For the standard survey

#### **SURVEY COMPONENTS**

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# Survey Components

- Inspectors will typically include all of the following survey components in relicensure, recertification and CHOW surveys.
- Initial licensure surveys will not include all of these components as the agency is not operational yet.
- A complaint investigation/survey may include all of these components, or it may only include the components necessary to investigate the allegation(s).

#### **Pre-Survey Preparation**

" Survey history

" Ownership

- <sup>"</sup> Complaint history
- " Occurrences

*<sup>"</sup>* Licensing data

" OBQI/OBQM data

" Agency website

Administration

- <sup>"</sup> The inspectors will request to speak with the Administrator or Manager
- <sup>"</sup>Should have CDPHE business card and photo ID badge
- " They will request space to work
- " Explain the purpose for the visit and their plan
- " Interview to gather data about agency
- <sup>"</sup> Request documents

- Based on the initial interview and documents requested, they will choose their sample for record review and home visits.
- Keep in mind the entrance conference and any discussions with the inspectors are considered interviews.

Putting Your Best Foot Forward

- <sup>"</sup> Be courteous and helpful
- " Provide a quiet workspace
- <sup>"</sup> Be prepared

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Consumer records kept in the home or individual consumer documents not included in the permanent record shall be made available within 2 hours request if the last visit occurred 14 days or more prior to the request. Chapter 26 5.5(C)(1)

<sup>7</sup> The consumer file and administrative records including, but not limited to, census and demographic information, complaint and incident reports, meeting minutes, quality assurance and annual program review documents shall be provided to the inspector commencing within 30 minutes of request. Chapter 26 5.5(C)(2)

## Investigative Method

<sup>"</sup> Each survey component (complaint/incident review, chart reviews, home visits, personnel file review, etc.) is used to either confirm compliance with applicable rules and regulations or reveal instances of non-compliance/deficient practice

## Investigative Method

- <sup>7</sup> Throughout survey, when potential deficient practice is identified:
  - . Inspectors will attempt to gather additional evidence via expanded or refocused record review, home visit observations, and/or client and staff interviews
  - Inspector focus will be on determining scope of problem (isolated vs. widespread) and whether deficient practice is related to a system failure

# Complaint/Incident Logs

- <sup>7</sup> The complaint and incident logs are reviewed to determine whether you are identifying all complaints and incidents and adequately investigating and resolving them.
- <sup>"</sup> The steps and depth of your investigation will be evaluated along with your resolution.

## Complaint/Incident Logs

- Then the logs are reviewed to identify patterns and negative trends, with follow up to determine if the agency is acting on these trends
- The logs are also used to compare findings from record review and home visits with documentation in logs
- Copies from complaint and incident logs likely indicate further investigation

# Complaint/Incident Logs

- <sup>"</sup> Preparing for Survey:
  - . Regularly review logs to ensure all complaints/incidents are fully documented, investigated and resolved.
  - . Regularly review logs to ensure all follow up action is documented.

#### Patient/Client Record Review

- Number of records reviewed varies based on type of survey, size of agency, and the number and nature of issues found
- Timeframe for review is up to the Inspector based on why the chart was selected for review

#### Patient/Client Record Review

- <sup>"</sup> Compare plan of care/service plan to what is being documented
- <sup>"</sup> Track orders, labs, response to issues
- <sup>"</sup>Services are within scope of practice and agency license
- <sup>"</sup> Compliance with certain rules/regulations