COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

Diagnostic Accreditation Program

CRITICAL RISK CRITERION

Neurodiagnostics

Diagnostic Accreditation Program
College of Physicians and Surgeons of British Columbia
300–669 Howe Street
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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. *Guidance: Personal protective equipment may include gloves, lab coats/gowns and masks.*		**C**	

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.		**C**	

Patient safety

Patient identification

No.		Description	Reference	Risk	Change
NPS2.1		**Patient identification is confirmed prior to a patient's test or procedure by the individual(s) performing the test.**			
NPS2.1.2	**M**	Patient identification is confirmed prior to testing by the person(s) performing the test.		**C**	
NPS2.1.3	**M**	At least two unique patient identifiers are used when verifying patient identification.		**C**	

Medication management and administration

No.		Description	Reference	Risk	Change
NPS3.4		**Medications are administered safely.**			
NPS3.4.1	**M**	Only medical practitioners and authorized staff obtain and administer medication.		**C**	

Infection prevention and control

Cleaning of surfaces and ancillary medical equipment

No.		Description	Reference	Risk	Change
NIPC6.2		**The diagnostic service reduces the risk of infections associated with ancillary medical equipment.**			
NIPC6.2.2	**M**	Single use medical devices are not reprocessed. *Intent: The reuse of single-use devices can affect their safety, performance, and effectiveness and expose patients and staff to unnecessary risk.*		**C**	