



Medical Consultants Network Inc.

Your Partner in Healthcare Compliance

CMS Validation Survey Video

Length 56 minutes

ITEM #50127

\$239.00

Additional workbooks available in sets of 10 for only \$29.95

(PLUS SHIPPING SEE ORDER FORM)

Now, you and your staff can view how a CMS Validation Survey actually takes place. See for yourself what happens, and what you can expect when the CMS surveyors arrive at your door! Learn what you and your organization can do to prepare for a successful CMS Inspection.

The video and workbooks address topics such as:

- Important differences between the JCAHO and CMS Validation Survey processes
- CMS requirements you are expected to meet that are not addressed by the JCAHO
- The CMS survey process and surveyor methodology
- Types of documents frequently requested
- Surveyor questions to selected staff
- Medical staff credentialing requirements
- Personnel qualifications and requirements
- Quality management data requirements
- Medication management issues
- Intensive nature of the physical inspection process
- Medical record documentation requirements
- Life Safety issues
- Inspection of individual units
- Staffing issues
- Best practice for assisting your surveyors and facilitating a smooth survey
- CMS surveyor observation of staff's performance of routine duties
- CMS surveyor discussions with patients

Don't let the thought of a "surprise" survey throw your institution into a panic. You can build confidence through knowing what to expect and plan in advance how your organization can demonstrate compliance with the CMS requirements.... *Don't be scared... stay prepared!* with MCN's CMS Validation Survey Video.

You will witness the review of personnel files and find out what surveyor concerns will be related to staff qualifications, staff education and training issues. Find out first hand what type of physical inspection the surveyor will perform and how *all* locations throughout the facility will be reviewed. Learn about the intensive focus on pharmaceutical management and medication use and which specific issues are emphasized during survey. Discover which documents prepared for JCAHO accreditation are sufficient for CMS surveyor review, and what other documents you may need to prepare and provide. Use the workbook and video to help your organization stay in a constant state of readiness!

We offer a 100% Money Back Guarantee! Call us at 1-800-538-6264

If not satisfied or product damaged in shipping return within 7 days for a refund or replacement.

FACTS ABOUT THE CMS VALIDATION SURVEY

To receive Medicare/Medicaid funds, hospitals must be in compliance with the CMS Hospital Conditions of Participation. Under the Medicare Act of 1965, CMS granted the Joint Commission on Accreditation of Health Care Organizations “deemed status” to survey hospitals for compliance with CMS’s Conditions of Participation. Therefore, through this legislation, JCAHO became the inspection arm for CMS.

CMS performs random “validation” surveys to assess the accuracy of (or, more appropriately, to validate the accuracy of) the JCAHO accreditation (or American Osteopathic Association – another agency with CMS “deemed status”) survey results. The purpose is to validate that the survey process of these two organizations is *equivalent in determination*, to a survey performed by CMS.

CMS may also perform a survey to validate compliance with the Conditions of Participation due to “cause”. A “for cause” survey may occur whenever there is a concern or complaint forwarded to CMS regarding patient health and safety issues. Also, a “for cause” survey can be conducted as a result of a press release or news article that indicates possible hospital non-compliance with one or more of the Conditions of Participation.

Differences Between JCAHO and CMS Surveys:

There are distinct differences between an accreditation survey performed by the JCAHO and a CMS survey (validation and/or “for cause”):

JCAHO	CMS
Surveys scheduled with advance notice – exception being the random unannounced survey	Minimal or no advance notice
Survey includes a strong educational component	Survey does not include educational component, tends to have a more “punitive approach”
Survey includes series of multi-participant scheduled interviews	Survey does not include scheduled multi-participant scheduled interviews – CMS surveyors may ask staff questions, however no formal interviews held
Survey includes high level participation from hospital staff as method to evidence compliance	Survey consists of significant “self” review by surveyors without participation by hospital staff
Survey includes a schedule of survey events submitted with hospital participation well in advance of survey	No pre-established survey schedule
Emphasis on ORYX data	May review ORYX data, but will not focus on this element

MOCK SURVEYOR UNIT SPECIFIC SURVEY TOOL

The following is a pre-survey readiness tool for use by the Mock Surveyor

- Tell me about the patients you typically care for on this unit.
- How did you make assignments in this shift?
 - How did you know a specific nurse is capable of taking care of this patient population?

- Do you require any special certifications for nurses on this unit? Yes No
 - If yes, what certifications? _____
- Show me evidence that the nurses on this unit are qualified to take care of this population.
 - Any and all certifications up to date:
 - RN License Yes No
 - CPR Yes No
 - Certifications Yes No
 - Evidence of education for this patient population? Yes No
 - Evidence of age specific education (peds, geriatric, etc.) Yes No
 - Safety issues – Evidence of education in:
 - Fire Safety Yes No
 - Emergency Management Yes No
 - Evidence of attendance at meetings:
 - Unit Inservices Yes No
 - Staff Meetings Yes No
 - Evaluation Current Yes No

CMS VALIDATION SURVEY

FOCUS ISSUES

Discuss with appropriate members of your organization how the following situations are managed and/or where documents or evidence of compliance for specific CMS focus issues are located:

- Transfer of patients, meeting compliance with EMTALA laws, informing the patient and obtaining patient consent to transfer – outside and intra-facility transfer

- Autopsies – mechanism for obtaining consent for autopsy and informing medical staff and attending physician of the procedure and findings:

- Discharge Planning – must be supervised by an RN or social worker or physician, patient's rights to request a discharge plan, high risk screening criteria, multi-disciplinary discharge planning:

- Discharge Planning – maintenance of a complete and accurate file on community-based services and facilities including long term care, subacute care, home care or other appropriate levels of care to which patients can be referred:
