



TEXAS
Health and Human
Services

**Texas Department of State
Health Services**

PAC Survey Presentation

Agenda Item 6c

Designation Programs Unit

July 27th, 2022

DSHS Survey Process



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Feedback to Survey Organizations

- Contact the survey organization immediately if the designation determination is affected.
- Questions regarding surveyor conflict of interest.
- Survey summary report or medical record review variances.
- Incomplete or inadequate number of record reviews.
- Incomplete survey summary report.
- Discrepancies between findings on the medical record reviews and 'met or not met' indicators on the survey summary.



Feedback to Survey Organizations

- Lack of surgeon surveyor for a facility with reported surgical procedures.
- Developing a consistent procedure and review document for all surveyors completing survey summary reports and medical record reviews.
- Individual meetings with survey organizations to discuss variances and opportunities in their survey process and receive comments and concerns.
- Quarterly meeting with perinatal survey organizations to provide DSHS updates, clarification of requirements and surveyor expectations, and to receive comments and concerns from the survey organizations.



Expectations of Surveyors

- Consistent in surveying only to the rules.
- Reviewing and evaluating documented evidence from the facility that supports their verbal confirmation of meeting requirements.
- Complete review of medical records that verify the requirements are met through patient care.
- Providing guidance to the facilities to help them improve processes and patient care.
- Objective evaluation, verbal and written, of the designation requirements and program.



What is working well

- The ability for facilities to have virtual surveys.
- Facilities receiving feedback from subject matter experts outside of their organization.
- Identification and sharing of best practices.
- Learning together to comprehensively evaluate programs to identify where care can be improved.
- Feedback from designated facilities that report improvements in their care due to designation.
- Monthly meetings between DSHS and the designated facilities enhances communication, sharing of information and best practices across the state.
- Monthly meetings provide a safe platform for facilities to express challenges in their programs, ask questions and communicate with peers.



What is working well

- Perinatal collaboration in the Perinatal Care Regions.
- Statewide performance improvement and data collaboration between PCRs.
- Collaboration with TCHMB and Texas AIM.



Performance Improvement Activities

- Clarifying conflict of interest for surveyors in the maternal and neonatal rules.
- Department standardization of surveyor guidelines for consistent review and evaluation of designation program elements and patient care record reviews.
- Additional clarification of requirements in the Evidence of Requirements Met Document.
- Standardize surveyor training and education including the opportunities above.
- Improve department communication and performance improvement findings with survey organizations.
- The internal designation process was updated to decrease the overall time from application receipt to designation award.



Thank you!

DSHS EMS/Trauma Systems Section

Designation Programs Unit