



SOUTH CAROLINA OFFICE OF
RURAL HEALTH

Investment. Opportunity. Health.

Biennial Evaluation
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Biennial Evaluation

- Purpose of the evaluation is to determine whether:
 - 1. The utilization of services was appropriate.
 - 2. The established policies were followed
 - 3. Any changes are needed



Biennial Evaluation Report

- Report should consist of all findings from Policy Review, Walkthrough and Chart Audit.
- Should be signed by all committee members



Policy Manual Requirements

- Written policies should consist of both administrative and patient care policies. Policies should be specific to your clinic even if owned by a hospital.
- In addition to including lines of authority and responsibilities, administrative policies may cover topics such as personnel, fiscal, purchasing, and maintenance of building and equipment.
- A description of the services that the clinic furnishes directly and those furnished through agreement or arrangement.
 - Inpatient Hospital Care
 - Physician Services
 - Any additional x-ray or specialized lab services that aren't available onsite

- ❖ It MUST be documented that the Medical Director and NP/PA review all policies annually. This can be achieved by signing and dating the manual.
- ❖ Make sure that an biennial policy review/update is documented. Include the physician/np/outside member! (Your Committee)
- ❖ Organize Manual according to RHC regulations.
- ❖ Keep business, personnel, and medical licenses current!! Maintain all CPR staff certifications as well.

- Make sure that patient care and administrative polices are included and current!
- Update and Maintain the organizational chart.
- Assign one person and an alternate responsibility for the manual in case of inspection. The manual should be available for any inspector at any time.
- Can have more than one manual but must be labeled with location etc.

Policy and Procedure Manual

- **Tab 1**-Organizational Chart and List of Employees
- **Tab 2**-Clinic Information/ Copies of Professional Licenses for Physicians and Mid-levels
 - ✓ Medical License
 - ✓ CVs
 - ✓ NP/PA Protocols
 - ✓ Drug Enforcement Authority Prescriptive Permit
 - ✓ Certificate of Liability Insurance
 - ✓ CLIA Certificate
 - ✓ Business License

- **Tab 3**- Agreements-
 - ✓ Medical Director
 - ✓ Hospital Privileges
 - ✓ Laboratory Agreement
 - ✓ Bio-Waste Agreement
 - ✓ Confidentiality Agreement (If outside cleaning crew)
- **Tab 4**- Periodic Chart Reviews- Follow your policy
- **Tab 5**- Disaster Drills- Fire Drill, Bomb Threat, Severe weather, Evacuation Plan

- **Tab 6**-Preventative Maintenance
 - ✓ Copy of letter from certified electrician
 - ✓ CPR Certification
 - ✓ Refrigerator temperature log
- **Tab 7**-Miscellaneous
 - ✓ Exam Room Cleaning Chart
 - ✓ Checklist for Sample Drugs
 - ✓ Emergency Kit- Supplies list out
 - ✓ Encounter Form
 - ✓ Anti-Discrimination Policy

- **Tab 8-** Prior Evaluations

- ✓ Biennial Evaluation – Typed up document that lays out what you found during review. This is where you want to catch errors so inspector doesn't. Signed by committee members.
- ✓ Biennial Clinic Inspection- Look at your clinic from the eyes of a two year old.
- ✓ Biennial Chart Review (45 Active and 5 Inactive)
(Must be 5% of patient volume or 50 charts)

Clinic Walkthrough

- A clinic walkthrough must be completed as part of your Evaluation.
- This includes:
 - Room Review
 - Waiting Room
 - Bathrooms
 - Supplies
 - Medications
 - Equipment
 - Staff Education

Physical Plant and Environment

- Exit signs are clearly marked at each exit.
- Exit routes are free of barriers. Doors are locked from outside but allow exit from inside.
- Diagrams indicating Emergency exits are present.
- Clinic is clear of clutter and is clean.
- Fire extinguishers are checked monthly by staff
- Fire Drills and emergency drills are conducted and documented at least annually.
- Overhead ceiling lights are free of bugs and debris.
- Clinic does not have any exposed building materials.

- Electrical sockets are covered when not in use.
- Bathroom/clinic is handicapped accessible.
- Clinic has handicap parking spots.
- Bathrooms do not contain personal hygiene products
- Adult and Pediatric scales are balanced at least annually.
- AED is maintained and tested in accordance with manufacturer recommendations
- Cleaning policies are in place and followed
- List of all equipment by manufacturer, model and serial number.
- Preventive maintenance due dates are tracked.

Laboratory

- The lab has a CLIA certificate
- Refrigerator and Freezer temperatures are recorded daily.
- Lab Equipment is calibrated accordingly.
- External control results are logged.
- No food is stored in refrigerators that are used for vaccines/samples.
- Nothing is stored on the door in a freezer or refrigerator.
- Reagents strips and supplies are dated when opened?

Drugs and Biologicals

- Drug samples are reviewed monthly and documented.
- Samples are stored in a secure area without patient access.
- Samples are logged should a recall be issued. If completed in EMR, ensure that you are able to run a report on it.
- All medications are stored with no patient access.
- Multidose vials, ointments, and solutions are dated when opened and discarded in accordance with policy.
- Expired medications, biologicals, and supplies are discarded in accordance with policy.

Controlled Meds

- All controlled meds should be double locked and all transactions recorded.
- Log should be verified weekly by management.



Room Review

- Do not contain hazardous materials. (Cleaners, drug samples, etc.)
- Nothing is under the sinks.
- Electrical Outlets are covered when not in use.
- Sharps containers are secured
- All supplies are in date.
- Supplies should be clean with no dust or debris.
- Equipment is cleaned and disinfected prior to each patient's use.
- Equipment is not stored on floor.

- Preventative Maintenance stickers on appropriate equipment.
- Exam tables do not contain rips or tears
- Countertops are clean and not cracked.
- Review lights, walls, and flooring.
- No meds in patient rooms

Monthly Logs

- Sample Closet
- Emergency Kit
- Oxygen
- AED- Visual Check, Battery Check, Pads,
- Eye Wash Station (Weekly)



Staffing

- Change in Staff since last review?
- PPD status
- Staff is performing as expected – no clinical or administrative actions.
- BLS Certified?
- Staff have participated in emergency training?



Additional Items

- Hours of operation are posted
- CPR certification is up to date
- Improvements in the office or Parking Lot?
- Adding or Changing EMRs?
- Any new services that you are providing?
- Medical director is identified
- Owner of clinic is disclosed and documented.

Chart Review

- 45 Active Charts and 5 inactive charts.
- 5 inactive- Transferred, Terminated or Deceased.
- When reviewing charts we are looking for the following:
 - ✓ Records are in good order- Vitals, Current Meds, Clean and clear documentation.
 - ✓ Labs, radiology and consults were recorded and documented.
 - ✓ Authorization to treat
 - ✓ Insurance verification
 - ✓ Provider signature
 - ✓ HIPAA

Emergency Preparedness

- Must address an emergency on-site, off-site and disruption of service.
 - Developing the RHC EP Plan
 - EP Policy and Procedures
 - EP Communication Plan
 - EP Training and Testing Program

HVA and Risk Assessments

- Hazard vulnerability analysis (HVA) and risk assessments are systematic approaches to identifying hazards or risks that are most likely to have an impact on a healthcare facility and the surrounding community.
- Not all hazards are created equal. They can impact different regions of the state, greatly differ in physical size, and cause different types of social, economic, and infrastructural damage. Hazard events such as hurricanes and earthquakes can have large consequences, but they do not happen as frequently as severe storms, wildfires, lightning, and hail. Hazards that occur regularly and have the potential to cause a great amount of damage are the hazards for which the State spends the most time planning and preparing.

Effective Planning

- Planning Principles
 - Engage the whole community
 - Inclusive and diverse planning team
 - Use a logical and analytical problem-solving process
 - Consider all threats and hazards
 - Focus on needed capabilities
 - Ensure plans are flexible
 - Establish measurable goals
 - Identify tasks, resources, and accountability
 - Anticipate the emergency environment

Evaluation and After Action

- Homeland Security Exercise and Evaluation Program (HSEEP)
 - The Homeland Security Exercise and Evaluation Program (HSEEP) provides a set of guiding principles for exercise programs, as well as a common approach to exercise program management, design and development, conduct, evaluation, and improvement planning.
- A hotwash or debriefing is the immediate "after-action" discussion and evaluations of an agency's (or multiple agencies') performance following an exercise, training session, or major event to identify strengths and weaknesses of the response to an Exercise.
 - Normally includes all the parties that participated in the exercise or response activities. The outcome from this section is used to create the After Action Review.

Websites



Chapter 13: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c13.pdf>



Chapter 9: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c09.pdf>



[som107ap_z_emergprep.pdf \(cms.gov\)](#)

Questions???



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