The purpose of the on-site survey is to determine whether the entity meets applicable state laws and administrative codes.

Surveys are conducted by nurse consultant surveyors employed by the Division of Quality Assurance (DQA).
THE SURVEY PROCESS

DQA may conduct an on-site survey for a variety of reasons including:

- as part of the initial application process
- if a complaint is received that might indicate the agency was out of compliance with regulations
- at intervals determined by DQA

THE SURVEY PROCESS

You should be aware that other state agencies could potentially come to your agency.

For example, the Office of Caregiver Quality might arrive to investigate any complaint of caregiver misconduct or the Office of the Inspector General might send personnel to investigate possible Medicaid Fraud or mismanagement.
THE SURVEY PROCESS

Per Wis. Admin. Code § DHS 105.17(4), DQA may make any inspections and investigations it considers necessary and may review clinical and administrative records, policies and other documents required, identified in Wis. Admin. Code §§ DHS 105.17 and DHS 107.112.

THE SURVEY PROCESS

DQA may contact clients of personal care providers as part of an inspection or investigation. The provider shall provide DQA with a list of names, addresses and other identifying information of current and past clients as may be requested.
THE SURVEY PROCESS

Initial Survey

As a part of the agency’s initial application, the agency must submit a written request to DQA to request an onsite survey before the agency’s provisional certification expires.

In order to ensure that DQA is able to schedule your onsite survey prior to the expiration of the probationary license, your agency should submit your request for survey at least 90 days before your license is due to expire.

THE SURVEY PROCESS

- In order to request an onsite survey, the agency must be fully operational and have served at least 5 personal care clients during the period of provisional approval.

- At the time of the on-site survey, the agency must be providing personal care services to at least 2 clients.

NOTE: Agencies who also provide supportive care services are reminded that this is not the same as personal care services. Clients receiving supportive services will not count toward meeting the requirement.
THE SURVEY PROCESS

All surveys are unannounced. This means that the agency will not receive notice prior to the arrival of the surveyor.

The surveyor will arrive during the normal business hours. Normal business hours are generally considered to mean between 8:00 AM and 4:30 PM Monday through Friday.

THE SURVEY PROCESS

If the administrator or designee is not present or the agency is closed, the surveyor will attempt to contact the administrator using the telephone number listed on the application for up to one hour.

DQA expects the agency to be available during usual business hours, therefore, if the surveyor is unable to contact someone, DQA will recommend denial for Medicaid certification.
THE SURVEY PROCESS

Upon entering the personal care agency, the surveyor will introduce themselves and ask to speak with the administrator.

During an entrance conference, the surveyor will inform staff about the survey process, request information needed to conduct the survey, set up a schedule for necessary interviews and begin to select clients for home visits.

THE SURVEY PROCESS

Information the surveyor may request includes:

1. The unduplicated number of clients admitted for all services for the past 12 months regardless of payment source, except those clients who are only receiving supportive home services.

2. Copy of the client admission packet.

3. Contracts with workers and other agencies.

4. Home visit schedule for survey days.

5. List of discharges within the previous 30-60 days.
THE SURVEY PROCESS

6. Client records, including the nursing assessment, physician orders, plan of care, personal care assignments, record of all personal care visits/notes and RN supervisory visit documentation.

7. List of personnel with dates of hire and specific personnel files.

8. A written plan of operations indicating the entire process from making referrals through delivery of services and follow-up.

THE SURVEY PROCESS

9. A written statement defining the scope of personal care services provided, including the population being served, service needs and service priorities.

10. Written job descriptions.
THE SURVEY PROCESS

Home Visits

The surveyor conducts home visits based on a random sample of all current clients. After receiving a client’s oral or written consent, the surveyor observes staff implementing the plan of care in the client’s home.

THE SURVEY PROCESS

Record Review

The surveyor reviews a random sample of client health records. Clients selected for home visits are included in the sample.
THE SURVEY PROCESS

Personnel Records

The surveyor reviews a sample of agency personnel records of individuals directly employed or under contract. A sample of personal care worker and RN supervisor personnel records are reviewed to ensure that the personal care workers and RN supervisors meet the qualifications, training and all other requirements for personal care agency employees.

THE SURVEY PROCESS

Exit Conference

The exit conference is an informal meeting between the agency and the surveyor at the end of the survey. The surveyor will summarize the preliminary findings.

The administrator can determine which staff should attend the exit conference. If an agency wishes to audio or video tape record the exit conference, it must first obtain permission from the surveyor.
Survey findings will be issued electronically and are completed within 10 working days from the date of exit.

Statement of Deficiency (SOD)

Electronic format is used to document citations if any deficiencies are found during survey.

The citation will have a tag number that corresponds to regulatory requirements in Wis. Admin. Code §§ DHS 105.17 or DHS 107.112.
THE SURVEY PROCESS

Plan of Correction (POC)

The plan to correct violations of deficiencies found by the DQA should be returned to the surveyor within 10 calendar days.

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THE SURVEY PROCESS

Plan of Correction (POC)

The POC should include the following:

- What the personal care agency will do to correct the deficient practice and ensure continued compliance in the future.
- How correction will be accomplished and monitored.
- Who will implement the plan and monitor future compliance.
- When the corrections will be completed.
Plan of Correction (POC)

The plan of correction should be accomplished within 60 days of the exit conference or sooner. Serious deficiencies or violations require a correction date of 30 days or less. If the completion date extends beyond 60 days, the plan of correction must include benchmark dates to specify when correction stages will be completed.

Plan of Correction (POC)

Within 5 working days of receipt of an accepted plan of correction, the surveyor will notify the agency of approval via email.
THE SURVEY PROCESS

Verification of completion and compliance with the Plan of Correction

- The surveyor may choose to complete a desk review to ensure compliance with the plan of correction which would involve requesting copies of records that would indicate compliance e.g., training records, revised forms, current plans of care, etc.
- The surveyor might do a verification visit which is an unannounced on-site survey.
- The surveyor might check for compliance at the next occurring on-site survey (during a recertification or complaint survey).

CONGRATULATIONS!

You have successfully completed Module 4 of the Personal Care Webinar Series.