

Community Health Accreditation Partner: Document Requested

NOTE: This is a Guideline. Additional Information may be requested based on Scope of Services (disciplines/services provided).

Items Requested

General Request for All Service Lines

Policy and Procedure Manual

Sample and Admission Packet

List of Unduplicated Admissions (New Patients) for Past 12 Months

- Include Diagnosis and Start of Care Date
- For HME and Pharmacy – type of equipment/service

List of Personnel from Past 12 Months

- Include Title and Date of Hire

List of Governing Body Membership

- Include Positions on Board
- Annual Conflict of Interest Statements
- Minutes of Governing Body Meeting(s)

By-Laws

Mission Statement Including Date of Last Review

Most recent Strategic Plan

Annual Agency Evaluations

List of Contracts

Operating Budget

Capital Expenditure Plan

Surety Bond (if applicable) and Insurance Coverage

Most recent Annual External Review of Financial Statement

Performance Improvement Plan

Copy of the following for past 12 months

- Clinical Record Audit Results and trends
- Adverse Events Incidents and Complaint trends
- Patient Satisfaction Survey Results and trends
- Any additional performance improvement indicators and/or action plans



✓	Items Requested	✓
Requested	Service Specific Information	Received
	Copy of visit schedule of home visits for the next 2 days <ul style="list-style-type: none"> • Patient names, discipline visiting patient, and diagnosis 	
	Professional Advisory Committee minutes and membership for past 12 months, as applicable.	
	OBQI outcome reports for past 12 months (Home Health Only)	
	OBQI case mix report for past 12 months (Home Health Only)	
	Hospice Volunteer hours tracked and trended for past 12 months including cost saving (Hospice Only)	
	Billing and coding error reports (DMEPOS{HME/Pharmacy} only)	