

Administrative/General	Reviewed By	Comments
Is there an organization chart onsite?		
Has the governing body approved objectives and policies under which the dialysis program operates?		
Have the written administrative rules and regulations been reviewed at least annually by the medical director, CEO, and other appropriate personnel?		
Is there an annual review of the policy and procedure manual?		
Has the medical director reviewed and approved the policy and procedure manual?		
Does the policy and procedure manual designate the type of dialysis used?		
Does the facility have a record retention policy that complies with state statute of limitations and/or 5 years from the discharge, or in the case of minor, 3 years after the patient becomes of age under state law, whichever is longest?		
Is there a policy to validate staff licenses on regular basis?		
Are there written policies and procedures pertaining to employee conditions of employment?		
Is there a policy and procedure for obtaining and storing of medications?		
Does the policy and procedure manual address the procedures used in performing dialysis?		
Does the policy and procedure manual address the emergency preparedness plan?		
Is there a written and approved policy covering all areas of blood procurement and administration?		
Does the dispensing procedure for blood include checking the label on the blood bag with the patient's chart for name, identification number, and blood type?		
Does a second person verify the above information and is it documented?		
Is patient identification either verbal or visual?		
Is there a weather emergency policy in place?		
Does the facility have a business license?		
Are there written agreements with other facilities for services not provided (such as transplantation, self-care training) and do they bear the signature of authorized representative of service?		
Are consultant reports maintained on file, or when appropriate, maintained in the medical record?		
Is there a written agreement between facilities to provide emergency treatment?		
Is there a written agreement between the dialysis unit and backup hospital for patients that have to be admitted for other conditions and require dialysis in an acute facility?		
Are there written contracts with transplant facilities?		
Are there written contracts for dietary services?		
Are all maintenance contracts available in the unit and/or maintenance departments?		
Are there written agreements for emergency Rx/transport?		
Is there a written quality assurance program in place?		
Does the quality assurance program have quality indicators for medical care, nursing care, social services, dietary services, and administration?		

Administrative/General (continued)	Reviewed By	Comments
Are focus studies documented to indicate follow-up on the quality of care?		
Are problems identified through quality assurance process resolved?		
Is there timely intervention of problems?		
Where are incident and accident reports maintained?		
How are patient and staff complaints recorded?		
Do minutes of the quality assurance (QA) committee regularly exist?		
Do records of formal QA activities exist?		
Is there a number for patients to contact physicians 24 hours a day?		
Is there an on-call schedule to cover when the unit is closed?		
Is the physician roster available at the nurses station?		
Does the emergency room at closest hospital have a copy of nephrology physicians roster?		
Is the physician director of the unit board eligible or board certified in internal medicine?		
Appointment to the medical staff is made for a period =<2 years.		
What is the credentialing process for physicians?		
Is there information available to the public that explains the services available and the admission policy?		
Does the admission policy spell out those patients who can be treated as well as those not admitted?		
Does the admission policy state reasons a patient can be discharged from the program?		
<b>Facility</b>		
Is there sufficient parking available?		
Is there sufficient handicapped parking?		
Is the lighting conducive to patient comfort?		
How does the facility determine the appropriate temperature for both patients and staff?		
Are paper towel holders and soap dispensers placed appropriately around sinks?		
Are clean supplies kept away from splash areas around sink?		
Other than cleaning supplies, is anything stored under sinks?		
Are there any blood spills in the unit – walls, floors, chairs, equipment, etc.		
Is anything stored in the medication refrigerator stored other than medications?		
Is the lab area clean?		
Is the water room clean? Are there any safety issues?		
Are there separate clean/dirty utility areas?		
Are storage areas sanitary?		
Are medical supplies off floor and 18 inches below ceiling?		
Are ceiling tiles intact and clean with no signs of water damage or mold?		
Is the "green sheet" posted in a visible location for staff reference?		

Facility (continued)	Reviewed By	Comments
Do you smell vapors from disinfectants?		
Are staff food/drink items kept out of the patient care area and public areas?		
Are clean supplies and waste separated appropriately?		
Are oxygen tanks securely chained or in racks in the storage area?		
Is there always a back-up oxygen tank with regulator available for immediate use?		
Are fire doors kept closed? Is paper signage on fire doors?		
Are fire extinguishers available, and are they in sufficient numbers?		
Are all fire extinguishers at least class B-C?		
Fire extinguishers – tested yearly?		
Fire extinguishers – checked monthly?		
Is the fire evacuation route posted?		
Are clamps available to the patient for emergency takeoff?		
Is there a written emergency preparedness plan?		
Was there an internal disaster drill within the last 12 months?		
Is there documentation that the crash cart is being checked daily?		
Is there documentation that the eye wash stations are checked weekly?		
Disinfection between shifts?		
Are the equipment/chairs/blood pressure cuff in good condition?		
Are there documentation that the refrigerator temperatures are done daily?		
Is there documentation that the hematocrit monitor is checked daily?		
Is there documentation of quarterly fire drills?		
Are there any extension cords in use in the facility?		
Can all patients be observed?		
Is there adequate space between patient chairs to provide emergency care in the event of a drop in blood pressure, nausea, and/or vomiting?		
Does space permit the use of emergency equipment?		
Do all drapes and cubicle curtains meet the fire code?		
Does the facility offer temporary coverings, such as blankets, to patients who become cold?		
Is there a written linen policy for patients explaining what is permitted in the unit and the disposition of all dirty linen?		
Is there a patient bulletin board?		
Is the internal disaster plan posted on the bulletin board?		
Is there a smoking policy within the unit and posted on the patient bulletin board?		
Is the Grievance Procedure from the Network displayed in a patient area?		
Are the patient's rights and responsibilities posted on the patient bulletin board?		

Facility (continued)	Reviewed By	Comments
Is the traffic control policy and procedure posted on the bulletin board?		
Are the hours of operation posted, and are patients aware of the number to call in case they have an emergency?		
Are there written policies and procedures for preventing and controlling hepatitis and other diseases?		
Are hepatitis B-infected patients treated appropriately in an isolated area?		
Are appropriate measures taken to prevent contamination among patients and staff in the isolated area?		
Are waste containers for trash placed and used appropriately?		
Are sharps boxes for needles placed and used appropriately?		
Are there written policies and procedures in place for disposition of waste, including infectious waste?		
Are there written policies for handling of waste within the unit?		
Are medication storage areas inspected on a monthly basis?		
Is there adequate space available to provide for the processing of medical records?		
Is the medical records storage area locked when not in use?		
Are all areas in good repair?		
Are all exits marked appropriately?		
<b>Patient Records and Procedures Related to Patients</b>		
Do staff wear and change gloves at any time of exposure to blood and body fluids?		
Do staff wear and change protective clothing (including face/eye protection) appropriately?		
Are handwashing procedures appropriate?		
Is there evidence of the prevention of cross contamination?		
If syringes are pre-drawn, are they labeled with contents and the patient's name?		
Are staff members paying attention to the patient's reaction to treatment?		
Are vital signs being monitored during treatment?		
Rx administered as prescribed for blood flow rate, dialyzer type, etc.		
Does the flowsheet match machine settings?		
Can you observe dignity and respect in the relationships among staff and patients?		
Are patients aware of the procedure to disconnect themselves and have they been instructed on this procedure in case of evacuation? (Also, have patients been identified who are not able to disconnect themselves?)		
Are patients informed of services available and charges for services not covered under Medicare?		
Are all patients ensured confidential treatment of their person and medical records?		
Inspector observes put-on/take off.		
Are vital signs recorded at the initiation and conclusion of treatment?		
Does the flowsheet indicate periodic safety checks?		

Patient Records and Procedures Related to Patients (continued)	Reviewed By	Comments
Are long-term care plans formally reviewed in writing every 12 months or more often as indicated by the patient response to treatment?		
Is the care plan for any patient who is considered non-stable reviewed monthly?		
Are patients' long-term and intermediate plans developed with the physician as leader of the professional team and assistance for qualified nurses, dietitian, and social worker?		
Is the written care plan for each patient based upon illness, assessment of patient needs, and treatment prescribed?		
Is the patient involved with developing the plan and given due consideration to his/her preference?		
Does the medical record identify the patient?		
Does the medical record justify the treatment?		
Does the medical record contain current physician orders?		
Does the medical record contain signed consent forms?		
Does the medical record document review of the fire plan?		
Are Patient Rights and Responsibility on file in the chart?		
Does the medical record contain a current dietary/social work note?		
Does the medical record address the suitability of transplantation and home dialysis?		
Does the medical record contain transplant note/consults?		
Checks medications with orders in chart.		
Does the physician inform the patient of his/her medical condition unless medically contraindicated as stated in the medical record?		
How does the physician update the record for prescriptions and medications?		
Are patients informed of their suitability for transplantation or home Rx?		
How are infections monitored?		
Does the medical record document the results?		
Does the medical record contain the patient assessment?		
Does the medical record contain a plan of treatment and what care and services will be provided?		
Does the medical record contain medical and nursing history?		
Does the medical record contain physical examination?		
Does the medical record contain diagnostic and therapeutic orders?		
Does the medical record contain observations and findings?		
Does the medical record contain progress notes?		
Does the medical record contain treatment reports?		
Does the medical record contain referral information?		
Does the medical record contain lab results?		
How do the records show that someone has reviewed, analyzed, and responded to the laboratory results?		
Does the medical record contain discharge summary?		

Patient Records and Procedures Related to Patients (continued)	Reviewed By	Comments
Does the medical record contain final diagnosis and prognosis?		
Is there a weather emergency policy and procedure in place for patients?		
<b>Staff</b>		
Are all trainees under the direct supervision of qualified professional personnel?		
Is there a grievance procedure in effect for all employees?		
Is there a personnel manual, and is it periodically updated and made available to all staff?		
How does the facility ensure that there is sufficient staff coverage?		
How does the facility ensure that there is at least one licensed professional present during dialysis treatments?		
How does the facility ensure that health professionals have credentials and authority to institute required emergency treatment procedures, such as changing a clotted dialyzer or administering IV medications, physician orders, or CPR?		
Are there written job descriptions for all employees, contract staff?		
Do these job descriptions comply with state nursing practice act?		
Are there periodic criteria based performance reviews on all staff?		
Are medical staff screened for hepatitis?		
Are medical staff screened for rubella or tuberculosis?		
Are name tags present?		
Is staff knowledge of the fire evacuation?		
Have newly assigned personnel been orientated to the fire and safety procedures of the unit?		
Do all employees participate in a documented fire safety inservice?		
Are all employees aware of their responsibility in case of a fire?		
Are staff instructed on patient confidentiality?		
Is there documentation of staff training on file?		
Are staff mandatory competencies on file?		
Clinical director/CV personnel file.		
Is staff continuing education documented?		
Personnel files – current license.		
Are mandatory inservices held at least annually on fire and safety?		
Are mandatory inservices held at least annually on infection control?		
Are mandatory inservices held at least annually on patient rights?		
Are mandatory inservices held at least annually on confidentiality of records?		
Are mandatory inservices held at least annually on renal nutrition?		
Is there a designated supervisor of medical records?		
Are there any stagnant flow areas in the fluid distribution system that cannot be easily sanitized?		

Water	Reviewed By	Comments
Copper, zinc, brass, or aluminum components should not be used in the distribution system after the first processing element in the dialysis water treatment system.		
Are there sampling ports located after each component of the water treatment system?		
Are the water records reviewed and signed by the medical director?		
Are there written policies and procedures on water testing (colony counts, chemistries, and trace elements)?		
Review staff testing procedures of the water system.		
Review daily water log.		
Chloramines/chlorine checks daily/bid – examine supplies used in testing.		
AAMI water analysis.		
Review routine maintenance/cleaning of water system.		
Are containers used to prepare/store bicarbonate rinsed and completely drained at the end of each day?		
Are they disinfected periodically?		
Are there equipment operating manuals for all equipment located in the unit?		
Is there a procedure for reporting defective equipment?		
Is equipment tagged when found defective?		
Are all electrical and other equipment free of defects that could be hazardous to staff and patients?		
Are there regular preventive maintenance programs within the facility?		
Are there written policies and procedures on protocols necessary for any laboratory instruments used within the unit?		
Are control tests utilized to verify that all lab instruments are properly calibrated and documentation present in the unit?		

Additional Information:  
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- Developed by ANNA's Administration Special Interest Group -

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