THE NURSING HOME SURVEY PROCESS

1. HOW THE STATE SURVEYS NURSING HOMES FOR MEDICARE AND MEDICAID CERTIFICATION

TIMING:
All nursing homes must be licensed and inspected using state standards and homes that do not participate in Medicare and Medicaid are inspected using only these standards. The time frame for these inspections is every 12 months. The Office of Long Term Care Services, Assurance & Licensure Services Division, of the Arizona Department of Health Services, inspects nursing homes that provide care to Medicare and Medicaid clients using federal standards. Such inspections are called "surveys." The surveys take place every 9 to 15 months, with an average of every 12 months.

WHY ARE SURVEYS PERFORMED?
Surveys are conducted to make sure that the nursing home is meeting state and federal standards which spell out very specifically how care must be provided to nursing home residents. The areas looked at are quality of care and quality of life in the facility, whether residents' rights are observed and whether the facility meets environmental standards of cleanliness and is hazard-free. Facilities that do not meet all these standards must correct these "deficiencies" or they face a variety of sanctions.

WHO PERFORMS THESE SURVEYS?
Surveys are performed by teams of state employees (usually three or four people) who are specialists in nursing home care. The surveyors have backgrounds in nursing, social work, dietetics, sanitation, health care administration and counseling. These individuals must pass a test administered by the federal government to qualify as nursing home surveyors.

HOW DO SURVEYS OCCUR?
Prior to beginning a survey, team members review the nursing home's background. They look at previous survey results, complaint investigations, incident reports and quality indicators that give information specific to each facility. They also consult with the long-term care ombudsmen assigned to that facility. This gives them an idea of whether there are special concerns or problems that they should be aware of during the survey.

SURVEYS ARE UNANNOUNCED!
The nursing home is not notified in advance of a survey unless it is an initial survey. When the team arrives at the nursing home, they place a sign in the lobby informing everybody that a survey is in progress. The idea of unannounced surveys is for the team to be able to see how the facility operates on a daily basis.
HOW DO SURVEYORS CONDUCT THEIR WORK?
Surveyors observe what is going on in the nursing home; they interview residents, family members and nursing home employees and they read medical records and other documents. They also meet with nursing home staff members for clarification of questions. The surveyors summarize their observations to the facility staff at the conclusion of the visit.

WHAT KINDS OF QUESTIONS DO SURVEYORS ASK RESIDENTS AND/OR THEIR FAMILY MEMBERS?
The surveyors want to know what life is really like in the nursing home. They spend time talking to residents asking how staff treat them, what the food is like; whether residents like and participate in the activities being offered; and how the nursing home responds when they have a concern or a complaint. Surveyors want to know whether the home provides help to people when they need it with such daily tasks as bathing, dressing, eating meals, going to the bathroom and getting in and out of bed. They also talk to family members of residents who are "not interviewable", i.e. persons who can no longer speak or who have advanced dementia and other diseases which keep them out of touch with what's going on.

WHY IS IT IMPORTANT FOR RESIDENTS AND FAMILY MEMBERS TO PARTICIPATE IN INTERVIEWS?
It is important for residents and family members to participate in interviews because they know best what really happens in the nursing home. It is important they speak very frankly with the surveyors about the home's performance. The home is evaluated primarily on how it cares for its residents.

SHOULD I WAIT UNTIL A SURVEY IF I HAVE PROBLEMS THAT I AM REALLY CONCERNED ABOUT NOW?
No. Residents and family members should talk to the facility staff immediately about any concerns. If they are not addressed, help can be sought from the long-term care ombudsman or a formal complaint can be filed with the Office of Long Term Care Services, Division of Assurance & Licensure Services, Arizona Department of Health Services.

WHAT HAPPENS AFTER A SURVEY IS COMPLETED?
The team meets briefly with nursing home staff to explain the outcome of the survey. If the facility receives a statement of deficiencies, they are given ten days to respond with a “plan of correction.” A follow-up survey takes place to verify the accurate and timely implementation of the “plan of correction.”

DEFICIENCIES AND PLANS OF CORRECTION - A deficiency is a determination by the Office of Long-Term Care that a nursing home has violated one or more specific licensure or certification regulations. Deficiencies range in scope and severity from isolated violations with no actual harm to residents to widespread violations that cause injuries or put residents in immediate jeopardy of harm. Deficiencies are cited as a result of an on-site inspection.

When deficiencies are alleged, the facility is given an opportunity to rebut the findings. If deficiencies are cited, the Office of Long Term Care requires the nursing home to submit a written plan of correction detailing how and when each deficiency will be corrected. In some cases, the Office of Long Term Care will direct specific corrective measures that must be implemented. In
situations where current conditions at the facility pose a serious risk to the health and safety of residents or staff, the Office of Long Term Care can initiate immediate corrective actions.

**Nursing Home Regulations** – All nursing facilities in Arizona are required to meet mandatory state standards that set the minimum and essential requirements of care that must be provided.

**Enforcement Actions** – The information on state and federal inspections and complaint investigations is available from the Office of Long Term Care. When reviewing an inspection report it is important to remember that nursing homes have the right to appeal survey findings and penalties imposed. Such appeals may be pending at the time the report is used. On appeal, the decision of the Office of Long Term Care may be upheld or reversed, or a settlement may be reached in which fines are reduced.

It is also important to note that inspection reports show only a one-time “snapshot” of nursing home compliance with established standards. To more fully assess the quality of care provided by a facility, it is important that current and past survey reports by reviewed. You may also wish to discuss the facility’s services and performance with your doctor and family members or friends who have used the facility.

Complete survey reports and nursing home plans of correction, edited to protect patient confidentiality, are available at each nursing home as well as at the Office of Long Term Care. The most recent federal inspection surveys are posted on the CMS Website at [www.Medicare.gov/nursing/home.asp](http://www.Medicare.gov/nursing/home.asp).

**GLOSSARY OF TERMS**

**CERTIFICATION** – A determination that a nursing home meets the federal care standards for operating a home with Medicaid or Medicare funding.

**DEFICIENCY** – A failure to meet a federal and/or state standard for care. The most serious deficiencies pose an immediate threat to resident health or safety.

**EXIT CONFERENCE** – A meeting at the end of a survey where surveyors review their findings with the nursing home’s administrator and key staff.

**CENTER FOR MEDICARE AND MEDICAID SERVICES (CMS)** - A federal agency that oversees the regulation of nursing facilities that are paid by Medicare or Medicaid funds.

**LICENSURE** – A determination that a nursing home meets the state standards for operating a home in Arizona.

**OFFICE OF LONG TERM CARE LICENSURE** – An office in the Assurance and Licensure Services Division of the Arizona Department of Health Services set up to protect the health and safety of the residents in nursing care institutions.

**OMBUDSMAN** – A federally-mandated program with offices throughout Arizona. Ombudsman representatives are trained to received questions and complaints and to advocate for residents and families. The Ombudsman Program is administered through the Aging and Adult Administration of the Arizona Department of Economic Security [(602) 542-4445] and the Area Agencies on Aging.
CONTACTING US

PHOENIX
Office of Long Term Care Services
AZ Department of Health Services
150 N. 18th Ave., Ste. 440
Phoenix, Arizona 85007
602/364-2690

TUCSON
Office of Long Term Care
AZ Department of Health Services
400 West Congress
Tucson, Arizona 85701
520/628-6965