

Long-Term Care Survey Alert

Survey Trends: AHCA CITES SPECIFIC REASONS FOR SURVEY INCONSISTENCIES

The **American Health Care Association** has identified for the **Centers for Medicare & Medicaid Services** what the group believes to be some specific causes of inconsistencies in survey findings nationwide:

1. Vagueness of CMS' definitions and guidance. For example, the definitions of "deficiency, harm, scope, and severity" and related survey guidance are subject to varied interpretations.
2. Political pressure, including that from (or placed on) the governor, department of health and/ or survey agency (SA) director.
3. Inconsistency or failure in communication from CMS central office to the regional offices or ROs. This problem encourages RO leaders to make their own decisions about CMS policy interpretations and send directives to their respective SAs that may differ from CMS Central Office and other ROs.
4. Variations in SAs' interpretation of CMS policy directives, guidance and expectations.
5. Extent or quality of the SA leaders' oversight of survey teams' work and findings. This includes use of quality assurance or quality management processes to hold surveyors accountable and ensure that deficiency citations are valid and correct.
6. Variations in SAs' emphasis. For example, one SA may emphasize pressure ulcer care and compliance while another emphasizes patient elopements from facilities as a safety issue.
7. Composition of survey teams. If a dietitian or pharmacist is a regular member of the team in a state, higher deficiency rates in their respective areas have been noted compared to states in which these professionals are used only as consultants.
8. Previous experience of survey team members. Those with long-term care experience generally have a better understanding of the patients, care and expectations in nursing facilities.
9. Federal regulations that allow deficiencies to stand even if surveyors do not follow CMS procedures.

