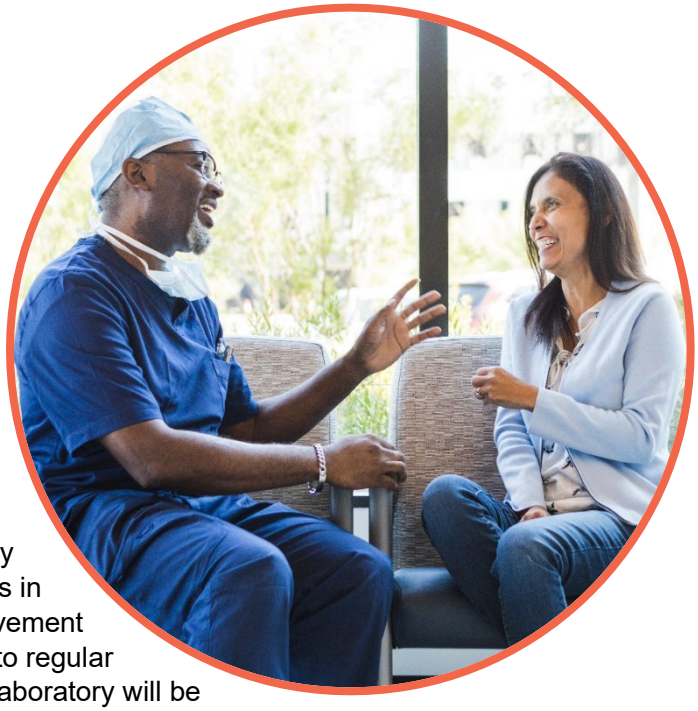
Guide for Responding to Surveyors



To receive reimbursement, the Centers for Medicare & Medicaid Services (CMS) requires hospitals and nursing homes to pass regular inspections, also known as surveys, to ensure high-quality care is provided in a safe environment. Surveys may be conducted by CMS state or federal surveyors or by accrediting agencies with "deemed status" which allows the accrediting agency to survey facilities on behalf of CMS.

CMS does not currently require regular inspection of independent clinics or providers to participate in Medicare and Medicaid. However, because CMS regulates all laboratory testing (except research) performed on humans in the U.S. through the Clinical Laboratory Improvement Amendments (CLIA) program and are subject to regular inspection, independent clinics that operate a laboratory will be surveyed by either CMS state or federal surveyors or their respective accrediting agency regarding their laboratory services and operations.

What is Accreditation?

Health care facility accreditation is a voluntary self-assessment and external peer-assessment process used to determine a facility's current performance in relation to established standards aligned with and exceeding regulatory requirements. Accreditation is awarded if the facility's practices, processes and policies are in compliance with the accrediting agency's current standards as determined through direct observation survey processes performed by representatives of the accrediting agency.

CMS grants health care facility accrediting agencies with deemed status if their standards and survey processes meet or exceed the federal standards required for Medicare and Medicaid participation. Health care accrediting bodies with CMS deemed status include The Joint Commission (TJC), National Committee for Quality Assurance (NCQA), Det Norske Veritas (DNV), Healthcare Facilities Accreditation Program (HFAP), Accreditation Commission for Health Care (ACHC), Accreditation Association for Ambulatory Health Care (AAAHC) and more.

Why is Accreditation Important for Your Facility?

Choosing to become accredited demonstrates that an organization is committed to going beyond the minimum standards to provide high-quality safe care. Facilities that follow accreditation standards are more likely to use evidence-based approaches and have better clinical outcomes. Accrediting agencies perform inspection surveys on behalf of CMS and also provide supporting resources and consultation to ensure ongoing compliance.

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General Guidelines for Staff Interviews During Survey

1. Review the Accreditation and Certification Preparation Activity Guideline.
2. Introduce yourself with confidence.
   - State your title.
   - Briefly describe your role in the organization.
3. Answer questions honestly but keep it simple.
   - Be proud of what you do for your patients and community!
   - Answer completely but as simply as possible, then wait for the next question. Do not offer more than asked for.
4. Focus on the positive.
5. Remain calm if the surveyors ask tough or confusing questions.
   - Don't understand the question? Ask for clarification.
   - Don't know the answer? Say, "I would need to clarify that with my supervisor and/or refer to our policies/procedures."
   - If they ask a general question (e.g., "Tell me about your department."), start with accomplishments and the big picture (e.g., "What I'm most excited about is…" or "What we're most proud of is…").
6. Discuss the impacts natural disasters or other emergencies have had on your organization.
   - Describe operational changes implemented in response to emergencies (e.g., facility closures, staffing adjustments, resource reallocation).
   - Outline efforts to ensure continuity and quality of patient care during and after the emergency (e.g., alternate care sites, triage protocols).
   - Highlight collaboration with community partners and agencies that supported response and recovery efforts.
   - Explain your plans and processes for recovery and reinstating normal operations, including any updates to your emergency preparedness protocols.

Common Surveyor Questions for Staff

- What quality improvement projects(s) are you working on?
- What do you do to prevent the spread of infections?
- If you saw something unsafe, what would you do?
- How can patients and families report concerns?
- How would you report an incident or safety concern?
- What would you do in case of an emergency?
- How do you know that is what you should do? (Policies, procedures, instructions for use)