

Confidence At Survey

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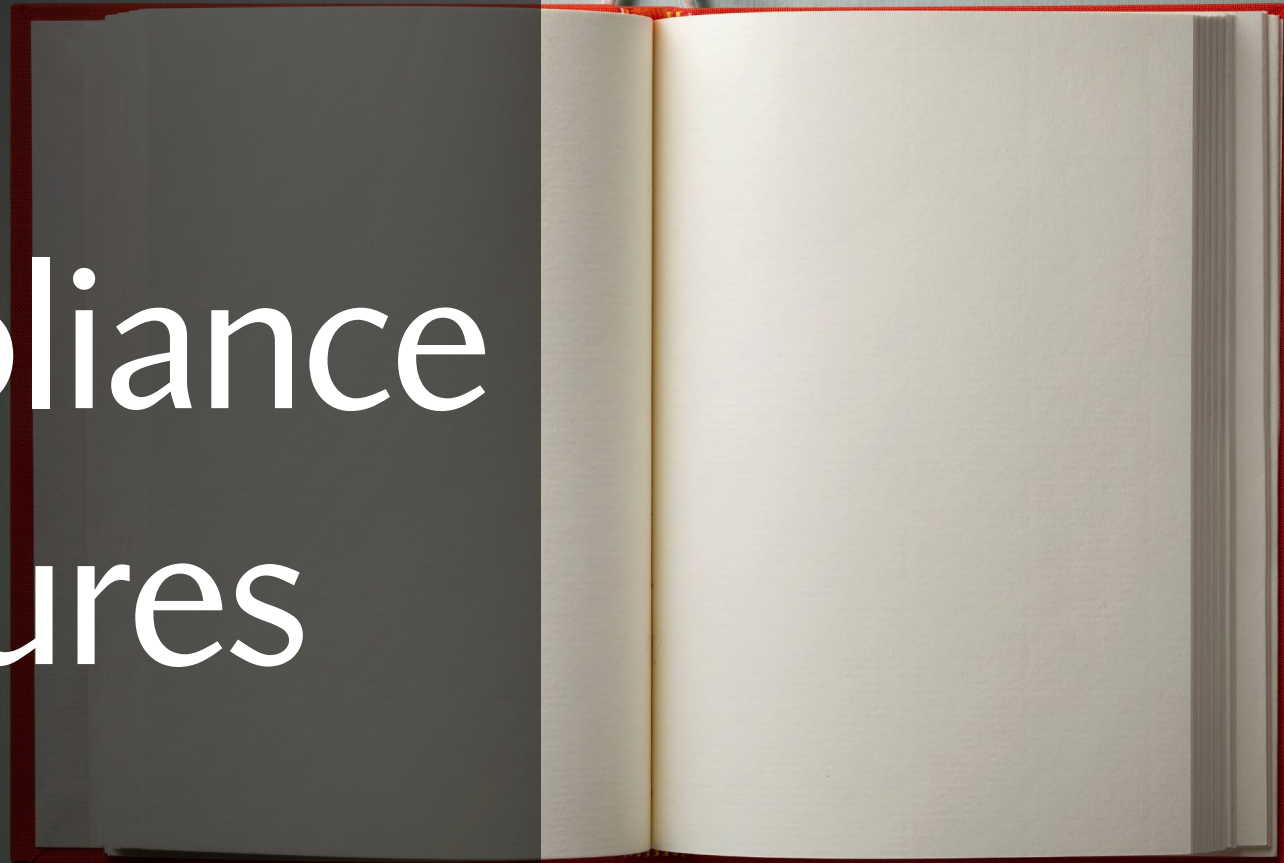




Participants will:

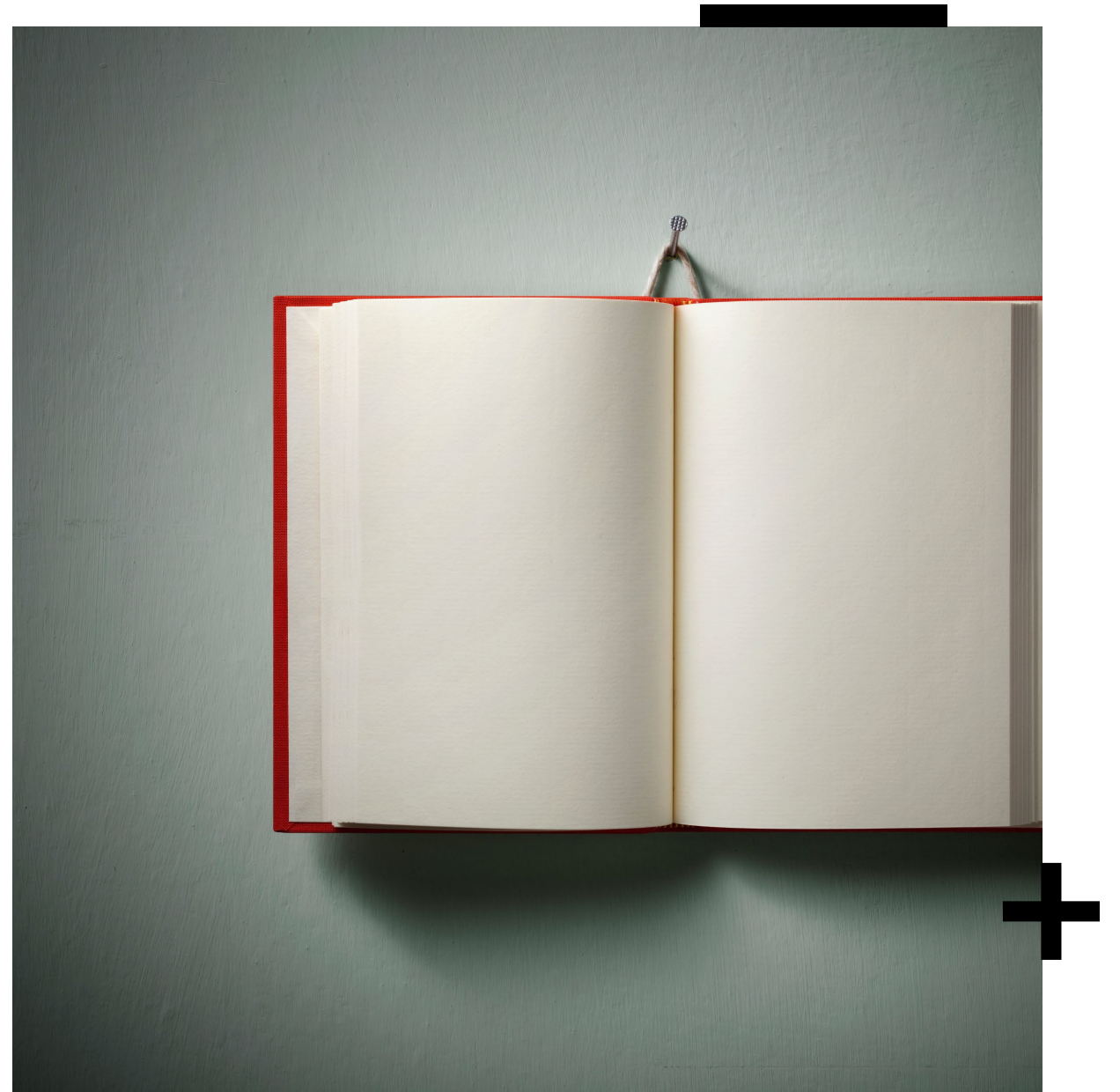
- Review the ongoing compliance measurements for an RHC**
- Discover helpful tools for use in the clinic**
- Discuss ways to streamline processes and build confidence for your next survey**

Compliance Measures



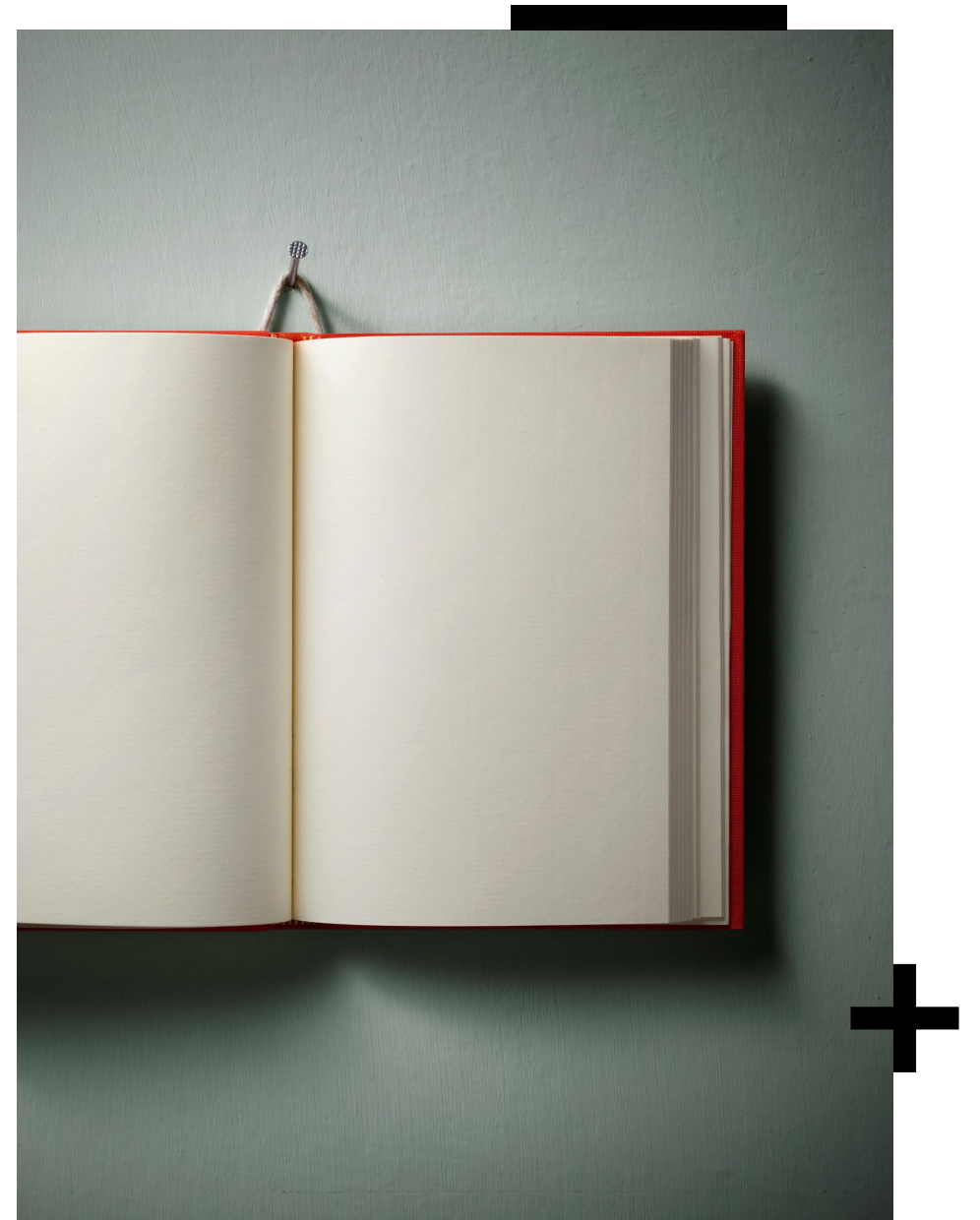
Open book test

- What test are you taking?
 - TCT, QUAD A, State
- Unannounced visit
- 100% Compliance



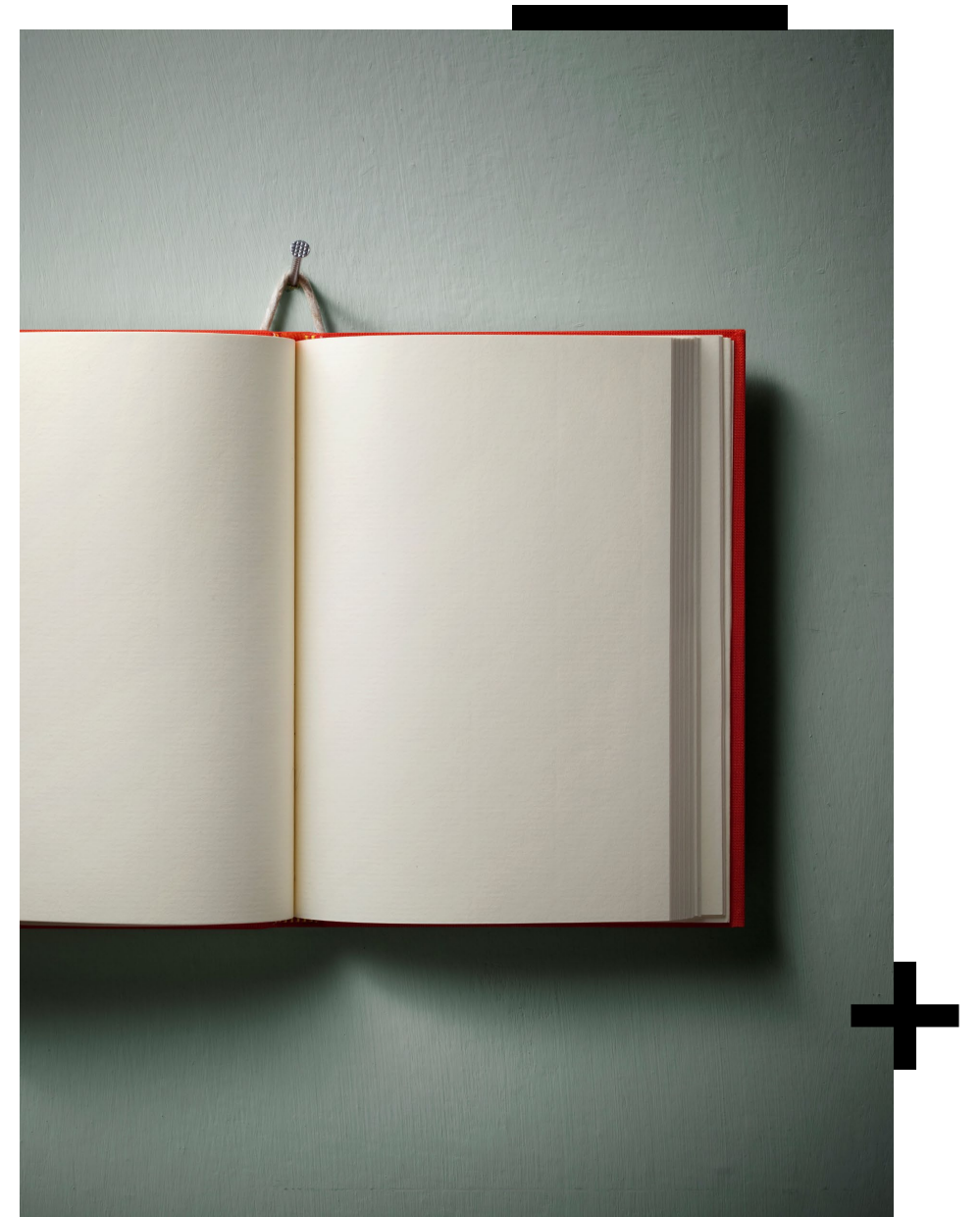
Open book test

- 491.1 Purpose and scope
- 491.2 Definitions
- 491.3 Certification procedures
- 491.4 Compliance with Federal, State and local laws
- 491.5 Location of clinic
- 491.6 Physical plant and environment



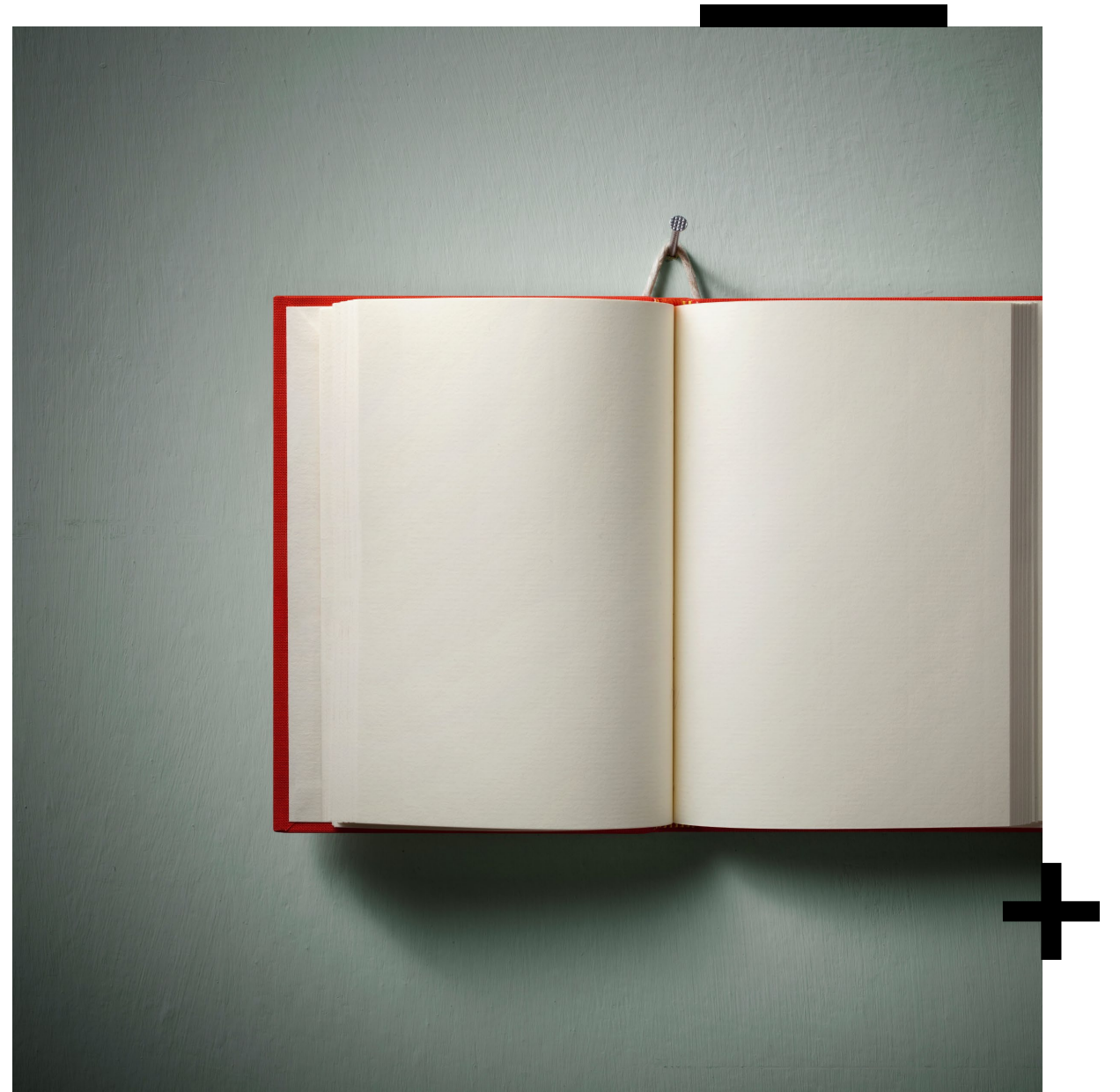
Open book test

- 491.7 Organizational structure
- 491.8 Staffing and staff responsibilities
- 491.9 Provision of services
- 491.10 Patient health records
- 491.11 Program evaluation
- 491.12 Emergency preparedness



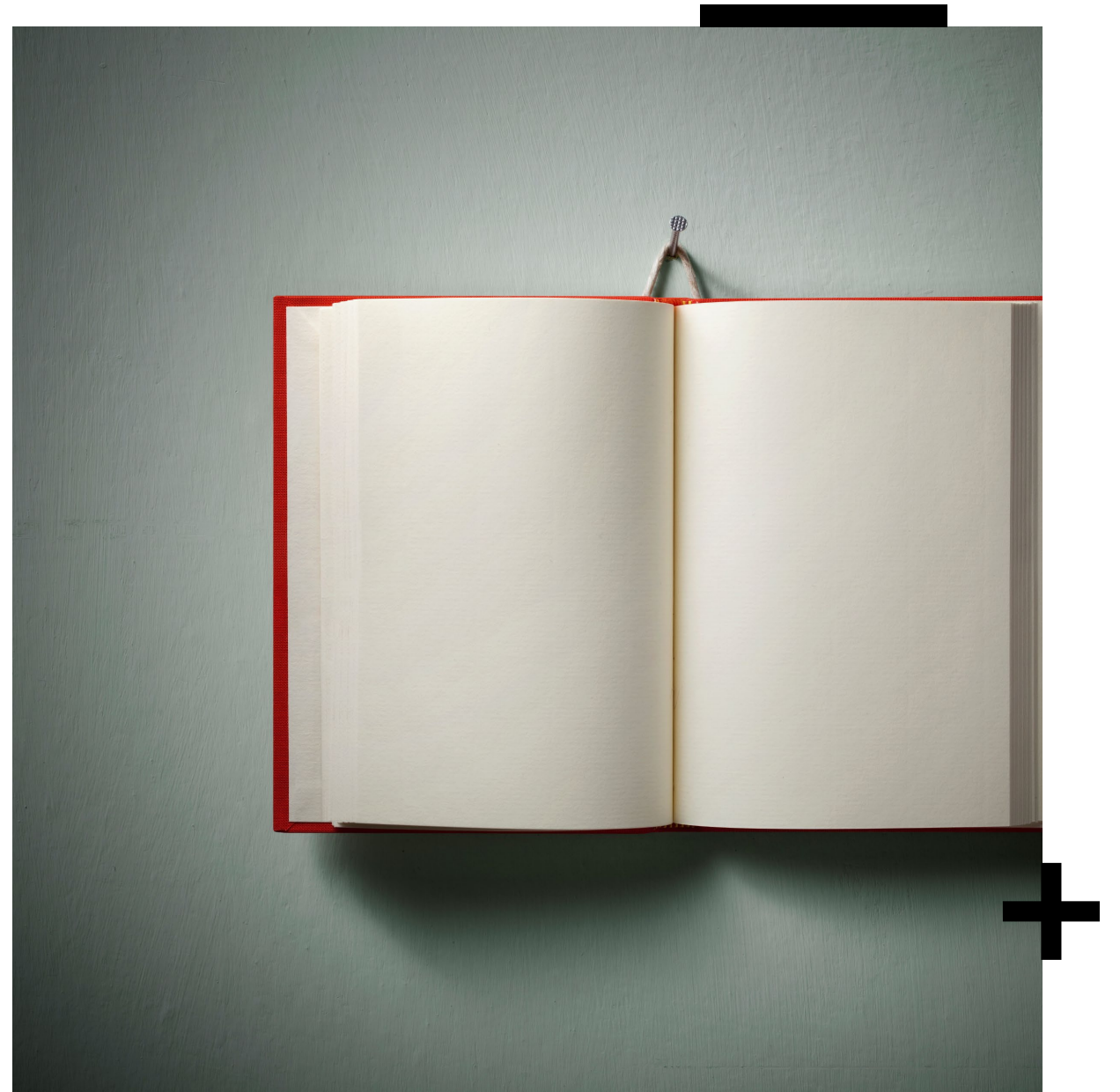
Open book test

- Personnel files
- Medical records
- Documentation
 - Policy/EOP
- Entrance
- Equipment



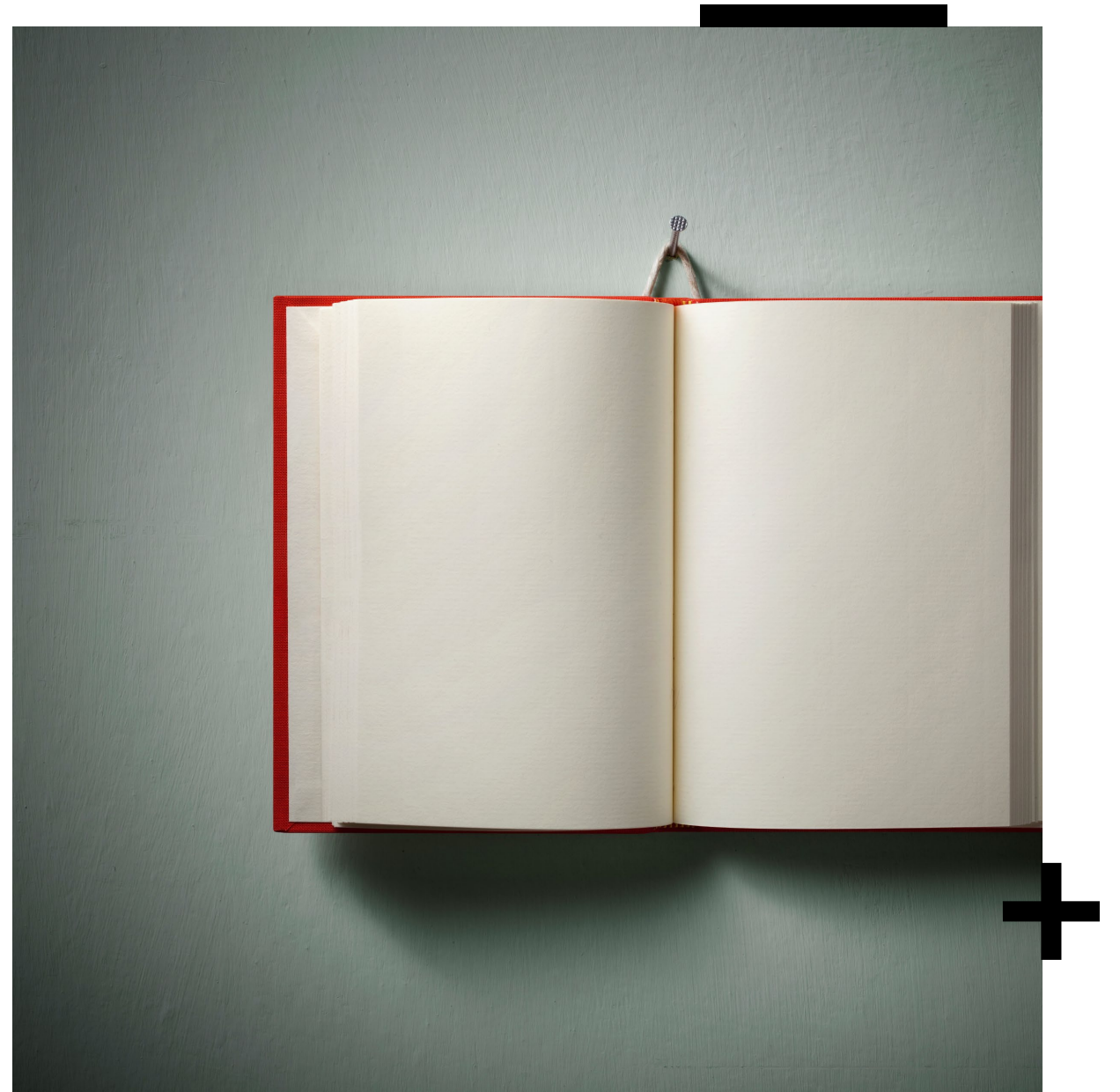
Open book test

- Medications and supplies
- Infection control
- Laboratory services
- Safety and housekeeping
- Administration
- Postings at the clinic



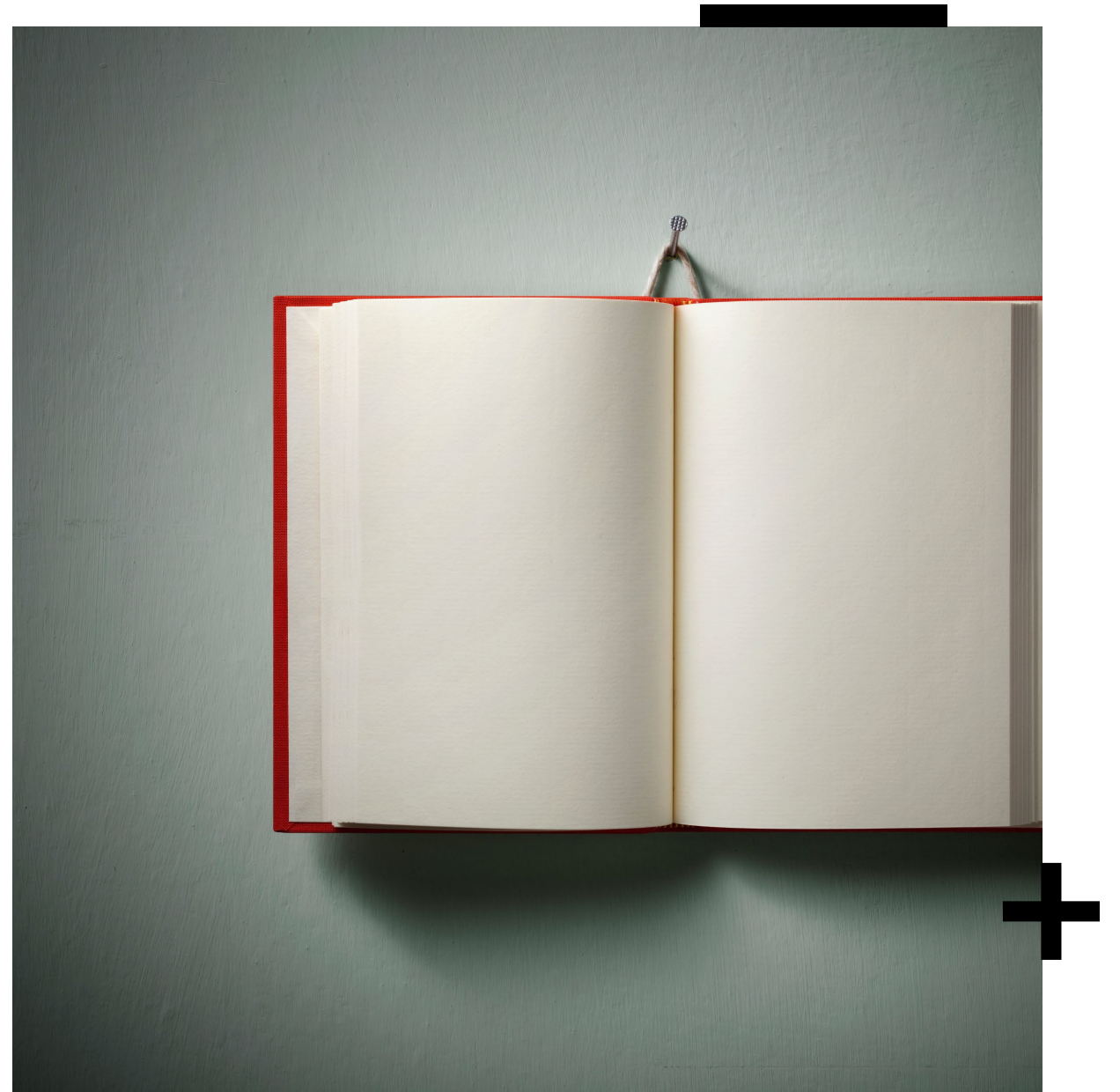
Changes at the Clinic:

- Staff turnover
- New policy/protocol
- Change in equipment/supplies
- Patient/staff incident
- Patient/community feedback
- Analysis of overall program
- Analysis of drills/exercises



Changes to the Program:

- RHC Regulations (491.1-491.12)
- Interpretive guidance (App. G/Z)
- Accreditation standards (TCT/QUAD A)
- Memos/publications from CMS
- Provider Fee Schedule
- Policy changes in Washington DC





Helpful Tools





RHC Evidence Binder

- This binder allows you to keep all requested information available for quick access**
- Be sure to keep it in safe location as it may contain confidential information**



RHC Evidence Binder

- Format and organize the binder in a manner that works best for you**
- Create sections that are labeled for quick reference**



RHC Evidence Binder

- Review the binder quarterly to identify items that expire or need to be updated**
- Make sure key staff know where to find the binder**



RHC Evidence Binder

- Certification:**
 - HPSA designation**
 - Final tie-in notice**
 - Most recent survey results**
 - Copy of CLIA**



RHC Evidence Binder

- **Physical plant:**
 - Equipment inspection log
 - Clinic floor plan
 - Drill reports
 - Cleaning logs
 - Fire/AED/Oxygen logs
 - Environmental rounding logs

Daily Oxygen Tank Pressure Check

[illegible]

FIRE EXTINGUISHER INSPECTION RECORD				
EXTINGUISHER NO. _____				
'21	'22		'23	'24
		JAN.		
		FEB.		
		MAR.		
		APR.		
		MAY		
		JUNE		
		JULY		

[illegible]



RHC Evidence Binder

- Chart audits:
 - Collaborative audit results
 - Administrative audit results

Collaborative Chart Audit

Number and Frequency based on your State OR policy

Medical oversight between MD/DO and NP/PA

Covers all APPs

Maintain documentation as proof of compliance

Administrative Chart Audit

50 or 5%, whichever is less

Determination if required elements are being captured

Covers all providers

Includes closed record(s) and feeds into program evaluation



Patient Chart Audit

Name of Clinic:

Date Reviewed:

Prepared by:

Reviewer:



Practitioner	Date of Service	Account Number	Chief Complaint	Consent	Social Data	H&P	Provider Signature	Labs Signed	Treatment Reports	Instructions to Patients	Evidence of Follow-up	Med. List	Allergies	Comments
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														

- 1
- 2
- 3
- 4
- 5
- 6



Medical Record Review Tool
For the Month of _____ Year _____

Supervising Physician: _____ Non-Physician Provider: _____

If there is a concern place N and respond in Notes.

Pt ID	DOS	H & P	ROS	Meds	Plan/Treatment	Education	Tests Ordered	Notes:

Supervising Physician Signature: _____ Date: _____

Non-Physician provider is required to respond to EACH notation from Supervising Physician.

Pt ID	DOS	Notes/Feedback & Response:

Non-Physician Signature: _____ Date: _____



RHC Evidence Binder

- Program evaluation:**
 - Copy of meeting minutes**
 - Data reports**
 - Signature page**

Program Evaluation Meeting Agenda

- I. Review the mission and purpose of the advisory council
- II. Review utilization of services
 - A. Volume
 - Top diagnosis codes
 - Number of patients seen in each clinic by insurance
 - Number of patients seen by age
 - Number of patients seen by gender
 - Number of in house lab services performed
 - Number of in house x-ray performed (if applicable)
 - Number of diagnostic referrals
 - B. Care of acute and chronic conditions
 - C. Patient safety
 - D. Coordination of care
 - E. Convenience and timeliness of available services
 - F. Patient satisfaction
- III. Review Performance Improvement projects
 - A. What project is the clinic reviewing
 - B. How is the project going
 - C. What is the clinic's next area of focus
- IV. Updates to overall program:
 - A. Review what went well
 - B. Review changes that have been implemented
 - C. Review improvements needed
 - D. Review clinic hours of operations
 - E. Review staffing levels
- V. Medical record review
 - A. Review audit analysis
- VI. Review policies and procedures and emergency plan
 - A. Review change recommendations
 - B. Give final approval
 - C. Timeline for implementation
 - D. Determine if policies were followed
- VII. Conclusion
 - A. Set future clinic goals
 - B. Next steps
 - C. Set date for next meeting





RHC Evidence Binder

- **Staff information:**
 - **Organizational chart**
 - **Roster of staff with FTE status**
 - **Non-physician practitioner schedule**
 - **Provider CV, License, DEA, BLS**
 - **Clinical staff certification and BLS**



Additional Binders:

- Policy manual**
- Emergency plan**
- Medication logs**
 - Sample/Controlled Meds**
- SDS sheets**
- Lab controls**

SAMPLE MEDICATION LOG

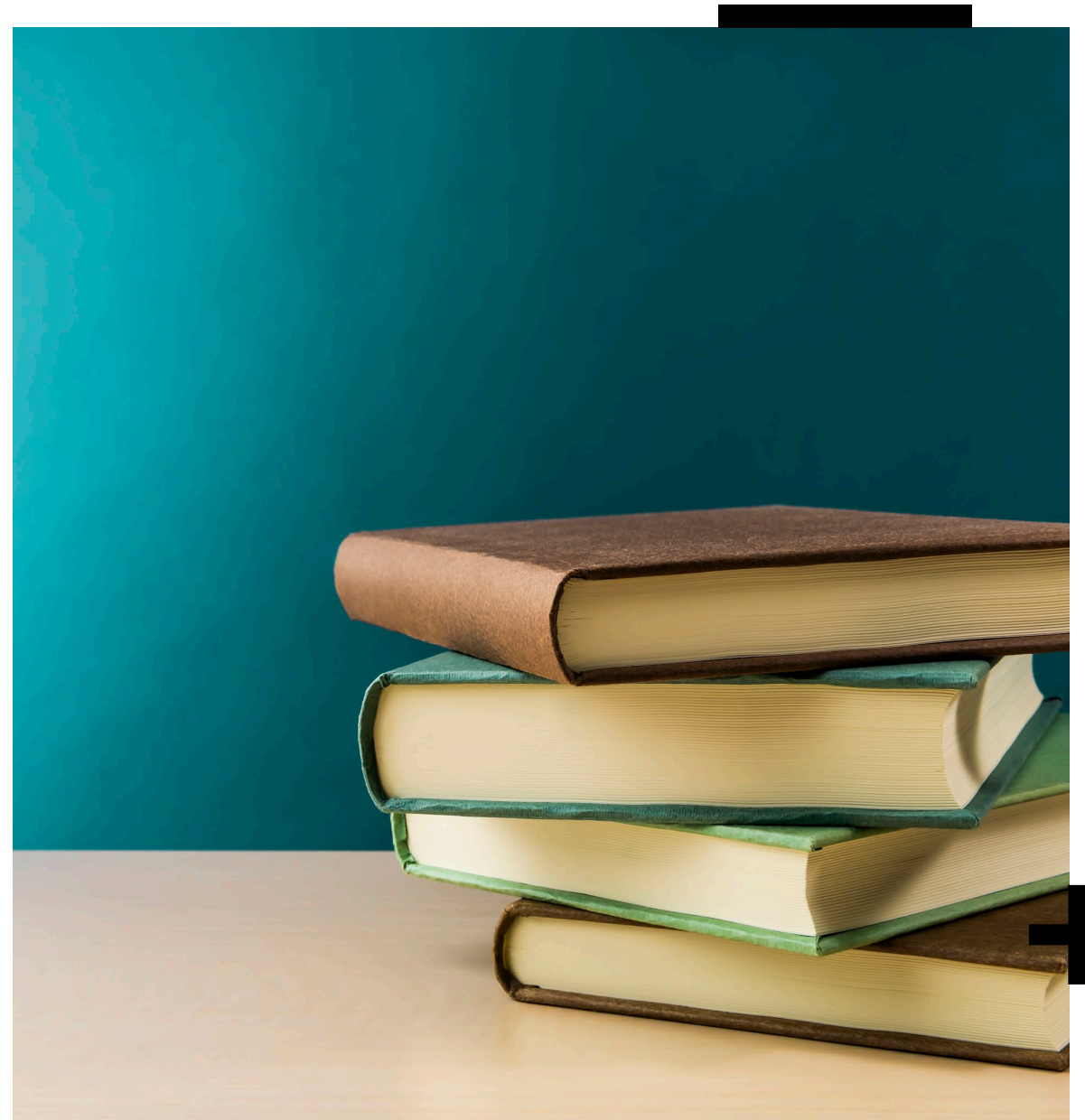
DATE	PATIENT NAME	MEDICATION	LOT NO.	DOSE	# of SAMPLES GIVEN	EXP. DATE	SIGNATURE

Streamlining Processes



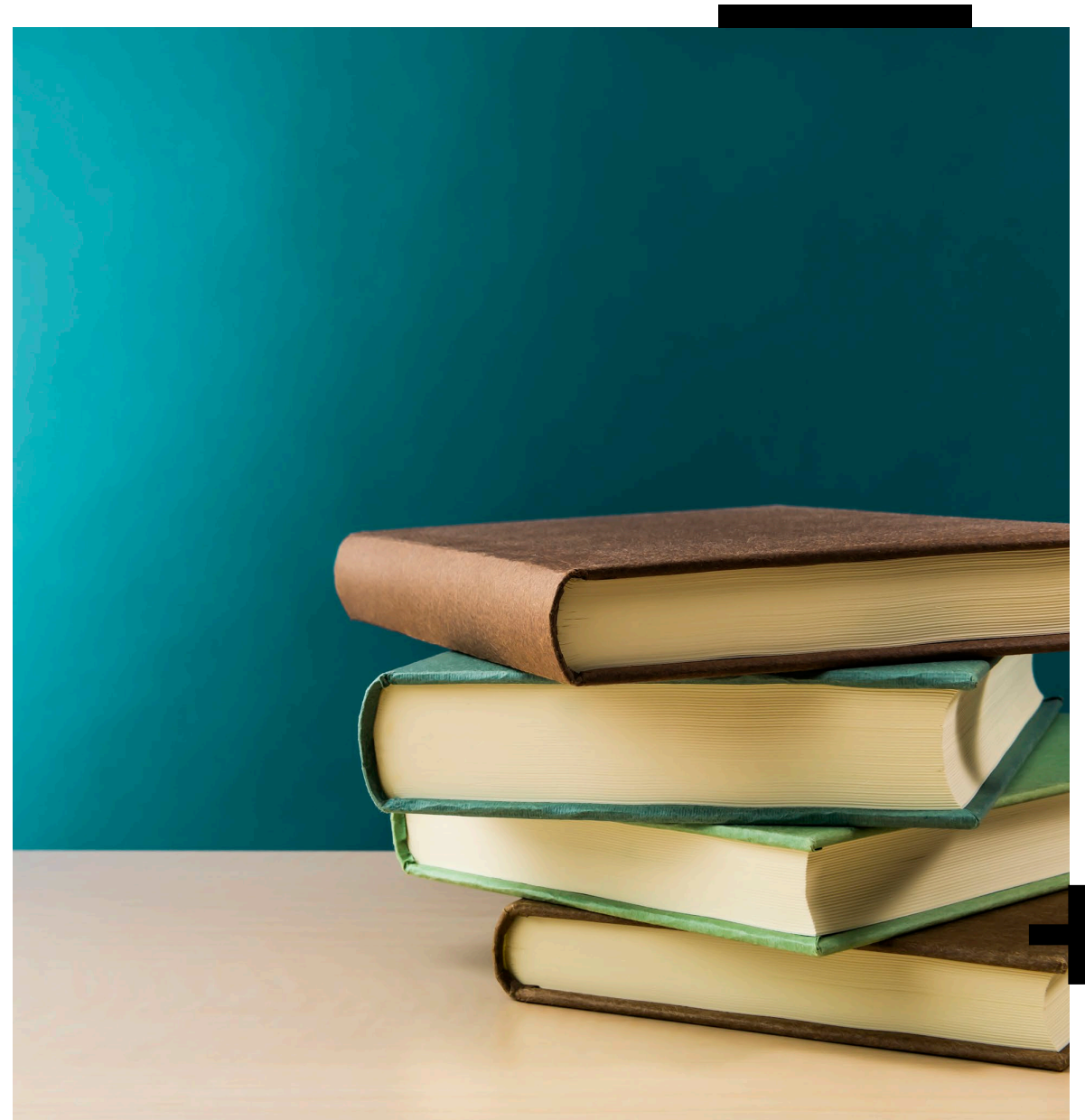
Helpful Tips

- **Personnel files**
 - Place in order of surveyor checklist
- **Medical records**
 - Set template to categories listed in 491.10
 - Use surveyor tool to conduct self audits
 - Review audit results with staff for additional educational opportunities



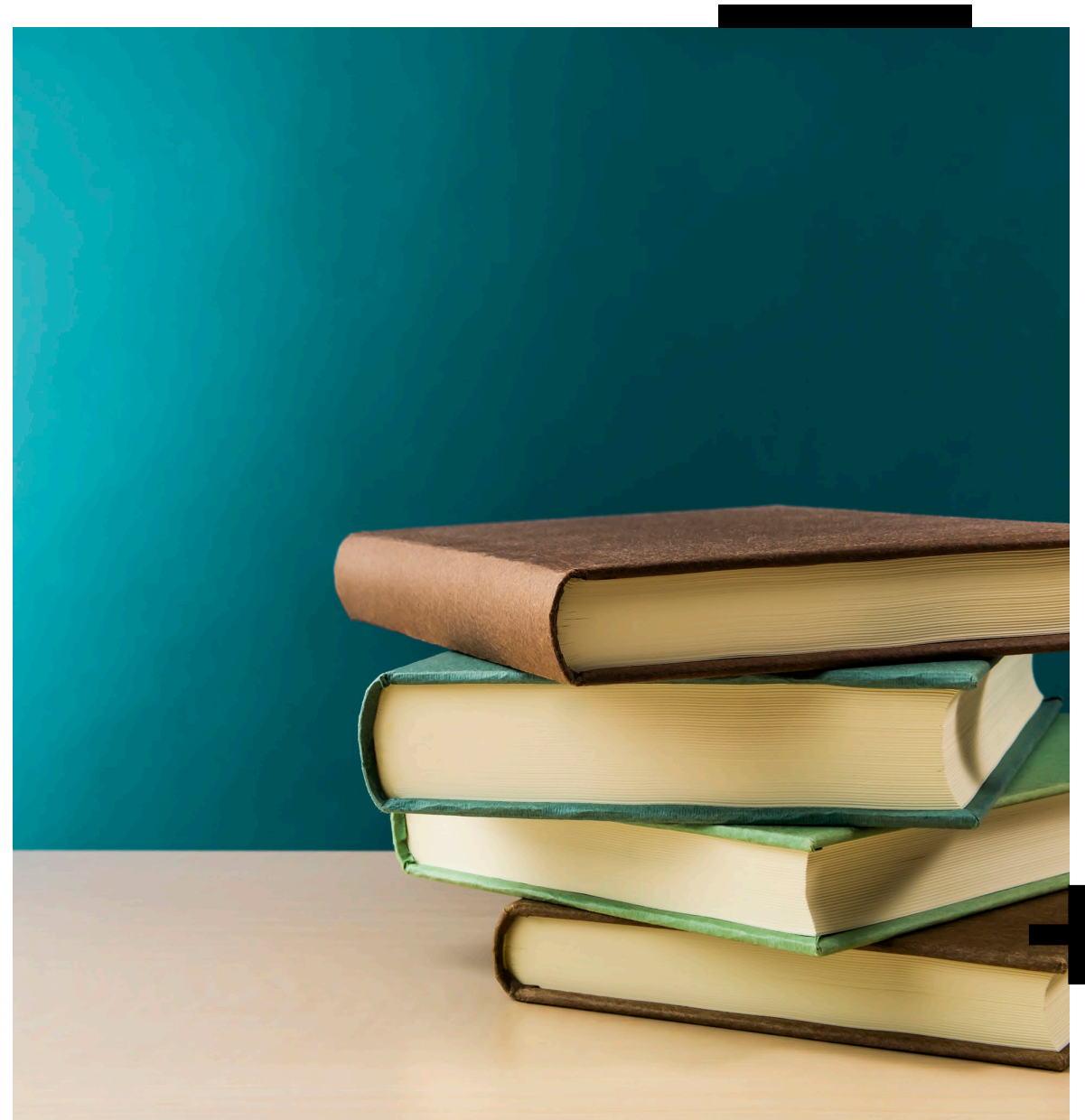
Helpful Tips

- Policy Manual
 - Do a crosswalk between surveyor checklist/Appendix G and your policy manual
 - Referral process (provider based)
- Emergency Plan
 - Create a checklist based on 491.12/Appendix Z and outline where each element is covered in your emergency plan
- Table of contents



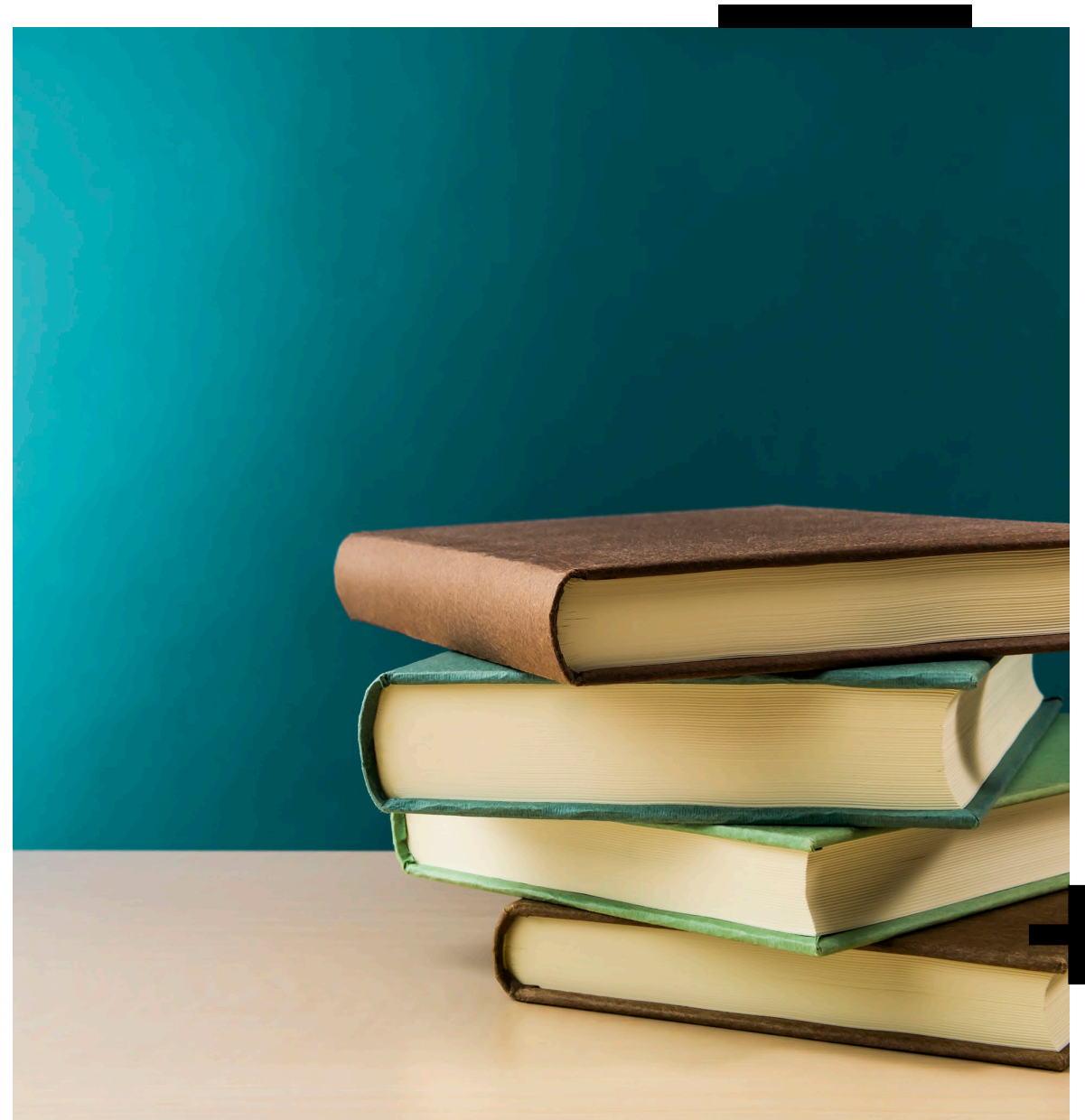
Helpful Tips

- Physical plant
 - Make exam rooms identical
 - Limit inventory in patient care areas
 - Assign staff to various areas of the facility
 - Environmental rounding log
 - Break down by expectation in each area
 - Assign staff person to medication review



Helpful Tips

- **Administrative Tasks**
 - Set calendar reminders
 - Delegate tasks
 - Break tasks down to smaller increments
 - Document/organize your proof of compliance
 - Conduct mock surveys





Questions:

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