

Successful Survey Strategies

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Provider Insights



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Survey Stress

We know the survey process can be stressful due to the unannounced nature of the survey, the increase in workload due to the process and the negative-based focus of the survey on areas of deficient practice not our good practices.

Understanding how the survey process works can be beneficial in decreasing the stress that we feel.

Preparing ahead of time for the survey process is the answer!!

CMS Surveyor Off-site Pre-Survey Tasks

- The offsite preparation task has been refocused to optimize surveyor time in planning for the HHA survey and to shift the focus of the offsite review to potentially avoidable events.
- Surveyors will review 3 agency specific reports from iQIES prior to survey:
 - Risk Adjusted Potentially Avoidable Event Report (12 Months)
 - Potentially Avoidable Event Report: Patient Listing (12 Months)
 - Agency Patient-Related Characteristics Report

CMS Surveyor Off-site Pre-Survey Tasks

- ****Agencies should be pulling these reports on a scheduled basis as part of the QI process. Utilize the Characteristics report to determine areas low when compared to the national average as potential projects and Patient Listing report to review for potential areas that could have been potentially avoided to determine if changes or improvements are needed before the survey occurs. This avoids a deficiency!!****

Risk Adjusted Potentially Avoidable Event Report:

Surveyors will utilize the Risk Adjusted Potentially Avoidable Event Report to:

- identify potential areas of concern for the survey
- identify all potentially avoidable events. All incidents contained within the report time period will be used as the universe.
- The closed record sample is selected during the pre-survey preparation.

Potentially Avoidable Event Patient Listing Report:

This report is a companion report and provides the names of the patients who experienced the events noted in that report.

- Patients listed under multiple areas in the above report will be selected by surveyors as a priority for discharged record review.
- If an insufficient number of patients are listed in the Potentially Avoidable Event Report to meet the number of closed records required for the survey sample, additional records may be added to the sample from the list of patients discharged from the agency for the 6 months prior to the survey.

Agency Patient-Related Characteristics Report:

Provides a high-level overview of the HHA patient demographics, home care diagnoses, and agency statistics. Surveyors will review to identify potential focus areas of concern where the agency's indicators exceed the national reference in the areas of:

- Acute Conditions
- Patient Diagnostic Information
- Home Care Diagnoses

Surveyors will select patients for review and home visits during the survey who be associated with these areas of concern, focusing on patients who are listed under multiple areas on this report.

Surveyor Computer Access

- This is a MUST!! The surveyors cannot complete chart audits without having access to EMR..... which leads to delay in survey work..... which leads to surveyors being in your agency longer than needed.....
- Work with your IT before the survey begins to ensure ease in this process.
- Know who to contact with knowledge and approval to set up
- Have IDs preset for multiple surveyors to speed up the process.

Information Gathering

- Information is now being entered directly into iQIES: Upon entrance, the surveyor may request the Administrator's email address and send an email with attached documents. This email exchange will be used for the transferring of the items requested.
- The surveyors will provide a list of documents needed and the requested documents will need to be provided electronically. Predetermination of how your SA is accepting documents and how your agency will comply in secure manner will be important- seek legal advice prior to survey to know how you plan to make this happen if you do not currently use an encrypted or secure email system.

Information Gathering

- Many of the reports/documents can be ready and waiting for the survey entrance to help with the inevitable stress of the process. Items can be stored in a hard copy binder and scanned in when surveyors request, stored on a memory stick for ease or stored electronically in a file and attached when surveyor requests.
- This will help decrease the stress associated with survey and help move things along more quickly for the surveyors.
- Some items will be essential to have ready within 1 hour of initiation of the survey to avoid delays:

Items Requested: Unduplicated Skilled Admission Report

This report drives the survey process so quick response is a must!

The surveyor will give you the dates to run the report during the entrance conference so you will not be able to run this report ahead of time.

This is not a skilled census request, so be sure to know how to run this report in your EMR system.

The report needs to identify each patient with at least one admission that falls on or between the dates provided by the surveyor. If the patient was admitted more than once during this time period, make sure they are only counted once in the number given to surveyors.

Items Requested: Visit schedules:

- Will be needed for the first week of the survey for nurses (RN and LPN), therapies (including PT, PTA, OT, OTA, ST/SLP, MSW)- if surveyors are unable to schedule enough visits with nursing/therapies, they may request schedules for aides.
- The schedules can be updated to reflect the type of service provided by the clinician (initial assessment, DC, ROC, medication set up, IV therapy, supervisory, wound care, etc.) before providing to the surveyor or a knowledgeable staff member can sit down with the surveyor to verbally exchange this information.
- Hint: To speed up the process for HV selection, notify your clinicians as soon as the surveyors arrive and request an updated account of what is still left for visits on the day of arrival as the surveyors most likely will arrive part way through the morning.

Items Requested: Current patients, including SOC date, Pay Source, Primary Diagnosis and Services

- Surveyors will use this list to choose open patient records for review with a variety of FS, diagnoses and services.
- Know how to pull this report in your EMR system prior to survey- Make sure you are updating the current census list in your EMR routinely to make sure you always have an accurate list of current patients.
- If agency operates branches, be sure to print a separate census list as described above for the parent office and each branch office.
- It is acceptable to provide this to the surveyors in multiple reports if your EMR does not have one report with all the requested information.
- When closer to the time for survey, routinely pull this report- ensure it is updated and print for binder, save to a memory stick or add to your electronic survey file.

Items Requested: List of patients discharged in the past 6 months, including SOC date, DC date and reason for DC

- Know how to pull this report in your EMR system prior to survey- Make sure you are updating the discharged patients timely in your EMR routinely to make sure you always have an accurate list. If using numbered codes for reasons on your report, make sure to attach a ledger identifying what each code number is.
- Surveyors will use this list to supplement the off-site choices for closed records
- If agency operates branches, be sure to print a separate discharge list as described above for the parent office and each branch office.
- When closer to the time for survey, pull this report- ensure it is updated and print for binder, save to a memory stick or add to your electronic survey file.

Items Requested: List of patients with ROC or SCIC in past 6 months with dates

List of all patients (may currently be open or closed) resuming care following inpatient stay and/or having an identified significant change in condition in the past 6 months.

- Surveyors will use this list to choose a variety of patients as part of the survey process.
- If agency operates branches, be sure to print a separate discharge list as described above for the parent office and each branch office.
- When closer to the time for survey, pull this report- ensure it is updated and print for binder, save to a memory stick or add to your electronic survey file.

Items Requested: List of agency staff, direct and contracted, including titles and DOH

- Contact telephone numbers will be helpful to the surveyors for interviews- this helps decrease the need for your staff to drive into the office for interview and keeps the survey moving.
- Be sure to notify your staff members that the survey is taking place, provide the names of the surveyors and let them know they may be contacted by surveyors for interview purposes- this alleviates any uncertainty about who/why they are being contacted.
- Surveyors often make telephone calls after leaving the office for the day as this does not interrupt patient care. If your agency policy requires or any of your staff would prefer contact during working hours only, be sure to let the surveyors know this.

Items Requested: List of agency staff, direct and contracted, including titles and DOH

- Identify staff by branch office if they work specifically for one
- Keep both staff lists up to date- and either print and keep in paper binder or add to memory stick or add to electronic survey file.

Surveyors use the staff lists for:

- Staff identification when performing chart review/interviews
- Staff identification when surveying for background check reviews and Emergency Preparedness interview/training tasks

Items Requested: Organizational Chart

- Provide the chart that best describes how the home health department is organized if you are part of a larger organization
- Make sure it goes from Administration down to the patient level
- Print and include in paper binder or attach to memory stick or electronically to survey file.
- Keep updated if names of staff are included on chart as staff change does occur.

Items Requested: Geographic Service Area Map

- If you have branch offices, identify the counties services by each by shading areas with different colored highlighters with a code added at the bottom of the page or identify in some other way with a code added.
- If you service only partial counties, you may attach a written word document identifying the approved townships in the partial counties.
- You may print the map and have it prepared and waiting prior to survey entrance to help decrease the number of tasks required on first day of survey.

Items Requested: Agency Policies

1. Comprehensive Assessment policies- including OASIS and Non-OASIS required- include SOC/ROC/ FU/ SCIC/ TIF/DC policies
2. DRR policy
3. Protection/Retention Clinical Records- hard copy and electronic
4. Timeliness documentation
5. Complaint/grievance policies
6. Alleged staff abuse policies
7. Plan of Care policies- anything related to completion/review/content/signatures
8. Home Health Aide supervision/care plans
9. Timeliness of Initiation of Therapy Services and ancillary services
10. Wound Assessment/Measurements
11. Infection Control- including handwashing, laptop/tablets, home health bag/reusable equipment

Items Requested: Other Documents

- An admission packet used by clinicians for review
- Evidence the governing body appointed the Administrator
- Evidence who acts in absence of the Administrator
- Any investigations since the last survey re: alleged staff abuse

- All policies and other requested items can be stored in the paper survey binder, stored on a memory stick or stored in an electronic survey file and provided by email if requested. This will help decrease stress of the first day of survey.

Other Ways of Preparing for Survey

- We have already discussed having documents/reports/policies we know will be requested ready prior to the survey entrance.
- Recertification surveys for Home Health can occur between 1-3 years from a previous recertification survey. Complaint investigations can occur anytime a complaint is lodged with the SA.
- To ensure the best survey outcomes you need to make sure staff are following agency policies and regulatory requirements at times other than right before a survey.

Other Ways of Preparing for Survey

- Ways to ensure staff understanding and compliance:
- Clinical record audits performed internally or externally by a home health consultant- remember surveyors can go back in the clinical record to the time of the previous survey.
- Co-visits with your staff- completed either by you or by a home health consultant.
- Mock surveys- mimicking the survey process either internally or by a home health consultant.
- Annual review and update of all patient care policies.

Onsite Survey Tasks- Home Visit

- Make sure your staff are familiar with infections control policies before the survey begins
- Co-visits by agency administrative staff can help lessen the anxiety of the staff member being watched by another person and help determine the staff member's infection control competency or incompetency
- Medications will always be reviewed by the surveyor every visit- make sure to clinicians are familiar with DRR policies and get used to assessing for new medications each visit as the surveyor will be observant of such in the environment and by interview of the patient/caregiver.
- Ensure the clinician always has a POC to refer to during the home visit to address each intervention as ordered by the physician.

Self- Identification of Deficient Practices

Any deficient practice identified during pre-survey preparation cannot be cited at the time of the survey if:

- An action plan (similar to Plan of Correction) is initiated by the agency.
- The action plan will identify:
 - deficient practice found
 - actions put into place to correct the practice
 - who will monitor to ensure it is corrected
 - date will be corrected by- make this date reasonable, considering the time to educate staff to the changes

Self- Identification of Deficient Practices

- If the action plan corrects the deficient practice, the surveyors should not cite the deficiency. If the deficient practice continues, despite the changes made, then the surveyors may cite the deficiency.
- The key to the action plan is making sure you have time to correct prior to the survey- routine monitoring by the agency or a home health consultant will allow this to happen. Waiting until last minute will not work!
- Be upfront about any action plans for self-identified issues- provide the action plan and identify the date of compliance so the surveyors do not waste their time looking for compliance prior to the corrected date.

Actions of a Prudent Home Health Agency™

1. Understand the survey process.
2. Be prepared by having routinely requested reports and documents ready to present prior to survey.
3. Prepare staff for the survey process ahead of time to ensure they know their role in the process and feel comfortable participating.

Questions?



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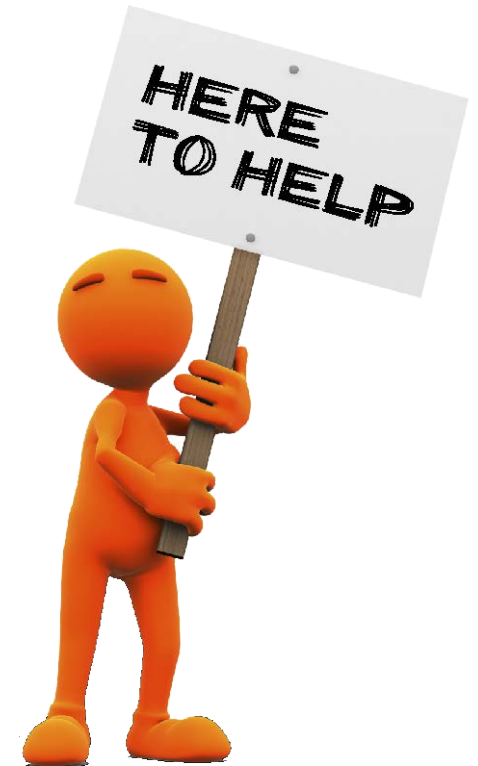
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