

Optum Idaho

Family Support Services Site Audit Tool

Provider Name:

City: State:

Region:

Audit Type:

Reviewer Name:

Date of Program Review:

Rating Scale: NA = Not Applicable Y = Yes N = No

Y	N	NA
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Rights, Responsibilities and Ethics

1	There is a policy and procedure about member's/member family's rights, responsibilities, and ethics.			
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Comments:

2	There is a policy and procedure about family's involvement in care and services.			
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Comments:

3	There is a policy and procedure about member's involvement in care.			
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Comments:

4	There is a policy and procedure about confidentiality.			
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Comments:

Environment of Care

5	The agency location is easily identifiable from the street.			
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Comments:

6	There is a policy addressing safety and security.			
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Rights, Responsibilities and Ethics

Comments:

7	There is a policy or written criteria addressing control of hazardous materials and wastes, including management of any spills of bodily fluids (This question applies to all agencies) .			
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Comments:

8	There is a disaster plan.			
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Comments:

9	There is a fire safety plan.			
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Comments:

10	There is evidence of compliance with fire safety procedures/regulations, including inspection by the fire department/marshal.			
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Comments:

11	There are fire extinguishers in the facility or there is a fire suppression system.			
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Comments:

12	The exits are well marked and free of obstruction.			
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Comments:

13	The agency appearance is reasonably neat and clean.			
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Comments:

14	The waiting room and member areas are of adequate size and reasonably comfortable.			
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Comments:

15	The furnishings and décor are appropriate.			
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Comments:

16	There are no culturally insensitive or offensive materials posted.			
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Comments:

Rights, Responsibilities and Ethics

Continuum of Care

17 There is a policy/written criteria about expectations and limitations for services being provided.

Comments:

18 The program description is recovery and resiliency focused.

Comments:

19 There is a policy/written criteria that includes exclusionary criteria for the program.

Comments:

20 There is a policy/written criteria that includes continuation of service needs of the member/member family at the time of their transition from the program.

Comments:

Initiation

21 The policy/written criteria for initiation procedures includes an inventory of the member's/member family's strengths and resiliency factors.

Comments:

22 The policy/written criteria for initiation procedures includes a review of the member's/member family's support network.

Comments:

23 The policy/written criteria for initiation procedures includes a review of whether the member and/or family has an individualized recovery plan or family-centered service plan that includes a description of the member's/member family's goals, timeframes for meeting these goals, and the interventions that will assist in meeting the goals.

Comments:

24 There is a policy/written criteria for obtaining appropriate consents to contact the member's behavioral health clinician, medical physician, family/social supports, and or agencies and other programs that is involved in the member's care.

Comments:

Rights, Responsibilities and Ethics

25 There is a policy/written criteria for the development of a individualized family-centered service plan that is developed with the member/member family.

Comments:

26 There is a policy/written criteria for the review and update of the individualized family-centered service plan at a minimum of 120 days (per IDAPA 16.07.37, section 407).

Comments:

Performance Improvement

27 There is a Performance Improvement Program.

Comments:

Management of Information

28 The program has a process in place to ensure the availability of service records to the CFSP.

Comments:

29 The program has a policy for making the service record available to the family/member upon request in a reasonable amount of time.

Comments:

30 The program has an organized system of filing information in the service records.

Comments:

31 The program must have an established procedure to maintain the confidentiality of service records in accordance with any applicable statutes and regulations.

Comments:

32 If service records need to be transported to another service location, there is a protocol in place to maintain confidentiality of records throughout the transportation process.

Comments:

Human Resources

Rights, Responsibilities and Ethics

33 There is evidence of on-going assessment of CFSP staff competency through verification of certification status, ongoing supervision, performance evaluations and training.

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Comments:

34 Personnel files include: resume, background checks, job description, appropriate license or certification for CFSP staff, and annual evaluations.

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Comments:

35 There is a specific policy/written criteria addressing initial and ongoing training of CFSP staff.

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Comments:

36 There is evidence that staff have received training related to agency policies and procedures.

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Comments:

37 There is a specific policy/written criteria addressing staff supervision of CFSP staff.

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Comments:

38 There is documentation of on-going supervision of CFSP staff.

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Comments:

39 The CFSP job description lists essential knowledge and skills consistent with the State of Idaho's Behavioral Health Standards Manual for CFSP services.

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Comments:

40 The agency has a protocol to notify the certifying entity/program of any violations of certification standards in accordance with the State of Idaho's Behavioral Health Standards Manual for CFSP services.

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Comments:

41 Verification of appropriate certification for CFSP staff is completed. There is evidence certification is obtained in accordance with the State of Idaho's Behavioral Health Standards Manual for CFSP services. *(During initial credentialing, this verification is completed by the network manager).*

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Comments:

Rights, Responsibilities and Ethics

42 A sample of the CFSP's employee files were reviewed and the files contained documentation of hiring consistent with program policy.

Comments:

Infection Control

43 There is a policy and procedure regarding infection control at the agency which includes written protocols for communication with local public health authorities.

Comments:

44 There are written protocols for the treatment of family's/members with infectious diseases.

Comments:

Handicap Accessibility

45 The agency has parking for handicapped vehicles.

Comments:

46 The agency has a ramp allowing entrance into the building.

Comments:

47 The agency has wide doorways for wheelchair access.

Comments:

48 The agency has handicap accessible restroom(s).

Comments:

49 If the agency is not handicap accessible, does the program staff screen for handicap needs prior to initiation of services?

Comments:

Rights, Responsibilities and Ethics

Member Complaints

50 There is a protocol for dealing with complaints.

Comments:

51 The agency documents that families/members are informed of methods of resolving complaints.

Comments:

Recovery and Resiliency

52 The mission statement of the agency is recovery oriented. (For example, SAMHSA has established a working definition that defines recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on access to evidence-based clinical treatment and recovery support services for all populations.)

Comments:

Region:	Audit Type:	Auditor:	Member Gender:
Region: 1	Audit Type: OTHR [Ongoing Monitoring Audit]	Auditor: Angie Radford	Member Gender: F
Region: 2	Audit Type: QOC1 [Initial Audit]	Auditor: Barb Beville	Member Gender: M
Region: 3	Audit Type: QOC2 [Quality of Care Re-Audits]	Auditor: Sharon Moore Barnett	
Region: 4	Audit Type: REAU [Re-audit (any type except Quality of Care)]		
Region: 5	Audit Type: UAF1 [Unaccredited Facility, Initial Audit (includes new programs & locations)]		
Region: 6	Audit Type: UAF2 [Unaccredited Facility, Recredentialing Audit]		
Region: 7			

State:
State: ID
State: WA
State: OR
State: UT