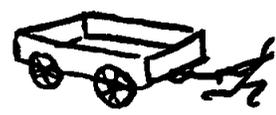


Date \_\_\_\_\_ Time \_\_\_\_\_

Facility Name \_\_\_\_\_ Facility Location \_\_\_\_\_

Satellite  Yes  No

Patient	<b>Exterior of Facility</b>	
	1. Parking area is free of trash. (N/A for facilities leasing space within a building.)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	2. <b>For leased-space facilities:</b> Facility is listed on building directory.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	3. Entrance to non-leased buildings is free of trash and debris.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	4. <b>For leased-space facilities:</b> Entrance to facility appears in good repair and building supports <b>HEALTHSOUTH</b> image.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Respect	5. Facility has a sign identifying it as a <b>HEALTHSOUTH</b> facility. If No, note when facility was acquired. _____	<input type="radio"/> Yes <input type="radio"/> No
	<b>Lobby/Waiting Area</b>	
	6. Overall appearance is organized and neat.	<input type="radio"/> Yes <input type="radio"/> No
Integrity	7. No magazines on floor or in chairs.	<input type="radio"/> Yes <input type="radio"/> No
	8. Furniture appears in good repair.	<input type="radio"/> Yes <input type="radio"/> No
	<b>Receptionist</b>	
	9. Patients/visitors are greeted upon entry.	<input type="radio"/> Yes <input type="radio"/> No
Service	10. Receptionist has a friendly and helpful attitude.	<input type="radio"/> Yes <input type="radio"/> No
	11. Proper telephone etiquette is used.	<input type="radio"/> Yes <input type="radio"/> No
	12. Work area in patient/visitor view is organized and neat.	<input type="radio"/> Yes <input type="radio"/> No
	13. Patient admission/intake is handled in a private area.	<input type="radio"/> Yes <input type="radio"/> No
	<b>Treatment/Examination Areas (Items 14. - 28.)</b>	
Teamwork	14. Staff is attentive to patients.	<input type="radio"/> Yes <input type="radio"/> No
	15. Staff exhibits a caring and professional attitude toward patients.	<input type="radio"/> Yes <input type="radio"/> No
	16. Equipment appears in good working condition.	<input type="radio"/> Yes <input type="radio"/> No
	17. Equipment has no rust or dust.	<input type="radio"/> Yes <input type="radio"/> No
	18. Carpet or flooring appears clean and in good repair.	<input type="radio"/> Yes <input type="radio"/> No
Impression	19. Ceiling is free of stains and dust accumulation.	<input type="radio"/> Yes <input type="radio"/> No
	20. Facility has adequate lighting.	<input type="radio"/> Yes <input type="radio"/> No
	21. Walls are free of stains and marks. If No, note areas needing attention. _____	<input type="radio"/> Yes <input type="radio"/> No
	_____	
	22. Doors to storage areas are closed to public view.	<input type="radio"/> Yes <input type="radio"/> No
No hassle	23. Music is at an acceptable level.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	24. Pool is free of stains.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
	25. Charting area is organized and neat. (N/A if no specific charting area within patient treatment areas.)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Extra mile	26. Patient privacy is respected @ all times.	<input type="radio"/> Yes <input type="radio"/> No



Patient

27. Clean laundry is neatly folded and stored in a designated area.

Yes  No

28. Soiled laundry is stored in a covered container.

Yes  No

**Public Restrooms/Locker Rooms (Within facility)**

29. Floors are free of trash.

Yes  No

30. Floors, walls and toilet areas are free of stains.

Yes  No

31. Overall appearance is sanitary.

Yes  No

Respect

**Financial**

32. Business office personnel are courteous and helpful.  
(N/A for facilities without a business office.)

Yes  No  N/A

33. Patient receipt book is pre-numbered and multicopied.

Yes  No

34. All pre-numbered receipts in patient receipt book are accounted for; one copy of all receipts issued remains in the receipt book.

Yes  No

Integrity

35. Over-the-counter collections are stored in a locked safe overnight until forwarded to a Regional Business Office or deposited in the bank. If No, note where money is stored. \_\_\_\_\_

Yes  No

36. Three people or less have the safe combination. List names and titles: \_\_\_\_\_  
\_\_\_\_\_

Yes  No  N/A

Service

37. One copy of all purchase orders (issued and voided) is maintained numerically.  
(N/A only for facilities which requisition supplies from another facility.)

Yes  No  N/A

38. Previous day's charge slips have been processed.

Yes  No  N/A

Obtain patient schedule for the day prior to the audit and pull five medical charts for patients seen on that date.

Teamwork

39. Charges documented for the date under review.

Yes  No

40. Patient name and account number agree with latest charge ticket.

Yes  No

Note any problems with 39 and 40. \_\_\_\_\_  
\_\_\_\_\_

Impression

**General**

Patient transportation and all company vehicles. Items 41 through 43:

41. Patient transportation vehicle has **HEALTHSOUTH** logo on exterior.

Yes  No  N/A

If N/A or No, note reason. \_\_\_\_\_

42. Interior of vehicle is clean and neat in appearance.

Yes  No  N/A

43. Tires on company vehicle do not have visibly worn tread.

Yes  No  N/A

No hassle

44. There are no taped signs (handwritten or printed) on walls, doorways, or equipment in areas open to patient/visitor view.

Yes  No

45. "Pulling the Wagon" poster is prominently displayed in the facility.

Yes  No

46. Throughout facility, employees are identified by **HEALTHSOUTH** name tags or apparel.

Yes  No

47. Overall attitude of the facility is courteous and professional.

Yes  No

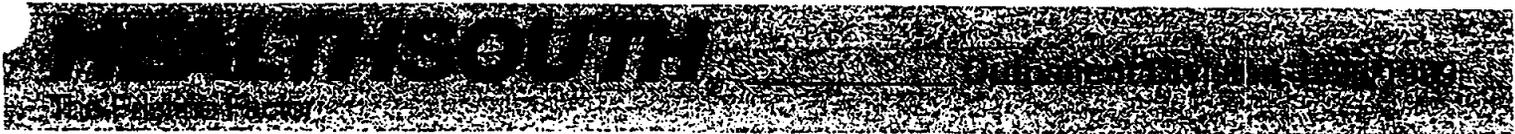
Extra mile

**Pristine Factor**

3/29/96

\_\_\_\_\_ %





E & Y Auditor # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Time \_\_\_\_\_ AM / PM

Facility Number **04 / 08** \_\_\_\_\_

Facility Location (City/State) \_\_\_\_\_

Facility undergoing construction/renovations at the time of audit.  Yes

**Patient**

### Exterior of Facility

- 1. Parking area is free of trash. (N/A for facilities leasing space within a building.)  Yes  No  N/A
  - 2. Entrance to facility is free of trash and debris.  Yes  No  N/A
  - 3. Entrance to building appears in good repair and building supports HEALTHSOUTH image.  Yes  No  N/A
  - 4. Facility has a sign identifying it as a HEALTHSOUTH facility.  Yes  No  N/A
- If no, note reason and when facility was acquired. \_\_\_\_\_

**Respect**

### Lobby/Waiting Area

- 5. Overall appearance is organized and neat.  Yes  No  N/A
- 6. Magazines appear neat and orderly.  Yes  No  N/A
- 7. Furniture appears in good repair.  Yes  No  N/A
- 8. Chairs/Seating have no stains, lint or broken parts.  Yes  No  N/A

**Integrity**

### Receptionist

- 9. Patients/Visitors are greeted upon entry.  Yes  No  N/A
- 10. Receptionist has a friendly and helpful attitude.  Yes  No  N/A
- 11. Proper telephone etiquette is used.  Yes  No  N/A
- 12. Work area in patient/visitor view is organized and neat.  Yes  No  N/A
- 13. "HEALTHSOUTH receipts are issued to all patients making a payment at our facility" sign is displayed at receptionist desk.  Yes  No  N/A

**Service**

### Treatment/Examination Areas

Answer items 14, 15 and 16 ONLY if patients are in the facility during the audit.

- 14. Staff is attentive to patients.  Yes  No  N/A
- 15. Staff exhibits a caring and professional attitude toward patients.  Yes  No  N/A
- 16. Patient privacy is respected at all times.  Yes  No  N/A
- 17. Carpet or flooring appears clean and in good repair.  Yes  No  N/A
- 18. Ceiling is free of stains.  Yes  No  N/A
- 19. Ceiling heating/cooling vents are free of dust accumulation.  Yes  No  N/A
- 20. Walls are free of stains and marks.  Yes  No  N/A
- If no, note areas needing attention. \_\_\_\_\_
- 21. Equipment appears in good working condition.  Yes  No  N/A
- 22. Equipment has no dust or rust.  Yes  No  N/A
- 23. Pool/Whirlpool is free of stains.  Yes  No  N/A
- 24. Facility has adequate lighting.  Yes  No  N/A
- 25. Doors to storage areas are closed to public view.  Yes  No  N/A
- 26. Music is at a level for holding conversations without raising voices.  Yes  No  N/A
- 27. CLEAN laundry is neatly folded and stored in a designated area.  Yes  No  N/A
- 28. SOILED laundry is stored in a covered container.  Yes  No  N/A

**Teamwork**

**Impression**

**No hassle**

**Extra mile**



Patient

**Public Restrooms (located inside facility only)**

- 29. Floors are free of trash.  Yes  No  N/A
- 30. Floors, walls and toilet areas are free of stains.  Yes  No  N/A
- 31. Overall appearance is sanitary.  Yes  No  N/A

Respect

**Financial**

- 32. Facility is using the "One-Write" system for issuing patient receipts.  Yes  No  N/A
- 33. Over-the-counter collections are stored in a LOCKED safe or cash box overnight until forwarded to RBO/CPC or deposited in the bank. If no, note where money is stored. \_\_\_\_\_  Yes  No  N/A
- 34. Three people or less have a key to cash box or the safe combination. List names and titles: \_\_\_\_\_  Yes  No  N/A
- 35. Throughout facility, assets are tagged with HEALTHSOUTH fixed asset tags. Note one asset description and tag #: \_\_\_\_\_  Yes  No  N/A

Integrity

Obtain patient schedule for ONE business day prior to the audit and select three medical charts for patients treated on that date.

- 36. Procedure(s) is(are) documented for the date under review.  Yes  No  N/A
- 37. Patient has signed consent to treat form. Note problems with 36 and 37. \_\_\_\_\_  Yes  No  N/A

Service

**General**

- 38. Facility business license is framed and displayed publicly.  Yes  No  N/A
- 39. Select three personnel files. Evidence of Completion form for Module One is on file. If no, note employee's name and date of hire.  Yes  No  N/A

Teamwork

- 40. Throughout facility, all trash receptacles have liners. If no, note location. \_\_\_\_\_  Yes  No  N/A

Impression

- 41. Throughout facility, all employees are identified by name/ID badges or HEALTHSOUTH apparel.  Yes  No  N/A
- 42. There are NO taped signs (handwritten or printed) on walls, doorways or equipment throughout facility.  Yes  No  N/A
- 43. HEALTHSOUTH merchandise brochure is displayed publicly.  Yes  No  N/A
- 44. "PULLING THE WAGON" poster is displayed publicly in the facility.  Yes  No  N/A
- 45. "WE'VE ADDED OUR 50TH STATE" poster is displayed publicly in facility.  Yes  No  N/A
- 46. "INTEGRITY IN ACTION" poster is displayed in area accessible to employees only.  Yes  No  N/A

No hassle

- 47. Soda vending machines located in facility distribute Coca-Cola products. (N/A for facilities without vending machines inside the facility.)  Yes  No  N/A
- 48. Throughout facility, employee work areas are organized and neat.  Yes  No  N/A
- 49. Throughout facility, storage areas are organized and neat.  Yes  No  N/A
- 50. Overall attitude of the facility is courteous and professional.  Yes  No  N/A

Extra mile

