANDARDS	WEDNESDAY, APRIL 23, 2025	12:00 – 12:30 PM CT
NAVIGATING THE UPDATED QUAD A STANDARDS: COMPLIANCE ESSENTIALS FOR INTERNATIONAL FACILITIES	WEDNESDAY, APRIL 30, 2025	12:00 – 12:30 PM CT
KEY ANESTHESIA CLASSIFICATION UPDATES FOR YOUR FACILITY	WEDNESDAY, MAY 7, 2025	12:00 – 12:30 PM CT
NAVIGATING QUAD A SURVEYS: TYPES, PREPARATION, AND BEST PRACTICES	WEDNESDAY, MAY 14, 2025	12:00 – 12:30 PM CT
PSDR EXPLAINED: COMPLIANCE, BEST PRACTICES, AND IMPACT ON PATIENT CARE	WEDNESDAY, MAY 21, 2025	12:00 – 12:30 PM CT
WHY QUAD A? THE DIFFERENCE THAT SETS US APART	WEDNESDAY, MAY 28, 2025	12:00 – 12:30 PM CT



QUAD A'S ACCREDITATION STANDARDS ARE CHANGING — ARE YOU READY?

PATIENTS FIRST. ALWAYS.

LEARNING OBJECTIVES:

- Gain a clear understanding of QUAD A'S latest accreditation updates, including new compliance requirements and revised protocols
- Identify how these updates affect various healthcare settings and operational workflows
- Learn proactive strategies to address potential compliance challenges and maintain longterm accreditation success



ABOUT QUAD A

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QUAD A has worked with thousands of healthcare facilities to **standardize and improve the quality of healthcare they provide** – believing **that patient safety should always come first.** At QUAD A, the goal is simple, to be your **go-to provider when it comes to accreditation.**

- Global Accreditation Organization
- Established in 1980
- Non-profit and Physician Founded
- Patients First. Always.
- Peer-based Survey Process
- Educational Approach to Compliance

- Mandatory 100% Compliance
- Board-certified or Eligible Staff
- Drives Continuous Quality Improvement
- CMS approved ASC-'97, OPT-'11, and RHC-'12
- IEEA accredited international since 2015



THE STANDARDS OVERHAUL PROJECT

PROJECT TIMELINE

2023

PROJECT KICK-OFF **INTERNALLY**

NOVEMBER 2024

QUAD A'S 2025 STANDARDS REVISION PROJECT ANNOUNCED & PUBLIC COMMENT **PERIOD OPENS**

DECEMBER 2024

THE PUBLIC COMMENT PERIOD CLOSES

MARCH 2025

UPDATED STANDARDS MANUALS AND CHANGE REPORTS POSTED TO QUAD A WEBSITE

APRIL 2025

NEW STANDARDS AND FIRST SET OF TECHNICAL CORRECTIONS **EFFECTIVE APRIL 7,** 2025

LATER IN 2025...

TECHNICAL CORRECTIONS WILL BE POSTED ON QUAD A WEBSITE

GOALS OF THIS PROJECT

- To streamline and remove standards with redundancies
- To clarify and provide revisions to problematic standards
- To provide interpretive guidance to help facilities understand compliance expectations
- To outline survey procedures regarding the way compliance will be assessed
- To provide additional resources (i.e., adding links to references and resources for easy access to supporting information related to requirements)
- To revise and create a more robust General Glossary
- To simplify anesthesia class definitions

DRIVING THE CHANGES: THE STANDARDS COMMITTEE

Why Does QUAD A Have A Standards Committee?

- ADVANCE PATIENT SAFETY AND CLINICAL EXCELLENCE
- ENSURE QUAD A STANDARDS ARE INFORMED AND PRACTICAL
- UPHOLD CONSISTENCY, INTEGRITY, AND COMPLIANCE
- STAY RESPONSIVE TO A CHANGING HEALTHCARE LANDSCAPE
- BUILD TRUST AND CREDIBILITY IN THE MEDICAL COMMUNITY



THE STANDARDS COMMITTEE: ROLES & REPRESENTATION

COMMITTEE ROLES

1. QUAD A BOARD MEMBERS

2. INVITED COMMITTEE MEMBERS

- I. Permanent Committee Members
- **II.** Subject Matter Experts
- III. Language Reviewers
- 3. QUAD A STAFF LIAISONS

PROFESSIONAL REPRESENTATION

PHYSICIANS

- ANESTHESIOLOGISTS
- PLASTIC SURGEONS
- PAIN MANAGEMENT

- GASTROENTEROLOGIST
- INFECTION CONTROL

REGISTERED NURSES

- CRNAs
- INTERNATIONAL
- PAIN MANAGEMENT
- OPTHALMOLOGY
- RURAL HEALTH
- INFECTION CONTROL

- OFFICE BASED SURGERY
- OFFICE BASED PROCEDURAL
- KETAMINE INFUSIONS
- FLORIDA STATE REGULATIONS

DENTISTS

- DMD/DDS
- PEDIATRIC DENTISTRY

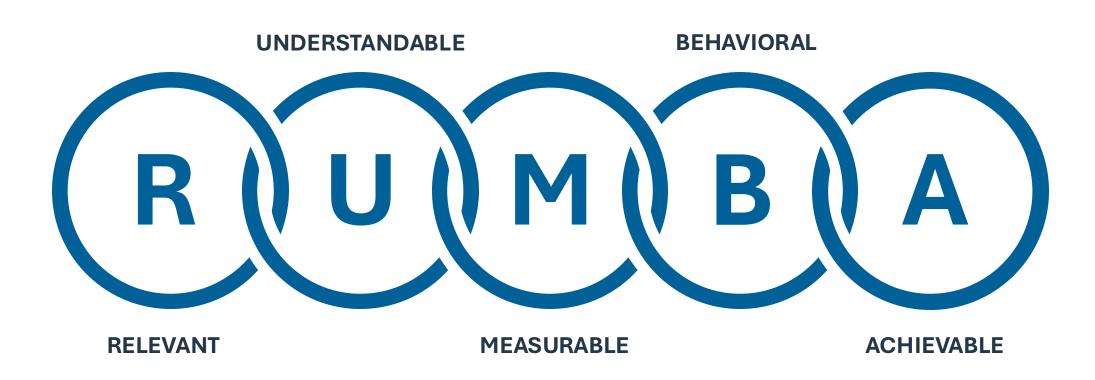
OCCUPATIONAL THERAPIST

DETERMINING THE UPDATES

HOW DID THE STANDARDS COMMITTEE DETERMINE WHICH STANDARDS NEEDED TO BE UPDATED?

- Each committee member completed individual reviews of each program's standards manual and provided comments
 - Utilized RUMBA method
- Weekly calls held to discuss each standard in detail
- Input gathered from professional societies and associations to reflect current industry practices

THE RUMBA METHOD





IMPLEMENTATION TIMELINE

MARK YOUR CALENDAR

APRIL 2025

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

TECHNICAL CORRECTIONS

Technical Corrections are necessary updates to some of the QUAD A standards. These updates occur when issues arise that cannot wait until the next version of Standards Manuals are published. The Technical Change document is a vehicle to rapidly communicate priority standards changes to facilities and surveyors. These corrections supersede standards in the Standards Manual.

- When can we expect technical corrections to be posted?
 - The first set of Technical Corrections were posted to the QUAD A website on Friday, March 28, 2025.
- What is the effective date for the first set of technical corrections?
 - April 7, 2025
- What is the expected frequency for posting Technical Corrections?
 - QUAD A may issue technical corrections as needed. Additional updates are anticipated later in 2025, with clearly defined implementation timelines provided.
- Which programs are affected by Technical Corrections?
 - Each program will see minor Technical Corrections on an as-needed basis that are expected to be implemented as indicated.



HOW THE UPDATED STANDARDS IMPACT OUR PROGRAMS

MAJOR CHANGES AT-A-GLANCE

PROGRAM	ELIMINATION OF ANESTHESIA CLASS C-M	CHANGES TO HOSPITAL PRIVILEGE REQUIREMENTS	ADDITION OF OBSERVATION OF CARE DURING SURVEY PROCESS	IMPLEMENTATION OF 10-DAY PLAN OF CORRECTIONS	OPPORTUNITY TO CORRECT DEFICIENCIES ONSITE	ADDITION OF QUAD A INTERPRETIVE GUIDANCE	NEW STANDARDS ADDED TO THE PROGRAM'S STANDARDS MANUAL
MEDICARE PROGRAMS							
Ambulatory Surgery Centers (ASC)	X	X	X (Case Tracer)	X	N/A	X	X
Out-Patient Physical Therapy (OPT)	N/A	N/A	X (Case Tracer)	X	N/A	X	X
Rural Health Clinics (RHC)	N/A	N/A	X (Case Tracer)	X	N/A	X	X
NON-MEDICARE PROGRAMS							
Office Based Surgery (OBS)	X	X	X	X	X	X	X
Office Based Procedural (OBP)	X	X	X	X	X	X	X
Oral Maxillofacial Surgery (OMS)	X	X	X	X	X	X	X
Pediatric Dentistry (PD)	X	X	X	X	X	X	X
INTERNATIONAL PROGRAMS							
International Surgery	X	X	X	X	X	X	X
International Dentistry	X	X	X	X	X	X	X
International Physical Therapy	N/A	N/A	X	X	X	X	X
	X- AL	READY APPLICABL	E TO PROGRAM	X- CHANGE	N/A- NOT A	PPLICABLE TO PROG	BRAM

ELIMINATION OF CLASS C-M

- Deletion of Facility Class C-M
 - Only three facility classes remain: A, B, and C.
- Revised to avoid mandating new practices unnecessarily.
- Ensures C-M facilities are not forced to transition to C classification, maintaining operational continuity.
- Purpose: To reduce confusion and improve compliance
- Scoring Implications: Non-compliance with any item in the document results in a deficiency under Standard 1-A-1



HOSPITAL PRIVILEGES

STANDARD 11-C-6 (NEW):

The facility must have written policies and procedures that address the criteria for clinical staff privileges and the process that the facility's leadership body uses when reviewing physician, APRN, and PA credentials and determining whether to grant privileges and the scope of the privileges for each practitioner.

WHY INCORPORATE OBSERVATION OF CARE?

- Provides direct insight into a facility's practices.
- Provides a clear picture of facility operations and patient care practices.
 - Does practice follow policy or what they say they do?
- Critical aspects of care must be evaluated to identify gaps that may lead to adverse events.

CORRECTED ON-SITE



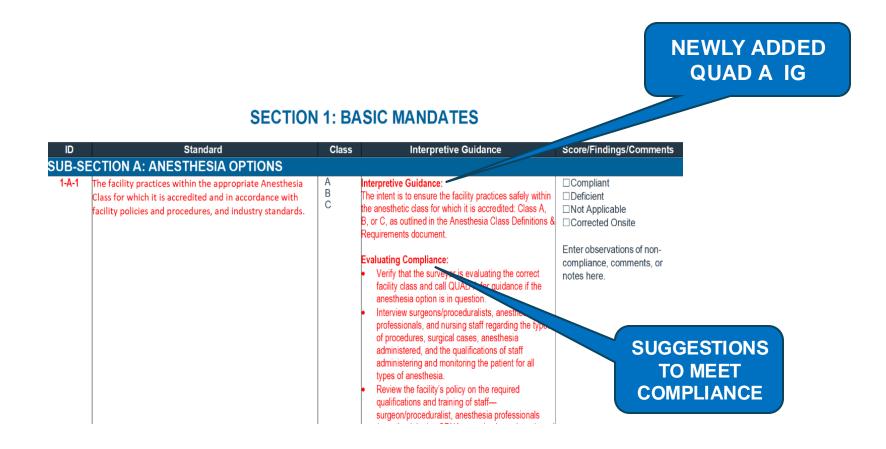
For deficiencies that are identified as corrected onsite during the survey, facilities will be required to submit an acceptable PoC. This ensures that all deficiencies, regardless of their status at the time of the survey, are documented and monitored for sustained compliance on an ongoing basis.



TEN-DAY PLAN OF CORRECTION

All facilities must submit an acceptable plan of correction (PoC) within 10 days for any deficiencies identified during the accreditation survey. The PoC should detail the steps your facility will take to address and resolve the identified issues, ensuring ongoing compliance with QUAD A standards. Additionally, evidence of correction (EOC) must be submitted within 30 days.

WHERE DO I FIND THE QUAD A INTERPRETIVE GUIDANCE?



CONTACT US!

Standards Questions?

Email Our Clinical Team! standards@quada.org

Due to the high volume of submissions and the technical and legal considerations involved in addressing questions related to standards, we kindly ask for your patience. The clinical team will respond as soon as possible, in the order in which the questions are received, to ensure we provide you with the most accurate and well-informed answer possible.

THANK YOU!



PART II: Q&A WITH THE EXPERTS

MEET THE EXPERTS



Janice Izlar, DNAAP, CRNA, FAANA
VP of Standards,
QUAD A Board Member
Standards Committee Chair



Shannon HawkinsDirector of Accreditation, QUAD A



Monte Goldstein, MD
VP of Investigations,
QUAD A Board Member
Standards Committee Co-Chair



Niki Zeman, BSN, RN Clinical Survey Analyst, QUAD A



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