



## **SAMPLES OF MOST COMMON ACCREDITATION CERTIFICATES FOR OUTPATIENT SURGICAL FACILITIES**

Please refer to the attached samples of the most common Accreditation  
Certificates for Outpatient Surgical Facilities

1. Certificate from the American Association for Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF);
2. Certificate from The Joint Commission – Non-Hospital Based
3. Certificate from the Accreditation Association *for* Ambulatory Health Care, Inc. (AAAHC);
4. Certificate from the State Department of Health; and
5. Letter from Medicare/Medicaid.

**Hospital-based outpatient surgical facilities certified by The Joint Commission must be identified but DO NOT require accreditation certificates/letters to be submitted.**

Reapplication Material Accreditation Certificates – effective 2-2024



7500 Grand Ave, Suite 200  
Gurnee, Illinois 60031

Toll Free: 1-888-545-5222  
Phone: 847-775-1970  
Fax: 847-775-1985  
reception@aaaasf.org  
www.aaaasf.org

## Accreditation Verification

**Facility ID Number:**

[REDACTED]

**Facility Name:**

[REDACTED]

**Facility Director:**

[REDACTED]

**Facility Address:**

[REDACTED]

[REDACTED]

**Class:**

C

**Accreditation Status:**

Current/Accredited

**Initial Accreditation Date:**

06/20/2020

**Accreditation Expiration Date:**

04/15/2024

**Clinicians/Physicians on Staff:**

Physician
[REDACTED]
[REDACTED]

*This information is valid as of 09/15/2021.*



August 31, 2021

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

Joint Commission ID #: [REDACTED]  
Program: Ambulatory Health Care Accreditation  
Accreditation Activity: 60-day Evidence of Standards  
Compliance  
Accreditation Activity Completed : 8/31/2021

Dear Mr. [REDACTED]:

The Joint Commission is pleased to grant your organization an accreditation decision of Accredited for all services surveyed under the applicable manual(s) noted below:

**Comprehensive Accreditation Manual for Ambulatory Health Care**

This accreditation cycle is effective beginning June 30, 2021 and is customarily valid for up to 36 months. Please note, The Joint Commission reserves the right to shorten the duration of the cycle.

Should you wish to promote your accreditation decision, please view the information listed under the 'Publicity Kit' link located on your secure extranet site, The Joint Commission Connect.

The Joint Commission will update your accreditation decision on Quality Check®.

Congratulations on your achievement.

Sincerely,

A handwritten signature in cursive script that reads "Mark Pelletier".

Mark G. Pelletier, RN, MS  
Chief Operating Officer and Chief Nurse Executive  
Division of Accreditation and Certification Operations

## ACCREDITATION NOTIFICATION

July 2, 2021

<b>Organization #</b>	[REDACTED]		
Organization Name	[REDACTED]		
Address	[REDACTED]		
City   State   Zip	[REDACTED]	[REDACTED]	[REDACTED]
Decision Recipient	[REDACTED]		
<b>Survey Date</b>	6/24/2021-6/25/2021	<b>Type of Survey</b>	Re-Accreditation
<b>Accreditation Type</b>	Full Accreditation		
<b>Accreditation Term Begins</b>	6/25/2021	<b>Accreditation Term Expires</b>	6/25/2024
<b>Accreditation Renewal Code</b>	[REDACTED]		
<b>Complimentary AAAHC Institute study participation code</b>	[REDACTED]		

As an ambulatory health care organization that has undergone the AAAHC Accreditation Survey, your organization has demonstrated its substantial compliance with AAAHC Standards. The AAAHC Accreditation Committee recommends your organization for accreditation.

### Next Steps

- Members of your organization should take time to thoroughly review your Survey Report.
  - Any standard rated less than “FC” (Fully Compliant) must be corrected promptly. Subsequent surveys by AAAHC will seek evidence that deficiencies from this survey were addressed without delay.
  - The Summary Table provides an overview of compliance for each chapter applicable to your organization.
- AAAHC Standards, policies and procedures are reviewed and revised annually. You are invited to participate in the review through the public comment process each fall. Your organization will be notified when the proposed changes are available for review. You may also check the AAAHC website in late summer for details.
- Accredited organizations are required to maintain operations in compliance with the current AAAHC Standards and policies. Updates are published annually in the AAAHC *Handbooks*. Mid-year updates are announced and posted to the AAAHC website, [www.aaahc.org](http://www.aaahc.org).

Organization # [REDACTED]

Organization: [REDACTED]

July 2, 2021

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4. In order to ensure uninterrupted accreditation, your organization should submit the *Application for Survey* approximately five months prior to the expiration of your term of accreditation. In states for which accreditation is mandated by law, the *Application* should be submitted six months in advance to ensure adequate time for scoping and scheduling the survey.

**NOTE:** You will need the Accreditation Renewal Code found in the table at the beginning of this document to submit your renewal application.

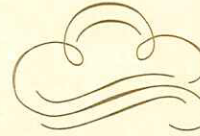
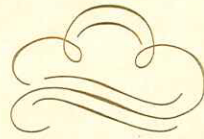
### **Additional Information**

The complimentary AAAHC Institute study participation code on the first page of this document may be used to register for one six-month, AAAHC Institute for Quality Improvement benchmarking study. Please visit [www.aaahc.org/institute](http://www.aaahc.org/institute) for more information.

Throughout your term of accreditation, AAAHC will communicate announcements via e-mail to the primary contact for your organization. Please be sure to notify us ([notifycqa@aaahc.org](mailto:notifycqa@aaahc.org)) should this individual or his/her contact information change.

If you have questions or comments about the accreditation process, please contact AAAHC Accreditation Services at 847.853.6060. We look forward to continuing to partner with you to deliver safe, high-quality health care.

PROPERTY OF THE  
**ARIZONA DEPARTMENT OF HEALTH SERVICES**



**This facility is licensed to operate as a(n) Outpatient Treatment Center**

**Effective: August 1, 2020**

**Recommended By: Kathryn McCanna, Branch Chief**

**License:**

**Issued By: Colby Bower, Assistant Director**

**HEALTH AND WELLNESS FOR ALL ARIZONANS**

PURSUANT TO A.R.S. §41-1092.11 (A), UPON SUBMITTAL OF A TIMELY AND SUFFICIENT APPLICATION  
THIS LICENSE WILL REMAIN IN EFFECT UNTIL REISSUED OR REVOKED  
TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE

# CERTIFICATE OF ACCREDITATION

Certificate No.:  
164322-2014-AHC-USA-NIAHO

Initial date:  
9/11/2021

Valid until:  
9/11/2024

This is to certify that:



has been found to comply with the requirements of the:  
**NIAHO® Hospital Accreditation Program**

Pursuant to the authority granted to DNV GL Healthcare USA, Inc. by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, this organization is deemed in compliance with the Medicare Conditions of Participation for Hospitals (42 C.F.R. §482).

This certificate is valid for a period of three (3) years from the Effective Date of Accreditation.

For the Accreditation Body:  
DNV GL - Healthcare  
Katy, TX

A handwritten signature in black ink, appearing to read "Patrick Norine".  
\_\_\_\_\_  
Patrick Norine  
Chief Executive Officer