

# THE STRUCTURE OF A STANDARD

The ACSA standard has **5 DOMAINS:**

- 1 The Care Pathway
- 2 Equipment, Facilities and Staffing
- 3 Patient Experience
- 4 Clinical Governance
- 5 Subspecialties

These are broken down further into **SUBDOMAINS** and **AREAS**

## KEY



The Care Quality Commission has released the **Key Lines of Enquiry** which the ACSA team maps against ACSA Standards.

**Guidelines for the Provision of Anaesthetic Services** references.

The standard has to be a **definitive statement** which warrants a 'yes' or 'no', 'met' or 'unmet' response.

## 1. The Care Pathway

### 1.1 General

#### 1.1.1 Policies

##### 1.1.1.1 All patients should have a named and documented supervisory anaesthetist who has overall responsibility for the care of the patient

This should be visible on the anaesthetic record, on the rota, on display in the department and visible in the obstetric area

#### PRIORITY

1

#### CQC KLoE

Safe  
Well-led

#### GPAS REFERENCES

3.4.6  
9.1.19, 9.1.20  
10.1.4

#### HELP NOTE

This has been written by the ACSA Team and agreed by the Quality Management of Service Group as useful additional wording to help clarify the standard further where possible.

Each **STANDARD** has a number. If a standard is removed, the number is not re-used, so some numbers are missing where standards have been taken out during the editing process. The standards themselves are grouped into these areas so that the standards are categorised and easy to find.

The text underneath each standard describes the evidence required to determine whether or not that standard is met.

Standards are either listed as Priority 1, Priority 2 or Priority 3.

**Priority 1 standards must be achieved** in order for accreditation to be awarded.

**Priority 2 standards are aspirational**, but may not be achievable because of mitigating circumstances (e.g. resource or geography issues) and may form part of ongoing issues.


**Priority 3 standards provide targets** for the highest performing departments to achieve.

These Key Lines of Enquiry are:



- 1 Safe
- 2 Effective
- 3 Caring
- 4 Responsive
- 5 Well-led

The KLoEs applicable to the standard are mentioned.

The standards all have one or more references to the GPAS document.

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<b>1 The Care Pathway</b>								
<b>5.2.1.1 There is a named lead clinician responsible for ophthalmic anaesthesia.</b> Documented evidence provided eg. Job plan or rotc 	1	Safe Effective Well led	Management and leadership	Workforce management and support	<a href="#">13.1.3</a>			
<b>5.2.1.2 All patients undergoing ophthalmic anaesthesia or sedation are assessed preoperatively by appropriately trained staff underpinned by guidelines on patient selection and perioperative management.</b> Copy of policy provided. Staff should be able to give verbal confirmation that this assessment takes place.	1	Safe Effective Well led	Safe, Effective, Well-led	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.1.5</a> , <a href="#">13.2.8</a> , <a href="#">13.2.9</a> , <a href="#">13.2.10</a> , <a href="#">13.2.11</a>			
<b>5.2.1.3 The WHO checklist should be adhered to including a robust procedure for checking the laterality of the eye to be operated on and that it is marked clearly with indelible ink, prior to local anaesthetic block or general anaesthesia. Where bilateral surgery is planned, there is a policy in place to ensure that each eye receives the correct operation.</b> Documented evidence that this occurs. Copy of policy provided. Verbal confirmation from staff. Audit of evidence.	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.5.6</a> <a href="#">13.5.7</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<p><b>5.2.1.4 The RCoA 'STOP before you block' protocol is adhered to.</b>                      Documented evidence that this occurs. Copy of policy provided. Verbal confirmation from staff. Audit of evidence.</p>	1	Safe Effective	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.5.7</a>			
<p><b>5.2.1.5 There is a policy on patient selection for ophthalmic day case procedures.</b>                      Copy of policy provided. Verbal confirmation from staff that policy is followed.</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.2.10</a>			
<p><b>5.2.1.6 There is a policy on patient selection for ophthalmic procedures under local anaesthetic.</b>                      Copy of policy provided. Verbal confirmation from staff that policy is followed.</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.2.10</a>			
<p><b>5.2.1.7 There is a formal system in place for assessing and recording the cognitive status of patients during preoperative assessment.</b>                      Documented evidence, e.g. preoperative assessment records such as Mini Mental State Evaluation or Abbreviated Mental Test.</p>	2	Safe Caring Responsive	Safe and effective care; Quality of patient experience	Safe, effective and person-centred care delivery; Policies, planning and governance; Impact on patients, service users, carers and families	<a href="#">13.3.5</a> , <a href="#">13.3.6</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<p><b>5.2.1.8 There is a policy for sedation of patients for ophthalmic procedures, including specifications of the facilities provided.</b></p> <p>Copy of policy provided </p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.2.13</a> , <a href="#">13.3.16</a> , <a href="#">13.3.17</a>			
<p><b>5.2.1.9 There is a policy for scheduling of urgent procedures in and out-of-hours with particular regard to the condition of the eye, the proposed operation, the ASA grade and age of the patients.</b></p> <p>Copy of policy provided. Audit data available</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.5.3</a>			
<p><b>5.2.1.10 There is a policy for the transfer of patients who become sick unexpectedly to an appropriate higher level of care.</b></p> <p>Copy of policy provided. Audit data available </p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.3.11</a>			
<p><b>5.2.1.11 Guidelines are in place for the prevention and management of postoperative cognitive dysfunction and postoperative delirium.</b></p> <p>Copy of guidelines provided. Verbal confirmation from staff that guidelines are followed.</p>	2	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Policies, planning and governance	<a href="#">13.3.5</a> , <a href="#">13.3.6</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<b>2 Equipment, Facilities and Staffing</b>								
<b>5.2.2.1 Appropriate staffing levels and skill mix is provided in all units delivering ophthalmic anaesthesia (multidisciplinary general hospitals, isolated units and large single specialty centres).</b> Documented evidence provided on rota. Verbal confirmation from staff.	1	Safe Effective Well led	Safe and effective care; Management and leadership	Safe, effective and person-centred care delivery; Workforce management and support	<a href="#">13.1.1</a>			
<b>5.2.2.2 An anaesthetist is present in the operating theatre at all times when intravenous sedation is administered for ophthalmic procedures.</b> Policy on provision of sedation. Verbal confirmation from staff.	1	Safe Responsive Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.3.16</a>			
<b>5.2.2.3 Needle blocks are administered only by trained surgeons or anaesthetists, or under the direct supervision of an experienced surgeon/anaesthetist.</b> Copy of policy provided. Verbal confirmation from staff.	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.3.14</a>			
<b>5.2.2.4 Where general anaesthesia is administered, monitoring and anaesthetic equipment, and appropriate lighting is provided to enable safe delivery of the full range of anaesthesia.</b> Verbal confirmation from staff especially if they feel that any equipment is lacking based on the procedures undertaken.	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.2.5</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<p><b>5.2.2.5</b> There is an identified group of senior anaesthetists who manage and deliver a comprehensive ophthalmic anaesthesia service, including the use of orbital regional anaesthetic techniques. Documented evidence provided, e.g. job plan or rota.</p>	2	Safe Effective Responsive Well led	Safe and effective care	Safe, effective and person-centred care delivery; Workforce management and support	<a href="#">13.1.4</a>			
<p><b>5.2.2.6</b> When lasers are in use for ophthalmic surgery, the correct safeguards are in place. Copy of policy provided. Verbal confirmation from staff that policy is followed.</p>	2	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.2.7</a>			
<b>3 Patient Experience</b>								
<p><b>5.2.3.1</b> There is comfortable access to the theatre suite and equipment is available to adjust patient position to ensure maximum comfort and optimum surgical access. Verbal confirmation from staff. Equipment should be seen.</p>	1	Safe Caring Responsive	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.2.16</a> , <a href="#">13.2.17</a>			
<p><b>5.2.3.2</b> Staff are trained to safely help patients on and off operating tables with care and dignity. Verbal confirmation from staff. Documented evidence provided, e.g. policy or staff training records.</p>	1	Safe Caring Responsive	Safe and effective care; Quality of patient experience	Safe, effective and person-centred care delivery; Impact on patients, service users, carers and families	<a href="#">13.2.17</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<p><b>5.2.3.3</b> Specific patient information regarding procedures for the day of admission and explanation of local or general anaesthetic techniques is available prior to admission. Copies of written information should be provided.</p>	1	Caring Responsive	Safe and effective care; Quality of patient experience	Safe, effective and person-centred care delivery; Impact on patients, service users, carers and families	<a href="#">13.9.3</a>			
<b>4 Clinical governance</b>								
<p><b>5.2.4.1</b> All ophthalmic theatre nurses, anaesthetic nurses and ODPs must have up-to-date appropriate life support training and ophthalmic nurses are trained in cardiopulmonary resuscitation. Documented evidence of training provided. Verbal confirmation from staff.</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.1.7</a>			
<p><b>5.2.4.2</b> Ophthalmic anaesthesia is included in departmental audit programmes, including on-going audit of patient satisfaction, elective and emergency anaesthesia activities, complications and adverse events. Written and verbal evidence should be provided.</p>	1	Safe Responsive Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery; Quality improvement focussed leadership	<a href="#">13.7.2</a>			

	Priority	CQC KLoE	HIW Domains	HIS Domains	GPAS Refs	Met	Not Met	N/A
<p><b>5.2.4.3 Structured training in regional orbital blocks is provided to all inexperienced doctors who wish to learn any of these techniques. This includes the applied knowledge of anatomy, and recognising and minimising the risks of complications.</b></p> <p>Documented evidence of training provided e.g. clinical governance meeting minutes. Verbal confirmation from staff.</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.4.3</a>			
<p><b>5.2.4.4 Doctors learning orbital regional anaesthesia are directly supervised by an expert until assessed to be competent.</b></p> <p>Documented evidence of training provided. Verbal confirmation from staff.</p>	1	Safe Effective Well led	Safe and effective care	Safe, effective and person-centred care delivery	<a href="#">13.4.3</a>			

Name of Department: