

## Hospice IPU Document Request List

**Note: This is a guideline. Additional information to include State specific requirements (as applicable) may be requested at any time during the site visit.**

**\*Denotes policies/documents to be provided within the first 1\*\*-2\* hours of the site visitor arrival**

Standard	Document Type(s)	Comments
	<b>General Documents/ Information</b>	For Hospice owned Inpatient Units
<b>NA</b>	List of all Hospice IPU Locations	Including Addressees
	Facility Tour(s)	Each Inpatient Unit with LSC review
<b>NA</b>	Staffing Schedule for the last 30 days	Schedules for all licensed and registered nurses
<b>NA</b>	*List of Active Inpatient Census	Include Admission date, Dx, Reason for Admission, and the level of care they are receiving
<b>NA</b>	*List of patients served over the last 30 days	Include the date of admission, reason for admission, DX, Date of Discharge,
<b>NA</b>	List of Active Personnel	Include Date of Hire, Position/Discipline, Medical Director, Volunteer, All Staff under contract
<b>HCPC 2.D</b>	IDG	Schedule, Location, and member phone numbers Location of meeting minutes
<b>HPFC 2.D</b>	*Sample Admission Packet	Include language specific documents
	<b>Quality Documents</b>	
<b>HCFC 6.D, HSLG 9.I, HQPI 8.I</b>	Complaint logs	Include complaints, investigations, and outcomes for the last 12 months
<b>HSIC 38.I</b>	List of patients placed in restraints or seclusion	For the last 12 months
<b>HIPC 5.I</b>	Infection Control Program/Activities	
<b>HSIC 17.I</b>	Recent Survey Results	Local, State, or federal
	<b>Policies and Procedures</b>	
	Policy Manual(s): Service Specific Policies, Human resources, Administrative, Operational, Clinical	Advanced directives, Plan of Care, IDG Coordination of Services, Training, Clinical Records, Management and disposal of controlled drugs, Use and maintenance of equipment and supplies, Pain and symptom Management, Hand washing, Emergency Preparedness, QAPI, Visitor Policy, Restraint/seclusion policy and procedures.

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	<b>Operational Documents</b>	
<b>HSRM 9.I</b>	Training and Competency	Inpatient Specific
<b>HSRM 12.I, HSRM14.I</b>	Clinical Competency Documentation	Including contractors and volunteers
<b>HSRM 18.I</b>	Annual In-service Education Provided	As applicable per Agency/State requirements
<b>HSIC 13.I, HSIC 10.D, HSIC 14.I</b>	Emergency Preparedness Plan	Documented exercises and records including Mock Fire Drills and Fire Inspection Reports
<b>HSIC 13.D</b>	Emergency Water Source	Verbal/written confirmation is acceptable
<b>HSIC 28.I</b>	Meals	Location of dining room (s) and schedule of mealtimes for the week
	Updated Facility Floor Plan	Including the location of Medication storage rooms Medication carts (if any) dining rooms
<b>HSIC 13.I</b>	Fire safety Inspection Reports	
<b>HSIC 10.D, HSIC 15.I</b>	Mock Fire Drills	Across all shifts completed quarterly For the prior 3 years
<b>HSIC 14.I</b>	Life Safety Code Compliance	Additional documents may be requested
<b>HSIC 18.I</b>	Maintenance Activities	Additional documents may be requested