

Optum - Behavioral Network Services

FACILITY SITE AUDIT TOOL

Facility Name:

Reviewer Name:

Date of Facility Review:

Rating Scale: NA = Not Applicable Y = Yes N = No

Y	N	NA
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Environment of Care

1	The facility location is easily identifiable from the street (may be scored NA in situations where prominent display of the identification of the facility is not appropriate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	The furnishings and décor are appropriately professional, and reasonably neat and clean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	The waiting room and patient care areas are of adequate size and reasonably comfortable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	There are no culturally insensitive or offensive materials posted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	There is a fire safety plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	There is evidence of compliance with fire safety procedures/regulations, including inspection by the fire department/marshall.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	The exits are well marked and free of obstruction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	There are fire extinguishers in the facility or there is a fire suppression system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9	The facility has parking for handicapped vehicles.			
10	The facility has a ramp allowing entrance into the building.			
11	The facility has wide doorways for wheelchair access.			
12	The facility has handicap accessible restroom(s).			
13	If the facility is not handicap accessible, does the program staff screen for handicap needs prior to the first session and refer patients out as needed?			
14	In residential settings, the patient rooms are arranged in a way that allows for privacy between genders.			
15	For <u>any</u> settings that offer food services: there is evidence of inspections of the food services area by appropriate agencies.			
Rights and Responsibilities				
16	There is a policy and procedure about patient rights, responsibilities and ethics.			
17	Patient rights, responsibilities and involvement in care are posted in waiting areas and patient care areas.			
18	There is a policy and procedure about patient involvement in care and services.			

19	There is a policy and procedure about reasonable access to care			
20	There is a policy and procedure about family involvement in patient care.			
21	There is a policy and procedure about confidentiality.			
22	There is a policy and procedure about the limits, use, and protections related to the use of portable electronic media to communicate with patients, including cellular calls, text messages and email.			
Safety and Security				
23	There is a policy addressing safety and security.			
24	There is a policy and/or procedure for dealing with life threatening emergencies.			
25	There is a comprehensive disaster plan , including plans for continuation of care when services are disrupted.			
26	There is a policy addressing control of hazardous materials, cleaning supplies/chemicals, and wastes, including management of any spills of bodily fluids (This question applies to all facilities).			
27	There is a policy/written criteria addressing sentinel events to include identifying opportunities for improvement and implementing corrective action when indicated.			

	Sentinel events are defined as a serious, unexpected occurrence involving a member that is believed to represent a possible quality of care issue on the part of the practitioner/facility providing services, which has, or may have, deleterious effects on the member, including death or serious disability, that occurs during the course of a Member receiving behavioral health treatment.		
Addressing Infectious Diseases			
28	There is a policy/written criteria regarding infection control at the facility which includes written protocols for communication with local public health authorities.		
29	There are written protocols for the treatment of patients with infectious diseases.		
Human Resources			
30	Personnel files include: resume, background checks, reference check, job description, license, and annual evaluations.		
31	Job Descriptions list essential knowledge and skills consistent with the work to be completed.		
32	The facility has a written process in place to credential its' practitioners when appropriate.		
33	The facility has a written process in place regarding the pre-screening of direct care staff background prior to hiring.		
34	There is evidence of on-going assessment of staff competency through performance evaluations and training.		
35	There is a policy/written criteria addressing staff supervision.		

36	For any non-independently licensed or unlicensed staff, direct 1:1 supervision by an appropriate clinician occurs on a regular basis, and is documented.			
37	A sample of the practitioners' employee/credentialing files were reviewed and the files contained documentation of credentialing consistent with facility policy.			
Treatment Records				
38	The facility has a process in place to ensure the availability of treatment records to the treating clinicians and the patient.			
39	For facilities/agencies with Electronic Health Records Only: The facility/agency has an established procedure to maintain a backup copy of all electronic health records.			
40	If records need to be transported to another service location, there is a protocol in place to maintain confidentiality of records throughout the transportation process.			
Complaints				
41	There is a protocol dealing with complaints			
42	The facility documents that patients/families are informed of methods of resolving complaints.			
Continuum of Care				
43	There is a policy/written criteria about expectations for treatment at each level of care, including criteria for transitioning to another level of care, or at the time of their discharge.			
44	There is a policy/written criteria about expectations for coordinating care with medical and other behavioral health treating providers.			

Admission and Assessment

45	The policy/written criteria for assessment procedures includes the type of care to be provided and the need for any further assessments.			
46	The policy/written criteria for assessment procedures includes an assessment of current behavioral/emotional functioning (history of emotional, behavioral, and substance abuse problems or treatment), the use of alcohol and other drugs by family and patients, and the patient's maladaptive or problem behaviors.			
47	The policy/written criteria for assessment procedures includes the presenting problems, along with relevant psychological and social conditions affecting the patient's psychiatric and medical status.			
48	The policy/written criteria for assessment procedures includes the reason(s) for admission or treatment.			
49	The policy/written criteria for assessment procedures includes documentation of the psychiatric and medical history (previous treatment dates, clinician identification, therapeutic interventions and responses, sources of clinical data, relevant family information, results of laboratory tests, and consultation reports).			
50	The policy/written criteria for assessment procedures includes evaluation of learning needs and barriers to learning as well as the level of functioning or functional impairment.			
51	The policy/written criteria for assessment procedures includes the mental status exam (affect, mood, thought content, judgment, insight, attention, concentration, memory, and impulse control).			
52	The policy/written criteria for assessment procedures includes risk assessments.			
53	The policy/written criteria for assessment procedures includes identification of community resources used by patients.			

54	The policy/written criteria for assessment procedures includes evaluation of the extent of the family's participation.			
55	The policy/written criteria for assessment procedures includes a social history, including: vocational, spiritual, cultural, educational, and legal assessments and services (appropriate to the level of care).			
56	The policy/written criteria for assessment procedures includes guidelines for physical health assessments, medical history, and physical examinations to be completed within 24 hours after admission to inpatient programs and within one week after admission to residential or therapeutic foster care.			
57	The policy/written criteria for assessment procedures includes the identification and prominent listing of relevant medical conditions.			
58	The policy/written criteria for assessment procedures includes the identification of or patient's self-report of infectious and contagious diseases.			
59	The policy/written criteria for assessment procedures includes documentation of allergies to medications and other substances.			
60	The policy/written criteria for assessment procedures identifies the specific services to be provided to children or adolescents.			
61	The policy/written criteria for assessment procedures includes the assessment and treatment of chemical dependency problems.			
62	The policy/written criteria for assessment procedures includes use of a diagnostic/integrated assessment to develop a treatment plan.			

Care and Treatment

63	There is a policy/written criteria that a treatment plan will be developed at each level of care.			
64	There is a policy/written criteria for transitioning patients from one level of care to another, including discharge.			
65	There is a policy/written criteria about patient and family education.			
66	There is a Quality Improvement Process in place for the program.			
67	There is a policy/written criteria on the monitoring of medications and medication recalls.			