

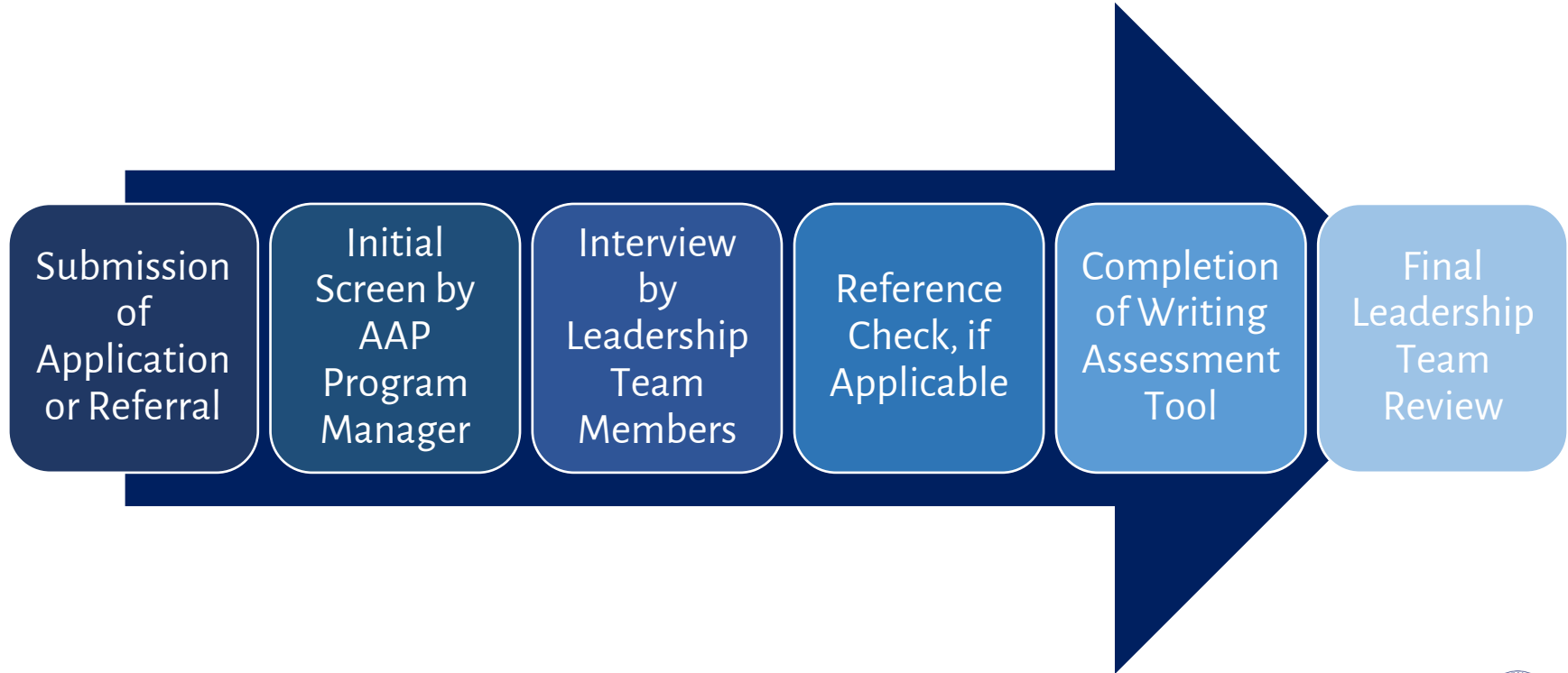
American Academy of Pediatrics NICU Verification Program

Survey Agency Report to the Texas Perinatal Advisory Council

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SURVEYOR SELECTION



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NICU Verification Program

SURVEYOR TRAINING

Meet with the AAP NICU Program Manager

Review all AAP and TX DSHS required training materials

Review of Texas Administrative Code

Observational Survey and Post-observational Survey Debrief

Precepted Survey and Post-precepted Survey Debrief

First Independent Survey

Attend Annual Education as Required

Utilization of Standardized Surveyor Questions and Survey Documents



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CONSULTATIVE & COLLABORATIVE APPROACH



Neonatal Medical Director (NMD) and Neonatal Program Manager (NPM) are asked to be physically present and easily accessible for the duration of the NICU survey.



Loop closure performed with the facility at the end of survey day 1 by the NICU Program Manager or NICU Program Specialist.



Day 1 survey debrief, and recap performed with NICU-specific facility personnel and the NICU survey team on the morning of survey day 2.



Supplemental additional findings document provided to the facility post-survey in addition to required survey documents.



Utilization of real-time feedback, just-in-time education, and ability to provide guidance on evidence-based literature/clinical practices throughout the course of the survey.

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SURVEYOR SELECTION

Cross Reference of Surveyor Credentials with TX Surveyor Requirements

Surveyor Availability

Survey Team Composition Based on Experience

Communication with Surveyors & Facility to Ensure No Actual, or Perceived, Conflict of Interest Occurs

Final Survey Dates & Survey Team Composition Communicated with the TX DSHS Team

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SURVEYOR EVALUATION & ONGOING COMPETENCE

Post-survey evaluation form completed by facility.

Review of all final survey reports completed by the NICU Medical Director & Program Manager.

Final survey documents are reviewed and approved by the AAP Chief Medical Officer.

Participation of the NICU Medical Director and AAP staff during closed survey team debriefs.

Post-survey team debriefs, as required.

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STRENGTHS OF CURRENT SURVEY & DESIGNATION PROCESS



Provides an opportunity for objective review and identification of areas for improvement, potentially improving care for newborns.



OPPORTUNITIES FOR IMPROVEMENT FOR THE CURRENT SURVEY & DESIGNATION PROCESS

1. Written criteria and training by TX DSHS on requirements for the Quality Assessment and Performance Improvement (QAPI) Plan.
2. Written criteria by the TX DSHS for the Neonatal Oversight Committee and a clearly defined pathway for neonatal QAPI review through the Neonatal Oversight Committee.
3. Clearly defined pathway for facilities transitioning to a higher level of care.
4. Direct and timely communication to survey agencies from the TX DSHS regarding final neonatal designation status, contingencies, mid-cycle surveys, and variances in neonatal survey findings, with explanation if needed.
5. Inclusion of survey agencies in educational webinars provided to Texas facilities (ie, QAPI sessions).



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IDENTIFICATION & NOTIFICATION OF VARIANCES IN FINAL SURVEY FINDINGS

The AAP does not receive direct notification of a facility's final designation status or variances between survey findings. This information is obtained either by reviewing the TX DSHS website or through informal communications with the facility. As a result, we are unable to notify surveyors of any differences or adapt training in a timely manner.



MITIGATION OF SURVEYOR BIAS

Utilization of situational & behavioral interview questions.

Education & training during the surveyor onboarding process.

Final review of all survey documents by the AAP NICU Medical Director, the NICU Verification Program Manager, & the AAP Chief Medical Officer (CMO) to ensure objective review.

Surveyors are trained to utilize and reference current evidence-based literature when potential deviations in care are identified during the record review sessions.

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