

Post-Acute Care Survey Survival Guide

Will You Be Ready When Surveyors Come Calling?





“A surveyor is in the building!” When you hear that, are you stressed out or ready to take the requests in stride?

Surveys of your healthcare operations are serious business, and they affect your bottom line in critical ways. A visit from state or federal officials should not be unexpected, so your goal is to be completely prepared for this inevitable situation.

Whether your organization focuses on skilled nursing, assisted living, home-based care, hospice, or a combination, the strategies in this survival guide give you the tools to be prepared for a survey. If you’re primed for this type of visit, your organization can survive the scrutiny and business can thrive.

As a starting point, your leaders must know and understand what’s expected in the conditions of participation (CoP) or requirements of participation (RoP) for your care setting. Review them regularly and

especially when the Centers for Medicare and Medicaid Services (CMS) announces updates.

Beyond that, you should give sustained attention to these basics:

- + Align your protocols and procedures with federal and state regulations.
- + Review your quality ratings.
- + Analyze the data to identify any performance gaps.
- + Train to ensure staff competence and organization compliance.

But let’s dig a bit deeper to ensure that you and your team respond with confidence when a surveyor comes calling.

Know what a surveyor expects

To get your survey action plan together, you need start with what surveyors are looking for when they visit your organization. “Surveyors will be placing your organization’s compliance program under a microscope,” said Trish Richardson, MSN, BSBA, RN, NE-BC, CMSRN, Director of Post-Acute Care Solutions at Relias. “This is the year of compliance with promised increased oversight of care quality and environment of care. So now is the time to pause for self-reflection into your current practices and minimize the risk for deficiencies — and along with them, negative financial impact on your business.”



To comply with a surveyor’s requests, you’ll need to provide evidence of:

- + An exceptionally safe healthcare setting
- + Active quality assurance and performance improvement (QAPI) initiatives
- + An effective infection control and prevention program
- + Highly trained staff with confirmed and documented licenses to practice
- + Acceptable and validated staff-client ratios
- + High-quality care and optimal clinical outcomes
- + Respectful communication and appropriate behavior
- + Patient or resident satisfaction

No matter your healthcare setting, you don’t want surveyor deficiency citations hurting your ability to do business and provide care.

Let’s look at how citations might hurt your post-acute care business. In a July 2022 posting of nursing homes with [serious quality issues](#), CMS noted, “Most nursing homes have some deficiencies, with the average being six to seven deficiencies per inspection.” Some facilities, however, have more problems, more serious problems, and a pattern of serious problems. CMS puts them on a list for the Special Focus Facility program.

Clearly, you don’t want to be on that list or any other list of deficient healthcare organizations.

Maintain an everyday state of survey readiness

To get and stay ready for an inspection, use a critical lens as you review the factors scrutinized during a survey. Where do you fall short? Where are you doing well? When you identify weak spots, provide consistent attention to bring them up to par, with documentation to prove it.

Preparation involves these critical steps:

- ✓ Recognize common deficiencies cited in your type of care setting.
- ✓ Audit coding and billing to ensure clinical documentation integrity and alignment with the Minimum Data Set.
- ✓ Assess your quality measure ratings, looking at benchmarks and trends.
- ✓ Provide staff compliance and competency education, addressing any quality measure deficiencies.
- ✓ Review resident rights.
- ✓ Ensure training and upskilling includes patient or resident assessments, organization processes, and care protocols.
- ✓ Assess infection control and prevention and continuously address it.
- ✓ Review facility safety status.
- ✓ Ensure all complaints have been documented, investigated, and followed up.
- ✓ Keep QAPI activities documented and up to date.

Viewing your organization's readiness with a critical eye can save you from deficiency citations on your survey report. "For example, conducting routine audits of your organization's practices and procedures, including auditing your coding and billing, may alert your leaders to some gaps in knowledge or the need for a quality initiative," said Tameka N. Warren, MSN, RN, CLC, a home health writer for Relias. "Helping your staff find a problem before the surveyor does is extremely valuable."

Start now on presurvey preparations

After you've reviewed the big picture, you need to take some snapshots and look more closely. Analyze the current state of your survey readiness and identify gaps.

We recommend a combination of self-assessments and mock surveys with an external partner taking the role of surveyor.

Presurvey analysis

Use these checklists to assess and critique your organization's readiness and professionalism.
In the sections below, you can make notes on what you observe and any action items needed.

What do you see?

Walk around and observe your business from a visitor's perspective.

Focus Item	Notes
Identify safety concerns.	
Validate high-quality care delivery.	
Confirm staff professionalism and behaviors aligned with excellent service.	
Listen for your staff's use of respectful, compassionate communication.	
Validate occasions of client satisfaction.	

Presurvey analysis

How's your staffing?

Dig into the details of your staffing and be ready to report on them.

Focus Item	Notes
Calculate and validate required patient-clinician ratios.	
Confirm documentation of staff compliance, competence, and license verification.	
Assemble data to support offering high-acuity or specialty care.	

Leader rounding

Intentionally lean in to assess evidence of your leadership's effectiveness in the following areas.

Focus Item	Notes
Interactions between staff and patients or residents	
Communication with staff around expectations	
Professional development programs and the learning culture	
Up-and-coming leaders — Who are your champions and leaders without titles?	

Survey preparation — dig into the details

Once you've scanned your current state, you need to focus carefully on your data and reporting. It must line up with federal and state requirements.

You should be keeping all the documentation needed for surveys in easily accessible and yet secure folders, whether paper or digital.



Ensure your employees know the rules

It is important to validate that employees:

- + Review your policies and procedures regularly and adhere to the requirements for your care setting
- + Understand their responsibilities under the Health Insurance Portability and Accountability Act (HIPAA) to protect sensitive patient health information and follow HIPAA
- + Are up to date on physical exams, immunizations, and health declarations

Drill on where to find data and reports

Your leaders and team members should be ready to respond to surveyors' questions. This means they:

- + Know where to find resources related to clinical needs, patient or resident rights, policies and procedures, safety, and so on, and whom to contact in the organization when issues arise
- + Can show on-demand evidence of staff compliance training, ongoing competency education, annual skills training, and professional development offerings
- + Keep all files containing sensitive information in confidential folders, locking them when unattended

Review your paperwork

Keep QAPI activities documented and up to date. Your reports should reflect issues that are common (such as falls or hospital readmissions) and those that might spur complaints (such as pressure injuries or urinary tract infections) and could result in policy changes or revised safety measures.

Be prepared to provide evidence of root cause analyses and resulting actions.

Check to be sure any complaints are fully documented. You'll need proof that:

- + All complaints were investigated in a timely fashion.
- + Findings were disclosed to the patients or residents involved.
- + A plan was implemented to correct the problem.
- + An intervention and follow-up were conducted at least once.

These steps are extremely important if a complaint survey is being conducted or if a surveyor learns of a complaint during a survey and wants to explore the details.

Keep competency training up to date

Conduct online competency training and ensure that supervisors sign off on the completion at least annually. As the organization begins serving patients or residents with higher acuity levels or new specialty needs, ensure that staff have the appropriate competency training in a timely manner.

Ensure your documentation shows that leaders sign off on competency training for new staff during onboarding and then update education annually. Documentation should show that your organization:

- + Provides timely compliance training on protected health information
- + Refreshes infection control and prevention education
- + Provides training on other required competencies

Validate and attest to skills competencies

Skills fairs are a trusted way to validate the online competency education. This approach is consistently relied on in hospital settings. Increasingly, post-acute care settings are recognizing the benefits of skills fairs and employing them to ensure that all staff receive the same type and quality of training and evaluation.

Whether you use a skills fair, annual competence marathon, or another method of competency evaluations, you should prepare by:

- + Identifying job-specific skills competencies
- + Reviewing gap assessment and QAPI program outcomes
- + Selecting and assigning job-specific education modules
- + Creating skills competency checklists that apply to care settings, state-specific requirements, and job-specific responsibilities and scope of practice

If you properly prepare with leadership, communication, education, and documentation, you'll be ready when the surveyor comes calling.
You've got this! And we've got you.





Relias is your survey partner

Our solutions prepare you to meet surveyor expectations.

Prepare with education for safety, infection control and prevention, licensing and credential updates, and even soft skills for dealing with those you serve.

With our tools, you're ready for surveyor questions.

Cover all the bases by assessing for skill gaps, educating for competencies and upskilling, refreshing your coding and billing knowledge, and more.

Start now on presurvey preparations.

The Relias Platform lets you quickly and easily disseminate policies and procedures, track your annual compliance training, and educate for high-acuity specializations.

Dig in and prepare for a survey.

Relias has the education you need to ensure:

- + Your compliance training is up to date
- + Your billing and coding specialists are up to speed and accurate
- + Your leaders can skillfully communicate and engage employees in quality improvement

The Relias Platform puts the power of data and education in your hands:

- + Document staff attestations related to policies and procedures
- + Use automated tracking of training for ease of reporting
- + Filter your reports to display compliance, competencies, and specialization education
- + Use evaluation tools and checklists to validate competence with skills
- + Align education with QAPI activities
- + Ensure the right education for the right role at the right time

Ready to explore our solutions?

LET'S TALK!