

# **Health Center Program Site Visit Protocol:**

## **Continuity of Care and Hospital Admitting**

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# CONTINUITY OF CARE AND HOSPITAL ADMITTING

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**Primary Reviewer:** Clinical Expert

**Secondary Reviewer:** N/A

**Authority:** Section 330(k)(3)(A) and 330(k)(3)(L) of the PHS Act; and 42 CFR 51.c.303(a) and 42 CFR 56.303(a)

## Document Checklist for Health Center Staff

### Documents Provided Prior to Site Visit:

- Health center's internal operating procedures and/or documentation from arrangements with non-health center provider(s) for tracking of patient hospitalization and continuity of care

### Documents Provided at the Start of the Site Visit:

- Documentation of EITHER:
  - Provider hospital admitting privileges (e.g., hospital staff membership, provider employee contracts) that address delivery of care in a hospital setting to health center patients by health center providers; OR
  - Formal arrangements with provider(s) or entity(ies) that address health center patient hospital admissions
- Sample of 5-10 health center patient records (e.g., using live navigation of the Electronic Health Records (EHR), screenshots from the EHR, or actual records if the records are not electronic/EHR records) who have been hospitalized or had Emergency Department (ED) visits within the past 12 months

## Demonstrating Compliance

### Element a: Documentation of Hospital Admitting Privileges or Arrangements

The health center has documentation of:

- Health center provider<sup>31</sup> hospital admitting privileges (for example, provider employment contracts or other files indicating the provider(s) has admitting privileges at one or more hospitals); and/or

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<sup>31</sup> In addition to physicians, various provider types may have admitting privileges, if applicable, based on scope of practice in their State (for example, Nurse Practitioners, Certified Nurse Midwives).

- Formal arrangements between the health center and one or more hospitals or entities (for example, hospitalists, obstetrics hospitalist practices) for the purposes of hospital admission of health center patients.

### Site Visit Team Methodology

- Interview health center clinical management (e.g., CMO, Clinical Director) on processes for ensuring continuity of care for patients that require inpatient hospitalization.
- Review documentation of EITHER:
  - Provider hospital admitting privileges that address delivery of care in a hospital setting to health center patients by health center providers; OR
  - Formal arrangements with non-health center provider(s) or entity(ies) (e.g., hospitalists) that address hospital admissions of health center patients.

### Site Visit Findings

1. Does the health center have:
  - Documentation of hospital admitting privileges (if select health center providers assume responsibility for admitting and following hospitalized patients); and/or
  - Formal arrangements with non-health center provider(s) or entity(ies) (such as a hospital, hospitalist group or obstetrics practice) that address health center patient hospital admissions?  
 YES                       NO

If Yes OR No, an explanation is required specifying the health center's arrangement(s) for hospital admissions:

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### Element b: Procedures for Hospitalized Patients

The health center has internal operating procedures and, if applicable, related provisions in its formal arrangements with non-health center provider(s) or entity(ies) that address the following areas for patients who are hospitalized as inpatients or who visit a hospital's ED:<sup>32</sup>

- Receipt and recording of medical information related to the hospital or ED visit, such as discharge follow-up instructions and laboratory, radiology, or other results; and
- Follow-up actions by health center staff, when appropriate.

### Site Visit Team Methodology

- Review health center internal operating procedures and/or documentation from arrangements with non-health center provider(s) or entity(ies) to assess continuity of care provisions.
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<sup>32</sup> Health center patients may be admitted to a hospital setting through a variety of means (for example, a visit to the ED may lead to an inpatient hospital admission, or a health center patient may be directly admitted to a unit of the hospital, such as labor and delivery).

## Site Visit Findings

2. Did the health center's internal operating procedures and/or arrangements with non-health center provider(s) or entity(ies), if applicable, address the following:
  - How the health center will obtain or receive medical information related to patient hospital or ED visits and record such information (e.g., discharge follow-up instructions and laboratory, radiology, or other results)?  
 YES                       NO
  - Follow-up by the health center staff, when appropriate?  
 YES                       NO

If No was selected for any of the above, an explanation is required:

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## Element c: Post-Hospitalization Tracking and Follow-up

The health center follows its operating procedures and formal arrangements as documented by:

- Receipt and recording of medical information related to the hospital or ED visit, such as discharge follow-up instructions and laboratory, radiology, or other results; and
- Evidence of follow-up actions taken by health center staff based on the information received, when appropriate.

## Site Visit Team Methodology

- In conjunction with a health center clinical staff member, have staff member navigate the reviewer through 5-10 health records.

## Site Visit Findings

3. Based on the review of sampled records, was there documentation of:
  - Medical information related to the hospital or ED visit, such as discharge follow-up instructions and laboratory, radiology, or other results?  
 YES                       NO
  - Follow-up actions taken by health center staff based on the information received, when appropriate?  
 YES                       NO

**Note:** For a health center that has had no patients who have been hospitalized in the past 12 months (e.g., a newly-funded health center that has just started its operations), a review of operating procedures and results of the interview with health center staff can be used to respond to these questions.

If No was selected for any of the above, an explanation is required:

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