

Diagnostic Accreditation Program

ACCREDITATION STANDARDS FOR  
RELOCATION ASSESSMENT

Neurodiagnostics

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## Medical staff

No.	Description	Reference	Change
NMS1.0	A MEDICAL LEADER IS APPOINTED WITH ASSIGNED RESPONSIBILITIES AND ACCOUNTABILITIES FOR THE DIAGNOSTIC SERVICE.		
NMS1.1	The medical leader has responsibility for medically related activities.		
	The medical leader:		
NMS1.1.6	M	authorizes the implementation of technical/medical operational policies and procedures related to the diagnostic service	

## Remotely supervised facilities

NMS1.2	Medical leaders must visit the remotely supervised facility to assess the quality and safety of the service.		
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No.	Description	Reference	Change
NMS1.4.3	M The medical leader documents those tests that may be performed at remotely supervised facilities.		

### Medical staff credentialing and privileging

No.	Description	Reference	Change
NMS2.0	THE DIAGNOSTIC SERVICE HAS QUALIFIED AND COMPETENT MEDICAL PRACTITIONERS.		
NMS2.1	Information for each medical practitioner is collected, verified and assessed relative to the requested scope of practice/procedure.		
NMS2.3	Electroencephalography (EEG) services are provided by qualified and competent physicians.		
NMS2.3.1	M Physicians providing diagnostic EEG services have the requisite credentials for privileges as outlined in the Provincial Privileging Dictionaries.	BCMQUI	
NMS2.4	Electromyography (EMG) services are provided by qualified and competent physicians.		
NMS2.4.1	M Physicians providing diagnostic EMG services have the requisite credentials for privileges as outlined in the Provincial Privileging Dictionaries.	BCMQUI	
NMS2.5	Nerve conduction studies (NCS) services are provided by qualified and competent physicians.		
NMS2.5.1	M Physicians providing diagnostic NCS services have the requisite credentials for privileges as outlined in the Provincial Privileging Dictionaries.	BCMQUI	

No.	Description	Reference	Change
NMS2.6	Evoked potentials (EP) services are provided by qualified and competent physicians.		
NMS2.6.1	M Physicians providing diagnostic EP services have the requisite credentials for privileges as outlined in the Provincial Privileging Dictionaries.	BCMQUI	

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## Human resources

### Staff selection and retention

No.	Description	Reference	Change
NHR2.0	THE DIAGNOSTIC SERVICE HAS PROCEDURES IN		

## General safety

### Management responsibilities

No.	Description	Reference	Change
NSA1.0	POTENTIAL HAZARDS AND RISKS TO STAFF, PATIENTS AND VISITORS ARE MINIMIZED.		
NSA1.2	A safety manual is readily available to staff that includes:		
NSA1.2.1	M	how to access first aid services and/or medical assistance for staff related injuries	WorkSafeBC
NSA1.2.2	M	the policy and procedure for investigating and reporting staff safety incidents	
NSA1.2.3	M	exposure control plans, based on existing occupational hazards	
NSA1.2.4	M	requirements for the use of personal protective and other safety equipment	
NSA1.2.5	M	Workplace Hazardous Materials Information System (WHMIS) program information	
NSA1.2.6	M	emergency evacuation plans	
NSA1.2.7	M	procedures to protect staff "working alone" or in "isolation"	

No.	Description	Reference	Change
NSA1.2.8	M procedures to manage violent and aggressive behaviour		

No.	Description	Reference	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.		
NSA1.8.2	M Latex-free gloves are available to staff with latex sensitivities.		
NSA1.9	There are mechanisms in place to prevent staff from assuming postures that could result in musculoskeletal injuries.		
NSA1.9.1	M Work place design and equipment positioning reduce the risk of ergonomic distress disorders and accidents.		
NSA1.9.5	M Adequate assistance and transfer/lift devices are available when moving or lifting patients.		
NSA1.9.6	M The weight limit of lifting equipment is clearly marked.		

Appropriate physical environment

No.	Description	Reference	Change
NSA2.0	THE DESIGN AND LAYOUT OF THE PHYSICAL SPACE ALLOWS SERVICE DELIVERY TO BE SAFE, EFFICIENT AND ACCESSIBLE FOR PATIENTS, VISITORS AND STAFF.		

No.	Description	Reference	Change
NSA2.3.5	M Patient information cannot be viewed by other patients or visitors.		
NSA2.3.6	M Patient privacy is not compromised during the diagnostic procedure.		
NSA2.4	The design and layout of the space supports safe and appropriate service delivery.		
NSA2.4.3	M Security measures are in place to prevent theft and tampering of equipment, drugs, chemicals and confidential information.		

## Patient safety

### Creating a culture of patient safety

No.	Description	Reference	Change
NPS1.0	THE DIAGNOSTIC SERVICE CREATES A CULTURE OF PATIENT SAFETY AND MAKES PATIENT SAFETY A PRIORITY.		
NPS1.2	The activities of the diagnostic service ensure patient safety.		
NPS1.2.4	M Mechanisms are in place to address patient sensitivities and allergies.		

### Medication management and administration

No.	Description	Reference	Change
NPS3.0	THE DIAGNOSTIC SERVICE HAS METHODS IN PLACE TO ENSURE THAT MEDICATION IS MANAGED AND ADMINISTERED TO PATIENTS SAFELY AND EFFECTIVELY.		
NPS3.1	Medications are stored safely.		
NPS3.1.1	M Storage of medications complies with manufacturer's recommendations.		
NPS3.1.2	M All stored medications are labeled with the contents, expiration date, and any warnings as applicable.		

### Medical emergencies

No.	Description	Reference	Change
NPS5.0	THE DIAGNOSTIC SERVICE HAS PROCEDURES IN PLACE TO HANDLE MEDICAL EMERGENCIES.		
NPS5.1	There are procedures to handle medical emergencies in a timely and effective mann(1e)-5( tm0 g0 G(THE)4( D)3(d- 10		

No.	Description	Reference	Change
NPS5.1.2	M Staff are familiar with the procedure(s) for responding to medical emergencies.		
NPS5.1.3	M The facility identifies staff who respond to emergencies and provides training in the use of emergency equipment.		
NPS5.1.4	M Emergency call systems are available in patient care areas.		
Staff know how to access:			
NPS5.1.5	M emergency medical services		
NPS5.1.6	M emergency equipment and supplies		

## Infection prevention and control

### Routine practices

No.	Description	Reference	Change
NIPC2.0	ROUTINE PRACTICES FOR PREVENTING THE TRANSMISSION OF INFECTION ARE IMPLEMENTED.		
NIPC2.1	Hand hygiene is used to prevent and control the spread of infection.		
NIPC2.1.7	M There are sufficient, readily accessible, designated hand hygiene sinks or other accessible forms of hand hygiene products.		

### Additional precautions

No.	Description	Reference	Change
NIPC4.0	PATIENTS, STAFF AND VISITORS ARE PROTECTED FROM POTENTIAL OR KNOWN COMMUNICABLE DISEASES.		
NIPC4.1	Additional precautions are used for patients with known or suspected communicable diseases.		



No.	Description	Reference	Change
NIPC5.0			

Examination of reusable semi-critical medical devices

Reference

Change



### Confidentiality

Privacy of health information applies to electronic, paper, and verbal communications. Protecting the privacy of health information is the responsibility of all staff. Organizations protect privacy by limiting the use of information to only what is needed to provide care, treatment, or services.

A confidentiality violation occurs when an individual is able to bypass security measures and systems to gain access to health information.

No.	Description	Reference	Change
NIM4.0	THE DIAGNOSTIC SERVICE PROTECTS THE CONFIDENTIALITY OF DATA AND INFORMATION.		
NIM4.1	Patient confidentiality and information is protected through policies and procedures.		
NIM4.1.1	M	Data access is restricted, controlled and monitored.	
NIM4.1.7	M	Generic login accounts are not used.	

Medical records

The medical record is an important method of communication for all members of the health-care team. The patient's medical record contains all the clinical data and information related to the patient's diagnostic procedures. The patient's medical record functions not only as a historical record of a patient's diagnostic procedure, but also as a method of communication between physicians and staff. These records facilitate the continuity of care and aid in clinical decision-making. Medical records may be one component of the facility's health record.

No.	Description	Reference	Change
NIM5.0	THE DIAGNOSTIC SERVICE MAINTAINS COMPLETE AND ACCURATE MEDICAL RECORDS.		



## Equipment and supplies

### Equipment

No.	Description	Reference	Change
NES1.0	EQUIPMENT IS SAFELY OPERATED, MAINTAINED AND MONITORED IN A MANNER THAT ENSURES PERFORMANCE SPECIFICATIONS ARE MET.		
NES1.2	Diagnostic equipment is appropriately operated.		
NES1.2.1	M	An orientation and training program is provided for all equipment to ensure safe, consistent, and accurate operation.	
NES1.2.4	M	Equipment operators have access to the manufacturer's operator manual for the specific equipment used in the facility.	
NES1.2.5	M	All equipment is located and stored in a safe and secure location.	

## Solutions and supplies

No.	Description	Reference	Change
NES3.0	SOLUTIONS AND SUPPLIES ARE MONITORED IN A WAY THAT REDUCES OR ELIMINATES SHORTAGES AND WASTE.		
NES3.1	The storage and monitoring of solutions and supplies ensures an effective inventory control system.		
NES3.1.1	M Storage complies with manufacturer's recommendations.		











## Electromyography (EMG) and nerve conduction studies (NCS)

The electromyography (EMG) and nerve conduction studies (NCS) accreditation standards are used with the global accreditation standards.

### Procedures

No.	Description	Reference	Change
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## Evoked potentials (EP)

The evoked potential accreditation standards are used with the global accreditation standards.

### Procedures

No.	Description	Reference
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Monitoring and recording

No.	Description	Reference	Change
EP3.0	MONITORING AND RECORDING PARAMETERS ARE CURRENT AND ACCURATE FOR THEIR INTENDED USE IN CLINICAL DECISION-MAKING.		
EP3.1	Normative data values are established and routinely employed.		
EP3.1.1	M	The normative data value is readily available.	Revised
EP3.1.2	M	The normative values are quantifiable and reproducible.	
EP3.1.3	M	Normative values are available with consistent filter settings, sweep speeds, sensitivities, distances and electrode separations, utilizing appropriate sampling of age, gender and height.	