1	10A NCAC 14E .0308 is adopted with changes as published in NCR 29:11, pp. 1290-1298 as follows:
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3	10A NCAC 14E .0308 RESERVED FOR FUTURE CODIFICATION QUALITY ASSURANCE
4	(a) The governing authority shall establish a quality assurance program for the purpose of providing standards of
5	care for the clinic. The program shall include the establishment of a committee that shall evaluate compliance with
6	clinic procedures and policies.
7	(b) The committee shall determine corrective action, if necessary.
8	(c) The committee shall consist of at least one physician who is not an owner, the chief executive officer or
9	designee, and other health [professionals as indicated.] professionals. The committee shall meet at least once per
10	<u>quarter.</u>
11	(d) The functions of the committee shall include development of policies for selection of patients, approval for
12	adoption of policies, review of credentials for staff privileges, peer review, tissue inspection, establishment of
13	infection control procedures, and approval of additional procedures to be performed in the clinic.
14	(e) Records shall be kept of the activities of the committee for a period not less than 10 years. These records shall
15	include:
16	(1) reports made to the governing authority;
17	(2) minutes of committee meetings including date, time, persons attending, description and results of
18	cases reviewed, and recommendations made by the committee; and
19	(3) information on any corrective action taken.
20	(f) Orientation, [training] training, or education programs shall be conducted to correct deficiencies that are
21	uncovered as a result of the quality assurance program.
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23	History Note: Authority G.S. 14-45.1(a); [G.S.90 21.83;] 143B-10; S.L.2013-366 s.4(c);
24	Eff. October 1, 2015.