BCBSOK/BlueLincs HMO Health Delivery Organization (HDO) Site Survey Skilled Nursing Facility

PHYSICAL SETTING AND SAFETY STANDARDS

- 1. Facility is accessible to the disabled, parking, entrance, restrooms, hallways, elevators
- 2. Hallways and floors clear and adequate for movement
- 3. Exit Signs visible
- 4. Visible, charged fire extinguishers (A,B,C)
- 5. Fire/disaster evacuation routes posted
- 6. Equipment maintenance current and documented
- 7. Emergency carts/kits are up to date/log maintained; drugs, equipment, O2, etc.
- 8. Controlled drugs are properly handled; locked cabinet, log maintained
- 9. Resident medications labeled and stored properly

Biohazard and Waste Management

- 10. Written policies and procedures
- 11. Provisions for appropriate disposal of bio-hazardous materials/waste with signs posted

Disaster Plan

- 12. Written policy; fire, tornado, bomb threat, city state/national emergency
- 13. Written evidence of a disaster drill in the past 12 months

Resident Monitoring

14. Written policy to address abuse, neglect as well as dignity, privacy, and respect

Dietary

15. Written policy regarding monitoring of food preparation and dietary staff training

QUALITY PROGRAM REVIEW

- 16. Mission Statement
- 17. DOH License is current

Quality Improvement

- 18. Written Plan, Policies, and Procedures
- 19. Annual review/revision of written plan with evidence of oversight
- 20. QI/QA Committee meets regularly and contemporaneous minutes are signed/dated
- 21. Evidence of coordination/monitoring of activities throughout the facility; examples include: Infection control, safety/maintenance, and pharmacy

Infection Control Plan

- 22. Written Policies and Procedures
- 23. Documented monitoring of problems/trends with correction action plans

Safety and Plant Management Program

- 24. Written policies and procedures
- 25. Documented monitoring

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LAB ON SITE (Yes)

- 26. Current CLIA certificate is displayed
- 27. Written policies and procedures
- 28. Equipment maintenance log available

LAB ON SITE (No)

- 29. Certificate of CLIA waiver available
- 30. Written policies and procedures

PHARMACY ON SITE (Yes)

- 31. Registered pharmacist oversees the pharmacy
- 32. If no registered pharmacist, written policy & procedure or process for oversight

EMPLOYEE REVIEW

Medical Staff Bylaws

33. Written plan of medical staff responsibility(ies) with annual review

Medical Staff Credentialing Plan (Including Temporary Medical Staffing)

34. Written plan, policies, and procedures

Professional Staff Licensure

- 35. Written Policy
- 36. Documented monitoring of license renewals
- 37. Documented monitoring of continued education as required
- 38. Nursing staff and/or ancillary staff members are CPR certified

Non-Professional Staff Oversight

- 39. Written policy
- 40. Documented monitoring of certification renewals
- 41. Documented monitoring of continued education as required

Employee Orientation

- 42. Written Plan
- 43. Orientation includes confidentiality/privacy training

MEDICAL RECORD STANDARDS

- 44. Organized, individual medical records
- 45. Organized filing system for medical records
- 46. Confidentiality/security of medical information assured
- 47. Release of information documents signed
- 48. Record notes whether or not adult patient has signed an Advanced Directive
- 49. Plan of care developed within 7 days of admission and updated interdisciplinary review and revision as appropriate
- 50. Patient safety assessments (i.e., fall risk/skin breakdown) completed per facility policy
- 51. Patient rights and responsibilities documented