

BCBSOK/BlueLincs HMO/Blue Advantage
Site Survey Form
Ambulatory Dialysis Center

PHYSICAL SETTING AND SAFETY STANDARDS

1. Facility accessible to the disabled-parking, entrance, restrooms, hallways, elevators.
2. Hallways and floors clear and there is adequate room for movement.
3. Exit signs visible
4. *Patient rights posted where likely to be noticed by patients or surrogate*
5. Visible, charged fire extinguishers (A,B,C)
6. Fire/disaster evacuation routes posted
7. Emergency carts are immediately available/log maintained.
8. Separate designated area/adequate space for medication storage, prep/dispensing.
9. Controlled drugs are properly handled-locked cabinet, log maintained.
10. Provisions for appropriate disposal of bio-hazardous materials/waste-signs posted.
11. Evidence of mechanical/electrical equipment is regularly inspected and tested.
12. Evidence of Safety and plant management program. i.e. books
13. Sterilization and re-use processes performed to appropriate standards; Autoclave use, bio-testing with spore indicators, load indicators and/or logbooks.

LAB ON SITE: (yes)

14. Written policies and procedures
15. Current CLIA certificate is displayed or certificate of waiver available.
16. Equipment maintenance log available

LAB ON SITE: (no)

17. Certificate of CLIA waiver available
18. Written policies and procedures

PHARMACY ON SITE: (yes)

19. Written policies/procedures outlining process for reconstitution, storage and dispensing of peri-dialysis medications.

QUALITY PROGRAM REVIEW

20. Mission statement
21. QAPI Written plan, policy, and procedures
22. Annual review/revision of written plan with evidence of oversight
23. QAPI committee meets regularly/minutes signed and dated.
24. Evidence of coordination of activities throughout facility, examples include; infection control, safety/maintenance, and pharmacy.
25. Infection control policies and procedures.
26. Documented monitoring of problems/trends with corrective action plan.

COMPLAINTS

Evidence of files maintained and investigated with results and resolution.

SAFETY AND PLANT MANAGEMENT PROGRAM:

28. Written policies and procedures include preparation/storage of dialysis solution.

DISASTER PLAN:

29. Written policy/procedure that specifically defines handling of emergencies such as fire, natural disaster or functional failures in equipment.

30. Evidence of annual disaster drill with assessment and corrections as indicated.

BIOHAZARD AND WASTE MANAGEMENT

31. Written policy/procedure related to biohazardous/waste management.

STAFF REVIEW

Medical Staff Bylaws

32. Written plan of medical staff responsibility, training and scope with annual review.

Medical Staff Credentialing (includes Temp Medical staffing)

33. Written plan, policy, and procedures include primary source verification.

Professional Staff

34. Written plan, policy, and procedures.

35. Written staffing matrix/plan

36. Documented monitoring of license renewals.

37. Documented monitoring of required continued education

38. Documented evidence-based training in management of adverse or unexpected outcome(s) in patient population; shock, seizure, arrest, etc.

39. Documented training of all individuals performing waived testing procedures

40. Nursing staff and/or ancillary staff members are CPR certified

Non-professional staff oversight

41. Written plan, policy and procedures

42. Documented monitoring of certification renewals.

Employee Orientation

43. Written plan, policy and procedures

44. Documentation of core competencies specific to job description

45. Training includes confidentiality and privacy training

MEDICAL RECORDS REVIEW

46. Confidentiality and security of medical information assured.

47. Evidence of critical lab value reporting process to physician.

48. Medical record documents PMH, physical exam, allergies, consent, advanced directive.

49. Release of information documents signed.