



*Your Lifeline for
Survey Success*

– SURVEY TRAINING HANDBOOK –
for CNAs



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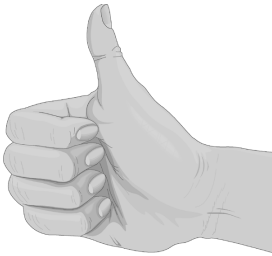
About the expert

Cindy Frakes, LNHA

Cindy Frakes, administrator at Medicalodge Post-Acute Care Center in Kansas City, KS, served as the advisor for this handbook. Frakes has more than 25 years of experience in long-term care and has participated in numerous nursing home surveys.

She has held positions as a certified nursing assistant and has worked in medical records and as a regional manager. She has been a licensed nursing home administrator since 1980.

Frakes wishes to thank the nursing staff of Medicalodge Post-Acute Care Center for their valuable contributions in developing this handbook.



A crucial role—We count on you!

Certified nursing assistants (CNAs) are the frontline workers in nursing homes. Nurse aides make up the largest number of caregivers in nursing homes and provide most of the direct care to residents. You play a critical role: The well-being of our residents depends on your skills and the relationship you develop with them.

Because your primary duty is direct care, you are often the first person to identify changes in a resident's condition. Often nursing home administrators liken their nurse aides to the "eyes and ears" of the facility.

Think of the different nursing home departments as spokes on a wheel. It takes everyone—including you—to keep that wheel turning and the facility running on the right track. If you think the job you do isn't important, think again. So thank you for all of the hard work you do every day.



We live by a tough set of rules

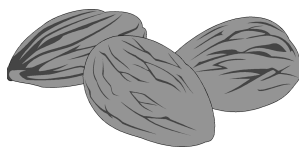
This nursing home receives state and federal tax money to pay for the care of the residents. Because the government pays for most of the care, it has many rules and regulations that nursing homes must follow.

So who makes sure nursing homes follow the rules?

Each year, the state sends out a team of surveyors or inspectors, usually registered nurses, to make sure nursing homes are doing the job right. This annual inspection takes about one week. It will be shorter or longer depending on the size of the facility and what kind of problems the inspectors find.

During this inspection visit, surveyors will watch you do your job and ask you questions. It can be a stressful time—like taking a test with the teacher standing over your shoulder. By being prepared and knowing what to expect, you'll have a better handle on the survey process. Read this handbook and keep it so you can refer back to it as a guide later.

It is important for a nursing home to do well during a survey. The ultimate goal is to be deficiency- and mistake-free.



The survey process in a nutshell

When they come to this nursing home, state surveyors must follow a detailed process for conducting their inspection.

Nursing home staff have no advance notice that surveyors are coming. Surveyors can arrive at this nursing home at any time, including weekends and nights.

✓ **How surveyors prepare for a visit**

Before surveyors even arrive at this nursing home's door, the members of the survey team have prepared for their visit. They know a great deal about the facility and its residents.

How is that the case? In what is called its off-site survey preparation, the survey team has reviewed reports about the facility, its residents, and the care they need. This review allows surveyors to identify issues that may be problems in the facility and select residents they will review. For example, do many residents have pressure sores or suffer from weight loss?

Surveyors will then focus on residents with those problems. They will watch the care that the CNAs and other staff provide. Surveyors will follow and monitor this sample of residents throughout the survey, so if one of your residents is chosen for review, you may feel under the microscope. Remember to follow the good work habits you practice each day.

✓ **Initial tour and on-site preparation**

All that preparation means that surveyors are ready to begin the survey immediately after they enter the facility. They will take an initial tour of the nursing home, getting their first look at the facility, the residents, and the staff.

The survey process directs surveyors to look closely at a nursing home's efforts to prevent pressure sores, its dining and food service, prevention of resident abuse, the occurrence of adverse drug reactions, whether residents get enough fluids to prevent hydration problems, and unintended weight loss in residents.

In evaluating this facility, surveyors will focus on residents' grooming, dress, and hygiene and how staff members interact with residents. They will look for good infection control practices such as regular handwashing, cleanliness of equipment, and a safe environment.

It is always important to give a good first impression to surveyors. Be professional and do your job as best you know how.

✓ **Resident interview**

During the survey, the inspectors will talk to residents about what it is like to live in the nursing home.

As part of the interview, surveyors will ask residents about their care. They will ask questions such as: Do you feel that you get help when you need it? Do staff encourage you to do as much as you can for yourself? Are you involved

in making decisions about your nursing care and medical treatment? Do you feel that staff members listen to your requests and respond appropriately? How does your food taste? Is the facility clean and free of bad smells?

Surveyors also want to know how residents feel about staff members at the facility. They may ask residents questions such as: Do the staff members treat you with respect? Do you feel they know something about you as a person? Has a staff member ever yelled or sworn at you?

✓ **Group interview**

During the survey, surveyors will also talk with members of the resident council if one exists, or with an informal group of residents.

✓ **Family/friend interview**

If surveyors cannot interview a resident (perhaps because he or she cannot understand the questions), the surveyors will try to interview a family member, friend, or guardian who acts on behalf of the resident and authorizes care.

✓ **Observations and citations**

Throughout the survey, the survey team will observe what goes on in the facility. Surveyors will then determine the facility's compliance with the regulations based on the information gathered during the survey.

At an exit conference, the surveyors will meet with the nursing home administration and report any mistakes or deficiencies they found.



When surveyors ask, how should you answer?

As part of their inspection, you can expect that surveyors will ask staff members (maybe even you) questions. While questions from a surveyor can be scary, remember to stay calm and answer truthfully.

Be prepared to answer the following questions during a survey:

- ? What would you do in case of a fire?
- ? What would you do if you saw or heard someone abusing a resident? Examples of hearing possible abuse might be hearing an argument, foul words, a slapping sound, or a resident crying out.
- ? What can you tell me about your nursing home's quality assessment and improvement program?
- ? How do you know what your nursing home's policies are? Policies and procedures refer to the rules and instructions you are given about how to do your job right—such as following a resident's care plan, reporting changes in a resident's condition, how you handle clean and dirty linen, and proper handwashing rules.

Keep these tips in mind when talking to surveyors:



Don't give more information than is asked for. Just answer the question. Don't rattle on out of fear that you don't know the answer. If a surveyor asks a specific question about a resident's room or diet, for instance, answer that question. Don't take it as an invitation to talk about everything you know about that resident's care.



This is not the time to complain about the facility. You don't want to blame other people or departments for a problem the surveyor has raised questions about. Let surveyors find problems themselves.



Talk to the surveyor just like you would talk to any important visitor. Be kind, professional, and use appropriate language.

And what should you do if you don't know the answer to a surveyor's question? Or if you "go blank"?

If you don't know the information, don't guess. Don't make it up. Don't "wing it." That can create problems. If you don't understand the surveyor's question, say so.

It's okay to say, "I'm not sure, but I can find out for you." Find a supervisor for help. You need to find out the answer from someone who knows.



Are you lookin' at me?

During the inspection of a facility, surveyors always want to observe CNAs giving daily care to residents.

Surveyors will watch for good skin care techniques, such as washing urine and feces off the skin of a soiled resident. They will check for your awareness of good infection control techniques, such as cleaning urine and feces away from any wounds, not across them. They will expect to see “front-to-back” perineum area care when you are cleaning a resident.

Surveyors will also watch to see whether you are aware of a resident’s plan of care (POC). For instance, if the care plan calls for a resident to try and improve her range of motion, do you encourage her to fully extend her arms during dressing and bathing so that she stretches her muscles and moves her joints during the activity?

Remember that good habits pay off. Doing things right each time you perform a task means you are prepared to be “observed.” If you are uncomfortable when a surveyor is observing you as you provide resident care, it is okay to ask for a supervisor or another CNA to be with you in the room.



Follow those care plans

Federal regulations require nursing home staff to provide residents with the care and help that will allow them to maintain their “highest possible levels of well-being.” However, since most residents have deteriorating health because of disease or the aging process, adhering to these regulations is difficult.

When a resident comes to this facility, the nursing home performs a thorough assessment to determine what problems the person has. Is this resident incontinent? Suffering from depression? Having difficulty walking? Nursing homes use a form called the Minimum Data Set (MDS) to assess the needs and strengths of residents. Nurses do these assessments periodically to see whether residents’ needs have changed.

After completing an assessment, the nursing home staff develop what’s called a comprehensive care plan or plan of care (POC) for each resident that includes all problem areas, goals for the resident, methods for achieving those goals, and documentation of the resident’s progress. For example, what will staff do to keep Mrs. Jones from falling or Mr. Smith from losing weight?

CNAs often have the most knowledge of a resident's day-to-day preferences and routines, as well as ideas for caring for the resident. Your input into the care planning process is very important. Your supervisor may ask you to attend the care planning meeting where staff will discuss the resident's needs or, if you cannot attend, another staffer may talk to you about how the care plan can benefit the resident.

Staff members use the care plan to try to prevent declines in a resident's well-being. Surveyors will expect to see that staff consistently follow the care plan. As a CNA, you must know what care you need to provide each resident and the rationale for providing it. For instance, you would need to know that Mrs. Walters' care plan requires you to help her to the bathroom every two hours to try to improve bladder function and prevent incontinence. Surveyors will check to see that you provide the care called for in the care plan.

Respect resident rights

Comedian Rodney Dangerfield has complained for years: “I don’t get no respect.”



But that’s one complaint you don’t ever want to hear from one of your nursing home residents. Protecting every resident’s rights and dignity is a top priority of this nursing home. Surveyors are constantly listening and observing to see how you and other staff members treat the residents.

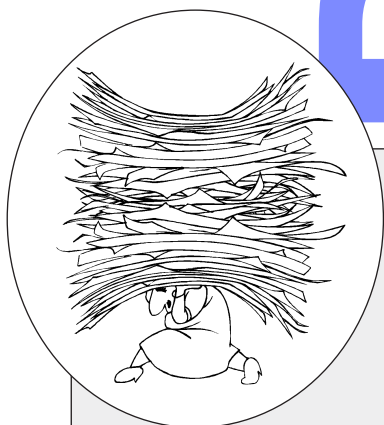
So follow these tips to protect resident rights:

- Stop and take time to listen to what each resident wants. Let the resident make choices.
- Don’t discuss a resident’s medical, social, or financial matters with people who are not involved in his or her care. Don’t hold such conversations where others can overhear.
- Protect every resident’s privacy. Pull curtains or close doors to protect privacy.
- Always knock and identify yourself before entering a resident’s room and then wait for a response.
- Introduce yourself to the resident.

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- Talk to your residents while working with or near them. Surveyors don't want to see staff members talking to each other and ignoring the residents.
- Sit down when feeding or assisting residents and talk to them.
- Always address each resident by his or her preferred name. Don't use nicknames or call a resident "honey" or "darling" unless the resident asks to be addressed that way.
- Clean up the resident's hands and face after meals. Be sure there are no stains on clothing after meals.
- Clean up spills on tables and floors after meals.
- Be sure to address the concerns of any resident who is yelling out. Don't ignore the resident.
- Serve everyone at the same table in your dining room at the same time. No one should sit and watch others eat.
- Don't change the radio or television station without the resident's permission, and make sure it's tuned to a channel he or she enjoys.
- Speak respectfully. Don't shout or use foul language.

- Don't borrow one resident's clothing or toiletries for use by another resident.
- Don't help yourself to residents' personal items, such as taking candy or using their telephone. If you see someone else doing this tell that person to stop and let your supervisor know.



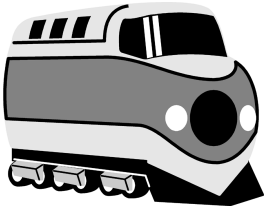
Need a lift?

Lifting, transferring, and ambulating residents is the backbone of a CNA's day!

Your facility will instruct you on how to lift safely to prevent back or other injuries. Use good lifting habits with all loads, large and small.

Make it a point to keep gait belts handy to use when transferring and walking residents.

Use mechanical lifts where needed for your safety and that of residents.



Stop resident abuse in its tracks

You, this facility, and the government want to make sure every nursing home does all it can to protect residents from abuse and neglect.

That's why this nursing home has a zero-tolerance policy that prohibits the neglect and abuse of residents and the theft or use of a resident's personal possessions without his or her permission.

Residents have the right to be free from any verbal, sexual, physical, and mental abuse. No one should abuse a resident—including friends, family members, guardians, visitors, other residents, volunteers, consultants, agency people providing resident services—nobody!

If you see an incident of resident abuse, report it immediately to your supervisor. If you see or hear something that makes you uncomfortable, don't try to decide on your own whether it was abuse. Let your supervisor take that responsibility off your shoulders. It's better to be safe than sorry.

What is abuse? It can be physical, such as hitting, slapping, pinching, or kicking. Verbal abuse includes threats of harm, saying things to frighten a resident, or using disciplinary, rude, insulting, or foul language. Mental abuse includes humiliation, harassment, or threats of punishment, like saying to a resident, "If you don't stop that I'll take your call light away."

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Caregivers must never use cruel or mean language, roughly handle a resident, or ignore a resident while giving care.

Neglect can be harder to define. If a staff member fails to do something that can cause a resident to become sick, it may be neglect. Not cleaning a resident's room, not giving a resident the right kind of diet, or not giving a resident his or her medicine may also be neglect.

You can expect surveyors to ask staff members questions about how this facility protects residents from abuse. Be prepared to answer the following questions:

- ? What would you do if you saw another person being abusive to a resident?
- ? How would you deal with an aggressive resident?
- ? Do you know the signs of burnout, frustration, and stress that may lead to abuse?

Surveyors will ask these questions to find out how this nursing home trains and encourages you and other staff members to let someone know whether they or another person needs a break or additional training so they can handle the daily stress of the job. We all know it can be very emotionally and physically challenging to take care of people. A supervisor may change the job assignment of a CNA for a while to give him or her a break, talk about what to do when someone is very stressed, or give extra training in how to handle tough situations.

Safety first

You can help protect the safety of residents and everyone in the facility by knowing how to react in an emergency. Often surveyors will ask staff members questions about disaster and emergency procedures. Know the facility's evacuation, fire procedure, and disaster plans. Know your role in the event of disaster.

In a fire, remember **RACE**:



- R**escue
- A**larm
- C**ontain
- E**xtinguish

When using a fire extinguisher, remember **PASS**:



- P**ull the pin
- A**im at the base of the fire
- S**queeze the handle
- S**weep side to side

Safety rules protect you and the residents. Follow them.

**SAFETY
FIRST**

**KEEP THIS AREA
SAFE AND CLEAN**

A safe environment

Yes, this is a nursing home, but surveyors expect to see a home-like environment. Surveyors will look for personal items in residents' rooms such as family photographs, books and magazines, bedspreads, knickknacks, mementos, and furniture.

When you go into a resident's room, can you learn something about his or her everyday life and interests? Are there signs of who the resident was prior to coming to the nursing home? Do staff respect the resident's personal property?

Surveyors will check to see that resident care equipment is clean and properly stored. The facility must be uncluttered, neat, and well-kept.



Tips: Don't leave personal items on sink tops. Mark personal items and be sure they are put away. Keep resident rooms uncluttered and in good repair so residents and staff can move around without tripping or having to move around obstacles.

Make sure that trash barrels are emptied and covered. Be sure that bedside commodes are emptied and cleaned. Keep residents' rooms clean and free of dirty linen. Store away any urinals/bed pans, and be sure that beds are made.



Preventing accidents

Staff must ensure that the facility is as free of accident hazards as possible.

This is the second most frequently cited deficiency in nursing homes across the country. You can play an important role in protecting residents by preventing accidents. For instance, always check to be sure resident equipment is in good condition. Check the brakes on wheelchairs and geri-chairs. Check walkers for loose nuts and bolts. Report any problems to your supervisor or to the maintenance department.

Bathing facilities should have nonslip surfaces to prevent falls. Be aware of hazards, such as electrical appliances with frayed wires and cleaning supplies that are easily accessible to cognitively impaired residents. Be sure staff put up signs when floors are wet and block access. Make sure handrails are securely fixed to the walls, easy for residents to grasp, and without any sharp edges or splinters. Water temperatures in hand sinks and bathtubs should be kept low enough that they don't scald residents.

Tips: Keep resident wheelchairs clean from dirt and food, and ensure that they are kept in good repair. Also, make sure halls are free of excess wheelchairs and that you clean up any spills right away. Keep tools, carts, and supplies away from residents to prevent serious harm. Many residents have limited eyesight and cannot see tripping hazards or read caution labels on products.



Mom was right, wash your hands

What's the single biggest way to help ensure that infections don't spread within this nursing home?

It's handwashing. You can expect surveyors to take a close look at infection control practices, including whether you and other CNAs regularly wash their hands.

Remember to wash your hands before and after caring for each resident!

Remember to wash your hands after glove changes between procedures on the same person.

Wash your hands each time you remove gloves, handle soiled laundry, and before you leave a room.

It's also important to wash your hands as a matter of personal hygiene. So don't forget to wash your hands after smoking, eating or drinking, using the bathroom, petting animals, touching garbage, sneezing or coughing into your hands, or whenever in doubt. If you use the phone, wash your hands!

The regulations require handwashing and the Centers for Disease Control and Prevention (CDC) says proper handwashing is the single most important procedure for prevent-

ing infections. The CDC also endorses the use of alcohol-based hand rubs to clean your hands.

Follow these guidelines:

Wash your hands for at least 10 seconds, vigorously rubbing together the lathered surfaces. Pay particular attention to your fingernails and between your fingers. Thoroughly rinse your hands under a stream of warm water. Use a paper towel to turn off the faucet.

The government also recommends that health care workers keep short, natural fingernails and that they not wear fake press-on nails. Long fingernails can harbor bacteria.



Gloves help protect you and the residents

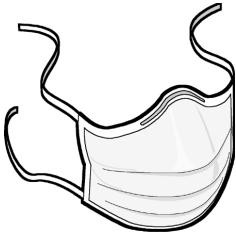
You wear gloves to protect both yourself and the residents you work with.

When it comes to glove use, keep in mind:

- Use gloves whenever you may come in contact with bodily fluids including blood and urine.
- Change gloves and wash or sanitize your hands between procedures on the same person.

- Change your gloves between caring for residents.
- Don't wear gloves in the hallways. Remove gloves and throw them in the trash before walking out in the hallway.
- Wash or sanitize your hands whenever you remove your gloves.
- Don't touch barrels, door knobs, faucets, or residents' personal items with dirty gloves on.

Remember, gloves don't replace handwashing!



Infection control

You have a role to play in infection control. Be sure you know about your facility's infection control program and stay up-to-date on any changes. Follow facility policies for handwashing, wearing gloves, mask and gown use, linen handling, housekeeping, needle and hazardous waste disposal, as well as other ways to limit the spread of diseases.

Properly use disinfectants, antiseptics, and germicides according to the manufacturer's instructions to avoid harm to staff, residents, and visitors and to ensure effectiveness.

Always sanitize tubs, showers, whirlpools, and multiple-use equipment according to the manufacturer's recommendations. Follow the facility policy for disposing of infectious waste.

Tip: If you go into any area where a resident is isolated because of a contagious illness, use proper isolation techniques such as gloves, gowns, or hair-coverings.



Dining right

Every nursing home is responsible for ensuring that each resident has a well-balanced diet that looks and tastes good, and meets any special dietary needs. Here are some of the areas surveyors will focus on:

- Surveyors will observe mealtimes to see whether staff members serve trays quickly and that they are not left on a hall cart or bedside table long enough to become cold. Surveyors pay lots of attention to food temperatures because after all, who wants to drink cold coffee or eat melted ice cream?
- Be sure a resident's tray has the right food called for in an assessment and care plan. For example, is food cut, chopped, or ground for an individual's needs?
- You will want to have an alternative meal available for any resident who does not want the meal that staff serve. Staff members should offer and encourage a substitute meal if a resident has not eaten well. Make sure substitutions are of similar nutritional value. For instance, instead of grapefruit juice, offer orange juice, which the resident may prefer.
- Always observe the amount of food that residents eat. If they eat less than normal, ask whether they disliked the meal and want something else. Sur-

veyors pay close attention to food intakes and will ask residents whether they liked the food and whether staff offered a substitute if they did not.

- A therapeutic diet is one ordered by a physician. The diet can be part of treatment for a disease or clinical condition (such as diabetes) or to eliminate salt or increase potassium or to provide a mechanically altered diet the resident is able to eat.



Tip: Check trays for correct diet and condiments. For instance, remember not to leave sugar on a tray for diabetics or add salt for residents on low-sodium diets.

- Nursing homes must provide special eating equipment and utensils for residents who need them. Be sure to provide residents with “assistive devices” to maintain or improve their ability to eat independently. Examples of assistive devices are enlarged silverware handles or a special seating arrangement that helps a resident sit close enough to the table to reach everything and sit up well.



Tip: In the dining room, check for equipment such as spoon holders or high-edge plates if they are ordered for a resident. Surveyors will expect to see that residents have these devices if called for in their care plan.

- Every nursing home must store, prepare, distribute, and serve food under sanitary conditions. This requirement is the most frequently cited deficiency

in nursing homes. This regulation is intended to prevent the spread of illnesses through food, which can be fatal to nursing home residents. Be sure to properly wash your hands before touching foods.

Be sure not to touch food with your bare hands while helping someone eat. If you use gloves, get fresh gloves and sanitize your hands after touching non-food items, and in between helping residents.

- Remember to respect residents' food likes and dislikes as often as possible to encourage them to eat. Include the "hidden calorie" foods that are easy to give residents, such as condiments. For instance, be sure to butter toast, put sugar in coffee, pour syrup on pancakes, and so on, unless dietary restrictions prevent these steps.
- Report all changes in appetite to a supervisor so that interventions to prevent weight loss can begin at the earliest possible time.
- Make sure residents have access to fresh water or fluids at all times. For nonambulatory residents, be sure to place a glass of water or other liquid within their reach. Keep fluids next to the resident at all times and assist or cue the resident to drink. You can also offer Popsicles, gelatin, and other similar nonliquid foods if they're not restricted from a resident's diet.



Tip: Be sure you provide thickened liquids to residents who need them. Be sure they are at the right consistency and given with all liquids throughout the day. Don't forget to thicken soups for these residents, as well.

In your role as a CNA, remember to talk to the other members of the health care team about what you see and know. The nurses, dietitian, social worker, and other CNAs won't always know what you see and know about how each resident is eating and drinking in the dining room, their bedroom, and between meals. Your valuable information helps to make sure the resident will reach and maintain his or her best nutritional health.



That never-ending laundry

Proper handling

Remember this: Staff must handle linens so as to prevent the spread of infection. You need to handle soiled linens in a way that contains and minimizes exposure to any waste products. Keep soiled and clean linens separated in the laundry room.

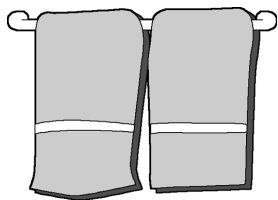
Follow these guidelines:

- Keep lids on barrels and close bags of dirty laundry.
- Bag soiled linen and clothing before carrying it down the hall.
- Place dirty linens in a bag on the chair, not on the floor.
- Keep dirty linens and clothing away from your uniform.
- Don't take clean linen from one resident's room into another room.
- Don't leave dirty linen in a resident's bathroom.
- Keep linen carts covered.

- Don't eat or drink in clean or soiled linen areas. You risk exposing yourself or someone else to germs.

Personal possessions

Make sure you return residents' personal clothes to their owner. Let your supervisor know about unmarked items as quickly as possible. Show special concern for quilts, bedspreads, or other items that may have sentimental value to residents. Remember that people who live in nursing homes give up a lot when they must move out of their own homes. Special dresses, quilts, and even their own socks make this nursing center their home.



Linens

Only use bed and bath linens that are in good condition. Take any sheets, towels, and washcloths that are frayed, thin, ripped, or torn to your supervisor so that the facility can replace them when it orders new supplies. Make sure there are enough bed and bath linens available for each resident.

Expect surveyors to focus on the appearance of residents. Resident clothing should also be in good condition. Be sure there are no buttons missing, broken zippers, or rips or holes.



Why survey results matter to you and this nursing home

Your team's 'grade card'

As you know, it's always important for a nursing home to do well during a survey. Every nursing home wants to be mistake-free.

If the surveyors find this facility has not followed a certain rule, they will give the nursing home a written list of deficiencies. The surveyors send this list of mistakes to the state and federal government in the form of a report card explaining what was found. This report card also tells the public how well we all do our jobs.

When surveyors find deficiencies, a facility must say how and when staff will fix the mistakes that were made and prevent them from happening again.

This facility has a quality improvement program. Your ideas to fix mistakes are an important part of this program. Ask your supervisor who is on the quality improvement team and give them your ideas.

Getting to know you, getting to know all about you

The public is hungry for information about nursing homes. So how did this nursing home do during its last survey?

Who, they wonder, will provide the best care for their mother or grandfather?

CMS provides information about your facility, including a summary of the results from your last survey, on its website.

You want the data to paint the right picture and to compare favorably with other nursing homes in your area. The job you do and the care you provide help paint that picture. Go to the Nursing Home Compare Web page at www.medicare.gov/nhcompare/home.asp to check out the information that CMS includes about this facility.

Frequency of surveys

All nursing homes face a state survey at least once every nine to 15 months and sometimes more frequently. The most common survey is the annual survey, which your facility must pass.

Surveyors will come to a nursing home more often if surveyors uncover serious mistakes or if a facility has a poor survey history. A complaint about the facility or its staff from a resident, family member, or other person can also result in an investigation.

Keep in mind, it's always important to be survey-ready. Do things according to the rules. If you don't understand or know these rules, don't be afraid to ask your supervisor or the administrator for help. You are not stupid if you ask a question. There are more than 500 rules to try to follow and understand.



What the heck are they talking about?

If you've never worked in long-term care before, during your first few days on the job you might have thought you landed on a different planet. CMS. MDS. QIs. What's everybody talking about?

Here's a little dictionary to help you interpret the language of long-term care.

CMS—The Centers for Medicare & Medicaid Services. This federal agency is in charge of the Medicare and Medicaid programs. CMS writes and enforces the federal regulations that govern nursing home care.

Deficiencies—When a nursing home fails to meet a federal requirement, surveyors cite that home with a violation or deficiency. When there are no violations found, the facility is “deficiency-free.”

The Joint Commission—The Joint Commission on Accreditation of Healthcare Organizations. Some nursing homes choose to undergo an accreditation survey by this independent, not-for-profit organization that evaluates and accredits health care organizations. A Joint Commission survey is separate from a state survey and is conducted by surveyors who work for the Joint Commission.

MDS assessment—MDS stands for Minimum Data Set. This is the detailed form that nursing home staff must use to assess a resident’s problems and needs. It is key to Medicare reimbursement and a critical part of the state survey process. Information on the MDS is the basis for a facility’s quality indicators or QIs.

Plan of care—Also called the care plan. Each resident has a care plan that identifies that person’s problems (for example, incontinence or the inability to walk), what nursing home staff need to do in response, goals for the resident, and documentation of the resident’s progress.

Quality improvement—Also called quality assurance. Regulations require each nursing home to have a quality assessment and assurance committee to identify problems and come up with plans to correct deficiencies.

Sample—As part of the survey process, surveyors will decide which specific residents they will focus on while in the nursing home. These residents will be the “sample selection.” Surveyors will closely review these residents’ charts, including care plans, interview them if possible, and observe staff as they provide care.

State Operations Manual—Also called the *SOM*. Published by CMS, this manual contains the guidelines for conducting surveys and the regulations nursing homes must follow.

Survey—CMS contracts with state agencies to conduct nursing home inspections or surveys to see whether facilities are following its regulations. State surveyors or inspectors do a yearly inspection of all long-term care facilities before renewing the facility's license. A nursing home cannot operate without a license.

Survey team—Also called surveyors or inspectors. The team consists of nurses, dietitians, sanitarians, and others who inspect the facility.

Pop quiz

The following questions relate to the survey handbook you have just read. Please respond to the questions below to the best of your ability.

1. When state surveyors come into this nursing home, they are checking to be sure the way staff members do things complies with federal regulations.

True False

2. As part of the survey, inspectors will observe the care CNAs provide to residents, including whether you follow a resident's plan of care.

True False

3. What should you remember to do before entering a resident's room?

4. Residents need to eat what's on the planned menu, therefore if a resident does not like the meal that's offered, the facility should not substitute other foods.

True False

5. Surveyors will start from scratch when they arrive at this nursing home's door, having no prior knowledge of the facility's operations.

True False

6. What do the four letters in RACE stand for?

R _____

A _____

C _____

E _____

7. If you see an incident that you suspect may be considered resident abuse (but you're not sure), you should report what you saw or heard to your supervisor right away.

True False

8. If a surveyor asks you a question and you have no idea of the right answer, it won't hurt to guess since you don't want to look stupid.

True False

9. According to the Centers for Disease Control and Prevention, what is the most effective way to stop the spread of infection in health care settings such as nursing homes?

10. Survey results are kept private and members of the public do not have access to the results of state inspections

True False

I have read this training handbook and realize that the job I do is of critical importance to the residents who live here, to my coworkers, and to the survey success of this facility.

Name: _____ Title: _____

Signature: _____

Answer key

- | | |
|--|--|
| 1. True | 3. Always knock on the door |
| 2. True | 4. False |
| 3. Always knock on the door | 5. False |
| 4. False | 6. RACE = Rescue, Alarm, Contain, Extinguish |
| 5. False | 7. True |
| 6. RACE = Rescue, Alarm, Contain, Extinguish | 8. False |
| 7. True | 9. Handwashing |
| 8. False | 10. False |
| 9. Handwashing | |
| 10. False | |

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