

OASIS Alert

Survey & Certification: CHECK YOURSELF BEFORE YOU WRECK YOURSELF

A new survey protocol is here are ready for it? Now that the **Centers for Medicare and Medicaid Services** has issued the draft protocol, home health agencies should start bracing themselves for gung-ho surveyors.

While many HHAs may be pleased to see a protocol focused more on outcomes and less on process, there is grumbling over how individual surveyors will approach each HHAs data, notes **Bob Wardwell** of the **Visiting Nurses Association of America**. Much of this anxiety stems from the contrast between CMSs intended use of surveying as an educational tool to help agencies improve quality and the potential for surveyors to employ it solely as a punitive measure against HHAs, Ward-well tells **Eli**.

After assessing initial reactions to the survey protocol, Wardwell found that a chief concern among HHAs was whether the protocol would in fact be geared toward quality improvement or if it was "going to be a gotcha game that surveyors play."

In the face of surveyors newest weapon, agencies must do more than simply brace themselves for a blow. To prepare, Wardwell encourages HHAs to study the eight adverse events and 10 OBQI outcomes on the protocol in conjunction with their most recent outcome reports.

Look over statistics to determine which of these AEs or outcomes will send a surveyor breathing down your neck. Then figure out why your agency might deviate from the national reference and put a plan in place to correct the problem, Wardwell counsels.

Wardwell likens this self-diagnostic tactic to an all-too-familiar grade-school memory. "To have a terrible flashback to my elementary education," he states, "its a pre-test, and if I get a couple words wrong on my pre-test, maybe I want to go study them a little more and see whats going on."

Rachel Hammon of the **Texas Association for Home Care** also suggests that home health agencies prepare for the survey protocol by focusing on what the surveyors will be looking for under these new guidelines. In particular, she notes CMSs emphasis on falls and believes agencies would be wise to educate themselves on any such incidents among their own patients (see related article #3).

Simply reviewing any prior patient falls or accidents isnt enough "if this [AE outcome] is going to be under scrutiny, then agencies need to be equipped to have a fall prevention plan in place," Hammon advises. To this end, Hammon has been busy directing HHAs to the **National Guideline Clearinghouse**, which is operated by the **Agency for Healthcare Research and Quality**. At the NGC Web site, Hammon stresses, home health agencies can access numerous evidence-based studies on falls, as well as fall prevention guidelines which HHAs can implement at once.

Editors Note: The National Guideline Clearinghouses Web site is at www.guideline.gov.