

ASSISTED LIVING COMPREHENSIVE HOME CARE AGENCY SELF-ASSESSMENT (MOCK SURVEY)

Introduction

Assisted living home care providers strive to meet regulatory requirements and be survey-ready year round to demonstrate compliance. In order to achieve that level of performance it is essential to conduct on-going monitoring, periodic audits and internal mock surveys. A mock survey conducted by internal staff serves several purposes. It is an opportunity for focused examination of systems, procedures and processes of care in targeted formalized manner. It can reveal how staff will function under stressful circumstances. It is also a great education opportunity for staff to understand the magnitude of standards and expectations for providing services that meet the regulatory and current professional standards of practice.

Pre-survey preparation and risk management are effective methods to stay current with today's regulatory climate. Mock surveys and on-going monitoring are proven methods of identifying an organization's non-compliance and expectations prior to an unannounced Minnesota Department of Health Survey.

The self-survey checklist has been designed to incorporate the survey process used by the Minnesota Department of Health Surveyors including the tools utilized by the surveyors. It will guide you in designing and conducting a mock survey, providing ample time to identify and address any gaps in performance.

Survey Readiness for Housing Director and Home Care Director

INDEX

Introduction

Background (pg 3)

Self Assessment Mock Survey Phases

- Phase 1. Acquiring and sustaining knowledge (pg 4 – 5)
 - Phase 2. Assemble a survey readiness 3 ring binder (pg 6 – 8)
 - Phase 3. Mock survey client review (pg 9)
 - Phase 4. Mock survey client /family interview (pg 10)
 - Phase 5. Mock survey observations
Medication administration / drug storage (pg 11)
Treatment (pg 11)
 - Phase 6. Personnel record review (pg 12)
 - Phase 7. Client record (pg 13)
Documentation
Incident
Service Plan
 - Phase 8. Review of Education Record (pg 14 – 16)
Documentation of orientation
Orientation to the client
Alzheimer disease content
Annual requirements
- Audit Results (pg 17 – 20)

ASSISTED LIVING COMPREHENSIVE HOME CARE AGENCY SELF-ASSESSMENT (MOCK SURVEY)

Background

Assisted Living Home Care more than ever, must be prepared to show evidence of compliance with the Minnesota Department of Health Licensure regulations. It is important to operate in the mind-set of day-to-day compliance and not just when the MDH survey team arrives. Because conducting a mock survey is time intensive the Assisted Living Comprehensive Home Care Agency Self Assessment checklist is presented in such a way that the self assessment can be done in phases or focused on a particular aspect of the operation.

The self assessment of operations serves as a hands-on learning tool as well as an opportunity to look at systems, procedures, process of care and performance for efficiencies and effectiveness with an objective “fresh look.” And it identifies potential survey-risk areas as well as areas of excellence. The assessment sometimes referred to as a mock survey should be performed on a scheduled basis and results shared with all personnel. The findings should be presented as a report to the quality assurance and improvement (QA/QI) committee and acted upon as this is the most important aspect of the survey process. The periodic self- assessment mock surveys should become an integral feature of the agencies quality assurance and improvement process.

The internal mock survey is not only an excellent way to prepare staff to succeed during a survey but to also ensure compliance with regulations and current standards of practice. There are several ways in which the “facility self-assessment (mock survey) checklist” can be performed by facility staff, peer reviewer from another home care provider, external experienced well informed professionals, corporate consultants or by contracted consultants. Keep in mind it is important to include participants who have a “fresh eye” -- which could include new employees, family member (if the area of focus is on a non-confidential aspect), or employees from another area of the assisted living. And lastly the survey should replicate as closely as possible an “actual Minnesota Department of Health survey.” For that reason the LeadingAge Minnesota’s Agency Self Assessment – Mock Survey includes the use of the Minnesota Department of Health Assisted Living Comprehensive Home Care Services survey forms.

By utilizing the Minnesota Department of Health survey forms the home care agency staff will become familiar with the survey procedures, care observations, interview questions and record reviews. Therefore the staff will be better prepared to demonstrate their knowledge and skills.

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 1. Acquiring and sustaining knowledge

The Housing director and the Home Care director should be fully informed and have a clear understanding of the Minnesota Laws (rules) that define the minimum requirements for the Comprehensive Home Care Agency.

Knowledge of Minnesota Laws (and rules)

- 1. Knowledge of the 2013 Home Care Law (09-003)
§144A.474 and §144A.475
- 2. Knowledge of the Vulnerable Adult Act (09-004)
- 3. Knowledge of the Assisted Living Law (144G)
- 4. Knowledge of the Housing-with-Services Contract Act (144D)
<http://www.revisor.mn.gov/statutes/?id=144D>
- 5. Minnesota Nurse Practice Act
<http://mn.gov/health-licensing-boards/nursing/laws-and-rules/nurse-practice-act/>

Knowledge of Surveyor Training and Protocols

- 6. Comprehensive Home Care Provider Survey Forms
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/compsurveyforms.html>
- 7. Guide to the Survey Process for Comprehensive Home Care Providers
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/comproviderguide.pdf>
- 8. Be informed of the Surveyor's Pre-Survey discoveries regarding your agency prior to arrival at your facility
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/comppresurveycheck.pdf>
- 9. Familiarize yourself with the Provider Survey Introductory letter
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/introletter.pdf>
- 10. Understand the Minnesota Department of Health surveyors expectations of

providers during the survey process by reading the *Guide to the Survey Process for Home Care Providers* at:

<http://www.health.state.mn.us/divs/fpc/homecare/providers/descriptions.html>

- 11. Review surveyor materials and protocols
<http://www.health.state.mn.us/divs/fpc/homecare/surveyortraining/index.html>
- 12. Familiarize self with documentation of surveyor findings
<http://www.health.state.mn.us/divs/fpc/directory/hcpsurveyselect.cfm>

Keep informed of changes and interpretation of the requirements

- 13. Sign up to receive notice from the MDH of new internet postings of answers to frequently asked questions (FAQ).
<http://www.health.state.mn.us/divs/fpc/homecare/providers/faq.html>
- 14. Sign up to receive notice from the MDH when ever completed survey results are posted
<http://www.health.state.mn.us/divs/fpc/homecare/consumers/surveyresults.html>

Resources for Home Care Providers and Consumers

- 15. List of Web Site Resources
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/resources.pdf>

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 2. Assemble a Survey Readiness 3 Ring Binder

Because surveys are unannounced it is a good practice to have as much information available to reduce the stress in having to find information in such a short notice. The binder should include all the basic information surveyors will request upon arrival at the Assisted Living Home Care:

- 1. Photocopy of the Home Care Licensure Application. Review annually if the services designated on the application are still the same.
- 2. Photocopy of the CLIA certificate of waiver if appropriate to your practice:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/cliawaiverinfo.pdf>
- 3. Review annually the Home Care Provider Entrance Conference Form for information surveyors will ask about. And add accordingly to the 3-ring binder any missing information that should be readily available upon arrival of the surveyor(s).
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/competenceconf.pdf>
- 4. A roster of current clients with start date, primary diagnosis and types of services provided. Arrange to have this information available as an electronic printed report upon demand with instructions on how to print. Following is a link to the form:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/compclientroster.pdf>
- 5. A roster of discharged/expired clients with start/end date and details about what happened to the client. If at all possible arrange to have this information available as an electronic printed report upon demand with instructions on how to print. Following is a link to the actual surveyor form:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/dischargeclient.pdf>
- 6. Maintain a list of names of: owner/manager, supervisory personnel, professional and paraprofessional staff, including RNs, LPNs and unlicensed staff.
- 7. All of the marketing materials of the Agency.
- 8. Timeframe to provide surveyors with requested information
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/materialreq.pdf>

9. Client Admission packet – SAMPLE.
10. Hours of operation.
11. Home Care Services
- List of all the services provided directly by your agency and does the list of current services match the licensure application.
 - List of services provided by contract, along with the name of the contracted agency/provider and a copy of the contract to review (PT, OT, Speech Therapist, etc). And evidence of current license and /or registration.
 - System for tracking mandated client monitoring for example but not limited to: i.e. treatments, vital signs, location, etc.
12. Be prepared to assemble a schedule for all home visits to be completed with date and time during the days **the MDH survey team is on-site**.
13. Process for assuring 24-hour RN coverage with either on duty or on-call for consultation.
14. Copies of Policies and Procedures or a list of where to locate the mandated by 2013 law policies and procedures for home care, which may be in the facilities hard copy policy procedure manual or electronic version. These required and recommended policies and procedures are listed in the *LeadingAge Minnesota Comprehensive Home Care Policy and Procedures Manual, 1st edition*. The agency may choose to have additional policies and procedures needed to promote performance, consistency and compliance with standards of practice.
15. Evidence the Policy and Procedure Manual is annually reviewed and current – it may be a document that shows the date the review was completed and who did the review. Recommend this task of reviewing the policies and procedures be broken up into smaller segments on an established perpetual calendar schedule to be reviewed quarterly or monthly.
16. List the locations of all the following documents and information. This is a helpful practice should the MDH surveyors arrive to conduct the survey in the absence of the director and the personnel in charge are relatively new to their position and to the agency.
- a) Home Care License.
 - b) Personnel files that show completion and presence of
 - Job description

- TB screening
- Background checks (and soon to be with finger printing and picture)
- Home Care Orientation
- Current Professional Licenses and/or Certifications
- Completed Annual In-service Training for all staff
- Information on any contracted staff
- System for tracking mandates for education, licensure, etc.

- c) List of staff employed in previous 3 years but no longer employed.
- d) Policy and Procedure Manual hard copy or access to electronic versions

17. Current copies of home care personnel job descriptions.

18. Facility Quality Assurance Program.

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 3. Mock Survey Client Review

The selection process used by the MDH surveyors for determining how many clients to review is dependent on the number of clients served by the provider. The site visit numbers of housing with services is dependent on the number of establishments of an organization. It is also possible the number of clients could be expanded beyond the guideline as the number really depends on whether concerns are identified during the interviews and observation. Minimum guidelines:

<http://www.health.state.mn.us/divs/fpc/profinfo/lic/20120913classvisitselection.pdf>

Instructions for conducting the client review:

- 1. Utilize the MDH Surveyor Client Review Form at the following link:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/compclientreview.pdf>
- 2. The same team should proceed with conducting the Home Visit Client/Family Interview utilizing the MDH forms that follow:
HWS: <http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/clientreviewhws.pdf>
Assisted Living:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/clientreviewcomm.pdf>
- 3. At least 4 client reviews should be conducted annually.
- 4. Selecting clients for the mock survey review will be most beneficial to the facility performance if the client receives or has a combination of the following: extensive services, episodic health status, hospitalized, new admission, the care giver is a newer employee, family involvement, some services are contracted (therapy, hospice, etc)
- 5. The person or a team of 2 conducting the **client daily life review**, **client record review** and **client drug therapy review** should have “fresh eyes,” and not be totally familiar with the client. This can be a good learning experience if the team combination is a licensed nurse and unlicensed personnel.
- 6. Conduct the client reviews at various times of the day or shifts.
- 7. If findings are not in compliance with any of the following: the service plan, following facility policy or procedure, the regulations, or current practice standards take immediate steps to correct.
- 8. Record the review findings and any immediate actions that were taken. Prepare a report and submit to the Director of the Home Care Agency and the Quality Assurance committee.

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 4. Mock Survey Client / Family Interview

Instructions:

1. Utilize the MDH Client / Family interview form:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/homevisitinterview.pdf>
2. Review the client/family interview form and become familiar with the questions.
3. Additional questions may be added to the MDH form interview questions as directed by the Quality Assurance committee.
4. Practice conducting an interview with a co-worker if not familiar with interview skills.
5. The interviews may be in person or by telephone.
6. The interviewer must introduce themselves.
7. Develop a rapport with the client or family by explaining the purpose of the interview. The purpose should be based on the Quality Committee's reasons for doing the interviews and there is a plan of what to do with the rich collected information.
8. Check to make sure the client or family can easily hear the conversation.
9. At the end of the interview thank the interviewee for taking time to respond to the questions.

Consent Form

As employees of the Home Care Agency mock survey observers or interviewees you will not need to get consent. But you may want to familiarize yourself with it and know the MDH surveyors must utilize it to obtain consent prior to conducting the home visit. Click on the following link for the Consent for Home Visit:

<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/consenthomevisit.pdf>

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 5. Mock Survey Observation

Step 1. Medication Administration Observation / Drug Storage

Instructions:

- 1. To properly conduct the medication observation and drug storage aspect of the mock survey, at least one of the observations should be conducted on and pertaining to a client that was part of the sample for the client review.
- 2. When possible the observations of the medication administration should be done with the intent of verifying that the staff administers medications using the proper technique and medications are administered as ordered.
- 3. The observation should consist of:
 - 10 medications being administered,
 - three or more different staff administering the medications, and
 - include medications administered via three or more different routes and
 - at different medication administration times.
- 4. Utilize the MDH Medication Administration Observation / Drug Storage form which provides a very useful and easy check list for the mock survey. It has 26 key observations to be made and can be downloaded from the following link: <http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/medadmin.pdf>

Step 2. Treatment Observation

Instructions:

- 1. When possible, the mock survey observation should be of clients receiving at least three different treatments – for example: blood glucose checks, tube feedings, wound cares, administration of oxygen therapy, etc.
- 2. The observation sample should include performance of seasoned employees as well as of the new employee.
- 3. Utilize the MDH Treatment Observation Form as it provides an excellent format for identifying services being provided to clients, capture and record the type of treatment, the time the observation was made, the employee who provided the treatment and space for comment regarding observation. The form can be downloaded from the following link: <http://www.health.state.mn.us/divs/fpc/profinfo/lic/HCtreatmentobservationfrm.pdf>

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 6. Personnel Record Review

Prior to delivering any service to clients a new employee must have completed their TB screening, the criminal background check, training related to each client, met the annual education requirements and have knowledge of where and how to access the policies and procedures.

Instructions:

- 1. Utilize the MDH Home Care Comprehensive Provider Unlicensed Personnel, Professional, Contract and Volunteer Record Review. To download the form, click on the following link:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/comppersonnelrecord.pdf>
- 2. To do a personnel record review select from two of the unlicensed staff that were observed providing services such as the treatments, medication pass, or cares.
- 3. Include in the sample for the personnel record review – at least one that has been employed less than a year.
- 4. Verify the recorded information in the personnel record review by asking the staff whose record being reviewed regarding the education received, timing of the education, when and how they received training, and if a return demonstration was part of the training.
- 5. Conduct section B of the record review regardless if there were no issues identified during the observations and interviews.
- 6. Utilize the MDH TB Prevention and Control – Surveyor Checklist to evaluate if the home care agency’s policy, procedure and practice for TB screening are met for health care workers by clicking on the following link:
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/tbsurveyorcheck.pdf>

Please note the TB checklist includes additional requirements for other care settings which involves their residents and not just the health care worker:

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 7. Client Record: Documentation

- 1. Utilize MDH client review form.
<http://www.health.state.mn.us/divs/fpc/homecare/surveyforms/compclientroster.pdf>
- 2. All services provided to clients is documented in the client record.
- 3. All incidents involving clients is documented in the client record.
- 4. Standards of health care records are met.
- 5. The content of the client record (if hard copy) has a consistent order and arranged preferably with the various sections organized from the most recent to the oldest.
- 6. Service Plan
 - Needs to be current.
 - For original and all succeeding revisions and modifications the signature of the client and or client's representative must be present. If unable to get the signature – documentation must summarize the attempts to get the signature as well as any verbal agreement with time date and name of contact.
 - Identifies the services, treatments and or therapy services that agency staff will provide.
 - The services to be provided are specific for example: rather than “a.m. cares” the plan should read “a.m. cares with dressing, assist with morning oral cares and grooming, etc.”
 - The physician orders are up-to-dated and changes made timely.
 - All medication and treatment orders are in the client record for any medication management services, treatments or therapy services that agency staff will provide.

Assisted Living Comprehensive Home Care Agency Self-Assessment / Mock Survey Program

Phase 8. Review of Education Record

1. Verification and documentation of orientation. Each home care provider shall retain evidence in the employee record of each staff person having completed the orientation required by this section.
 - o Content of the education;
 - o Who the instructor is;
 - o Date, time and duration of the program;
 - o How learning is verified – if competency is by a test what is the acceptable passing score or identify other methods for used to test competency and define what is passing;
 - o Attendance roll-call identifies which attendees received credit;
 - o Annual infection control;
 - o Annual behavior management;
 - o Attendees are given a copy of any training they successfully completed for their own personal records.

2. Orientation Training of staff and supervisors to home care requirements:
 - o All staff providing and supervising direct home care services must complete an orientation to home care licensing requirements and regulations before providing home care services to clients;
 - o The orientation need only be completed once for each staff person and is not transferable to another home care provider;
 - o Training needs to be completed before providing home care services to clients (compare hiring date with date education was completed).

Content shall include

 - o An overview of sections [144A.43](#) to [144A.4798](#);
 - o Introduction and review of all the provider's policies and procedures related to the provision of home care services;
 - o Handling of emergencies and use of emergency services;
 - o Compliance with and reporting of the maltreatment of minors or vulnerable adults under sections [626.556](#) and [626.557](#);
 - o Home care bill of rights under section [144A.44](#);

- Handling of clients' complaints, reporting of complaints, and where to report complaints including information on the Office of Health Facility Complaints and the Common Entry Point;
 - Consumer advocacy services of the Office of Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county managed care advocates, or other relevant advocacy services; and
 - Review of the types of home care services the employee will be providing and the provider's scope of licensure.
3. Orientation to client.
- Staff providing home care services must be oriented specifically to each individual client and the services to be provided;
 - This orientation may be provided in person, orally, in writing, or electronically.
4. Training required related to Alzheimer's disease and other related disorders.
- If working with Alzheimer clients the care giver must receive training that includes a current explanation of Alzheimer's disease and related disorders;
 - Effective approaches to use to problem-solve the challenging behaviors when working with Alzheimer's or related disorders;
 - How to communicate with clients who have Alzheimer's or related disorders.
5. Required annual training.
- All staff that perform direct home care services must complete at least eight hours of annual training for each 12 months of employment. The training may be obtained from the home care provider or another source and must include topics relevant to the provision of home care services. The annual training must include:
 - Training on reporting of maltreatment of minors under section [626.556](#) and maltreatment of vulnerable adults under section [626.557](#), whichever is applicable to the services provided;
 - Review of the home care bill of rights in section [144A.44](#);

- Review of infection control techniques used in the home and implementation of infection control standards including a review of hand-washing techniques; the need for and use of protective gloves, gowns, and masks; appropriate disposal of contaminated materials and equipment, such as dressings, needles, syringes, and razor blades; disinfecting reusable equipment; disinfecting environmental surfaces; and reporting of communicable diseases; and
- Review of the provider's policies and procedures relating to the provision of home care services and how to implement those policies and procedures.

**ASSISTED LIVING COMPREHENSIVE HOME CARE
SELF SURVEY ASSESSMENT – MOCK SURVEY
AUDIT RESULTS**

Phase 1. Knowledgeable of Requirements

Met : Yes _____ No _____

Action to be taken:

Phase 2. The Survey Readiness 3 Ring Binder is current

Met: Yes _____ No _____

Action to be taken:

Phase 3. Mock Survey Client review

Met: Yes _____ No _____

Action to be taken:



Phase 4. Mock Survey Client / Family Interview

Met: Yes _____ No _____



Phase 5. Mock Survey Medication and Treatment Observations

Met: Yes _____ No _____

Phase 6. Review of the Personnel Record

Met: Yes _____ No _____

Phase 7. Client Record Review

Met: Yes _____ No _____

Phase 8. Education Review

Met: Yes _____ No _____