

SURVEY SUCCESS: DEPARTMENTAL TIPS AND PEARLS FOR EXCELLENCE IN LONG-TERM CARE COMPLIANCE

2024 ANNUAL PROVIDER MEETINGS



1

OBJECTIVES

- Explain the key departmental regulatory standards and guidelines that skilled nursing facilities (SNFs) must adhere to during surveys.
- Outline strategies and best practices for maintaining continuous departmental survey readiness within SNFs.
- Discuss departmental best practices to identify areas of improvement



2

REGULATIONS

- CMS State Operations Manual Appendix PP-Guidance to Surveyors for Long Term Care Facilities (“F” Tags)
- State Operations Manual Appendix Z-Emergency Preparedness for All Provider and Certified Supplier Types Interpretive Guidance (“E” Tags)
- 2012 Life Safety Code Healthcare (“K” Tags)
- Division of Regulation and Licensure Section for Long-Term Care Regulation Licensure Regulations Manual (“A” Tags)



3

DEPARTMENTAL TIPS AND PEARLS



4

THINK SURVEY READINESS: SURVEYOR TASKS

MANDATORY TASKS

- Surveyors are required to complete the following mandatory tasks for each survey conducted. The mandatory tasks include review of the following target subject areas:
 - SNF beneficiary notification review
 - Dining Observation[#]
 - Infection control^{**}
 - Kitchen
 - Medication administration^{**}
 - Medication storage and labeling^{**#}
 - QAPI/QAA
 - Resident council interview[#]
 - Sufficient and competent nurse staffing^{**}

** Nursing focused

Discretionary Starting 11/21/21 (QSO-22-02-ALL)



TRIGGERED TASKS

- In addition to the mandatory tasks, there are triggered tasks to be completed.
- During the standard survey process, these tasks are triggered when surveyors identify concerns with these specific areas:
 - Environment
 - Personal funds
 - Resident assessment
 - Binding arbitration agreement

5

ADMINISTRATION

PLAN, REVIEW, PREPARE

- Review Regulatory Standards
- Review three prior survey cycles (*all survey types*) for trends and ongoing compliance
- Prepare the team
- Inspect the Facility
- Review Policies and Procedures
- Regular rounding schedule
- Ensure survey readiness book is current and in order
- Visualize your Medicare/Medicaid posting to ensure it is in place
- Visualize your Survey results binders to make sure they are up to date, posted and available
- Ask QIPMO for a **FREE** mock survey



6

NURSING

- Audit all clinical records to ensure quarterly assessments are done for each department
- Audit all orders (physician, diet, labs, radiology, etc.) for accuracy
- Review past 6 months pharmacy recommendations to ensure completion and follow-up, including gradual dose reduction (GDR)
- Review past 6 months fall logs, ensure care plans show intervention(s) after each fall
- Review residents with pressure ulcers/injuries
- Review past 90 days of discharges including acute transfers
- Review care plans to ensure interdisciplinary, person-centered with psychosocial needs addressed



7

NURSING

- Review residents receiving hospice care
- Review weight loss for past 30, 90, and 180 days (5%, 7.5% and 10%)
- Review all residents with daily or weekly weight orders
- Review all residents with orders for fluid restrictions
- Review bath records, skin assessments, MAR/TAR
- Review infection control program
- Review TB testing on residents ^{AND} employees
- Review immunizations



8

NURSING

- Review residents on oxygen
- Review residents with catheters
- Review residents receiving dialysis
- Review residents with side rails or assist bars assessments
- Review residents who smoke for proper assessments
- Review triggers for each resident on QM/iQIES report
- Review resident preferences (interdisciplinary team)
- Review your Bowel and Bladder assessments
- Review residents with enteral feedings



9

FOOD SERVICES

- Audit diet orders vs. tray cards to ensure they match
- Review past 6 months of RD recommendations to ensure follow up was completed
- Observe meals on a regular basis
- Audit food and beverage temperatures with test trays
- Audit daily/weekly/monthly cleaning tasks for completion
- Audit medical record to ensure food preferences are honored
- Inspect and observe
 - Food, supplies, and chemical storage areas (dry and refrigeration (*are food items labeled and dated?*));
 - Preparation;
 - Distribution;
 - Handling;
 - and Sanitation Practices
- Ensure proper temperatures are maintained in all refrigeration appliances
- Ensure proper temperatures are maintained during ware washing (machine and manual)



10

SOCIAL SERVICES ^{and} ACTIVITIES

SOCIAL SERVICES

- Review all code statuses
- PASSR determination
- Review NOMNC and ABN processes
- Ensure that Ombudsman is being notified monthly of all discharges and notified immediately of emergency discharges
- Review grievance log
- Review personal property inventories
- What role do you play in obtaining equipment or supplies needed by the resident to participate in activities of choice?

ACTIVITIES

- Review activity documentation
- Review resident council minutes and concerns
- Review how residents are informed of the activity program schedule
- Ensure that activities are compatible with the resident's individual physical and mental capabilities
- Review resident participation
- Ensure the activity area has sufficient light and space for the residents to complete activities



11

MAINTENANCE

- Building information-Facility layout
- Emergency Plan and In-service Records
- Pest Control
- Fire Drills
- Systems Out of Service (Fire Watch)
- Fire Alarm System/Automatic Dialer
- Smoke Detector Sensitivity Testing
- Battery-operated Smoke Alarm Testing
- Sprinkler System/Fire Pump
- Kitchen Hood System
- Portable Fire Extinguishers
- Call Device Functioning
- Review frequently cited deficiencies list
- Emergency Generator
- Battery-operated Emergency Lights/EXIT Signs
- Proper lighting levels
- Interior Finishes/Decorations/Drapes & Curtains
- Water temperatures maintained
- Handrails accessible and secure
- LSC binder – everything in one place



12

HOUSEKEEPING *and* LAUNDRY

HOUSEKEEPING

- Homelike environment
- Ensure cleaning schedules are followed
- Ensure deep cleaning of resident rooms and common areas is completed according to schedules
- High-touch surfaces cleaned at least daily
- Proper labeling and storage of chemical bottles
- Train staff on contact time meaning
- Ensure chemicals used for disinfection are appropriate (EPA Lists)



LAUNDRY

- Ensure linens are free of wear and tear
- Linens are covered during transport
- Clothing items have names on them
- Dryer vents, traps, and back are clean and free of lint
- Chemicals are sufficient for disinfection (when needed)



13

BUSINESS OFFICE *and/or* HUMAN RESOURCES

BUSINESS OFFICE

- Ensure access to personal funds (evenings? weekends? holidays?)
- Ensure funds held on site are safeguarded (cash/petty cash)
- Maintain a separate accounting for each resident
- Funds maintained in an interest-bearing account when required
- Review surety bond
- Ensure Medicaid residents are notified when the account reaches \$200 of the resource limit
- Ensure monthly reconciliations are completed for resident personal fund accounts



HUMAN RESOURCES

- Review Education/In-services for past year-skill checks completed per facility assessment
- Ensure each CNA has 12 hours of documented annual training
- All required employee screenings are complete (criminal background check, EDL, CNA registry (all employees), etc.)
- Maintain a list of employees hired since the last survey



14

TAKE AWAYS... PREPARATION IS KEY

- USE ALL AVAILABLE TOOLS:
 - Review prior survey results
 - Facility Assessment
 - Facility/Resident Level QM reports
 - Critical Element Pathways
 - QIPMO Resources and Survey Manual
- PRACTICE! PRACTICE! PRACTICE!
 - Conduct mock surveys—internal or schedule with QIPMO
 - Review abuse policies and reporting with staff
 - Monitor infection control practices
 - Perform resident care observations/audits
- GO INTO THE FIELD:
 - Get out on the floor to observe and perform frequent rounds
 - Monitor call lights
 - Observe a medication pass, treatments, meal delivery, and/or transfers
- TAKE ACTION:
 - Develop a year-round survey preparation program
 - Tackle any issues you have identified quickly via your QAPI program
 - Involve each staff member in process improvement and consistency to facilitate compliance



15

7-WEEK SURVEY PREP GUIDE



16

WEEKLY MONITORING

- Repeat every 7 weeks if no survey
- Negative findings-Do a PIP and increase monitoring frequency
 - Review/audit of Med rooms, med carts, Insulin labeling dated, expired medications, cleanliness.
 - Review of temp logs in all areas.
 - Review of current wounds, weights, incidents for completion/compliance (May use audit tools).
 - Review of resident restrooms for labeling (if applicable), tubing (if applicable), cleanliness, chemicals.
 - Review of bathing areas for chemicals, locks, cleanliness.
 - Review of areas containing chemicals for locks, labels, and proper storage.
 - Audit of call lights to ensure proper functioning and free of safety concerns.
 - Review of fridges for labeling/dating/temp logs.
 - Review of high-risk kitchen areas: drawers, utensils, scoops.



17

WEEK 1

- Update CMS 802 Resident Matrix . Take it to morning meeting each day to keep it current and ready for entrance. **MDS**
- Ensure survey readiness book is current and in order **Administrator**.
- Visualize your Medicare/Medicaid posting to ensure it is in place **Administrator**
- Visualize your Survey results binders to make sure they are up to date, posted and available **Administrator**
- Ensure all residents have a current CARE assessment and review residents with a current Level II or
- PASSR determination: Is letter in place? Does the care plan and facility processes show all guidelines listed in Level II (is the letter being followed?) Is MDS coded correctly? Run report to ensure no errors on other residents with Level II/PASSR determinations. **MDS/Social Services**
- Audit all clinical records to ensure quarterly assessments are done for each department. **Nursing**
- Review all code statuses. Make sure they match care plan/clinical record/POS. Ensure there is system that is an easy visual to identify full code residents (ex: small heart by name on door). **Social Services**
- Audit diet orders vs tray cards to ensure they match. **Dietary/Nursing**
- Review residents receiving Coumadin. Ensure current PT/INR and side effect monitoring are in place. **Nursing**
- Review past 6 months of RD recommendations to ensure follow ups was completed. **Dietary/Nursing**
- Review NOMNC process. Ensure all NOMNC's are complete and signed-correct forms being used. Look at past 90 days of discharges. **Social services/Administrator**
- Review Education/In-services for past year-skill checks completed per facility assessment? Each CNA has 12 hours of documented training? Individual in-services are noted for each employee? (if not-ongoing with working PIP). **Administrator/Payroll/Business office**



18

RESOURCES

- MO DHSS State Regulations: <https://health.mo.gov/seniors/nursinghomes/lawsregs.php>
- Appendix PP Federal Regulations, Critical Element Pathways, and Other Survey Resources: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsandRegulations/Nursing-Homes>
- Appendix Z Emergency Preparedness: <https://www.cms.gov/files/document/qso-21-15-all.pdf>
- NFPA Life Safety Code and Standards: <https://www.nfpa.org>
- QIPMO: www.nursinghomehelp.org
- QIPMO Long-Term Care Survey Manual: <https://nursinghomehelp.org/leadership-coaching/long-term-care-survey-manual/>



19

CLINICAL EDUCATION NURSES

www.nursinghomehelp.org/qipmo-program
musonqipmo@missouri.edu



Julie Tootle
tootlej@missouri.edu
 Region 1



Wendy Boren
borenw@missouri.edu
 Region 2



Carolyn Gasser
gasserc@missouri.edu
 Region 3, 4



Crystal Plank
plankc@missouri.edu
 Regions 5, 6



Debbie Pool
poold@missouri.edu
 Region 7



20

LEADERSHIP COACHES AND ADMIN TEAM

www.nursinghomehelp.org/leadership-coaching
musonqipmo@missouri.edu



Mark Francis
francismd@missouri.edu
 Regions 1, 3



Penny Kampeter
kampeterp@missouri.edu
 Region 7



Nicky Martin
martincaro@missouri.edu
 Region 2



Libby Youse
youseme@missouri.edu
 Regions 4, 5, 6



Marilyn Rantz
 Project Director



Jessica Mueller
 Sr. Project Coordinator
muellerjes@missouri.edu



Ronda Cramer
 Business Support Specialist
cramerr@missouri.edu



21

INFECTION CONTROL TEAM

www.nursinghomehelp.org/icar-project
musonicarproject@missouri.edu



Carolyn Gasser
gasserc@missouri.edu
 Region 3, 4



Shari Kist
kistse@missouri.edu
 Regions 5, 6



Nicky Martin
martincaro@missouri.edu
 Region 2 SNFs



Sue Shumate
shumatese@missouri.edu
 Region 2 (ALFs/RCFs), 7 (all)



22