



**California Department of Public Health  
Center for Health Care Quality  
Licensing & Certification Program**



**General Acute Care Hospital Relicensing Survey**

NAME OF FACILITY	DATE	NAME OF TEAM COORDINATOR

<b>The team leader will work with the facility staff to determine which documents/items the team needs immediately and which ones are needed within a few hours. Please provide the following:</b>	REQUESTING	RCV'D
<b>1. Hospital Policy and Procedures:</b>		
a) Infection control policy (HSC §1255.8)		
b) Environmental Services Policies that address cleaning/disinfection (HSC §1255.8)		
c) Patient safety plan (HSC §1279.6 & HSC §1279.7(e))		
d) Immunizations/Vaccinations - staff & patient (HSC §1288.7(a) & HSC §120392.9)		
<b>2. Hospital Written Reports:</b>		
a) Infection surveillance & prevention program's written report, required every 3 years, & required annual updates, with revisions, if necessary (HSC §1288.6)		
b) Hospital strategic plan (HSC §1288.6).		
c) Seasonal influenza plan with disaster plan revisions for a pandemic influenza component (HSC §1288.7(b))		
(d) Process for reimbursing patients for excess amounts paid on their bills, including interest owed by the hospital. (HSC §127440)		
<b>3. Healthcare Staff/ Employee Records:</b>		
a) Credentialing file evidence of infection surveillance, prevention, & control training attendance for the physician who has been designated as a hospital epidemiologist/infection surveillance, prevention and control committee chairperson (HSC §1288.95(a))		
b) Facility infection control training program for all types of staff, which includes annual and after policy changes (HSC §1288.95)		
c) List of charity care and discount payment patients including outpatient services (last 3 months) (HSC §127405-127440)		
<b>4. Nutrition/Dietary Services:</b>		
a) Organizational Chart of Nutrition Services		
b) Personnel file of Director of Food Services (HSC §1265.4)		
c) Job Descriptions: Manager of Dietetic Services, Manager of Food Services and Chief Clinical Dietitian, Dietetic Technicians (if applicable)		
d) Menus for the Week: including extensions		
e) Meal and Nourishment Schedules		
f) Current Patient Diet List		



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Documents	REQUESTING	RCV'D
<b>5. Additional Items:</b>		
a) Current inpatient census		
b) Hospital floor plan or stacking diagram		
c) List of key hospital personnel with phone numbers and roles		
d) Hospital organization chart to include governing body and officers		
e) List of current program flexibility(s)		
f) Medical Staff roster to include allied health and mid-level practitioners		
g) List of all service locations		
h) List of contracted services		
i) Governing Body Bylaws/Rules and regulations		