

## ***Your form title here***

### SECTION: CONTRACT DETAIL

Quiktrak Job # 12345

EMG ID # Emg Id

### SECTION: OFFICE INFORMATION

Group or Practice Name Practice Name

PCP or Specialist? Specialist

Specialty Type \_Other

Other Specialty Type: Spec Type

Other Specialty Type: Spec Type

Practitioner Name from Humana Request Practitioner

Manager/Contact Manager

Office Address Address 1234

Office City Vancouver

Office State Washington

Office Zip Code 98683

Office Phone Number (503) 214 3052

Manager/Contact email Email

Practice Tax ID Tax Id

Organization/ Entity NPI Organization

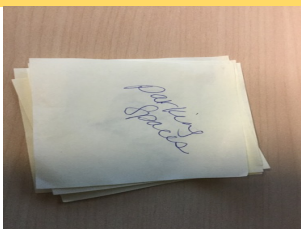
Office Contact Completing and Signing Survey Contact Completing

Date of Survey Oct 23, 2019

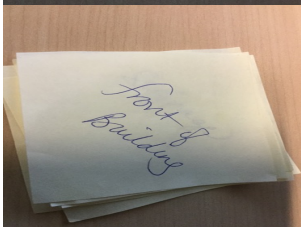
Company Conducting Inspection	Quiktrak
Name of Auditor/Inspector	Auditor
Survey Purpose	Re-credentialing
Provider Type	OB/GYN

### SECTION: EXTERIOR PHOTOS

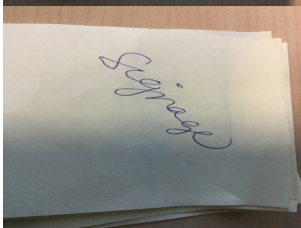
Take photos of the accessible parking spaces.



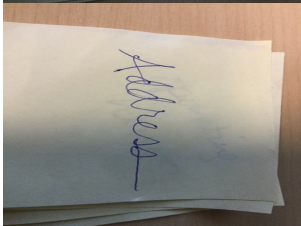
Take a photo of the front of the building.



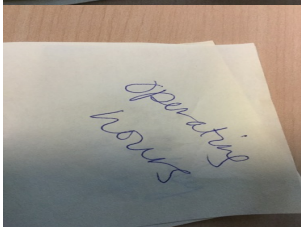
Take photos of all exterior signage.



Take a photo of the address number on the subject property.



Take a photo of the posted operating hours and after hours phone number.



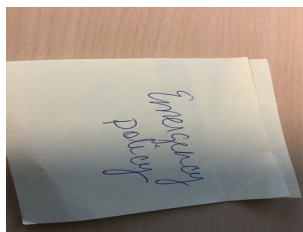
### SECTION: PARKING

Is there parking adequate and close by?	Yes
Does your facility provide one	No

accessible parking space per 25 total parking spaces?	
Is at least one van-accessible parking space available per every one to 25 total spaces?	Yes
Is the parking space clearly marked by the International Symbol of Access?	No
If only street parking is available, is there an unobstructed curb cut/ramp?	Yes
If the accessible route crosses a curb, is a curb ramp provided?	No
Is the ramp at least 36 inches wide?	N/A

#### SECTION: GENERAL INFORMATION

Do/can you provide alternative appointment scheduling for those who need extra time?	Yes
Are members' rights to file a grievance visually posted?	No
Is there a policy and procedure document that states what to do in case of emergency?	Yes
Take a photo of the emergency policy and procedure document.	



#### SECTION: BUILDING ENTRANCE

Is the exterior entry door at least 32 inches wide and does it open at least 90 degrees?	Yes
Does the entrance door have handles that can be opened without grasping, pinching or twisting of the wrist?	No

#### SECTION: INTERIOR ROUTE

Are all interior travel route paths at least 36 inches wide?	Yes
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Is the route stable, firm and slip-resistant?	No
Is the route clear of any free object that may stick out?	Yes
Is the interior door leading from waiting room to other interior rooms at least 32 inches wide and does it open at least 90 degrees?	No
Does the facility have an elevator?	Yes
Do the sliding doors reopen automatically when obstructed by an object? (Note: If constructed before March 15, 2012, and manually operated, the door is not required to reopen automatically.)	No
Are the call buttons no higher than 54 inches from the floor?	N/A
Are the in-car buttons no higher than 48 inches from the floor?	Yes
Do the elevators provide audible signal indicators and or Braille signage?	No
Are there audible signals when the elevator car passes or stops at a floor?	N/A

#### SECTION: WAITING ROOM AREA

Is there an open space at least 36 inches wide by 48 inches long in the waiting area to accommodate a wheelchair?	Yes
Does the reception area accommodate at least 1.5 seats per number of patients scheduled each hour?	No

#### SECTION: RESTROOMS

Does the restroom entry configuration provide adequate maneuvering space for a person using a	Yes
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<p>wheelchair? (Needs 36" of clear width for forward movement and a five-foot diameter or T-shaped clear space to make turns. If entry vestibule has two doors, a minimum distance of 48" clear of the door swing between the two doors.)</p>	
<p>In restrooms without stalls, is there at least 30"X48" area of open floor space clear of the door swing?</p>	No
<p>Is the side-wall grab bar at least 42 inches long?</p>	Yes
<p>Is the rear-wall grab bar at least 36 inches long?</p>	No
<p>Is the toilet paper dispenser no greater than 48 inches above the floor below the side-wall grab bar?</p>	Yes
<p>Is there at least one accessible sink that provides enough space for wheelchair users to park in front of the sink (30"W X 48"L)?</p>	No
<p>Is the faucet handle operable without needing to grasp, twist or pinch?</p>	Yes
<p>Are the soap and towel dispensers (or hand-driers) within reach (i.e., no higher than 48" from the floor) and not over an obstruction?</p>	No

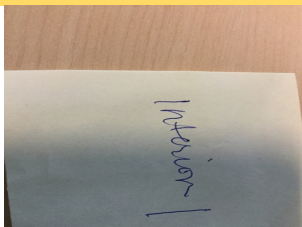
#### SECTION: EXAM ROOMS

<p>Is the entry door to the exam room at least 32 inches wide?</p>	Yes
<p>Is there adequate space for a mobility device to make a 180-degree turn (i.e., at least 30" X 48") on one side of the exam table?</p>	No
<p>Are there private changing areas that are accessible?</p>	Yes
<p>Are gowns and drapes</p>	No

provided?

### SECTION: ADDITIONAL INTERIOR PHOTOS

Take photos of the interior of the facility. The photos should be representational of the facility and include, but not be limited to: interior signage, posted operating hours/after hours phone number, offices, reception area, employee break room, x-ray room, lab, conference room, storage area).



### SECTION: EQUIPMENT/SCALES

Is there a weight scale that can accommodate wheelchairs or people who are unable to stand without assistance, which is either integrated into a patient lift, integrated into an exam table or has a platform?

Yes

Does the office have or can your office adapt an exam table for accessible transfers of people who use a wheelchair or are unable to transfer without assistance? (This may include the use of an adjustable-height table, transfer board, portable lift or a stretcher/gurney.)

No

### SECTION: ACCOMMODATIONS

Does the office have the ability to accommodate members with hearing, speech and sight disabilities? (The following materials are examples of accommodations: paper/writing utensil, visual aids, written materials, assistive-listening devices or systems and access to qualified sign language interpreters.)

Yes

Are translation services available in a minimum of 150

No

languages (such as an oral interpretation vendor)?	
SECTION: ADA	
Do staff members or designated leader receive ADA training once a year?	Yes
SECTION: PLANS, POLICIES AND LICENSURE	
Is there a hazardous materials/waste policy that describes the storage of sterile needles and proper disposal of used needles?	No
Is there an exposure-control process that includes infections control and universal precautions policies, procedures or protocols?	Yes
Does the office have a Clinical Laboratory Improvement Amendments (CLIA) certificate and/or waiver?	No
Does the office have an automated prescription writing tool that ensures the following list of abbreviations, acronyms, symbols and dose designations are not used? The list must include: U,u; IU; Q.D., QD, q.d., qd, Q.O.D., QOD, q.o.d., qod; Trailing zero (x.o mg); Lack of leading zero (.xmg); MS; MSO4; MgSO4	Yes
Are procedures in place to review prescriptions for accuracy prior to giving to patients or sending to pharmacies?	No
Does the office label all medications and medication containers (e.g., syringes, basins) to identify the contents?	Yes
Are all medications stored and maintained in an area away from public access and in an	No

area, cabinet or room that can  
 be securely locked? If no  
 medications currently stored in  
 office is there a policy that  
 addresses medication storage  
 if ever needed?  
  
 Is there a 24-hour answering  
 service or machine instructing  
 members about how to obtain  
 care?  
  
 Are your office hours and after-  
 hours phone number posted  
 internally and externally?  
 (NOTE: May be "N/A" only if  
 the office is located in large  
 building and outside posting is  
 prohibited by building  
 management.)

Yes

No

## SECTION: MEDICAL RECORDS

Are medical records  
 maintained in an area away  
 from public access?

Yes

Is a Health Insurance  
 Portability and Accountability  
 Act (HIPAA)-compliant written  
 authorization obtained from  
 the member or the member's  
 authorized representative for  
 maintaining the release of  
 medical records? (Ask to see  
 policy and procedure and the  
 release form.)

No

Is there a mechanism for  
 tracking referrals and reports  
 to and from other practitioners  
 and providers (e.g., between a  
 primary care physician and a  
 specialist)?

Yes

Is there evidence that medical  
 record documentation  
 standards have been  
 implemented (e.g., legible,  
 clear, concise, consistent,  
 complete)?

No

Is there prominent  
 documentation in an  
 individual's record regarding

Yes



Is there a policy/procedure that outlines anti-discrimination in health care delivery? (Ask to see policy.)

No

## SECTION: OVERALL ASSESSMENT

Yes

No

Yes

No

Yes

No

Yes

## SECTION: ADDITIONAL DETAILS

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## SECTION: PRACTITIONER/DESIGNEE SIGNATURE

Joe

Joe

Oct 23, 2019 08:14 AM

## SECTION: EMG REPRESENTATIVE SIGNATURE

Printed name: Michele

Signature

A handwritten signature in blue ink, appearing to read 'Michele', is displayed on a light gray background.

Date/Time Oct 23, 2019 08:14 AM