Items Needed for On-Site Survey

Survey readiness checklist with the location of each item in the agency's manual and records

Agency: Legacy Home Health

Below are items that will need to be reviewed by the Surveyor during your on-site survey. Please have these items available prior to your Surveyor's arrival to expedite the process. If you have any questions, please contact your Account Advisor.

1 GENERAL ITEMS TO HAVE AVAILABLE

Check each item when it is ready for the Surveyor.

- ☐ Number of unduplicated admissions per Medicare provider number during the past 12 months (or since start of operation if less than one year)
- ☐ Number of unduplicated admissions per branch location served under the parent Medicare provider number during the past 12 months (or since start of operation if less than one year)
- ☐ Current patient census, complete with start-of-care date, admitting diagnosis, and disciplines providing care
- ☐ Current schedule of patient visits
- ☐ Discharge/transfer patient census for past 12 months (or since start of operation if less than one year)
- ☐ Most recent OASIS Reports, such as the Potentially Avoidable Events and Patient Listing, Agency Patient Related Characteristics, and HHA Error Summary by Agency (N/A for initial Medicare Certification surveys)
- ☐ Personnel list with title, discipline, and hire date (including direct care and contract staff)
- ☐ Any survey results from the past year
- ☐ Admission packet and education materials given to patients
- ☐ Staff meeting minutes for the past 12 months
- ☐ Any internal Plans of Correction based on identified deficiencies along with audit results

Annual requirements are not applicable to agencies in operation for less than one year. **Unduplicated admissions** refer to all patients admitted one time during the past 12 months regardless of payor. Conducting **interviews** to validate findings from observations and record reviews is a standard part of survey procedures. These interviews, involving personnel, patients, and family members or caregivers, must be conducted confidentially.

2 ACHC STANDARDS AND REQUIRED ITEMS

ACHC Standard	Required Items	Located (P&P Manual policy, page / agency record)
HH1-1A	Copy of current applicable licenses or permits and copy of articles of incorporation/bylaws	Agency record: licenses/permits posted in the office; articles of incorporation and bylaws in the corporate file P&P: A-51 Minimum Licensure Requirements Policy, p. 89 P&P: A-1 Compliance with Federal, State and Local Laws, p. 39 P&P: L-1 Internal By-Laws, p. 1030
HH1-1A.01	Access to policies and procedures manual with the following policies flagged:	Home Health Policy & Procedure Manual (flag the policies below)
	▪ HH2-1A Patient acceptance to service policy	P&P: D-14 Policy on Acceptance of Patients, p. 356 P&P: D-76 Policy on Admission, p. 418
	▪ HH2-2A Patient rights and responsibilities policy	P&P: C-47 Client's Bill of Rights / Responsibilities, p. 305 P&P: C-50 Notice of Rights, p. 308
	▪ HH2-9A.01 Compliance Program	P&P: C-11 Compliance Program Policy, p. 269 P&P: C-15 Agency Compliance Plan, p. 273
	▪ HH5-1B HIPAA policies	P&P: H-5 Policy on HIPAA/HITECH Act Enrollment and Compliance, p. 829 P&P: H-89 Security of Records/Confidentiality, p. 913
	▪ HH5-6A Transfer and discharge policies	P&P: D-24 Policy on Discharge and Transfer, p. 366 P&P: D-25 Policy on Patient Transfer, p. 367
	▪ HH5-8A Acceptance of verbal orders	P&P: E-107 Verbal/Telephone Orders Read-Back, p. 571 P&P: D-38 Patient Visits/Plan of Care/Verbal Orders, p. 380

Agency: Legacy Home Health

ACHC Standard	Required Items	Located (P&P Manual policy, page / agency record)
	■ HH7-3B Emergency Preparedness Plan/Policies	P&P: G-3 Emergency Management Plan, p. 712 P&P: G-17 Emergency/Disaster Plan, p. 726
	■ State specific policies	P&P: A-45 State Regulatory Requirements, p. 83 P&P: A-46 Legal Requirements, p. 84
HH1-1A.01	All required federal and state posters are placed in a prominent location	Agency record: posters displayed in a prominent location in the office P&P: C-40 Policy on Non-Discrimination, p. 298 P&P: C-42 Compliance with Title VI of the Civil Rights Act, p. 300
HH1-1B	Current 855A/CMS approval letter	Agency record: 855A and CMS approval letter in the licensure file P&P: A-48 Changes in Authority, Ownership, or Management, p. 86 P&P: A-56 Credentialing, Payer Enrollment, and CAQH Policy, p. 94 P&P: H-15 Public Disclosure, p. 839
HH1-2A, HH1-2A.03/ HH1-9A.01/ HH2-4A/ HH2-7A.01/ HH3-1A/ HH3-1C/ HH6-1C	Governing body meeting minutes for the past 12 months and documentation of orientation and signed confidentiality statement(s) List of governing body members	Agency record: governing body minute book, signed orientation and confidentiality statements, member list P&P: A-23 Policy on Governing Body, p. 61 P&P: A-25 Board of Directors Orientation, p. 63 P&P: A-28 Board of Directors Confidentiality Statement, p. 66 P&P: A-26 Governing Body / Board of Directors, p. 64
HH1-5A	Job description for the Administrator	P&P: M-1 Job Descriptions, p. 1038 P&P: A-50 Policy Named the Administrator and the DON, p. 88 P&P: A-39 Policy on Administration, p. 77
HH1-5A.01	Annual evaluation of the Administrator	Agency record: signed annual evaluation in the Administrator's personnel file P&P: B-18 Policy on Employee Evaluation, p. 128 P&P: B-19 Employee Evaluation Sheet (Probation/Annual), p. 129 P&P: A-31 Management, Leadership Staff Functions, p. 69
HH1-6A	Organizational chart	P&P: A-70 Organizational Chart, p. 108 P&P: A-8 Organization and Administration of Services, p. 46
HH1-6B	Job description for the clinical manager(s)	P&P: M-8 Clinical Manager, p. 1045 P&P: A-49 Director of Nursing, Clinical Manager Oversight, p. 87 P&P: A-50 Policy Named the Administrator and the DON, p. 88
HH1-8A/HH1-8B	Previous 4 month's final OASIS Validation reports	Agency record: final OASIS validation reports (iQIES) for the past 4 months P&P: D-8 Outcome and Assessment Information Set (OASIS), p. 350 P&P: H-91 Medical Records Correction Policy/OASIS, p. 915
HH1-10A	Contracts for direct care, including copies of professional liability insurance certificates	Agency record: signed contracts and current liability insurance certificates P&P: K-3 Contracts, p. 1012 P&P: K-6 Contract/Agreement, p. 1015 P&P: K-1 Monitoring of Contracted Services, p. 1010
HH1-11A	CLIA certificate of waiver for agency or CLIA certificate for the reference laboratory	Agency record: CLIA certificate posted/filed in the office P&P: E-31 Certificate of Waiver CLIA (Waived Test), p. 495 P&P: E-8 Laboratory Testing CLIA Waiver, p. 472
HH1-12A.01	CMS letter of approval for branch addition (if applicable)	Agency record: CMS branch approval letter (if applicable) P&P: A-48 Changes in Authority, Ownership, or Management, p. 86 P&P: A-51 Minimum Licensure Requirements Policy, p. 89
HH2-1A.01	Marketing materials	Agency record: current brochures, website and advertising materials P&P: A-34 Planning Processes, Marketing Plan/Strategic Plan, p. 72 P&P: C-21 Code of Ethics, p. 279
HH2-4A	Grievance/complaint log	Agency record: grievance/complaint log P&P: C-43 Policy on Grievance Procedure, p. 301 P&P: C-82 Complaints, p. 340 P&P: C-46 On-Call / Complaint Report (Form), p. 304

Agency: **Legacy Home Health**

ACHC Standard	Required Items	Located (P&P Manual policy, page / agency record)
HH2-5C.01	Business Associate Agreements (BAAs)	Agency record: signed Business Associate Agreements P&P: K-16 Business Associate Contract, p. 1025 P&P: K-5 Services Under Arrangement/Business Associates, p. 1014
HH2-7A.01	Evidence of how ethical issues are identified, evaluated, and discussed	Agency record: ethics committee minutes/case reviews P&P: C-23 Ethics Committee, p. 281 P&P: C-24 Ethics Policy, p. 282 P&P: C-21 Code of Ethics, p. 279
HH2-8A	Evidence of communication assistance for language barriers	Agency record: interpreter/language line arrangements and use P&P: C-3 Handling Barriers to Communication, p. 261 P&P: C-59 Communicating Information to Patients, p. 317
HH2-9A.01	Evidence of a Compliance Program	P&P: C-11 Compliance Program Policy, p. 269 P&P: C-15 Agency Compliance Plan, p. 273 P&P: C-16 Fraud Prevention Policy, p. 274
HH2-10A.01/ HH2-11A.01	On-call calendar	Agency record: current on-call calendar P&P: G-1 On Call and Emergency Services, p. 710 P&P: G-2 On Call Duties, p. 711
HH3-1A	Most recent annual operating budget	Agency record: current annual operating budget P&P: J-40 Policy on Annual Operating Budget, p. 1007 P&P: J-9 Policy on Budget, p. 976
HH3-1B	Most recent capital expenditure plan (if applicable)	Agency record: capital expenditure plan (if applicable) P&P: J-41 Policy on Capital Expenditures Plan, p. 1008
HH3-1C	Evidence of the review of the budget	Agency record: governing body minutes showing budget review P&P: J-6 Policy on Annual Review of Plan and Budget, p. 973
HH3-3B.02	Recent Medicare cost report (N/A for initial Medicare certification)	Agency record: most recent filed Medicare cost report P&P: J-11 Financial Planning, p. 978 P&P: J-21 Inventory/Fixed Assets, p. 988
HH3-4A.01	Listing of patient care charges	P&P: J-15 Patient Charges for Our Services, p. 982 P&P: J-27 Fee Setting and Collection Policy, p. 994
HH4-1B.01	Personnel records (including direct care and contract staff) contain evidence of the items listed in the standard. Surveyor will review personnel records at a minimum for the following disciplines: Administrator, Clinical Manager, Nurses, Aides, Social Worker, Physical Therapist, Occupational Therapist, Speech Therapist (if services are provided by the home health agency)	Agency record: personnel files (employees and contract staff) P&P: B-11 Personnel Policy Statements, p. 121 P&P: B-86 Retention of Personnel Records, p. 196 P&P: B-36 Staff Health Requirements, p. 146
HH4-2E.01	Job descriptions for identified staff	P&P: M-1 Job Descriptions, p. 1038 (Section M) P&P: B-6 Policy on Personnel Policies, p. 116
HH4-2I.01	Employee handbook or access to personnel policies	P&P: B-6 Policy on Personnel Policies, p. 116 P&P: B-11 Personnel Policy Statements, p. 121 P&P: B-3 Employee's Rights and Responsibilities, p. 113
HH4-8A/HH4-8A.01	Evidence of ongoing education and/or written education plan	Agency record: in-service calendar, sign-in sheets and education plan P&P: B-69 Continuing Education, p. 179 P&P: B-96 Meeting and In-Service Times, p. 206
HH4-12A/ HH4-12B/ HH4-12C/ HH4-12F	Home Health Aide competency evaluation and/or training materials (if applicable)	Agency record: aide competency evaluations and training records P&P: E-37 Policy on Home Health Aide Services, p. 501 P&P: B-80 Staff Competency, p. 190 P&P: M-30 Selection of Home Health Aides/CNA, p. 1067
HH5-11A	Evidence of skilled services are provided by or under the supervision of qualified professionals per ACHC Glossary of Personnel Qualifications	P&P: E-33 Policy on Skilled Professional Services, p. 497 P&P: E-42 Policy on Supervising Visits, p. 506 P&P: E-1 Supervisory Plan Policy, p. 465

Agency: Legacy Home Health

ACHC Standard	Required Items	Located (P&P Manual policy, page / agency record)
HH5-12A.01	Patient education materials	Agency record: patient education handouts in use P&P: E-58 Process for Patient/Caregiver Education, p. 522 P&P: E-96 Patient/Family Education, p. 560 P&P: N-28 Patient Education, p. 1158
HH5-13A.01	Referral log	Agency record: referral/intake log P&P: D-81 How to Order Home Health Services/Referral, p. 423 P&P: M-85 Referral/Intake Services Assistant, p. 1122
HH5-16A.01	Verification of physician or allowed practitioner licensure	Agency record: physician/practitioner license verifications P&P: B-2 Verification of Physician and Professional Staff License, p. 112
HH6-1A	Quality Assessment and Performance Improvement (QAPI) Program	P&P: I-35 Quality Assessment Performance Improvement Plan, p. 962 P&P: I-4 Plan for Improving Agency Performance, p. 931 P&P: I-11 The Key to Quality Assurance and PI, p. 938
HH6-1B.01	Job description for individual responsible for the QAPI Program	P&P: M-11 Supervisor Clinical Quality Improvement (QAPI), p. 1048 P&P: M-72 Quality Assurance/Performance Improvement (QAPI), p. 1109
HH6-1C	Governing body meeting minutes demonstrate involvement of the governing body in QAPI	Agency record: governing body minutes (QAPI reports/approval) P&P: I-35 Quality Assessment Performance Improvement Plan, p. 962 P&P: A-23 Policy on Governing Body, p. 61
HH6-1D.01	Evidence of personnel involvement in QAPI	Agency record: QAPI committee minutes and sign-in sheets P&P: I-4 Plan for Improving Agency Performance, p. 931 P&P: I-11 The Key to Quality Assurance and PI, p. 938
HH6-3A.01	QAPI annual report	Agency record: current QAPI annual report P&P: I-35 Quality Assessment Performance Improvement Plan, p. 962 P&P: I-4 Plan for Improving Agency Performance, p. 931
HH6-4A.02	Evidence of monitoring processes that involve risks, including infections and communicable diseases	Agency record: infection surveillance data and QAPI reports P&P: F-70 Infection Surveillance, Monitoring and Reporting, p. 667 P&P: F-32 Infection Control Policy, p. 629
HH6-4A.04	Evidence of monitoring of an aspect related to administrative function of the agency	Agency record: QAPI administrative indicator data P&P: H-19 Data Collections and Reviews, p. 843 P&P: C-15 Agency Compliance Plan, p. 273
HH6-4A.05	Satisfaction surveys utilized in QAPI	Agency record: completed surveys and summary results P&P: I-15 Patient Satisfaction Survey, p. 942 P&P: I-18 QAPI Questionnaires/Surveys Summary Table, p. 945
HH6-4A.06	Evidence of monitoring of patient grievances/complaints and actions needed to resolve problems	Agency record: complaint log trending in QAPI P&P: C-82 Complaints, p. 340 P&P: I-35 Quality Assessment Performance Improvement Plan, p. 962
HH6-4A.07	Evidence of quarterly record reviews and results are utilized in QAPI	Agency record: quarterly clinical record review tools and summaries P&P: I-20 Clinical Record Review, p. 947 P&P: I-22 QA Form for Review of Clinical Records, p. 949 P&P: I-30 Utilization Review, p. 957
HH6-5A	Evidence QAPI activities focus on high risk, high volume, or problem prone areas	P&P: I-4 Plan for Improving Agency Performance, p. 931 P&P: I-35 Quality Assessment Performance Improvement Plan, p. 962
HH6-6A	Evidence of the monitoring of all patient related variances	Agency record: incident/variance reports and QAPI tracking P&P: G-92 Sentinel Events, Adverse Events, p. 801 P&P: E-72 Medication Errors and Drug Reactions, p. 536
HH6-7A.01	OASIS reports (most recent OBQM, OBQI, Patient/Agency Characteristics Report, Submission Statistics by Agency Report, and Error Summary Report) and evidence of ongoing monitoring of reports	Agency record: current OASIS/iQIES reports with review notes P&P: D-8 Outcome and Assessment Information Set (OASIS), p. 350 P&P: I-39 Home Health Value-Based Purchasing (HHVBP), p. 966
HH7-1A	Evidence of an Infection Control Program, Annual Agency TB Assessment, TB Exposure Control Plan, and OSHA Bloodborne Pathogen Plan	Agency record: annual agency TB risk assessment P&P: F-32 Infection Control Policy, p. 629 P&P: F-94 Identification TB High Risk Exposure, p. 691 P&P: F-86 Bloodborne Pathogens Exposure Plan, p. 683

Agency: Legacy Home Health

ACHC Standard	Required Items	Located (P&P Manual policy, page / agency record)
HH7-1D	Infection control logs for patients and personnel and evidence infection control data is monitored and incorporated into QAPI as appropriate	Agency record: patient and personnel infection logs P&P: F-70 Infection Surveillance, Monitoring and Reporting, p. 667 P&P: F-32 Infection Control Policy, p. 629
HH7-3A	Emergency Preparedness Plan that includes the all-hazards risk assessment	Comprehensive Emergency Management Plan (CEMP) P&P: G-3 Emergency Management Plan, p. 712 P&P: G-115 Hazard Vulnerability Analysis, p. 824 P&P: G-17 Emergency/Disaster Plan, p. 726
HH7-3C	Communication Plan	CEMP communication plan section P&P: G-3 Emergency Management Plan, p. 712 P&P: G-10 Emergency Preparedness - Patient Evacuation, p. 719
HH7-3D	Evidence of emergency preparedness training for all existing and new staff, including staff that provide services under arrangement	Agency record: emergency preparedness training records P&P: G-3 Emergency Management Plan, p. 712 P&P: G-45 Staff Safety at Work, p. 754
HH7-3D	Evidence of a minimum of one test/drill completed annually ■ One is a community-based or facility-based exercise functional exercise, and opposite the year of the full-scale exercise ■ A community-based or a facility-based functional exercise, or a mock disaster drill or a tabletop exercise or workshop, that is led by a facilitator. The tabletop exercise or workshop must include a group discussion using a narrated, clinically-relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan	Agency record: exercise/drill reports and after-action reviews P&P: G-3 Emergency Management Plan, p. 712 P&P: G-26 Environment of Care Management, p. 735
HH7-3E	Emergency plan for integrated healthcare systems can demonstrate that the agency's needs and circumstances, patient population, and services offered were included in all aspects of the emergency preparedness requirements (if applicable)	P&P: G-3 Emergency Management Plan, p. 712 (if applicable)
HH7-5A.01	Report of annual fire drill and results of testing of emergency power systems	Agency record: annual fire drill report and emergency power test results P&P: G-26 Environment of Care Management, p. 735 P&P: G-25 Utilities Management Plan, p. 734
HH7-6B.01	Access to Safety Data Sheets (SDS)	Agency record: SDS binder in the office P&P: G-53 OSHA's Hazard Communication Standard, p. 762
HH7-7A.01	OSHA forms 300, 300A, and/or 301 (if applicable)	Agency record: OSHA 300/300A/301 logs (if applicable) P&P: G-41 Accident/Incidents of Home Health Care Staff, p. 750 P&P: G-95 Risk Management, p. 804
HH7-8A.01/HH 7-9A.01	Quality control logs of any equipment used in the provision of care	Agency record: glucometer and equipment QC/maintenance logs P&P: O-21 Glucometer Quality Control, p. 1188 P&P: G-100 Equipment Maintenance, p. 809