

## Healthcare-Associated Infection Prevention in Ambulatory Surgical Centers Candidate Measures

*Note: The following is not an exhaustive list of candidate measures.  
If there are additional measures to be considered, please feel free to suggest them before  
or during the meeting.*

- By December 31, 2011, identify selected common ambulatory surgical center surgical procedures for which surgical site infection definitions and methods should be developed and develop a multi-year plan and phased approach to support routine surveillance.
- By December 31, 2013, all certified/accredited ambulatory surgical centers will have in place a surveillance system for procedure-related adverse events, including no less than 30 days post-discharge surveillance for all patients.
- By December 31, 2015, all certified/accredited ambulatory surgical centers will demonstrate 100% adherence to the following measures contained within the current infection control worksheet:
  - Staff perform hand hygiene before performing invasive procedures (e.g., placing an IV);
  - Needles and syringes are used only for one patient;
  - Single-dose vials, IV solutions, and IV tubing are used only for one patient;
  - Items undergoing sterilization and high-level disinfection are pre-cleaned appropriately; and,
  - Any fingerstick testing is conducted using only a single-use auto-disabling lancing device for each patient.
- By December 31, 2015, all certified/accredited ambulatory surgical centers will be reporting surveillance data in standardized formats to both Patient Safety Organizations and to the National Healthcare Safety Network.
- By December 31, 2015, all certified/accredited ambulatory surgical centers will demonstrate 100% adherence to Surgical Care Improvement Project/National Quality Forum infection process measures (i.e., perioperative antibiotics, hair removal, postoperative glucose control, normothermia).
- By December 31, 2015, all certified/accredited ambulatory surgical centers will have achieved a zero incidence of “Never Events” as defined by the National Quality Forum.
- By December 31, 2015, and within two years of National Quality Forum endorsement, all certified/accredited ambulatory surgical centers will have implemented any new applicable healthcare-associated infection-related measures (e.g., endoscope reprocessing, immunization).
- By December 31, 2015, all certified/accredited ambulatory surgical centers will have on staff or on contract the services of a certified infection preventionist.