



4600 Cox Road, Glen Allen, VA 23060
(800) 431-1270 Fax (804) 527-7966

Speech/Hearing Pathology & Occupational Therapy

(To be attached to ACORD applications)

NAMED INSURED: _____

- 1. What percentage of clients are elderly? _____
- 2. Is the facility fully wheel-chair accessible? Yes No
- 3. Are all staff members & volunteers trained in getting clients in & out of wheelchairs properly? Yes No
- 4. Is the facility accredited by the appropriate accrediting organization? Yes No
If not, has it ever been declined for accreditation by any organization? Yes No
- 5. Are all clients evaluated by a physician prior to receiving therapy? Yes No
If not, explain: _____
- 6. Are all services delivered by registered, certified, licensed or degreed personnel? Yes No
If not, does one of the above directly supervise all services? _____
- 7. Are young clients required to be accompanied by a parent or guardian during treatment? Yes No
- 8. Does the insured make appropriate referrals for treatment outside of their specialties? Yes No
- 9. Does the insured transport clients to and from the center? Yes No
- 10. Are all treatment plans and services performed kept in writing? Yes No
- 11. Are all records kept in fireproof cabinets? Yes No
- 12. Are there off-premises activities and field trips? Yes No
If yes, describe: _____
- 13. Does the insured perform ANY invasive procedures (for example, nasendoscopies)? Yes No
- 14. Is all equipment, electrical or otherwise, maintained and inspected regularly? Yes No
If yes, are maintenance records kept in writing? Yes No
- 15. Are all licensed therapists members of a professional association? Yes No

Additional Comments: _____

