

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

**MISSOURI ASSOCIATION OF NURSING HOME
ADMINISTRATORS
2025 ANNUAL CONVENTION
INNOVATE, NETWORK AND
SUCCEED WITH MANHA**



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OBJECTIVES

- Review 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



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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)



DEPARTMENTAL TIPS AND PEARLS



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



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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



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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



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



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



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)



SOCIAL SERVICES^{and} ACTIVITIES

SOCIAL SERVICES

- Review all code statuses
- PASRR 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



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



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)



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



7-WEEK SURVEY PREP GUIDE



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7-WEEK SURVEY PREP GUIDE (Repeat every 7 weeks if no survey)

Review the [CMS survey resources](#) (survey pathways, entrance conference form, etc.) for audit tools.

Negative Findings - Do a PIP and Increase Monitoring Frequency

WEEKLY MONITORING:

- ☐ Review/audit of Med rooms, med carts, Insulin labeling dated, expired medications, cleanliness.
- ☐ Review of temperature 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/temperature logs.
- ☐ Review of high-risk kitchen areas: drawers, utensils, scoops.



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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



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/>





THANK YOU

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