Diagnostic Accreditation Program CRITICAL RISK CRITERION Neurodiagnostics

Copyright © 2023 by the Diagnostic Accreditation Program and the College of Physicians and Surgeons of British Columbia.

All rights reserved. No part of this publication may be used, reproduced or transmitted, in any form or by any means electronic, mechanical, photocopying, recording or otherwise, or stored in any retrieval system or any nature, without the prior written permission of the copyright holder, application for which shall be made to:

Diagnostic Accreditation Program College of Physicians and Surgeons of British Columbia 300–669 Howe Street Vancouver BC V6C 0B4

The Diagnostic Accreditation Program and the College of Physicians and Surgeons of BC has used their best efforts in preparing this publication. As websites are constantly changing, some of the website addresses in this publication may have moved or no longer exist.

Critical risk nonconformance

Introduction

Under established Diagnostic Accreditation Program (DAP) policy, identified nonconformances represent a risk that must be managed within an appropriate time frame. Through the use of a risk/frequency matrix the DAP has established time frames within which resolution to identified nonconformances must be submitted.

Critical risk has been defined as a nonconformance that results in an immediate hazardous or unsafe condition for patients or facility personnel, or a pervasive deficiency in the facility that represents systemic failure leading to unsafe conditions for patients or facility personnel. Critical risk nonconformances require immediate corrective action.

Through consultation with subject matter experts and community feedback, the DAP has identified a number of standard criterion that have been determined to be critical risk.

When a critical risk nonconformance is suspected to represent an immediate hazardous or unsafe condition for patients or facility personnel during an assessment activity the critical risk nonconformance management process will be initiated.

General safety

Safety practices and equipment

No.	Description	Reference	Risk	Change
NSA1.8	Personal protective equipment is available for staff.			
NSA1.8.1	M Adequate and appropriate personal protective equipment is available to protect staff from chemical or biological hazards. <i>Guidance: Personal protective equipment may include gloves, lab coats/gowns and</i> <i>masks.</i>		С	

Appropriate physical environment

No.	Description	Reference	Risk	Change
NSA2.1	The design and layout of the physical space meets laws, regulations and codes.			
NSA2.1.2	M Emergency exit routes are marked and provide unimpeded exit.		С	

Patient safety

Patient identification

No.

Infection prevention and contBTI