## Practitioner Office Site Quality Evaluation

Practice ID: Site Number:
Appt Date:
Reason:

## Aggregate Score:

Opportunities for improvement are indicated on individual measures with less than 80% compliance. Please indicate improvement implementation plans for the medical/treatment records by completing the Office/Facility Site Corrective Action Plan – Feedback Form.

	Met	Not Met	N/A	Comments
1. The office is reasonably accessible (noting the ease of entry into and the accessibility of space within the building) for patients with physical and/or sensory disabilities.				
2. The physical appearance of the office is clean, organized and well maintained for the safety of patients, staff and visitors.				
3. The waiting area is well lit, has adequate space and seating, and has posted office hours.				
4. There is adequacy of examining/treatment room space as well as patient interview areas and each are designed to respect patients' dignity and privacy.				
5. Clinical records are filed in an organized, systematic manner, easily located, and kept in a secure, confidential location and away from patient access. Only authorized persons have access to clinical records.				

6. The office has a written confidentiality policy to avoid the unauthorized release or disclosure of confidential personal health information including but not limited to computer screens, data disks, emails, telephone messages/calls fax machines.		
7. The medical equipment utilized in the office appears to be adequate, well maintained, up to date, appropriate for the patients' age and appropriate for the specialty of the practice.		
8. The office has 24-hour medical coverage that is available seven (7) days a week.		
9. The office has a process to ensure after-hours calls are returned within 30 minutes.		
10. The office has a process to ensure after-hours calls are communicated to the office by the morning of the following business day.		
11. The office has mechanisms to assess behavioral health disorders, alcohol and other drug dependence (i.e., screening tool or questionnaire).		
12. No more than six (6) office visits are scheduled per hour, per practitioner.		
13. Emergency, life-threatening, medical situations are handled immediately.		

14. Urgent medical care appointments, which require rapid clinical intervention as a result of an unforeseen illness, injury, or condition, are available within 1 day (e.g., high fever, persistent vomiting/diarrhea).		
15. Regular and routine care appointments that are non-urgent but in need of attention are available within 2-7 days (e.g., headache, cold, cough, rash, joint/muscle pain, etc.).		
16. Regular and routine care appointments for routine wellness appointments are available within 30 days (e.g., symptomatic preventive care, well child/patient exams, physical exams, etc.).		
17. Patients with chronic conditions (e.g., diabetes, hypertension, CHF, depression, etc) are proactively notified by the office and encouraged to schedule an appointment.		
18. There is a process to assure that pts. who either no show or cancel their appointments are contacted & encouraged to reschedule the appointments as evidenced by documentation of such in the medical record (appointment scheduled, reminder card, etc.).		
19. A reminder call is made by the practice prior to scheduled appointments to encourage attendance with the scheduled visit.		

20. There is a process confirming that laboratory, diagnostic procedure, and/or consultation appointments were performed and results were received, reviewed, and filed in the patient's medical record. The process: a) Identifies how the laboratory, diagnostic procedures and/or consultation appointments are tracked b) Identifies staff responsible to ensure results are returned to the office c) Identifies when and how staff match test results with patient's chart d) Identifies how the reviewer (practitioner) notifies how the results should be handled.		
21. There is a process in place to ensure patients are notified of abnormal results.		
22. Urgent medical care appointments which require rapid clinical intervention as a result of an unforeseen illness, injury, or condition are available within 1 day such as: a) OB: High fever, persistent vomiting/diarrhea, bladder infection, increased swelling. b) GYN: Unusual vaginal discharge or vaginal bleeding post-menopause/hysterectomy, or detection of breast mass/breast lump.		
23. Regular and routine care appointments that are non-urgent but in need of attention are available within 2-7 days: a) OB: Small amount of swelling in ankles or hands, sciatica pain (including hip/leg pain), respiratory infection, UTI symptoms b) GYN: Increased menstrual cramps.		
24. Regular and routine care appointments for routine wellness appointments are available within 30 days (e.g., regular routine obstetrical and gynecological appointments).		

25. Immediate intervention for a life-threatening emergency is required to prevent death or serious harm to patient or others.		
26. Intervention within 6 hours is required for a non-life-threatening emergency to prevent acute deterioration of the patient's clinical state that compromises patient safety.		
27. Timely evaluation (within 48 hours) is needed for urgent care to prevent deterioration of the patient's condition.		
28. Routine office visits are available (within 10 business days) when the patient's condition is considered to be stable.		

**General Comments:** 

The results of this evaluation and suggested recommendations were discussed with . He/she verbalized understanding regarding this evaluation.