Mountain Pacific Survey Readiness Book

Developed August 2023
Last Updated June 2024

Table of Contents

1. Introduction to the Survey Readiness "Proof" Book

The purpose of this toolkit is to help nursing homes be survey-ready every day. You will find links to survey documents.

The survey/proof book is to help organize documents for quick access during a survey. This survey book should be available, organized and updated at least weekly. Make sure others in management know where you keep this notebook, because surveyors might show up when you are not available.

These documents can be organized however you want. We suggest keeping them in a binder organized by section. When the survey team arrives, do not hand this binder to the survey team. Make copies and only provide the sections they request.

Suggestions for success:

1. Assemble the survey readiness binder.
2. Make sure all key staff know where to find the binder.
3. Pull the updated matrix on a routine basis, such as the first Monday of each month.
4. Keep your quality assurance and performance improvement (QAPI) and emergency preparedness plan binder next to the survey binder. You do not want to duplicate everything, so just have it ready to grab.
5. Have information technology update page four of the Entrance Conference Form any time there are updates to the electronic medical record system and review it at least quarterly.

2. Survey Preparedness Checklist
This is a list of suggested documents to include in your survey preparedness binder.

Section	Document	Date of Review	Responsible Party
Resident Rights	Resident rights policy and notice of rights		
	Posted signage		
	Ombudsman signage		
	Visitation policy and procedures		
	Resident access to records policy/procedures		

	Required notices:
	1. Personal funds
	2. Medicaid eligibility
	3. Information and contact information for:
	    i. State Survey Agency contact information
	    ii. State Long-Term Care Ombudsman program
	    iii. Protection & Advocacy agency
	    iv. Adult Protective Services
	    v. Local contact agency for information about returning to the community
	4. Medicaid Fraud Control Unit
	5. Aging and Disability Resources Center; or other No Wrong Door Program
	6. Resident grievance and complaint process concerning any suspected violation of state or federal nursing facility regulations, including but not limited to resident abuse, neglect, exploitation, misappropriation of resident property in the facility, non-compliance with the advance directive requirements and requests for information regarding returning to the community
	7. Right to accept or refuse treatment
	8. Advance directives
	9. Notification of changes policy/procedure
	
	[Centers for Medicare & Medicaid Services (CMS) "Your Resident Rights and Protections"](#)		

Abuse/Neglect/ Exploitation	• Abuse prohibition policy/procedures • Seclusion and restraint policy/procedures • Reporting violations policy/procedures • Resident to resident altercation procedures		
Admission Transfer and Discharge Rights	• Admission policy • Notice requirements prior to transfer and discharge policy/procedures • Resident admission packet		
Resident Assessment	Preadmission Screening and Resident Review (PASRR) Policy/Procedures		

Comprehensive Person-Centered Care Plans	Care planning policy/procedures		
Quality of Life	Activities of daily living policy/procedures		
Quality of Care	Care policies: • Foot care • Wound care • Pain management • Trauma-informed care • Bowel and bladder policy		
Physician Services	Physician services policy/procedures		
Nursing Services	• Nurse staffing policy/procedures • Nurse aide registry verification • Nurse training, competency sheets		
Behavioral Health Services	Behavioral health policies: • Includes screening for substance abuse, serious mental disorder or intellectual disabilities (PASRR) • Care plan address any areas identified		
Pharmacy Services	Pharmacy policy/procedures: • Unnecessary drugs • Unnecessary psychotropic med/as needed use • Medication errors • Labeling of drugs and biologicals		
Laboratory Radiology and Other Diagnostic Services	• Transportation for lab services policy/procedures • Laboratory services policy/procedures • Clinical Laboratory Improvement Amendments (CLIA) certification/CLIA waiver		
Dental Services	Routine/emergency dental services policy/procedures		
Food and Nutrition Services	Food service policy/procedures: • Dietary support personnel/qualified dietary staff • Resident allergies • Tube feeding management/restore eating skills		
Specialized Rehabilitative Services	Policy/procedures		
Administration	• Governing body • Facility assessment • Services provided (resident/family handout) • Payroll based journal		
Quality Assurance and Performance Improvement	• QAPI/quality assessment and assurance plan • Improvement activities • Committee charter • Quality improvement organization QAPI Written Plan How-To Guide: https://www.cms.gov/Medicare/Provider-		

	Enrollment-and-Certification/QAPI/Downloads/QAPI-Plan-How-to-Guide.pdf		
Infection Control	• Infection control plan • Antibiotic stewardship program • Infection preventionist (qualifications, training) • COVID-19, influenza and pneumococcal immunizations		
Compliance and Ethics Program	• Compliance/ethics policy/procedures • Staff education		

Physical Environment	• Emergency power policy/procedures
	• Essential equipment policy/procedures
	• Review of resident rooms
	  – Bedroom number of residents
	  – Bedrooms measure at least 80 square feet/resident
	  – Bedrooms have direct access to exit corridor
	  – Bedrooms assure full visual privacy
	  – Resident room has window
	  – Resident room floor is above grade
	  – Resident room has bed, furniture, closet
	  – Bedrooms equipped with or near lavatory/toilet
	• Call light procedures
	• Water availability procedures
	• Pest control program
	• Smoking policies
	• Water management program for Legionnaires' testing
	• Elopement procedures
	• Fire wall inspection procedures
	• Safety/entrapment (e.g., physical restraints, bed rails)		

Training Requirements	• Review staff education (orientation and recertification) for the following:
	  – F941 - Communication
	  – F942 - Resident rights and facility responsibilities
	  – F943 - Abuse, neglect and exploitation
	  – F944 - QAPI
	  – F945 - Infection control
	  – F946 - Compliance and ethics
	  – F947 - In-service training for nurse aids
	  – F949 - Behavioral health		

3. Entrance Conference Forms

PDF Entrance Conference Form

PDF CMS 802 Matrix for Providers

PDF Resident Interview Care Areas and Probe

PDF Resident Representative Intervi

PDF Resident Observation Care Areas and Probe

PDF Record Review Care Areas and Probes

4. Post-Survey Documents

If deficiencies are noted in your survey, update your survey readiness book to reflect the updated practice/policy following completion of the survey.

Deficiencies

Edit and Finalize
Statements of Deficier

Resources:

- **How to Write an Acceptable Plan of Correction – Webinar (August 31, 2021)**
  During this presentation, Glendive Medical Center provides help to advance the skillset of staff in writing an acceptable plan of correction.
  Access recording | Access slide deck
- F0371 - Store, cook and serve food | View handout
- F0325 - Make sure each resident gets a nutritional and well balanced diet | View handout
- F0323 - Accidents/injuries | View handout
- F0253 - Housekeeping/maintenance services | View Handout
- F0247 - Give notice to the resident before a room or roommate changes | View Handout
- Template with explanation | View handout
- Education slides | View handout

Nursing Home Facility Assessment Tool and State Operations Manual Revisions

For more information, please see the following links:

- Access transcript
- For more information

Appendix A: Survey Pathways

CMS-20053 Dining

CMS-20054 Infection Prevention Control an

CMS-20055 Kitchen

CMS-20056 Medication Administra

CMS-20057 Resident Council

CMS-20058 QAPI and QAA

CMS-20059 Abuse

CMS-20061 Environment

CMS-20062 Sufficient and Compet

CMS-20063 Personal Funds

CMS-20065 Activities

CMS-20067 Behavioral-Emotional

CMS-20068 Urinary Catheter or UTI

CMS-20069 Comm - Sensory Problems

CMS-20070 Dental

CMS-20071 Dialysis

CMS-20072 General

CMS-20073 Hospice and End of Life

CMS-20074 Death

CMS-20075 Nutrition

CMS-20076 Pain Recognition and Mgm

CMS-20077 Physical Restraints

CMS-20078 Pressure Ulcer

CMS-20080 Rehab and Restorative Servic

CMS-20081 Respiratory Care

CMS-20082 Unnecessary Medicati

CMS-20090 PASARR

CMS-20091 Extended Survey

CMS-20092 Hydration

CMS-20093 Tube Feeding

CMS-20120 Positioning, Mobility &

CMS-20123 Hospitalization

CMS-20125 Bladder and Bowel Incontinenc

CMS-20127 Accidents

CMS-20130 Neglect

CMS-20131 Resident Assessment

CMS-20132 Discharge

CMS-20133 Dementia Care

CMS-20140 Arbitration

Appendix B: Binder Section Headers

    A. **Map of Facility**
    B. **Organization Chart**
    C. **Definitions**
    D. **Resident Rights**
    E. **Freedom from Abuse, Neglect and Exploitation**
    F. **Admission Transfer and Discharge Rights**
    G. **Resident Assessment**
    H. **Comprehensive Person-Centered Care Plans**
    I. **Quality of Life**
    J. **Quality of Care**
    K. **Physician Services**
    L. **Nursing Services**
    M. **Behavioral Health Services**
    N. **Pharmacy Services**
    O. **Laboratory Radiology and Other Diagnostic Services**
    P. **Dental Services**
    Q. **Food and Nutrition Services**
    R. **Specialized Rehabilitative Services**
    S. **Administration**
    T. **Quality Assurance and Performance Improvement**
    U. **Infection Control**
    V. **Compliance and Ethics Program**
    W. **Physical Environment**
    X. **Training Requirements**

Appendix C: Mock Survey Tools

Med Pass Observation

Survey Readiness - Be Ready

CMS-20054 Infection Prevention Control an

Mountain Pacific COVID-19 CMS Mock Survey Tool

This tool supports nursing homes in evaluating COVID-19 infection prevention and control systems in place against CMS evaluation criteria.

Access tool

Appendix D: Committee Charter Template

Committee Name	Committee Chairperson(s)
Project/Committee Name	**Date/Quarter**
Frequency of Meeting	
Committee Mission (Why is the committee needed?)	
Committee Responsibilities (What is the expectation for this committee?)	
Committee Tasks/Projects:	
Committee Membership (both voting and non-voting members - Who can vote? Who cannot?)	

Charter Approval: _____ Date: _____

Worksheet to Create a Performance Improvement Project Charter
A project charter clearly establishes the goals, scope, timing, milestones, and team roles and responsibilities for a performance improvement project (PIP).
Access Tool Here

Appendix E: Resources

[Centers for Disease Control and Prevention Infection Prevention Training](#)

Centers for Medicare & Medicaid Services (CMS)

- [Nursing Homes](#)
- [Policy & Memos to States and CMS Locations](#)

[Mountain Pacific Nursing Home Quality Improvement Tools and Resources](#)

- S.O.S. Sharing Out Suggestions for Compliance

[Health Services Advisory Group QAPI](#)