

APPENDIX G

DOH INSPECTION FORM

NEW YORK STATE DEPARTMENT OF HEALTH
Bureau of Funeral Directing

Funeral Firm Inspection Report

Routine Inspection
 New Firm Inspection
 Change of Address Inspection
 Complaint Investigation
 Registered Resident Initial Inspection
 Follow-Up Inspection

Inspection No. _____
 Date of Inspection _____

Firm Name _____
 Registration No. _____ Date of Last Inspection _____
 Firm Address _____ County _____ Zip _____
 Manager: Name _____ Present Yes No
 Status Code Explanation: 1. Compliance 2. Non-Compliance 3. Not Applicable

HEALTH AND SANITATION	Removal Vehicle	Signature and printed name of funeral director/undertaker (2)
Embalming and Preparation Room	Type used:	Name of deceased together with place and date of death (3)
Preparation Room <input type="checkbox"/> Yes <input type="checkbox"/> No on Premise If no, where is preparation done?	Remains obscured from public view during transportation 13.2	Price of funeral together with price of each item of service and merchandise actually to be furnished (4)
Floors, Walls & Ceiling: smooth, tile or other impervious washable material 77.5 (c) (2) (i)	FACILITIES AND EQUIPMENT	Explanation of charges (5)
Floors, Walls & Ceiling: Clean & Sanitary Condition 77.5 (c) (1)	Chapel If new business at least 300 square feet 77.5 (d) (1)	Dated signature of person making arrangements (6)
Lighting - adequate 77.5 (c) (2) (ii)	Arrangement Office If new business used exclusively for making funeral arrangements 77.5 (d) (2)	Written disclosure of interest 77.12 (t)
Ventilation - adequate 77.5 (c) (2) (iii)	Funeral Merchandise	Funeral bills rendered to customers 78.1 (d) (2) (ii)
If new business at least 120 square feet 77.5 (d) (3)	Casket Selection Room: <input type="checkbox"/> Yes <input type="checkbox"/> No No. of caskets displayed: _____	Casket invoices or delivery copies 78.1 (d) (2) (iii)
Instruments and Equipment Water Supply	Actual retail price displayed on funeral merchandise offered for sale 77.12 (u)	Outer interment receptacle invoices or delivery copies 78.1 (d) (2) (iv)
Hot and Cold Running Water 77.5 (c) (2) (iii)	Firm (General)	Receipts or cancelled checks for cash advance items 78.1 (d) (2) (v)
Instruments: Clean & Sanitary 77.5	Business telephone in working order at registered address 77.5 (c) (3)	Customer's designation of intentions 78.3
Preparation Table: Nonporous surface 77.5 (c) (2) (vi)	Sign indicating true firm name conspicuously displayed 77.5 (c) (4)	PRICE DISCLOSURE
Preparation Table: Clean & Sanitary 77.5	Listing, publications and advertising reviewed indicate true firm name 77.5 (c) (5)	Telephone disclosure of prices 79.1
Removal Stretcher/litter: 13.2	Firm certificate of registration conspicuously displayed 3441 (c) PHL	Casket Price List 79.2
Removal Stretcher/litter: with waterproof pouch 13.2	License of manager conspicuously displayed 3441 (d) PHL	Specify format: _____
Removal Stretcher/litter: Clean & Sanitary Condition 77.5	RECORDS AND ANCILLARY DOCUMENTS	Outer Interment Receptacle Price List 79.3
Refrigeration Unit: Clean & Sanitary Condition 77.5	Itemization Statements	Specify format: _____
Chemicals	No. of cases for four previous years:	General Price List 79.4
Plainly Marked 77.10 (d)	Year _____ No. _____	Alternative Pricing Methods 79.5
Privacy	Number of itemization statements in sample reviewed _____	Retention of price lists 79.7
Preparation performed in privacy 77.10 (a)	Number of itemization statements reviewed in subsample _____	REMARKS:
Doors tight closing and windows maintained so to obstruct any view into preparation room 77.5 (c) (v)	Format 78.2	_____
Usage	Consecutively numbered and maintained in numerical order 78.1 (d) (1)	_____
Preparation room used exclusively for preparation of remains 77.5 (c) (i)	Content of statement properly completed: true firm name and address 78.1 (b) (1)	_____
Waste		_____
Preparation room equipped with proper waste receptacles 77.5 (c) (2) (vii)		_____
Blood and waste disposed of in sanitary manner 77.10 (c)		_____

Order to Correct Violation(s) Issued: No Yes If yes, number: _____

Printed Name of Funeral Directing Investigator _____ Signature of Investigator _____ Date _____

Acknowledgement of Receipt I have received this inspection report and I understand the finding of this inspection.
Printed Name _____ Signature _____ Date _____

A NON-COMPLIANCE IN A SHADED AREA WILL RESULT IN THE ISSUANCE OF AN ORDER TO CORRECT VIOLATION(S).
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Appendices

Funeral firms are inspected to ascertain if the firm is complying with the Laws, Administrative Rules and Regulations governing the business and practice of funeral directing.

The primary goal of the inspection is to establish that public health is not being compromised. Emphasis is placed on the manner in which human remains are transferred, prepared and held for disposition. The facilities are inspected to assure they are maintained in a sanitary manner so as not to create a public health hazard.

The inspection also will focus on the manner in which statements and ancillary documents are completed and maintained by the funeral firm for compliance with Department of Health regulations governing same.

CATEGORIES OF INSPECTION

Routine (to be completed once every three years), New Firm, Change of Address, Complaint Investigation, Registered Resident Initial and Follow-up.

PROCEDURE

The investigator, accompanied by a licensee employed by the firm will inspect the facilities, equipment, statements and ancillary documents and price lists for compliance.

HEALTH AND SANITATION

Embalming and Preparation Room
Water Supply
Instruments and Equipment
Chemicals

Privacy
Usage
Waste
Removal Vehicle and Equipment

FACILITIES AND EQUIPMENT

Chapel
Arrangement Office
Casket and Outer Interment Receptacle Display
Business Telephone

Sign
Certificate of Registration
License of Registered Manager

RECORDS AND ANCILLARY DOCUMENTS

Statements
Funeral Bills to Customers for Funeral Merchandise and/or Services
Casket Invoices or Delivery Copies
Outer Interment Receptacle Invoices or Delivery Copies
Receipts or Cancelled Checks for Cash Advance Items
Customer's Designation of Intentions for Disposition of Remains

PRICE DISCLOSURE

Telephone Disclosure
Casket Price List
Outer Interment Receptacle Price List
General Price List
Alternative Pricing Methods

The investigator will scan all itemization statements to ascertain statements are accounted for, consecutively numbered and the correct format is being utilized. A random sample of completed itemizations statements, not to exceed 25% and not less than 10%, will be selected by the investigator for review. The selection shall be a representation of all arrangers employed by the firm and a representation of all services offered by the firm (alternative, traditional and limited).

The investigator shall also review a subsample of the funeral bills, casket invoices or delivery copies, outer interment receptacle invoices or delivery copies, cancelled checks/receipts for cash advance items and customers designation of intentions for disposition of remains. The subsample is not to exceed 25% of the selected sample of itemization statements reviewed and shall not be less than 10% of the selected sample.

INSPECTIONS REPORT

At the completion of the inspection, the investigator shall provide a copy of the completed inspection report to the firm representative and the representative shall sign an acknowledgement of receipt for the report. The investigator shall explain all finding(s) of the inspection.

The white copy of the inspection report along with a blank itemization statement and a copy of the general price list (as provided to customers) shall be forwarded to the central office of the Bureau of Funeral Directing by the investigator.

If, during the course of an inspection the investigator ascertains the funeral firm is not in compliance, the following remedies shall be used:

DEFICIENCIES:

Observed areas of deficiency will be brought to the attention of the funeral firm by notation on the inspection report. Deficiency(ies) are to be corrected by the firm.

ORDER TO CORRECT VIOLATION(S):

The purpose of an Order to Correct Violation(s) is to inform the funeral firm of the aspects of its business and practice of funeral directing which are not in compliance with the laws, rules and regulations. The investigator will identify the areas of noncompliance and the specific date by which the firm must certify to the Department of Health, Bureau of Funeral Directing, that the cited area(s) have been corrected and the firm is in compliance. Depending on the nature of noncompliance, a follow-up inspection by the Department of Health may be made.

In the event of serious violations or the observance of a pattern of violations, the investigator may conduct a more comprehensive inspection or initiate an investigation. Investigations of this nature may lead to formal disciplinary action.