

## Site Inspection Evaluation Survey Tool

Urgent Care Name: \_\_\_\_\_

Address: \_\_\_\_\_

NPI: \_\_\_\_\_

TIN: \_\_\_\_\_

Date of Survey: \_\_\_\_\_

Type of Audit: \_\_\_\_\_ Initial/Recred \_\_\_\_\_ CAP Follow-up \_\_\_\_\_ Complaint Follow-up \_\_\_\_\_ Other



**\*CAP Indicators**  
**Bolded:** Critical Issue Corrective ("CIC"; Cease contracting until resolved)  
**Bolded, Underlined:** Correction Action Plan ("CAP") required

Regulation References: <sup>1</sup>AHCA; <sup>2</sup>AAAHC  
 (other references: DHR; DCH; NCQA)

**Final Score:** \_\_\_\_\_ **Pass:** Yes No **CAP Indicated\*:** Yes No

Surveyed by: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name Office Manager: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature Office Manager: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

PHYSICAL ACCESSIBILITY, APPEARANCE AND ACCESSIBLE EQUIPMENT	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
1. Is office address clearly visible from the street?	Address is clearly visible and can be seen from the street.				
<b>2. Is office handicapped / wheelchair accessible?</b> <sup>1,2</sup>	This includes handicapped ramps available externally, doorways, handrails and at least one rest room. Wheelchair accessible restroom can be anywhere in the same building as the physician's office; it does not have to be in the same suite.				
<b>3. Is parking adequate and close by?</b> <sup>1,2</sup>	At least one handicapped parking space.				
4. Is staff able to communicate with member in member's primary language? <sup>1,2</sup>	At least one staff person speaks member's primary language, or can access interpretive services (including hearing impaired).				
5. Is bus service available to physician's office?	May be N/A if office is located in rural area or public transportation is not available in the area.				

GENERAL FACILITY	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
6. Documentation of facility license/certification. <sup>2</sup>	The facility's license is available upon request				
<b><u>7. OSHA manual is present in office and all staff given required, documented orientation; compliance with OSHA guidelines.<sup>2</sup></u></b>	The facility complies with federal, state and local building codes and regulations				
<b><u>8. Does the facility have a documented safety program that includes the expeditious elimination of hazards that might lead to slipping, falling, electrical shock burns and poisoning?<sup>2</sup></u></b>	<i>Review Policy.</i>				
<b><u>9. Documented orientation of staff on usage of equipment required in diagnosis and treatment of patient.<sup>2</sup></u></b>					
<b><u>10. In case of fire, are exit signs visible?<sup>2</sup></u></b>	Exit signs present at all exits. When physician's office is located in large office building, exits might only be identified in common areas such as hallways, lobby, etc.				
<b><u>11. Are fire extinguishers working and accessible or does the entire building have a sprinkler system?<sup>2</sup></u></b>	Either fire extinguishers or a sprinkler system for the entire building is acceptable.				
<b><u>12. Is there adequate lighting?<sup>1,2</sup></u></b>	Lighting should be adequate for reading.				
13. Facility demonstrates that during all hours of operation, it has staff (including physicians) qualified to handle "urgent" conditions.					
<b><u>14. Are emergency drills performed on an annual basis?<sup>2</sup></u></b>	Facility has the necessary personnel, equipment, and procedures to handle medical and other emergencies that may arise in connection with services sought or provided. These drills must be appropriate to the facility's activities and environment. Examples include medical emergencies, building fires, surgical fires, tornadoes, hurricanes, earthquakes, bomb threats, violence, and chemical, biological or nuclear threats.				

GENERAL FACILITY (Continued)	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b>15. Facility fire plan with employee in-services. Instruction in the proper use of safety, emergency and fire extinguishing equipment. Trainings should be documented.<sup>2</sup></b>	Facility should have evacuation floor plans posted in office. If applicable, stairwells are protected by fire doors. The NFPA Life Safety Code is a commonly accepted guideline among states and localities. Current Life Safety Code is posted. Ensures that the facility's emergency equipment and supplies are maintained and readily accessible to all areas of each service site.				
16. Is the office staff able to provide or facilitate emergency care/service to include use of basic emergency equipment such as: an operable Ambubag or mask/pocket mask, oxygen, and airways? List procedures performed in office: _____ _____	A policy, procedure or protocol is in place for staff to initiate basic life support measures and to obtain emergency transport to an acute care facility, if indicated.				
<b>17. Emergency medication is in stock and not expired?<sup>2</sup></b>	Based on need related to high risk procedures.				
18. Is any staff member currently certified in CPR? <sup>2</sup>	At least one employee, who is in the office during all work office hours, must have a current BCLS certification.				
19. Pertinent resuscitation equipment is available.	<i>Visual inspection while on site.</i>				
20. Suction equipment is available.	<i>Visual inspection while on site.</i>				
21. A reliable oxygen source is available including tubing and masks.	There is evidence of ongoing oxygen supply and equipment checks.				
22. There is evidence of advanced airway equipment that is regularly maintained.	<i>Visual inspection while on site.</i>				
23. Equipment is clean and in working order and a service log is maintained on all equipment? (cleaning/biomedical testing) <sup>2</sup>	A log sheet should be maintained to document equipment checks.				
<b>24. An inventory log of sample drugs is maintained?<sup>1,2</sup></b>	Sample drugs are maintained away from public access. A log should be maintain and documentation either in log or progress notes when sample medications are dispensed.				

GENERAL FACILITY (Continued)	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
25. Medication refrigerator is clean and does not contain food or specimens? <sup>2</sup>	Medications are to be stored in a separate refrigerator away from other items.				
<b><u>26. Organization demonstrates mechanism for transfer of patient's care between itself and other facilities.</u></b>	Noted policies on referral, transition of care, denial of care issues. Appropriate information about specific follow-up is evident. Organization has a Utilization Review Committee or process and minutes. <i>(Review Policy)</i>				
27. Organization demonstrates mechanism to assure appropriate patient education.	Booklets, hand-out materials on self-care, health promotion, disease prevention or specific illness and treatments, discharge instruction records, discharge planning meetings and minutes, information about support groups and educational classes. <i>(Visual inspection while on site)</i>				
28. Students in the facility? If so, is there a policy for supervision and scope of responsibilities for the student. <sup>2</sup>	<i>Review Policy</i>				

PROTECTION OF MEMBER RIGHTS	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b><u>29. Facility demonstrates mechanism to ensure patient's rights and confidentiality issues including but not limited to medical record review and right to privacy/respect.</u></b>	<i>Review process for patient check-in.</i>				
<b><u>30. Mechanism available for member to "sign" release of information form is evident.</u></b>	<i>Review process for patient check-in.</i>				
<b><u>31. Member rights regarding complaints/appeals or processes are evident.</u></b>	<i>Review process for patient check-in.</i>				
<b><u>32. Member rights regarding "Informed Consent" and the right to refuse to participate in any "experimental treatment" are evident.</u></b>	<i>Review process for patient check-in.</i>				
<b><u>33. Are advance directives available to patients and/or guardians of legal consent age and documented in the medical record?<sup>2</sup></u></b>	<i>Review process for patient check-in.</i>				

WAITING ROOM	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b><u>34. Does the waiting room accommodate and provide adequate seating for patients?</u></b> <sup>1,2</sup>	There is a seat available for everyone waiting and one or two empty seats.				
<b><u>35. Is the waiting area well ventilated?</u></b> <sup>1,2</sup>	Well ventilated, with functioning central air conditioning or heat.				
<b><u>36. Is the waiting area clean and free of clutter?</u></b> <sup>1,2</sup>	Clutter includes any items which might be considered obstacles to safe passage in the area.				

EXAM/PROCEDURE ROOMS	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b><u>37. Are the exam rooms clean and free from clutter? Is there room for patients to maneuver easily?</u></b> <sup>1,2</sup>	Clutter includes any items which might be considered obstacles to safe passage in the area. Is there a minimum of 60 inches by 60 inches of clear floor space to allow patients in wheelchairs or with mobility aids to turn 180 degrees freely in the room?				
38. Are efforts made to maintain privacy by keeping door closed during exam and consultation with doctor or staff? Is there an accessible route to and through the room for patients with mobility disabilities, including those who use wheelchairs? <sup>1,2</sup>	This includes any area where patient care activities occur.				
39. Are drape sheets or gowns available to patients?	This includes any area where patient care activities occur.				
40. Are sinks and soap available in patient care areas? Are gloves located in the exam/procedure rooms and in all patient care areas?	Sinks in each exam room would be preferred, however it is acceptable if they are within the patient care area and easily accessible. YES or NO answer. Staff should wear gloves for any invasive procedure (i.e. drawing blood, handling any body fluids or specimens).				
<b><u>41. Is the equipment in the exam room accessible for patients with mobile disabilities, including those who use wheelchairs, to receive appropriate medical care?</u></b>	Exam rooms have adjustable exam tables or chairs that lower to the height of a wheelchair seat (19 to 17 inches), as well as handrails, straps, or cushions to provide support for patients.				
<b><u>42. Medications and syringes are not patient accessible, controlled substances are locked and signed out?</u></b>	Any medications and sterile needles are stored away from public access.				

EXAM/PROCEDURE ROOMS (Continued)	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b><u>43. A needle disposal container is used?</u></b> <sup>2</sup>	Used needles and other sharp items are properly stored and disposed of in closed containers.				
<b><u>44. Standard Universal Precautions are observed?</u></b> <sup>2</sup>	Protective equipment (i.e. gloves, gowns, goggles) are available to and used by all personnel when handling potentially infectious patients or materials. Must have supplies for good hand washing technique.				
<b><u>45. Is there a procedure in place to check for expired medications?</u></b> <sup>2</sup>	Check drug expiration dates. Open vials of medications are to be dated and stored properly to include refrigeration if indicated.				
<b><u>46. Prescription pads are not patient accessible?</u></b> <sup>1,2</sup>	Prescription pads are maintained away from public access in a locked environment.				

LICENSURE/CERTIFICATION	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
47. Are current documents available for positions requiring licensure, certification or registration? <sup>2</sup>	This category includes RN, LPN, RT, PT, CAN, Lab tech, Radiology Tech. Ask to see one license or certification of any staff member who is present at the time of review.				
<b><u>48. Facility demonstrates methodology used to review physician/allied health practitioners practicing in the facility includes but is not limited to:</u></b>					
<b><u>a. Primary verification of current valid medical license</u></b>					
<b><u>b. Primary verification of current valid DEA certification</u></b>					
<b><u>c. Primary verification of National Practitioner Data Bank (NPDB) Query</u></b>					
<b><u>d. Primary verification of current medical malpractice insurance with appropriate limits</u></b>					
<b><u>e. Evidence that there is no Medicare/Medicaid sanction issues</u></b>					

LABORATORY SERVICES	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b>49. Does the office have a CLIA registration certificate?<sup>2</sup></b> <b>Certificate # _____;</b> <b>Exp. Date _____</b>  <b>List lab tests performed on site:</b> _____ _____ _____ _____ _____ _____	If the physician's office performs any lab tests they must have a CLIA registration certificate or a CLIA certificate of waiver. A list of tests that can be performed under a waiver is available at www.cdc.gov; go to Danta and Statistics Page and choose CLIA. If no labs are performed in the office this question may be N/A.				
<b><u>50. Refrigerated vaccines are kept at a temperature not lower than 35° F and not higher than 46° F degrees.<sup>2</sup></u></b>	This should be in accordance with CDC requirements. Vaccines should be stored separate from food and beverages. ( <i>Visual inspection while on site.</i> )				
<b><u>51. Frozen vaccines are kept at 5° F or below.<sup>2</sup></u></b>	This should be in accordance with CDC requirements. Vaccines should be stored separate from food and beverages. ( <i>Visual inspection while on site.</i> )				
<b>52. Adequate specimen pick-up frequency.</b>	<i>Review that pick-up timeliness complies with Policy.</i>				
<b><u>53. Lab reports have patient's name and date of test.</u></b>	<i>Visual inspection while on site</i>				
<b><u>54. Equipment manual is present.</u></b>	Complete descriptions are available of each test, including sources of reagents, standards and calibration procedures, and information concerning the basis for the listed "normal" ranges. ( <i>Visual inspection while on site</i> )				
<b><u>55. Facility adheres to laboratory policies and/or procedures.</u></b>	Obtaining, identifying and storing specimens.				
<b><u>56. Calibration log maintained.<sup>2</sup></u></b>	<i>Visual inspection while on site</i>				

X-RAY SERVICES	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<b>57. Is X-ray equipment inspected and licensed according to applicable Federal, State and Local laws and regulations?</b>	Calibration and evaluation of radiation equipment must be performed by a qualified, medical radiation physicist according to time frames established by federal, state and local laws and regulations. N/A may be used if no X-ray equipment present in the office.				
<b>58. Are radiation protective devices in place to include shields, warning signs and pregnant women alert?</b>	Radiation signs posted and protection devices available for patient and staff. N/A may be used if no X-ray equipment present in the office. (N/A answer receives full point value). <i>(Visual inspection while on site)</i>				
<b>59. Current technician licensure on file.<sup>2</sup></b>	<i>Visual inspection while on site</i>				
<b>60. Office adheres to X-ray policies and procedures.</b>	<i>Visual inspection while on site</i>				

ACCESSIBILITY/AVAILABILITY OF APPOINTMENTS	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
61. Is there a policy on access of appointment times?	<i>Review Policy</i>				
62. Is the Health Plan's Member Service toll free number available?	Should be available to patients, upon request.				
63. What are the physician's office hours?	List in comments area.				
64. Are patients seen by physicians within 30-60 minutes of scheduled appointments? Actual # of minutes					



MEDICAL RECORD KEEPING AND FILING	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
<u>65. Are medical records maintained in an area away from public access?</u> <sup>1,2</sup>	Visual inspection while on site				
<u>66. Is written authorization obtained for the release of medical records?</u> <sup>1,2</sup>	Ask to see release form.				
<u>67. Is there a confidentiality policy for medical records?</u> <sup>1,2</sup>	Accept verbal explanation by staff.				
68. Medical record is organized and a standard format is used to document care?					
<u>69. All pages contain patient identification?</u>					
<u>70. The provider of service is identified on each entry?</u>					
<u>71. Biographical/personal data is contained in the record?</u>					

QUALITY MANAGEMENT PROGRAM	Criteria	Criteria Met			Comments
		0 = Fail	1 = Pass	N/A	
72. Organization has mechanism to identify and have staff communicate quality issues.	Review Policy.				
73. Organization demonstrates integration of quality throughout its organization; noted CQI teams, noted QI Committee and committee meeting notes.					
74. Does the facility have a HIPAA Compliance Program? <sup>1,2</sup>	Review policy.				
75. Verify that the facility has a policy on or that there is a staff privacy-training program in place. <sup>1,2</sup>	Review policy.				
76. Verify that the facility has a Notice of Privacy Practice (NPP) and that it is provided to all new patients. <sup>1,2</sup>					
77. Inquire if the facility has a standard Business Associate Agreement and that they obtain one on each business associate whom has access to Protected Health Information (PHI). <sup>1,2</sup>					
<b>Subtotals:</b>					<b>Score:</b>

**Sample calculation:** 75 items were scored  
71 items were marked as pass  
2 items were determined to be N/A > **71(passed)/75(scored) = 94%**      **(85% score required for passing)**