

Texas Department of State Health Services

Maternal Designation Survey Guidelines: Surveyor Expectations

Department of State Health Services

Consumer Protection Division

EMS-Trauma Systems Section's Designation Unit

Surveyor Training Objectives

1

Define the surveyor's presurvey expectations

2

Review the surveyor's expectations during the survey

3

Define the expectations for writing the summary report

Each survey serves as an evaluation process

Purpose is to define if designation requirements are met

Review
documentation of
evidence
requirements are met

Designation Survey Begins with an Agreement



Survey Organization Agreement

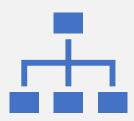
Team Compositions (defined in rule)

Conflict of Interest

Timelines of the Survey

Travel Arrangements

Virtual vs Onsite or Hybrid



Designation Coordinator

Department authority at the survey



Texas Department of State Health Services

Surveyor Requirements

Department-Approved Survey Organization

Department requirements

Follows Designation Survey Guidelines

Surveyor Requirements

Experience in leading a facility through 2 successful designation surveys (contingent or contingent probationary surveys do not meet this expectation)

Physician in lead role - actively participating in clinical care and experience with oversight of a designation program and QAPI, board-certified

Physician - actively participating in designation program and the QAPI process, board-certified

Program manager (director) – minimum of a BSN, actively participates in leading and oversight of the clinical care and designation program to include the maternal QAPI plan

Surveyors outside of Texas – must be from the same or higher level of designated facility, or from a state that has a certification program or categorization program that requires a survey process, and their facility has had 2 successful reviews

Retired individuals who meet the surveyor requirements can continue to review for 3 years following retirement

Individuals employed by a survey organization must have evidence of 10 years of experience in the roles required prior to being employed by the survey organization and maintain 16 hours of CME or CEUs annually specific to maternal care

Surveyor Requirements

Complete a QAPI course or training in the last 4 years, and not received any weaknesses or requirements not met related to the QAPI plan in their programs

Documented evidence of completing the survey organization's survey training course

Observe a survey, then successfully complete an intern survey with an assigned survey mentor that completes a critique of the intern's performance following the survey

Surveyor Requirements

Completes a minimum of 2 surveys annually

Maintains an annual conflict of interest statement

Maintains confidentiality with assigned surveys

Maintains a professional relationship throughout the survey process

Survey Orientation and Training

DSHS' role specific to designation

Expectations of the survey organization

Survey team's role and expectations

Expectations for a completed survey

Standardized process

- Scheduling surveys
 - Survey Organization guidelines
 - Conflict of interest
 - Out of RAC or contiguous RAC

Maternal Surveyor Expectations



Survey begins with documents review prior to the survey

Required data is placed in shared folder 45 days prior to the review.

Signed Business Agreement and HIPAA Agreement



Lead surveyor defines assignments



Surveyors review documents specific to their assignment including the medical record face sheets



Pre-Survey Conference Call

Select medical records for review (20 days prior to the survey)

Surveyors are prepared to ask clarifying questions.

Define additional documents needed to validate requirements are met.



Plan the Survey Opening Conference

Standardized Expectations: Review

- Maternal Program Oversight Plan
- Management guidelines
- QAPI Plan and processes
- Placenta accreta spectrum disorder plan
- Outreach education and training activities
- Credentialing process
- Nursing education and credentials
- Equipment and resources
- Telemedicine integration (if utilized)
- Facility's process for validating all designation requirements are met
- Review of 10 medical records and develops a summary of these reviews
- Surveyor validates designation requirements are met

- Morning Conference
 - Schedule and timelines
 - Assignments
 - Key areas of improvement since last survey
 - Drill down on previous weaknesses or requirements not met
 - Program enhancements or designation upgrades
 - Activities in regional perinatal system development
 - Structure for program oversight
 - Structure and process of QAPI Plan
 - Performance dashboard
 - Brief orientation to the EMR
 - Documents included in the folders (Schedule, handouts, list of participants)
 - Disaster planning and preparedness activities

Reviewed Questionnaire
QAPI Plan
Oversight Structure
Organizational Chart
Leadership team
Management Guidelines
Facility Demographics
Patient Complexities

Virtual Tour

Walk-Through Review

Group Interviews

Medical Staff

Nursing, Continuum of Care

Understand the goals and management of the "Group Interviews"

Understand importance of the "Closed Conferences"

Processes of identifying

- Requirements not met
- Opportunities for improvement
- Best practices
- Regional integration
- Strengths
- Defining recommendations

Understand key elements of writing the survey summary report

Importance of professionalism

Avoid	Avoid discussing or sharing the name or referring to other hospitals you have surveyed or discussing survey information related to another facility
Ask	Always ask clarifying questions to statements and physically review data or documents
Clarify	Do not make assumptions about practices – ask and clarify
Engage	Engage with hospital staff to address any questions regarding care, or information you are not able to find
Seek	Seek clarification or ask for needed documents while reviewing items in real-time

Complete 10 medical record reviews

Define if management guidelines were followed

Review timeliness and coordination of care

Review documentation

Events identified through QAPI and date identified

- Impact of event level of harm
- Levels of review dates of review
- Committee case reviews and minutes
- Corrective action plan
- Monitoring action plan
- Event resolution



Telemedicine integration

Management guidelines followed



Objective review – focusing on facts and designation requirements

Final Closed Surveyor Team Meeting



Only survey team members and designation coordinator



Surveyors - organized and prepared to discuss their findings



Define missing information needed and how you requested the information



Identify and list findings: requirements not met, opportunities for improvement, best practices, regional integration, strengths, and recommendations



Program leadership closed meeting with surveyors, designation coordinator: Administrator, MMD, MPM

Plan for the Exit Conference

- Lead surveyor makes assignments
- Lead surveyor reads the "Validation Statement"
- List of all
 - Requirements not met
 - Opportunities for improvement
 - Best practices
 - Regional integration
 - Strengths
 - Recommendations for all requirements not met and opportunities for improvement
- Provide facts: defined medical record reviews, specific guidelines, documents
- Gather needed information prior to actual Exit Conference

Surveyor Expectations Exit Conference

01

Lead surveyor will thank all individuals for their commitment to maternal designation

02

Lead surveyor reads the validation statement 03

Begin the Exit Conference:

Surveyor assignments

Examples of Lead-in Summary Comments

- The commitment of the institution's Board of Directors, administration, leadership, medical, nursing, and all staff supporting this maternal program ...
- The capacity to care for pregnant patients through their delivery and the continuum of care is ...
- The medical staff's level of engagement and participation is ...
- The specialty physician participation in clinical decisions is ...
- The nursing leadership is committed to excellence in maternal care ...
- The commitment to the community is ...

- Exit Conference
- Lead surveyor reads the survey validation statement
- Requirements not met lead surveyor (provide facts)
- Best practices − assigned
- Regional and system integration assigned
- Strengths of the program assigned
- Recommendations and summary comments lead surveyor

- Lead surveyor will define if questions are appropriate
 - If yes, the lead surveyor will field the questions

Surveyor Principles

Avoid making unnecessary comments or rendering personal opinions

Review the management guidelines, clarify any issues, check dates to ensure they are current documents

Example of Management Guideline Issues:

- Concern about guidelines; out dated; not consistent with standard practice
- Guidelines not followed
- Equipment utilization is unclear
- Documentation is lacking
- Ask navigator for information medical director or program manager

Provide an opportunity for the facility to the address issue

Consistently manage time

Review all essential information related to the medical record

QAPI (variances in care or system response)

Level of harm and near misses

Level of review

Associated minutes of case review, attendance

May include education and credentialing of individuals providing care

Documentation through the continuum

If items are missing from medical record reviews – ask for the documents

Each medical record review

Summary

- Management guidelines followed
- QAPI issues identified by facility
 - Event
 - Level of harm
 - Evidence of appropriate actions to address the event
 - Event resolution is documented
- QAPI issues identified by the surveyor and not by the facility
- Documentation
- Resources available

Complete the Facility Summary Narrative

- Facility Summary Narrative Objective Facts
 - Facility's leadership and commitment
 - Overall review of clinical care
 - Overall documentation using examples
 - Overall resources available
 - Overall facility structure for maternal care
- Integrate the comments from each surveyor

Survey Summary Report



Each Surveyor will complete the sections assigned



Complete their medical record review summaries



Issues identified in the medical record reviews need to be brought forward in the survey summary report



Lead surveyor is responsible to receive the reports and collate the final survey summary report, managing timelines

- Summary report
 - Reflects objective data and information
 - Timelines
 - Facts
 - Subjective comments need to be removed or clarified
 - Great care

Designation Survey Process Feedback

Surveyor feedback process

- What worked well from the surveyor's perspective
- What needs improvement
- What worked well from the facility's perspective
- What needs improvement

Feedback regarding the survey report

- Complete
- All surveyor findings are integrated into the final report
- All designation requirements are addressed

Designation Survey Processes



Designed to provide clarity for the facilities, survey organizations, and surveyors



Assist facility in planning and preparing for the survey process



Provide direction on documents and resources required for review during the survey



Designed to maximize time

Goal: decrease the time of the survey

Have a complete, thorough, consistent survey process



Standardized process for surveyor training, survey process, and survey summary reports

DSHS Review of Survey Reports

Designation or Re-Designation

Contingent Designation

(1 to 3 Requirements Not Met)

Contingent Probationary Designation

(4 or more Requirements Not Met)

If a facility has 4 or more requirements not met

• Call department within 10 business days of the survey

Department will follow-up

Next Steps

Surveyors review the designation requirements

Surveyors review the survey guidelines

Surveyors complete the required QAPI training

Summary

Create	Goal is to create consistency in the survey process regardless of who is completing the survey
Establish	Establish a fair and clear process for the facilities regarding planning and preparing for the survey
Establish	Establish guidelines for the survey process that ensures everyone is aware of the steps of the survey
Establish	Establish consistency regarding surveyor training and surveyor expectations
Establish	Establish consistency regarding completing the survey reports

Designation Surveyor Expectations

