

Compliance Audit Checklist

Updated April, 2017

Board of Pharmacy, State of California

- Every label on dispensed medication includes the following information: Trade or generic drug name, strength and quantity, directions for use, expiration date, date of issue, patient name, prescriber name, hospital name and address,
- Client's Right to Written Prescription notification (must be printed and handed to the client or must be posted in a conspicuous location where clients can read it.)
- Veterinarian understands that in California, clients have a right to obtain a written prescription in lieu of dispensed medication.
- Injectable medications are not pre-drawn and stored for future use (ex. Epinephrine).
- No expired medications on shelf

Cal/OSHA Requirements (ONLY IF THE PRACTICE HAS EMPLOYEES) * Consider purchasing the CVMA Cal/OSHA Compliance Guide for a step-by-step way to build a custom written safety plan for your practice. Visit www.cvma-inline.net to learn about the guide.**

- Paid sick leave policy in place and in accordance with state law: <http://www.dir.ca.gov/dlse/ab1522.html>

Injury/Illness Prevention Program (IIPP)

- Written plan in place and current
- Safety Coordinator identified and current
- Compliance and communication systems described in writing
- Procedures in place to identify hazards (documented monthly checklists)
- Cal/OSHA Log 300 current with recordable injuries/illness being recorded within 7 days (for businesses with 10 or more employees)
- Cal/OSHA Log 300A from previous year posted from Feb 1 to April 30 of each year (names need not be included)(for businesses with 10 or more employees)
- Serious injuries (any injury/illness requiring >24 hr. hospitalization for other than medical observation, loss of body part/disfigurement, fatality, multiple employee injuries) reported to Cal-OSHA within 8 hours.
- Documentation that injuries/illnesses have been investigated
- Documentation of actions taken to correct problems
- Documentation of training of all staff on IIPP within past year
- Compliance with Section 3203, which requires veterinary practices to establish and implement a written zoonotic disease exposure control plan. This plan should include biosecurity control steps such as isolation protocols, traffic control, and sanitation procedures.
- Documentation of training of new staff members as hired
- Cabinets and shelves over 5 feet tall must be secured to the wall
- Compressed gas containers must be stored with protective caps in a safe location (away from heat sources) and secured to prevent tipping
- Fire extinguishers adequate, mounted, charged and inspected annually

Emergency Action Plan (EAP)

- Written plan in place and current
- Rescue and medical duty assignments current
- Preferred means to report emergencies identified and current
- Contact person for further information identified and current
- Documentation of training of all staff within past year
- Documentation of training of new staff members as hired
- First Aid kit must be available
- Eye wash stations installed and to code (if applicable.)

Fire Prevention Written Plan

- Written plan in place and current
- Name of person responsible for fire prevention and control equipment posted and current
- Name of person responsible for controlling flammable waste posted and current
- Documentation of training of all staff within past year
- Documentation of training of new staff members as hired

Hazard Communication Program Written Plan

- Containers in hospital areas are all labeled (Secondary labels)
- SDS binder present and current in written format
- Person responsible for updating SDS binder identified and current
- List of Hazardous Substances in place and current
- Outside contractors for waste disposal identified and current
- Documentation of training of all staff within past year
- Documentation of training of new staff members as hired

Heat Illness Prevention Program (if applicable- only for businesses with outdoor workers)

- Written Heat Illness Prevention Program in place and current
- Written Heat Illness Prevention Training document in place and current

Safety Program Implementation

- Written safety plan in place and current
- Personal protective equipment in place, accessible, clearly identified
- Spill containment protocol in place and current (including spill kit)
- Person responsible for conduction monthly safety inspections identified and current
- Documentation of monthly safety inspections
- Documentation of safety correction made

Zoonotic Disease Control Program

- Written plan/ procedures in place to protect workers from aerosolized transmissible zoonotic diseases
- All workers have access to: <http://www.nasphv.org/Documents/VeterinaryPrecautions.pdf>
- All workers have training that covers control procedures for applicable diseases, and is appropriate in content and vocabulary for the educational level, literacy, and language suitable for each worker.

Waste Anesthetic Gas Monitoring Program

- Monitoring procedures for workers who are suspected to have exposure to waste halothane or isoflurane above 2 ppm in an 8-hour time-weighted average)
- Exposure control measures be instituted and documented if exposures above 2 ppm (the Permissible Exposure Limit or "PEL.")
- Documentation and records in place of exposure monitoring, exposure corrections and control measure.

Other Cal/OSHA Requirements which MAY be applicable to your practice:

- Antineoplastic Drug Program
- Elevator Safety Orders
- Emergency Eyewash and Shower Stations
- Ethylene Oxide
- First Aid/ CPR
- Ground Fault Circuit Interruptors
- Guidelines for Workplace Safety (Violence and Security)
- Hearing Conservation Program
- Lasers (Non-ionizing radiation)
- Pressure Vessel Regulation (air compressor)

Required Postings: Cal/OSHA – Post in an area visible to employees:

- Access to Medical and Exposure Records notification *
- Cal/OSHA Form 300A – Feb. 1 through April 30 (10 or fewer employees – exempt)
- DFEH Leave Notices A and B *
- Emergency Contract Information for Employees*
- Emergency Phone Numbers (emergency responders) *
- Employee Polygraph Protection Act (Dept. of Labor) *
- Equal Opportunity Employment Commission Poster with ADA Revisions *
- Exit signs next to every exit door
- Family and Medical Leave Act of 1993 *
- Harassment or Discrimination in Employment (Dept. of Fair Employment & Housing) *
- Minimum Wage (Federal) *
- Minimum Wage and Overtime (State) *
- National Labor Relations Board Employee Rights Rules*
- Paid sick leave California Healthy Workplaces, Healthy Families Act of 2014*
- Payday Notice *
- Prop 65 Warning (Cancer/Reproductive Harm Warning – Only required in practices with MORE THAN 10 employees)
- Safety & Health Protection On the Job *
- Unemployment Insurance & Disability Insurance Notice (Employment Development Dept.) *
- USERRA*
- Voter's Time Off Notice *
- Wage Order 5-2001
- Workers Compensation Insurance Notice *

(* indicates that this posting is included in the CVMA Employee Poster Set)

California Department of Public Health

Rabies Branch

- Documentation that doctors/staff have been trained on Rabies reporting requirements for county within past year
- Staff veterinarians understand their duty to report zoonotic diseases including rabies suspects, plague, and certain other diseases (for a list of diseases and requirements, see <http://www.cdph.ca.gov/HealthInfo/Pages/ReportableDiseases.aspx>)
- Any veterinarian administering rabies vaccinations provides required client information to county health authorities (if required by local ordinances.) See this article for additional information: <http://cvma.net/wp-content/uploads/2014/10/RabiesVaccineReporting.pdf>. Several local ordinances can be found by searching the code library at www.municode.com.
- Veterinarians understand that, according to CCR Title 17, Section 2606 (a), all animal bites to humans from species subject to rabies are to be reported to the local health officer. This applies to both animal bites to hospital staff members as well as bites to clients. In the case of bites to clients, staff veterinarians should document that they advised. A list of local health officers can be found here: <http://www.cdph.ca.gov/programs/cclho/Documents/CCLHOHealthOfficerDirectory.pdf>

Radiologic Health Branch

- Verify that x-ray machine has been registered (within 30 days of acquisition of new machine).
- Renewal of registration every 2 years
- DHS form RH-2364 (Notice to Employees, Standards for Protection Against Radiation) posted in radiology area
- CCR, Title 17 Safety Manual posted in the x-ray room. Title 17 information (located in the California Code of Regulations section of the California Veterinary Medicine Practice Act) is kept in the x-ray room, or there is a posting in the x-ray room indicating where this book is located. A printed version can be purchased from the CVMA.
- 10CFR20 Document located in the x-ray room with Title 17.
- Radiation Safety Instructions Posted in X-Ray area
- "Caution – X-Ray" sign posted conspicuously (NOT "Caution – Radiation Area" – firefighters may then discontinue their efforts during a fire if they see this sign) just outside of radiology room/area at all entry points to the room
- Radiation Emergency Procedures posted in X-Ray area
- Personal Protective Equipment (lead gowns, gloves, thyroid shields) are present and routinely checked for defects (see below.)
- Documentation that there is a Radiation Safety Program in place:
 - Documentation that Radiation Safety Rules have been provided to all staff
 - Documentation that all non-RVTs taking radiographs have passed the Non-RVT Radiation Safety Examination (included in the Practice Act) before taking radiographs
 - Documentation that gowns/gloves have been radiographed to check for defects (85kVp, 10mAs) annually (retain for one year)
 - Documentation that training conducted annually re: problems associated with radiation and available options for protecting the embryo/fetus (oral and written training required)
 - Dosimeter badges for **each** individual exposing radiographs monitored at a minimum quarterly. To be worn on thyroid shield when exposing radiographs, kept in one place away from radiograph machine when not being used (not kept on person). PPE = gown, gloves, thyroid shield required, glasses recommended.
 - Annual Report of Occupational Exposure provided to all staff being monitored on annual basis
 - Radiology log (for non-digital systems) in place and current (must list date, study, patient name, owner name, tech name, exposure factors). Note: a radiology log is not actually required, but is considered a good idea.

- Emergency Exposure Procedures in place
- Internal audit procedures in place

Required Postings: California Department of Public Health, Radiologic Health Branch - Post in radiology area:

- Standards for Protection Against Radiation (Notice to Employees) – [Form RH-2364](#) (*2015 Version)
- Radiation Safety Instructions
- California Radiation Control Regulation (relevant portions of [Title 17](#)) including [10CFR20](#).
- Radiation Emergency Procedures

Required Posting: California Department of Public Health, Radiologic Health Branch - Post in area leading to radiation area (not on the door!):

- “Caution X-ray Equipment”

Medical Waste Branch

- Use of a CDPH MWMP approved medical waste hauler:
<https://www.cdph.ca.gov/certlic/medicalwaste/Documents/MedicalWaste/2013/Haulist.pdf>
- Medical Waste Generator Registration: Veterinary practices must register with their respective health department medical waste management programs. Many counties defer to the state Department of Public Health for their program oversight, while other counties maintain their own medical waste management programs at the municipal level. To determine if your county is overseen by a local agency or the state, visit [this map](#) or access [this list](#). A list of local medical waste management program enforcement contacts can be accessed [here](#). Information on how to register can be found in Question 8.
 - Practices overseen by the state Department of Public Health Medical Waste Management Program (visit [this map](#) or access [this list](#)) must register using a form which may be accessed [here](#).
 - Practices overseen by the state Department of Public Health that use onsite steam sterilization, incineration, or microwave technology to treat medical waste must file a [different registration](#) pursuant to section 117925 of the California Health and Safety Code.
 - If your county maintains its own medical waste management program, then contact your local office to inquire about registration. A list of local medical waste management program enforcement contacts can be accessed [here](#).
- Biohazardous, Sharps, Trace Chemotherapeutic, Lab/ Pathology, and Pharmaceutical wastes are properly stored
- Written policy in place documenting method of disposal of each type of waste
- Biohazardous waste container have the universal biohazard symbol on them
- Sharps containers be of rigid construction and say: “SHARPS WASTE.”
- Pharmaceutical Waste be labeled: “INCINERATION- HIGH HEAT ONLY.”
- Trace Chemotherapeutic in special yellow bag- compliant with Medical Waste Management Act regulations.

DEA

- Current registration of practitioner if controlled substances are being used
- Separate registration for each principal place of business that a practitioner uses controlled substances
- Controlled drug logs (including Biennial Reconciliation Log and Dispensation /Logs) in place and current
- Schedule II drug records are kept separate from other scheduled drug logs (i.e: separate tab section in the same binder)
- Documentation of audits of drug stock vs. logs on a periodic basis (i.e.: quarterly.)
- Review medical records to check that doctors are recording actual dosages of controlled drugs used on every case
- Controlled drugs are maintained in secure, substantially constructed, locked containers. Schedule II drugs must be locked at all times except when in immediate use.
- Access to controlled drugs is limited to minimum number of staff requiring access for patient care
- Missing drugs have been reported to both the local DEA office and local police in a timely fashion. Significant loss of drugs due to theft or unaccounted reported online with [DEA form 106](#).
- Written employment application includes these questions for every candidate: 1) "Within the past five years, have you been convicted of a felony, or within the past two years, of any misdemeanor or are you presently formally charged with committing a criminal offense (do not include any traffic violations, juvenile offenses, or military convictions, except by general court martial)? If the answer is yes, furnish details of the conviction, offense, location, date, and sentence." 2) "In the past three years have you ever knowingly used any narcotics, amphetamines, or barbiturates, other than those prescribed to you by a physician? If yes, furnish details." The application should also advise the applicant that: 1) "Providing any false information or omitting information will jeopardize your position with respect to employment;" 2) "Information furnished or recovered as a result of any inquiry will not necessarily preclude employment, but will be considered as part of an overall evaluation of an applicant's qualifications. Information from any inquiries will be held in confidence."
- Signed authorizations are obtained from job applicants allowing inquires which may include: Local court inquiries, DEA field office inquiries, use of a background checking service.
- Every veterinarian who administers, prescribes, or dispenses any controlled substance is currently registered with the DEA (note that DVMs can administer and dispense from their employer's inventory without DEA registration, but are unable to write prescriptions for controlled substances unless registered themselves). DVMs are required to write a written prescription if a client requests one (vs. dispensing from the hospital itself).
- The hospital has a protocol for the proper disposal of expired or unused controlled substances via [Reverse Distribution](#) and staff is aware of this protocol if questioned during an inspection.

Department of Fair Employment and Housing

- Department of Fair Employment and Housing Written Harassment/ Discrimination Prevention Policy requirement: all California employers must adopt a written policy which complies with the [California Code of Regulations, Title 2, Section 11023\(b\)](#)

Department of Justice, State of California

- [State approved, tamper resistant Rx forms](#) are in use, as required for ALL scheduled drug prescriptions (these same Rx forms can also be used for non-scheduled drugs).
- All veterinarians are registered with the CURES Program. Registration as Dispensers with Department of Consumer Affairs licenses can be completed here: <https://cures.doj.ca.gov/registration/confirmEmailPnDRegistration.xhtml>
- CURES reports are being submitted electronically on-line **within 7 days** of a controlled substance being dispensed. Effective January 2011, Atlantic Associates became the vendor for CURES reporting. They can be contacted www.aaicures.com, at 800-539-3370 or at data@aainh.com

- ❑ Schedule II, III, and IV drugs that are dispensed to clients (i.e. that leave the hospital to be administered at home) must be reported to CURES, which must include the client's full name, gender, date of birth, address (but not phone), and the drug's National Drug Code (NDC) number – a 11 character code on the label. Compounded controlled substances are entered as all zeros (0). Date of birth must be for the HUMAN client, not the animal patient.
- ❑ Examples of dispensed drugs that require CURES logging include: morphine tablets (II), butorphanol tabs/injectable (IV), phenobarbital tabs. (IV), diazepam tabs. (IV), hydrocodone (II), hydrocodone combination products (II), and buprenorphine injectable (III), and Tramadol (IV). Fentanyl (II) patches *applied in hospital* do not require reporting (unless dispensed for home application by the owner). A list of scheduled drugs is available at <http://www.deadiversion.usdoj.gov/schedules/index.html>

Environmental Protection Agency

- ❑ Cal EPA number: All small quantity hazardous waste generators need a Cal EPA Registration number. Registration is free and is done by completing a [DTSC Form 1358](#). More information about Cal EPA ID numbers can be obtained [here](#).
- ❑ Written contingency plans in place for hazardous substances (formaldehyde solution, anesthetic gases, ether, radiographs, radiographic fix.)
- ❑ [Hazardous Waste Hauler](#) in place if needed.
- ❑ Biennial report for radiographic fix.
- ❑ Scavenging systems on anesthetic machines, adequate ventilation and documentation of staff training on machine maintenance.
- ❑ Machines checked periodically for leaks (preferably annually.)

Veterinary Medical Board

Demonstrate full compliance with the Minimum Standards set forth in the California Code of Regulations:
http://www.vmb.ca.gov/laws_regs/minstand_regs.shtml

Examples of more common compliance items include:

- ❑ California veterinarian licenses, RVT licenses, and Premise Permits must be current. ORIGINALS must be posted in a conspicuous location in the practice reception area. Copies are not permitted. A "Post It" note can be placed over the licensee address, but it cannot be permanently covered by pen or white-out.
- ❑ Veterinarians working relief or part-time at more than one veterinary premise need not have their original license posted, but they must carry their personal license ID card at all times.
- ❑ Without exception, only RVTs or DVMs are allowed to induce anesthesia (by injection or inhalation), place casts/splints, suture existing skin incisions, and/or perform dental extractions.
- ❑ Emergency clients are provided at the time of discharge with written discharge instructions and prognosis on a routine basis.
- ❑ Medical records consistently include: 1) correct name of DVM providing care; 2) dosage, route, and frequency of administration of all drugs administered to the patient; 3) written description of anesthetic technique used and monitoring equipment used; 4) tentative diagnosis; 5) prognosis; 6) description of surgical or other procedures performed; 7) client communication, 8) Initials or name of person making the entry.
- ❑ Doctors are routinely recording any specific diagnostic or therapeutic recommendations that a client declines.
- ❑ Doctors are routinely recording that the pet's condition, prognosis, and options for care were discussed and that the client gave approval to proceed.
- ❑ Without exception, clients are required to initial the legal releases and to sign when presented with estimates. Clients must be at least 18 years of age for legal releases to be valid.

- Radiographs may only be transferred from veterinarian to veterinarian (with client authorization.)
- Medications are not dispensed/ prescriptions are not written unless a veterinarian-client-patient relationship (VCPR) has been established, which requires an examination within the past year. (CVMA has a plaque that can be hung in the reception area to assist with informing clients of this.)
- For medications with potential serious side effects, doctors consistently document that clients have been advised of such potential side effects.
- Veterinary Assistant Controlled Substance Permit (VACSP) and LiveScan fingerprints for drug or alcohol related felony convictions on file for all unlicensed veterinary staff (“Veterinary Assistants”) who have access to controlled substances.
- Practice must be clean and sanitary at all times
- Reception area/ office area consistent with minimum standards
- Examination room consistent with minimum standards
- Adequate fire precautions present
- Surfaces/ counters must be made of a non-porous, cleanable material suitable for regular disinfection
- Surgery rooms are not “pass through”
- Sanitary surgery attire consistent with minimum standards
- Doors to surgery rooms meet minimum standards
- Doors on any cabinets/ shelves in the surgery room
- Surgery rooms only contain surgery-related equipment (no other storage)
- Ability to view radiographs in surgery room
- No sinks in surgery room
- Resuscitation bags and an assortment of endotracheal tubes available if anesthesia is taking place
- Anesthesia monitoring
- Total IV/ or SubQ fluids administered are noted in the medical record.
- Surgical packs contain both internal and external sterility indicators that have not been altered
- Every animal undergoing anesthesia has a physical exam conducted by the veterinarian and a written assessment/diagnosis recorded *no more than 12 hours prior to surgery*
- Separate refrigerator for medications
- Sterilization equipment is present and functional if sterile surgery is taking place
- Suitable lighting
- Suitable temperature/ ventilation
- Appropriate emergency medications current and available
- No expired medications on shelf
- Proper medical (biohazard, sharps, and pharmaceutical) waste storage and disposal
- Proper hazardous waste disposal
- Effective separation of animals in runs and kennels
- Functional isolation ward for animals with a suspected contagious illness
- Freezer suitable for holding deceased animals
- Laboratory services available
- Ability to take or have radiographs taken
- Adequate reference veterinary materials (library, computer access)

Required Postings: California Veterinary Medical Board

- Emergency Services Notice (near front entrance)
- Abandoned Animal Act notification (*2015 Version now required)
- Written Prescription Option (written notification required)
- Continuous Presence Not Provided (Notice of No Staff on Premises) (if applicable)
- Financial Interest Disclosure (if applicable)
- The **current original** of each doctor’s professional license is displayed in a public area.

- The **current original*** premise permit. For mobile vets, pocket copy is ok.
- The **current original*** of each RVT's professional license is displayed in a public area.
- The **current original*** of each Veterinary Assistant's Veterinary Assistant Controlled Substance Permit

*If personal addresses displayed on the license(s) are not to be viewed by the public, then this information is covered by a *removable* sticky note (it is illegal to permanently deface the license itself).

To assist in VMB Minimum Standards Compliance, reference their [Hospital Self-Evaluation Checklist \(2014 Version\)](#)

Miscellaneous State and County Animal Regulations

- Veterinarians are mandated by law to report to their local animal control agency: 1) any dog injury or death that may be related to a staged animal fight; 2) reasonable suspicion that an animal has been a victim of abuse or cruelty (as prescribed by Section 597 of the Penal Code); and, 3)
- Veterinarians and staff recognize a duty to report diseases on the CDFA List of Reportable Conditions. A current list can be accessed at:
http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CCAQFjAA&url=http%3A%2F%2Fwww.cdfa.ca.gov%2Fahfss%2Fanimal_health%2Fpdfs%2FCA_reportable_disease_list_poster.pdf&ei=BCIuPoQTQsIGQBA&usq=AFQjCNF9XATzQvGIwM_JRIaC4_2RgGxAJw&bvm=bv.83829542,d.cGU

Required Employee Pamphlets (to be given to employees at the time of hire)

- Time of Hire Workers Compensation (*2014 Version)
- Paid Family Leave (*2014 Version)
- Sexual Harassment in the Workplace (*2014 Version)
- State Disability Insurance
- For Your Benefit
- Affordable Care Act Options for Health Coverage Notice
- DLSE Notice to Employees (includes California Paid Sick Leave written notification)

(All pamphlets are available through the CVMA online store: www.cvma.net then click on the "Products" tab.)