# THE SURVEY PROCESS

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## LICENSURE SURVEY

- WHO
- WHAT
- WHEN
- WHERE
- HOW

#### WHO

- Surveyors experienced in the survey process
- Certified as LTC surveyors
- Multiple program surveyors
- Ability to interpret regulations, think independently and reason
- Nurses, Social Worker, Dietitian (Life Safety Specialist)
- Supervisors, Regional Administrator, Support Staff (Director of Licensure, Director of HCF)

## WHAT

- Initial:
- To confirm compliance with regulations for opening
- Annual:
- To reaffirm compliance with regulations
- Complaints:
- In response to & to investigate a complaint
- Renovations & Additions:
- To confirm compliance for something changed or new

#### WHEN

- Annually (9 15 months)
- Initials (At your request)
- Conversions (Really an Initial)
- Complaints (According to classification)
- Renovations & Additions (Coordinated with facility)
- Annuals and Complaints may be @ any hour

### WHERE

1. Scheduled by Supervisor

- 2. File Review:
- Last survey
- Complaints investigated
- Pending complaints
- Facility changes

### Where cont.

- 3. On Site
- Tour & Observations
- Interviews
- Resident record review
- Document review
- Exit Conference

### Where cont.

- 4. Office
- Write deficiencies & submit package
- Supervisor review
- Support Staff mail deficiencies
- Facility submits PoC (accepted or rejected)
- 5. Follow Up (On site or desk review)

## HOW

Survey is systematic but flexible

### HOW cont.

- TOUR (all areas)
- resident rooms
- bathrooms
- Kitchen, dining & food storage
- common areas
- laundry
- secure unit
- medication storage
- trash storage
- chemical storage
- Entrance & Exit

- OBSERVE (all time)
- postings
- residents
- employees
- visitors
- meals being served
- medications being given
- Infection control issues
- pets, insects & vermin
- safety
- interactions

### HOW cont.

- Interview (everyone)
- Residents
- Employees
- Visitors
- Complainants
- APS
- Police
- Family members
- Contracted workers
- HCF staff

- About (everything)
- General conversation
- Specific questions
- Clarification
- Insight
- Knowledge
- History

## HOW: Document Review

- Policies & Plans (Especially new or problems)
- Responsibilities, Grievance and Complaints policy
- Performance Improvement Plan
- Smoking policy
- Charity care
- Pet Management Plan
- Residents Rights
- Advance Directive
- Evacuation, Fire & Disaster Plans
- Health Care Decision Making Policy
- Infectious & Hazardous Waste Policy

- Contracts & Agreements
- Licensed Nurse
- Dietitian or Food Management Company
- Admission Agreement including Transfer & Discharge
- Infectious Waste transport/disposal
- Communications & Reports
- Facility Changes (CHOW, Administrator, Added service)
- Inspection Report file
- Waivers

#### Employee Files

- Age of direct care staff
- License or Certification (if applicable)
- Abuse Registry
- Communicable disease
- Influenza vaccine & education; IC & Hand Hygiene education
- Logs & Postings
- Resident Log
- Postings (Abuse, Charity, Insurance, HCF Complaint #, Smoking, License)

#### Resident records

- Organized, Entries legible, dated & signed,
- Personal record: SS #, veteran status, marital status, age, sex, health ins, photograph, contact person(s), physician, hospital, pharmacist, NH, emergency instructions, money & valuables entrusted, admit date, transfer date, discharge date, forwarding address, admission agreement, advance directive, Rights
- Medical record: Medical history, consultations, orders, care/services provided, medication administration & errors, special procedures, notes, vaccinations, assessment, plan of care

- Secure Unit (12 months of specific information)
- IDT evaluations (prior to admit & quarterly)
- Number of Deaths & Hospitalizations with DX
- Unusual Incidents & complications
- Daily staffing pattern
- Calendar of group activities & attendance (previous 3 months)
- List of decubitus and nosocomial infections
- Annual 100% unit staff inservicing: Alzheimer & related disorders causes, progression & management; Dealing with dysfunctional behavior & catastrophic reactions; safety risks; Assistance with ADL's; Communicating with families & others

#### Poc

#### • Plan of Correction Must Include:

- How the deficiency will be corrected
- The date the deficiency will be corrected
- Measures or Systemic changes to ensure practice does not recur
- How corrective action will be monitored
- Respond on the right side of the deficiency form
- Respond within 10 days
- Sign & date the response
- Must send the original

#### • FOLLOW DIRECTIONS IN THE LETTER

### The Process

- Schedule & Plan the survey
- Conduct survey
- Document survey
- Mail survey
- Review & accept or reject the PoC
- Follow Up survey

## QUESTIONS???

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