

RESIDENTIAL CARE FACILITY SURVEY PROCEDURE GUIDE

OBJECTIVE:

- To determine the facility's compliance with the State Residential Licensure Rules.
- To provide guidelines for surveyors to assess the facility's compliance.

PROCEDURE:

1. OFFSITE SURVEY PREPARATION: Team Coordinator

- Residential Care Offsite Survey Preparation Worksheet (SF53722) is completed by the Team Coordinator.
- Review pre-survey report.
- Identify areas of concerns and/or potential areas of concerns.
- Review for any open complaints and ensure they are investigated also.
- Team Coordinator makes surveyor assignments.

2. ENTRANCE CONFERENCE/ONSITE PREPARATORY ACTIVITIES: Team Coordinator

- Informs the facility's administrator/designee of the purpose of the survey and introduces the team.
- Reviews and explains the information needed from the Residential Entrance Conference Checklist (SF53725) with the administrator/designee. A copy of this can be provided to the facility for their reference.
- Provides the facility with the survey sign for posting at all entrance doors and locations accessible to all residents at wheelchair level. The facility should be informed that the signs should be posted immediately after the entrance conference and remain posted throughout the survey.

- Will notify the area ombudsman of the entrance into the facility and inquire of the ombudsman regarding any additional concerns.
- Informs the facility at entrance, the survey team will be communicating with the staff throughout the survey and will ask for facility assistance when needed. Inform the facility they can provide the team with information to clarify issues or concerns at anytime throughout the survey.

3. INITIAL TOUR: All Team Members

- As the Team Coordinator conducts the entrance conference. The other team members should start the initial tour of the facility.
- Team members should tour the facility as assigned by the Team Coordinator.
- The initial tour should begin as soon as possible after entrance to the facility. Tour should occur with a staff member knowledgeable of the resident care if possible.
- Meet and greet all available residents and staff.
- Document residents' appearance, comments, and other information that will be helpful in sample selection. Use the Residential Care Surveyor Notes Worksheet (SF53716).

4. SAMPLE SELECTION: All team members, after initial tour

- Sample selection should relate to the areas of concerns and/or potential areas of concern that were identified during the offsite preparation/complaint investigations.
- Sample selection should also include residents identified with concerns during the initial tour.
- Sample selection should include (3) residents for Residential Care Infection Control Review (SF57102).

- Sample selection should be five (5%) percent of the total resident population with a minimum of five (5) residents and maximum of twenty (20) residents.
- Complete 2 closed record reviews (SF53715).
- Residents selected for sample should be listed on a Residential Care Resident Roster/Sample Matrix (SF53718).
- Interview 3 residents using Residential Care Resident Interview (SF53717).

5. INFORMATION GATHERING: All Required

Observation is key during the survey. Follow the guidance on the State Forms for observation, interviews, and follow-up.

- Residential Care Clinical Record Review (SF53715): 5% of census, minimum of 5, maximum of 20
- Residential Care Resident Interview (SF53717): Must complete 3 interviews if possible
- Residential Care Kitchen/Food Service Observation (SF53723)
- Residential Care General Observations of the Facility (SF53721)
- Residential Care Medication Pass (SF53724): Must observe 5 residents, multiple Routes
- Residential Care Residential Infection Control (SF57102): Must sample 3 residents
- Residential Employee Records (SF53877): Must review 5 employee files

6. INFORMATION ANALYSIS FOR COMPLIANCE DETERMINATION

- Team meeting will be conducted to determine facility compliance.
- Review information from each surveyor and additional information obtained during the survey process.

- Team Coordinator will document state finding(s) determination summary on the Residential Surveyor Notes Worksheet.
- Review Residential State Licensure rules to determine compliance.
- If the facility is determined to be out of compliance with Residential State Licensure regulation(s) a finding should be written in ASE-Q.
- Follow the Principles of Documentation (POD) manual for documentation of findings.

7. EXIT CONFERENCE

- Team Coordinator invites the facility staff to the exit conference. Residents and Ombudsman may come if they would like.
- Team Coordinator leads the exit conference and completes the Exit Conference Checklist and Attendance Record (SF53739).
- The facility should be informed of all areas of concerns and those areas documented on Exit Conference Checklist and Attendance Record.
- The facility can submit additional information at any time.

SURVEY REPORT:

- Team documents Residential State finding(s) in ASE-Q.
- Report is reviewed by all team members for errors in POD.
- Team Coordinator then submits report (include 2567L and 670) to QR within 24 hours of exit.
- QR is either completed, returned to team for corrections, which need to be completed asap and send back to supervisor for submission to ACO.

PACKET SUBMISSION:

- Each team member reviews documentation then provides all survey documentation to the Team Coordinator for Packet Submission.
- Team Coordinator completes Survey Packet Cover Sheet and Surveyor Packet Checklist and submits all information to the office no later than 5 days after the survey has been submitted to ACO.

ANY PROBLEMS/CONCERNS RELATED TO SURVEY PROCESS WILL BE DISCUSSED WITH AREA SUPERVISOR IMMEDIATELY.

Revised 4/2021