Redefining Continual Survey Readiness

Cone Health Clinical Compliance and Regulatory Services

Team Members: Glenda Davis, Debbie Carter, Clara Iacoucci, Michelle Jones, Kristie Johnson, Laura Joyce, Lisa Norman, Mary Spedden, Brian Stewart

Contact Information
Name: Glenda Davis
Email Address: glenda.davis@conehealth.com

Background
Achieving a culture of continuous survey readiness is the goal for any accredited healthcare organization. This involves all staff proactively sustaining a safe health care environment conducive to high quality patient care and prevention of medical errors.

Goal
The goals of this project:
1) Create a rounding structure and associative activities that allows Cone Health to achieve and sustain a culture of continuous survey readiness.
2) Decrease the number of survey findings between same hospital quarterly survey audits.
3) Achieve consistency in data reporting and action plan follow-up by leadership.

Improvement Process
Cone Health’s Accreditation Team’s journey to redefine continual survey readiness began initially with the adoption of TJC’s SAFER Matrix scoring methodology and Verge software program. In 2018, the mock survey process became part of the standard work with each Cone Health facility and all accredited ambulatory sites assigned a designated week on a quarterly basis. The new schedule standardized rounding frequencies from random visits every three to six months to consistent quarterly surveys. The process also combined the expertise of our nursing coordinators with our environmental specialists forming one Accreditation team. Mock surveying as a team eliminates working independently, standardizing how the team assigned EP standards to findings to ensure consistency in data, increasing knowledge of other Cone Health facilities and establishing clear processes for identifying and resolving issues across all campuses. The key strategy to improving these interventions was the use of pre- and post- survey team huddles.