

## AMBULATORY SURGICAL FACILITY STATE LICENSURE CHECKLIST

### PATIENT CARE SERVICES

The ambulatory surgical facility licensing regulations (the “Licensing Regulations”) guide the development of a plan for patient care.<sup>1</sup> An ambulatory surgical facility (“ASF”) develops a plan for patient care by supervising staff and establishing, monitoring and enforcing policies and procedures that define and outline the use of materials and resources and promote the delivery of care. An ASF must:

- Provide personnel, space, equipment, reference materials, training, and supplies for the appropriate care and treatment of patients;
- Have a registered nurse available for consultation in the ASF at all times patients are present;
- Adopt, implement, review and revise patient care policies and procedures designed to guide staff that address:
  - Criteria for patient admission;
  - Reliable methods for personal identification of each patient;
  - Conditions that require patient transfer to outside facilities;
  - Patient safety measures;
  - Staff access to patient care areas;
  - Use of physical and chemical restraints or seclusion consistent with applicable law;
  - Use of pre-established patient care guidelines or protocols. When used, these must be documented in the medical record and be preapproved or authenticated by an authorized practitioner or advanced registered nurse practitioner;
  - Care and handling of patients whose conditions require special medical consideration;
  - Preparation and administration of blood and blood products; and
  - Discharge planning;
- Have a system to plan and document care in an interdisciplinary manner, including:
  - Development of an individualized patient plan of care, based on an initial assessment;
  - Assessment for risk of falls, skin condition, pressure ulcers, pain, medication use, therapeutic effects and side or adverse effects;
- Complete and document an initial assessment of each patient’s physical condition, emotional, and social needs in the medical record. Initial assessment includes:
  - Dependent upon the procedure and the risk of harm or injury, a patient history and physical assessment including but not limited to falls, mental status and skin condition;
  - Current needs;

<sup>1</sup> See WAC 246-330-205.

- Need for discharge planning;
- When treating pediatric patients, the immunization status;
- Physical examination, if within thirty days prior to admission, and updated as needed if patient status has changed; and
- Discharge plans when appropriate, coordinated with:
  - Patient, family or caregiver; and
  - Receiving agency, when necessary.

Emily R. Studebaker  
Garvey Schubert Barer  
1191 Second Avenue, Suite 1800  
Seattle, WA 98101  
estudebaker@gsblaw.com

The content provided in this checklist is for educational purposes only. It is not a substitute for legal advice. Transmission and receipt of this publication does not create an attorney-client relationship.