

# SAN JUAN IPA

## PHYSICIAN/GROUP SITE REVIEW TOOL

Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_

ACCESS/SAFETY	YES	NO	N/A	Wt.
<b>Site is accessible and usable by individuals with physical disabilities.</b> 28 CFR §35 (American Disabilities Act of 1990, Title II, Title III)				
Is there a clearly marked office sign? (Name of Provider/Group)				1
Is parking convenient and appropriate?				1
Parking is handicap accessible and clearly marked (blue) or sign designating disabled-parking.				2
Doorway openings allow for clear passage of a person in a wheelchair.				2
Accessible passenger elevator or reasonable alternative for multi-level floor accommodation.				2
Clear floor space for wheelchair in waiting area and exam room.				2
<b>Site environment is maintained in a clean and sanitary condition.</b> NMAC 7.11.2				
The office is neat, clean and well maintained.				1
The waiting room has adequate seating. <i>*min. 4 chairs per provider in office</i>				1
There is an accessible, clean, and properly supplied bathroom with handicap accessible handrails.				2
<b>Site environment is safe for all patients, visitors and personnel.</b> 29 CFR §1910, §1926; NMAC 7.11.2; ICC IFC 909				
The following fire and safety precautions are evidenced on site:				
Lighting is adequate in all areas to ensure safety.				1
Are fire extinguishers present and is the inspection tag up to date? <i>* within 1 year</i>				2
At least one type of firefighting/protection equipment is accessible at all times.				2
<input type="checkbox"/> smoke detector w/intact working batteries <input type="checkbox"/> sprinkler system <input type="checkbox"/> fire alarm device with code				
ENVIRONMENT	YES	NO	N/A	Wt.
Are there adequate patient rooms with appropriate supplies, which provide privacy for patients?				1
Does the staff appear to display helpful and professional behavior?				1
CPR certified staff available?				1
Is there someone dedicated to handle complaints?				1
<i>*Please write name/title:</i>				
Is there a process and/or number displayed for patients with complaints to use?				2
Are there provisions for those who do not speak English?				2
Office hours are posted where can be clearly seen by patients.				2
POLICIES AND PROCEDURES, DOCUMENTATION	YES	NO	N/A	Wt.
Are there written policies and procedures for patients needing emergency care?				1
Is there an Anti-discrimination policy? (NMAC 13.10.22.12 I.)				2
Have other documents under HIPAA Privacy Standards been implemented? <i>*i.e. authorization forms, consent forms, business associates contracts, etc.</i>				2
Is there a written Notice of HIPAA Privacy Practices posted or available?				2
Is there a receipt of acknowledgement of HIPAA awareness signed by each patient?				2
<b>Are there written HIPAA policies and/or procedures in place to maintain confidentiality of medical records, and the release of records and/or patient information?</b>				
TRAINING/EDUCATION	YES	NO	N/A	Wt.
There is evidence that staff has received training and/or has safety information available in the following:				
Emergency non-medical procedures (e.g. site evacuations, workplace violence)				1
Fire safety and protection.				2
HIPAA/HITECH <i>*Completed within 90days of hire and with any applicable changes.</i>				2
<b>CMS General Compliance; CMS Fraud, Waste and Abuse</b> <i>*All who participate in Medicare/Medicaid, must be completed yearly</i>				

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APPOINTMENT AVAILABILITY		YES	NO	N/A	Wt
<b>PCP</b>					
	Are new patient exams scheduled within 2 weeks?				2
	Newly established patients are scheduled a routine physical exam within 4 months.				2
	Can urgent/high risk follow-up visits be scheduled within 24 hours?				2
	Can non-urgent follow-up visits be scheduled within 3 days?				2
	Are patients seen within 30 minutes of their appointment time?				2
	When scheduling is the patient notified when scheduled with a non-physician practitioner?				2
	<b>OB ONLY</b> – Are high risk pregnancy appointments for patients in their third trimester scheduled within 5 days?				2
<b>BEHAVIORAL HEALTH</b>					
	Are new/intake exams scheduled within 14 days?				1
	Are routine follow-up visits scheduled within 10 days?				2
	Are urgent/high risk visits scheduled within 24 hours?				2
	Are non-life threatening emergency exams scheduled within 6 hours?				2
	Are life threatening emergency visits scheduled within 1 hour?				2
	Provide face-to-face services within 2 hours of a crisis evaluation.				2
	Provide services within 7 days of a patient's d/c after an inpatient stay.				2
<b>SPECIALISTS</b>					
	Are appointments scheduled consistent with clinical urgency and not more than 21 calendar days?				2
<b>AFTER HOURS COVERAGE</b>					
	24 hour seven days a week on-call and after-hours coverage is provided for all PCP, OB & BH.				2
	<input type="checkbox"/> On-call provider <input type="checkbox"/> Answering Service <input type="checkbox"/> Answering machine (for answering service/machine, all criteria below is provided)				
	<ul style="list-style-type: none"> <li>How to make an appt, Hours of operation, How to reach on-call provider, Emergency instructions including phone numbers</li> </ul>				1
<b>MEDICAL RECORDS</b>		<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>Wt</b>
<b>PAPER</b>					
	Are records stored away from public access, yet readily available during office hours?				2
	Are charts easily retrievable by name or number?				2
	Is there a policy and procedure for notifying patients of abnormal lab and/or test results and f/u?				2
	Does each record include patients DOB, address, phone, sex, occupation, employer, marital status, and current info regarding insurance?				2
	Do all pages in the record contain patient identification? <i>*i.e. name, ID #, etc.</i>				2
	Is each entry in the record dated, and does it contain the provider's name or initials?				2
	Is there a procedure to document allergies and adverse reactions?				2
	Is there a policy/procedure to document consultant reports are received and reviewed? OR- as applicable, sent to other appropriate providers?				2
<b>EHR</b>					
	Are passwords required for all users who may access medical records, with restricted access only given to those users who do not require full access to medical records?				2
	Is there a procedure to document allergies and adverse reactions?				2
	Is there a policy and procedure for notifying patients of abnormal lab and/or test results and f/u?				2
	Is there a policy/procedure to document consultant reports are received and reviewed? OR- as applicable, sent to other appropriate providers?				2
	Does each record include patients DOB, address, phone, sex, occupation, employer, marital status, and current info regarding insurance?				2
	Patient screens cannot be viewed by visitors.				2
	System is backed up daily to an offsite location.				2

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SAFETY		YES	NO	N/A	Wt.
<b>OSHA</b>					
General Requirements (29 CFR §1910.1030, §1903.2, §1902.9; NMAC 11.5.1.17)					
	OSHA poster is posted in at least 1 employee area.				2
	Required state and federal employment posters and notices are present.				2
	Is there a written OSHA policy?				2
<b>OSHA Manual to include:</b>					
Exit Routes Standard (29 CFR §1910.34-37)					
	Clearly diagramed "Evacuation Routes" for emergencies are posted in a visible location.				1
	Exit doors are clearly marked with "Exit" signs.				2
	<b>Exit doors and aisles are unobstructed and egress (escape) accessible.</b>				
Medical and First Aid Standard (29 CFR §1910.151)					
Hazard Communication Standard (29 CFR §1910.1200)					
	There is a written plan for hazard communication and documentation of compliance training for employees.				2
	All bio-hazardous containers are labeled.				2
	There is a licensed hazardous waste transporter w receipts/manifests on file.				2
	Appropriate disinfectants are used for disinfecting surfaces.				2
<b>LAB/VENIPUNCTURE</b>					
Bloodborne Pathogens Standard and Needle Stick Safety (29 CFR §1910.1030)					
	Is area Clean & Organized?				1
	Is area separate from patient area/exam room?				1
	There is a written Exposure Control Plan.				2
	ECP is reviewed at least annually and is current.				2
	All employees who may come in contact with blood or other potential infectious material have been provided annual Bloodborne Pathogens Training and it is documented.				2
	Appropriate PPE is provided at no charge to clinical employees.				2
	Employees are aware of the location of PPE.				2
	All needles and syringes disposed of properly in sharps containers. <i>*Sharps containers must not be over fill line</i>				2
	<b>Current CLIA certification or waiver posted?</b> <i>*if applicable, will fail if not present</i>				
Effective Date:		Expiration Date:			
<b>RADIOLOGY</b>					
Ionizing Radiation Standard (29 CFR §1910.1096)					
	Is area Clean & Organized?				1
	Is area separate from patient area/exam room?				1
	Is there a warning for pregnant women prominently displayed?				1
	Radiation control compliance letter, or written proof of on-site inspection within the past 3 years?				2
	Are protective shield and radiation inspection badges utilized, and radiation exposure rates monitored and logged?				2
	Is equipment monitored and maintained as necessary for volume of services?				2
	<b>Posted certificate of registration from the Bureau of Radiation Control?</b> <i>*if applicable, will fail if not present</i>				
Effective Date:		Expiration Date:			
<b>PHARMACEUTICAL</b>					
<b>Drugs and medication supplies are maintained secure to prevent unauthorized access.</b> (21 CFR §1301.75, §1301.76, §1304.04, NMAC 16.19.8)					
	Drugs (prescription, sample and OTC) and prescription pads are securely stored in a specifically designated lockable space (cupboard, cabinet, closet, drawers or room) within the office/clinic and is inaccessible to patients.				2

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## PHYSICIAN/GROUP SITE REVIEW TOOL

SAFETY Continued		YES	NO	N/A	Wt.
	Is there a mechanism for indicating prescription/sample drugs dispensed? <i>*Must have patient name, date, amount dispensed, lot number, and person dispensing</i>				2
	*Controlled drugs are stored in a separate locked space accessible only to authorized personnel.				2
	*A dose-by-dose controlled substance distribution log is maintained.				2
<b>Drugs are handled safely and stored appropriately.</b> (21 CFR §211.137; 21 USC §351, NMAC 16.19.8)					
	Drugs are prepared in a clean area or "designated clean" area if prepared in a multipurpose room.				1
	Drugs for external use are stored separately from drugs for internal use.				1
	Is the temperature properly regulated in the refrigerator? <i>*Must be between 35°F and 40°F</i>				2
	Is the temperature properly regulated in the freezer? <i>*Must be between 5°F and -68°F</i>				2
	Daily temperature logs are maintained or temp w alarm.				2
	Drugs are stored separately from test reagents, germicides, disinfectants and other household substances.				2
<b>Drugs are dispensed according to State and Federal drug distribution laws and regulations.</b> (21 CFR §211.137; 42 USC 6A §300AA-26, NMAC 16.19.8, Nurse Practice Act)					
	If there is a pharmacy on site, it is licensed by the NM Board of Pharmacy.				1
	All stored and dispensed prescription drugs are appropriately labeled.				2
	Site has a procedure to check expiration date of all drugs (including vaccines and samples, and infant and therapeutic formulas).				2
	There are no expired drugs on site.				2
	Site has method(s) in place for drug disposal.				2
	Current VIS for distribution to patients are present on site.				2
	<b>There is a policy in place that only lawfully authorized persons dispense drugs to patients.</b>				
<b>Site personnel are qualified and trained for assigned responsibilities.</b> (Nurse Practice Act)					
	Documentation of education/training for non-licensed medical personnel is maintained on site.				1
	Only qualified/trained personnel operate medical equipment.				2
	<b>There is a policy in place that only qualified/trained/certified personnel retrieve, prepare or administer medication.</b>				
<b>Medical and lab equipment used for patient care is properly maintained.</b> (21 CFR §800-1299; NMAC 20.9.8)					
	If the office has emergency equipment and drugs, are these checked regularly and expired drugs replaced?				1
	Medical equipment is clean.				2
	Written documentation demonstrates the appropriate maintenance of all medical equipment according to manufacturer's guidelines.				2
	Is there a means for sterilizing non-disposable medical instruments?				1
	<b>*There is a quality control program for sterilized items.</b> (NMAC 20.9.8.13)				

COMMENTS/RECOMMENDATIONS									
Deficiencies Corrected at Time of Visit?	Yes	No	Action Plan Recommended?	Yes	No				
Reviewer Name ( <i>Printed</i> ):									
Reviewer Signature:									
Office Representative Name ( <i>Printed</i> ):									
Office Representative Signature:									
Date:									

Site Visit Score	
Total Points Received	
Total Points Possible	
Percentage of Compliance	

**PASSING SCORE IS ≥ 80% of possible points plus all PASS/FAIL criteria must be met.**  
*Questions in which an N/A is appropriate are not considered as negative.*

**\*As per Medicare/Medicaid requirements a copy of the SJIPA HIPAA/ HITECH Policy can be made available to any SJIPA Member's office upon request.**