

ITEMS NEEDED FOR ON-SITE SURVEY

HOME CARE – NON-MEDICARE SURVEY



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.

- 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)
- Personnel list with title, discipline, and hire date (including direct care contract staff)
- Any previous survey results from the past year
- Admission packet or education materials given to patients
- Staff meeting minutes for the past 12 months
- Any internal Plan of Correction based on identified deficiencies along with audit results

Annual requirements are not applicable to agencies in operation for less than one year.

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.

This document is applicable to HCA, HCC, HCN, HCPT, HCOT, HCST and HCSW. You should reference the standards applicable to the services your agency provides for full detail of the requirements for compliance.

ACHC Standard	Required Item	Located
HC1-1A	Copy of current applicable licenses or permits and copy of articles of incorporation/bylaws	
HC1-1A.01	Access to policy and procedure manual with the following policies flagged: <ul style="list-style-type: none"> ■ HC2-2A Patient rights and responsibilities policy ■ HC2-3A Investigation of abuse, neglect, and exploitation policy ■ HC2-4A Grievance/complaint policy ■ HC4-2H Background check policy ■ HC4-13B Aide qualification requirements ■ HC5-3A Plan of care policy ■ HC6-4A Investigation of adverse events policy 	

ACHC Standard	Required Item	Located
HC1-2A/ HC1-2D/ HC1-3A/HC1-8A/ HC2-4/ HC2-5A/HC2-7A/ HC3-1A/ HC6-1A/HC6-1C/ HC7-7A	Governing body meeting minutes for the past 12 months and documentation of orientation and signed confidentiality statement(s)	
HC1-4 A	The job description for the Administrator meets any applicable state and federal laws as well as agency requirements	
HC1-4B	Annual performance review of the Administrator	
HC1-4C	The job description for the alternate Administrator meets any applicable state and federal laws as well as agency requirements	
HC1-5A	Organizational chart	
HC1-7A	All required federal and state posters are placed in a prominent location	
HC1-10A	Contracts for direct care staff, including copies of professional liability insurance certificates	
HC1-10D	Evidence of monitoring of care/service provided by contract staff	
HC1-11A	Verification of physician licensure (if applicable)	
HC2-1A	Marketing materials	
HC2-3A/HC2-4A	Grievance/complaint log	
HC2-5A	Signed confidentiality statement for all personnel and contract staff	
HC2-5C	Business Associate Agreements (BAAs)	
HC2-6A	Advance Directive information provided to patients/clients	
HC2-7A	Evidence of how ethical issues are identified, evaluated and discussed	
HC2-8A	Evidence of communication assistance for language barriers	
HC2-9A	Compliance Program	
HC2-10A/ HC2-11A/HC2-12A	On-call calendar	
HC3-1A	Most recent annual operating budget	
HC3-2A	Evidence that financial records are maintained and retained according to IRS requirements	
HC3-6A	Listing of patient care charges	
HC4-1C	Personnel records (including direct care and contract staff) contain evidence of the items listed in the standard. Surveyor will review personnel records based on the services provided by the agency.	
HC4-2E	Job descriptions	
HC4-2I	Employee handbook or access to personnel policies	
HC4-7A/HC4-7B	Evidence of ongoing education and/or written education plan	
HC5-2A	Evidence agency maintains patient/client records in a confidential manner	

ACHC Standard	Required Item	Located
HC5-4A	Referral log	
HC5-6A	Patient/client education materials	
HC6-1A	Performance Improvement (PI) Program	
HC6-1B	Job description for individual responsible for the PI Program	
HC6-1C	Governing body meeting minutes demonstrate involvement of the governing body in PI	
HC6-1D	Evidence of personnel involvement in PI	
HC6-2B	PI annual report	
HC6-2D	Evidence of monitoring processes that involve risks, including infections and communicable diseases	
HC6-2D	Evidence of monitoring staff incidents, accidents, complaints and worker compensation claims	
HC6-2E	Evidence of monitoring of an aspect related to patient care (high risk, high volume, problem prone)	
HC6-2F	Evidence of monitoring of an aspect related to administrative function of the agency	
HC6-2G	Satisfaction surveys utilized in PI	
HC6-2H	Evidence of ongoing chart audits and that results are utilized in PI	
HC6-2I	Evidence of monitoring of patient/client complaints and actions needed to resolve issues	
HC6-4A	Incident log demonstrates proper documentation, investigation, and resolution of all adverse events	
HC7-1A/HC7-1B	Annual TB risk assessment, TB exposure control plan, and OSHA Bloodborne Pathogens plan	
HC7-1E	Infection control logs for patients and personnel and evidence infection control data is monitored and incorporated into PI as appropriate	
HC7-3A	Emergency disaster plan and results of an annual emergency disaster drill	
HC7-3C	Emergency preparedness information provided to patients/clients	
HC7-5A	Report of annual fire drill and results of testing of emergency power systems	
HC7-6B	Access to Safety Data Sheets (SDS)	
HC7-7A	Evidence of proper reporting of personnel incidents, accidents, variance, or unusual occurrences OSHA forms 300, 300A, and/or 301 (if applicable)	
HC7-8A/HC7-9A	Maintenance logs of any equipment used in the provision of care	