| Facility Name [Title]  Date of Assessment | |
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| COMMUNICATION & FOLLOW-UP PROCESS | | | MET/UNMET | RECOMMENDATION FOR IMPROVEMENT |
| MEDICATION SAFETY & SECURITY | | | | |
| 1. | Staff can describe identification of patient's before medication administration. | | Choose an item. |  |
| 2. | Multi-dose vials are labeled and used appropriately. | | Choose an item. |  |
| 3. | Single dose vials are being used for only one patient. | | Choose an item. |  |
| 4. | Controlled substances are behind double locks. | | Choose an item. |  |
| 5. | Access to controlled substances is secured. | | Choose an item. |  |
| 6. | Accurate narcotic logs are in place. | | Choose an item. |  |
| 7. | Medications only are stored in the refrigerator designated for medications. | | Choose an item. |  |
| 8. | All medications are secured. | | Choose an item. |  |
| 9. | Medication refrigerator log is up to date. | | Choose an item. |  |
| 10. | Medications are not expired. | | Choose an item. |  |
| 11. | Prescription pads are secured and not pre-signed. | | Choose an item. |  |
| 12. | Physician DEA number is not posted. | | Choose an item. |  |
| 13. | Sample medication log is in place and contains a way to track lot numbers to patients. | | Choose an item. |  |
| 14. | Sample medications are secured and access limited. | | Choose an item. |  |
| 15. | A medication security & storage policy is in place which is comprehensive and raises no concerns. | | Choose an item. |  |
| 16. | Vaccine policy is in place to address storage, safety, and monitoring. | | Choose an item. |  |
| 17. | A policy on handling of sample medications is in place and raises no concerns. | | Choose an item. |  |
| 18. | A policy indicates the process for prescription renewals, including who is authorized to renew prescriptions, information needed before renewing, and required documentation. | | Choose an item. |  |
| 19. | Medication administration in the medical record is appropriate and reflective of policy requirements. | | Choose an item. |  |
| 20. | Vaccination administration in the medical record is appropriate and reflective of policy requirements. | | Choose an item. |  |
| 21. | No other significant findings. | | Choose an item. |  |
| COMMUNICATION | | | | |
| 1. | Call records to the answering service are maintained. | | Choose an item. |  |
| 2. | An after-hours recording is used to explain what to do in case of an emergency. | | Choose an item. |  |
| 3. | A policy for communication with the after-hours answering service about calls is in place. | | Choose an item. |  |
| 4. | Documentation is present to demonstrate follow up following a patient call with a medical need. | | Choose an item. |  |
| 5. | Other types of communication technology used in office that directly affects the care of the patient. | | Choose an item. |  |
| 6. | No safety/privacy concerns were identified related to communication technology being used. | | Choose an item. |  |
| 7. | No other significant findings | | Choose an item. |  |
| PATIENT COMPLAINTS | | | | |
| 1. | A system is in place to document patient complaints/grievances are handled. | | Choose an item. |  |
| 2. | Documentation is noted that follow-up of a patient complaint/grievance and includes information on how to appeal the final result. | | Choose an item. |  |
| 3. | A policy is in place to describe how complaints/grievances are handled and how the program is integrated with the health system (if applicable). | | Choose an item. |  |
| 4. | No other significant findings. | | Choose an item. |  |
| PATIENT PRIVACY | | | | |
| 1. | PHI is protected through-out the clinic, including the waiting/reception area. | | Choose an item. |  |
| 2. | No other significant findings. | | Choose an item. |  |
| RISK MANAGEMENT | | | | |
| 1. | Safety rounds are routinely made on a regular basis. | | Choose an item. |  |
| 2. | Staff are able to discuss the occurrence reporting process. | | Choose an item. |  |
| 3. | Staff are able to discuss how abuse/neglect suspicions or allegations are handled. | | Choose an item. |  |
| 4. | A written risk management plan is in place. | | Choose an item. |  |
| 5. | Occurrence reporting is addressed in the risk management plan. | | Choose an item. |  |
| 6. | Investigation of occurrences is addressed in the risk management plan. | | Choose an item. |  |
| 7. | Claims management is addressed in the risk management plan, including response to subpoenas, lawsuits, etc. | | Choose an item. |  |
| 8. | A policy on reporting of suspected or actual abuse/neglect is in place. | | Choose an item. |  |
| 9. | A formal tracking and trending process is in place to monitor adverse events and reporting is integrated with the health system (if applicable). | | Choose an item. |  |
| 10. | Types of trends or issues identified from Risk Management PI activity: | | Choose an item. |  |
| 11. | No other significant findings. | | Choose an item. |  |
| MEDICAL EQUIPMENT & DEVISES | | | | |
| 1. | All medical equipment and devices have an up-to-date preventive maintenance tag. | | Choose an item. |  |
| 2. | A process is in place to follow-up product recall notifications. | | Choose an item. |  |
| 3. | New equipment is inspected for proper function by biomed before use on patients. | | Choose an item. |  |
| 4. | No other significant findings. | | Choose an item. |  |
| INFECTION PREVENTION | | | | |
| 1. | A process is in place for disposal of waste and linens. | | Choose an item. |  |
| 2. | Someone trained in infection prevention is either employed by the practice or readily available to the practice. | | Choose an item. |  |
| 3. | Regular infection control surveillance is conducted regularly. | | Choose an item. |  |
| 4. | Sufficient amounts of PPE is available to staff. | | Choose an item. |  |
| 5. | A written plan for infection prevention is in place and the program is integrated with the health system (if applicable). | | Choose an item. |  |
| 6. | A policy is in place for cleaning toys kept in the clinic. | | Choose an item. |  |
| 7. | A policy is in place for routine disinfection and cleaning of devices and environmental surfaces. | | Choose an item. |  |
| 8. | A process is in place to report mandatory reportable diseases. | | Choose an item. |  |
| 9. | Cardboard boxes are not used for storage. | | Choose an item. |  |
| 10. | A hand hygiene campaign is in place for staff which includes monitoring compliance. | | Choose an item. |  |
| 11. | No other significant findings. | | Choose an item. |  |
| SOCIAL MEDIA | | | | |
| 1. | Staff are trained on appropriate use of practice-owned and personal technology devices and social media. | | Choose an item. |  |
| 2. | Signed acknowledgement of social media training is contained in the employee personnel files. | | Choose an item. |  |
| 3. | A stand-alone policy on social media is in place. | | Choose an item. |  |
| 4. | No other significant findings. | | Choose an item. |  |
| EMERGENCY PREPAREDNESS | | | | |
| 1. | Emergency equipment is accessible. | | Choose an item. |  |
| 2. | Emergency drills are conducted and documentation is kept on-site. | | Choose an item. |  |
| 3. | Evacuation plan for building is defined and posted (wall maps, etc). | | Choose an item. |  |
| 4. | Fire exits are marked and have clear, unobstructed egress. | | Choose an item. |  |
| 5. | Processes are in place in the event of power failure, computer technology disruptions, phone disruptions, etc. | | Choose an item. |  |
| 6. | Staff have training in violence prevention. | | Choose an item. |  |
| 7. | A plan is in place for responding to deterioration of a patient's condition. | | Choose an item. |  |
| 8. | Other significant findings. | | Choose an item. |  |
| INFORMED CONSENT | | | | |
| 1. | An informed consent policy is in place and lists what procedures require consent be obtained. | | Choose an item. |  |
| 2. | No other significant findings. | | Choose an item. |  |
| TESTING & CONSULTATION | | | | |
| 1. | A policy is in place describing how follow-up of tests and consultation reports are handled, communicated to physicians, and prioritized to the physician's attention. | | Choose an item. |  |
| 2. | A policy describes how critical values/tests and emergent situations are communicated to the physician. | | Choose an item. |  |
| 3. | Medical records demonstrate that a physician acknowledged testing results and that follow-up was done (if applicable). | | Choose an item. |  |
| 4. | If radiology testing is done in the clinic, a final reading by the Radiologist is in the medical record and has been reviewed / passed along to the physician and followed up as needed. | | Choose an item. |  |
| 5. | No other significant findings. | | Choose an item. |  |
| TERMINATION OF PHYSICIAN-PATIENT RELATIONSHIP & PATIENT NON-COMPLIANCE | | | | |
| 1. | A process/policy is in place describing how a physician-patient relationship is terminated. | | Choose an item. |  |
| 2. | A policy sets forth how non-compliant patients are handled, including education, documentation in record, and offering assistive resources. | | Choose an item. |  |
| 3. | No other significant findings. | | Choose an item. |  |
| STAFF EDUCATION | | | | |
| 1. | A staff orientation program is in place in which staff are oriented to the facility and area where care and services are provided. | | Choose an item. |  |
| 2. | Age specific care competency is in place for patient care staff which is specific to population served. | | Choose an item. |  |
| 3. | No other significant findings. | | Choose an item. |  |
| OTHER SIGNIFICANT FINDINGS | | | | |
| 1. | Finding: | | Choose an item. |  |
| 2. | Finding: | | Choose an item. |  |
| 3. | Finding: | | Choose an item. |  |
| 4. | Finding: | | Choose an item. |  |
| 5. | Finding: | | Choose an item. |  |
| 6. | Finding: | | Choose an item. |  |
| 7. | Finding: | | Choose an item. |  |
| 8. | Finding: | | Choose an item. |  |