

SITE REVIEW TOOL

| | | | |
|-------------------|-------------------------------------------------------|-----------------|-------------------------------------------------------|
| Provider_Name | <input type="text" value="Please select a value..."/> | Review Type | <input type="text" value="Please select a value..."/> |
| License | <input type="text" value="Please select a value..."/> | Location | <input type="text"/> |
| Date of Review | <input type="text"/> | Reviewer Name | <input type="text" value="Please select a value..."/> |
| Total Audit Score | 0 Out of 34 | Compliance Rate | 0 % |

Rating Scale: Y = Yes N = No N/A = Not Applicable

Environment of Care

| | | | |
|--------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------|---------------------------|
| Q1. The office location is easily identifiable from the street and/or client is informed how to access the office. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q1. Comment | <input type="text"/> | | |
| Q2. The office appearance is reasonably neat and clean. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q2. Comment | <input type="text"/> | | |
| Q3. The waiting room is of adequate size and reasonably comfortable. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q3. Comment | <input type="text"/> | | |
| Q4. The clinical offices are of adequate size and reasonably comfortable. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q4. Comment | <input type="text"/> | | |
| Q5. The office furnishings and decor are appropriately professional. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q5. Comment | <input type="text"/> | | |
| Q6. There are no culturally insensitive or offensive materials posted. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q6. Comment | <input type="text"/> | | |
| Q7. There are accessible and functional fire extinguishers in the office or there is a fire suppression system. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q7. Comment | <input type="text"/> | | |
| Q8. The exits are well marked and free of obstruction. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q8. Comment | <input type="text"/> | | |

Medi-Cal Beneficiary Protections

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|--------------------------------------------------------------------------------------------|---------------------------|--------------------------|---------------------------|
| Q9. Grievance and appeal poster is accessible in the waiting areas and/or the office area. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
|--------------------------------------------------------------------------------------------|---------------------------|--------------------------|---------------------------|

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------|---------------------------|
| Q9. Comment | | | |
| Q10. Access and Crisis Line poster/brochure is visibly posted. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q10. Comment | | | |
| Q11. Advanced Directives Brochure is accessible. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q11. Comment | | | |
| Q12. Limited English Proficiency poster is posted in the waiting areas and/or the office area. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q12. Comment | | | |
| Q13. Guide to Medi-Cal Mental Health Services or Medi-Cal Quick Guides are accessible. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q13. Comment | | | |
| Q14. Client grievance and appeal forms and brochures are available without requiring a consumer to request them from office personnel. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q14. Comment | | | |
| Q15. Professional licensure is current and available. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q15. Comment | | | |
| Q16. The office has a policy and/or process in place to ensure that clients are not discriminated against in the delivery of health care services based on race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), disability, genetic information, or source of payment. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q16. Comment | | | |
| Q17. Provider understands serious incident reporting requirements. Provider knows how to access and complete County of San Diego BHS Serious Incident Report. Provider maintains a log of any serious incidents involving Medi-Cal beneficiaries. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q17. Comment | | | |
| Q18. The provider has created a professional will to ensure continuity of care for their clients, in the case the provider is no longer able to render services. | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A |
| Q18. Comment | | | |

Q19. For providers with electronic health records only: The provider has a process to maintain a "back-up" copy of all electronic health records. Yes No N/A

Q19. Comment

Q20. The computer screen locations do not violate client confidentiality. Yes No N/A

Q20. Comment

Q21. The practice site has an organized system of filing information in the treatment records. Yes No N/A

Q21. Comment

Q22. There are appropriate levels of security and confidentiality of data (locked cabinets, charts and serious incident reports in secure areas, secure fax line, and secure computer systems). Yes No N/A

Q22. Comment

Q23. The practice site maintains the confidentiality and safety of treatment records in accordance with any applicable statutes and regulations. Yes No N/A

Q23. Comment

Q24. If records need to be transported to another location, there is a protocol in place to maintain confidentiality of records throughout the transportation process. Yes No N/A

Q24. Comment

Q25. Discharged client records are completed and filed within 30 days. Records are maintained for a minimum of 10 years except for minors, whose records shall be kept at least 10 years after the minor has reached the age of 18. Yes No N/A

Q25. Comment

Q26. Provider understands privacy incident reporting requirements. Provider knows how to access HHS portal and complete online County of San Diego BHS Privacy Incident Report. Provider maintains a log of any privacy incidents involving Medi-Cal beneficiaries. Yes No N/A

Q26. Comment

Accessibility for Individuals with Disabilities

Q27. If the office is not accessible for individuals with disabilities, does the provider screen for accessibility needs prior to the first session and provide services in an alternative setting, or refer clients out as needed? Yes No N/A

Q27. Comment

Q28. The office has accessible parking spaces. Yes No N/A

Q28. Comment

Q29. The office has an access ramp allowing wheelchair entrance into the building. Yes No N/A

Q29. Comment

Q30. The office has doorways wide enough for wheelchair access. Yes No N/A

Q30. Comment

Q31. The office has an accessible restroom. Yes No N/A

Q31. Comment

Q32. If the provider has any animals in the office, are clients informed prior to the first session? (N/A indicates the provider has no animals in the office) Yes No N/A

Q32. Comment

Q33. Are the animals certified pet therapy animals? Yes No N/A

Q33. Comment

Q34. Are the animals used as part of the therapeutic process? Yes No N/A

Q34. Comment

Medications (For Medication Service providers only)

Q35. Prescription drugs are labeled in compliance with state and federal laws. Yes No N/A

Q35. Comment

Q36. Prescription drugs are stored at proper temperatures (room temperatures at 59-86 F and refrigerated drugs at 36-46 F). Yes No N/A

Q36. Comment

Q37. Prescription drugs are stored in a locked area with access limited to those medical personnel authorized to prescribe, dispense, or administer medication. Yes No N/A

Q37. Comment

Q38. Prescription drugs are not retained after the expiration date. Yes No N/A

Q38. Comment

Q39. Multi-dose vials of injectable medications are dated and initialed when opened. Yes No N/A

Q39. Comment

Q40. Provider disposes of expired, contaminated, deteriorated, and abandoned drugs in compliance with state and federal laws.

Yes

No

N/A

Q40. Comment

Q41. A prescription drug log is maintained to ensure the provider disposes of expired, contaminated, deteriorated, and abandoned drugs in compliance with state and federal laws.

Yes

No

N/A

Q41. Comment

Q42. Prescription drugs are dispensed only by persons lawfully authorized to do so.

Yes

No

N/A

Q42. Comment

Q43. There is a health permit for disposal of infectious waste/sharps.

Yes

No

N/A

Q43. Comment

Save

Cancel

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