

# Survey Preparation and Your CMMS

Rich Sable, CBET  
EQ2 Product Manager  
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# 3 Easy Steps to Win \$100!

1. Take a picture
2. Post on social media using #MDEXpo
3. The attendee who uses the hashtag the most throughout the conference will win a \$100 giftcard!!



# Surveys

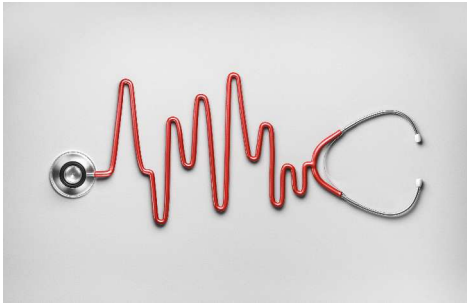
Normal part of working in an HDO (Healthcare Delivery Organization)

Primary focus is to protect patients and staff

- Safe environment
- Safe medical equipment
- Secure environment

Surveys are recurring scheduled events

- Normally unannounced
- Granted for a set period: 1 to 5 years



# Surveying Organizations

- CMS and Private
- **Visit EQ2 at Booth #309 for further discussions**

# Survey Organizations

- State Survey Agencies (SAs)
  - Act on behalf of CMS (Centers for Medicare & Medicaid Services)
  - Perform the Medicare certification process
  - Inspect hospitals to ensure compliance with the terms of CoPs (Conditions of Participation)
    - The CoPs are the requirements that hospitals must meet to participate in the Medicare and Medicaid programs
    - The CoPs are intended to protect patient health and safety and to ensure that high quality care is provided to all patients
  - CMS uses its SAs to perform validation inspections on some hospitals that were previously surveyed by an AO (Accrediting Organization)

# Private Accrediting Organizations

- The Joint Commission (JC)
- DNV GL Healthcare
- Bureau of Healthcare Facilities Accreditation Program (HFAP)
- Center for Improvement in Healthcare Quality
- Deemed Status - This refers to a **health care provider or supplier who has been accredited by a national accreditation program**, approved by the Centers for Medicare and [Medicaid](#) Services because of being compliant with specific conditions.

# JC Survey Process

- The Joint Commission performs on-site surveys once every three years
- Hospitals must also perform an annual self-assessment
- JC follows a tracer methodology and JC developed this process
  - Patient-Centered
  - Process-Focused
- All surveyors are employees of The Joint Commission and have extensive experience in healthcare

# DNV Survey Process

- DNV performs an on-site survey every year
- The surveys are done using Tracer Methodology (per ISO 9001), staff interviews, and patient interviews
- DNV surveyors are usually doctors, nurses, and specialists who must complete various training programs, 45 hours of continuing education every three years, and annual surveyor training by DNV staff



# HFAP Survey Process

Bureau of Healthcare Facilities  
Accreditation Program

- HFAP performs on-site surveys of hospitals once every three years
- The comprehensive, unbiased surveys focus on patient-centered processes
- They also include educationally focused reviews that offer non-prescriptive recommendations for corrective action
- HFAP surveyors are paid volunteers recruited from other HFAP-accredited facilities
  - Leadership role in their own facility and have extensive knowledge of the current healthcare industry

# CHIQ Survey Process

Center for Improvement in  
Healthcare Quality

- Full accreditation surveys are conducted every three years
- An average size hospital will likely have a 3–4-day survey with a team of 2-4 surveyors – including a facilities specialist
- Surveys are conducted by full-time clinicians with years of experience in the hospital setting
- Surveyors undergo a rigorous training program and are nationally certified in this field

# Survey Benefits



# Accreditation

## Benefits 1 of 3

- National recognition including recognition by insurance companies as well as other third parties
- May be a condition of reimbursement for certain insurers or other payers
- Commitment to excellence in quality, accountability and patient safety
- Competitive advantage

# Accreditation Benefits 2 of 3

- May fulfill state regulatory requirements
- **Can provide “deeming status” for Medicare**
- Provides standardization and consistency for processes across the organization
- May reduce liability insurance costs

# Accreditation Benefits 3 of 3

- Provides assurance the organization is current with healthcare regulations
- **Improves “customer satisfaction ratings”**
- Supports continuous quality improvement efforts
- Many consumers look for it when choosing a hospital for services
- Many practitioners look for it when choosing a hospital to work at

# HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems)

- Pronounced “**H-CAPS**”
- Survey instrument and data collection methodology for **measuring patients' perceptions** of their hospital experience
  - First, the survey is designed to produce data about patients' perspectives of care that allow objective and meaningful comparisons of hospitals on topics that are important to consumers.
  - Second, public reporting of the survey results creates new incentives for hospitals to improve quality of care.
  - Third, public reporting serves to enhance accountability in health care by increasing transparency of the quality of hospital care provided in return for the public investment.

## HCAHPS Content and Administration

- Cleanliness and quietness of the hospital environment
- Overall rating of hospital
- Would they recommend the hospital
- The survey is not restricted to Medicare beneficiaries
  
- The survey and its protocols for sampling, data collection and coding, and file submission can be found in the current HCAHPS Quality Assurance Guidelines, which is available on the official HCAHPS website, [www.hcahpsonline.org](http://www.hcahpsonline.org)
  - [Reference: HCAHPS: Patients' Perspectives of Care Survey | CMS](#)



# Survey Preparation



- Tips and Methods

# Methods for Survey Preparation

## Mock Surveys

- In-house or Contracted 3<sup>rd</sup> Party

## Pop Quiz

- Great for staff meetings

## Scheduled Checks

- Department sweeps

## Customized Approach

- HDO may have a 'best practice' based on experience
- Compliance Officer group meetings

# Methods for Survey Preparation (continued)

Always be prepared for a survey

- Provides piece of mind
- Can't go back in time to correct missing PMs

Reading the survey preparation guide for your surveyor

Attending survey preparation meetings at trade-shows or in-house

# Surveyor Questions to Staff



If you or your staff are questioned by a surveyor, it is best to stay calm and only answer the questions being asked.



If you don't know the answer to a question, be honest, and describe how you would find the answer (policy manual, supervisor, etc.)

# Policies & Procedures



Review and Update your policies and procedures annually

“Say what you do and do what you say”



Everyone in your department needs to know where and how to find the information they may need to refer to.



Review this during your staff meetings or upon any policy manual location change

# Other Thoughts on Surveys



While we all want our individual department to have a successful inspection, it's equally important for your HDO to obtain a successful inspection

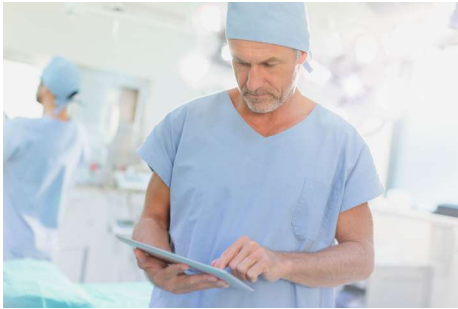


HTM personnel can identify areas of concern in other departments like cluttered hallways, storing items within 18 inches of the ceiling, or blocking access to fire alarm pulldowns or fire extinguishers.



It's important to work as a team so your HDO has a successful survey visit

# Environment of Care




- HTM and Facilities

# Environment of Care

 Safety

 Security

 Hazardous Materials and Waste

 Fire Safety

 **Medical Equipment**

 Utilities



# Using Your CMMS



- Tips for a Successful Survey

# Work Order Coding for Success

Make sure work orders are coded properly

- Device in Use
- Unable to Locate

Code for performance improvement

- Response Time
- Close or Turn-Around Time

AAMI CMMS Collaborative Coding

- Work Order Types
- Failure / Sub Codes
- Short list of mutually exclusive items

# Work Orders for HTM Usage



Schedule work orders for policy & procedure reviews



Record staff meeting minutes in a work order along with attendees



Work orders provide evidence of your adherence to regulations



Quickly search/filter work orders for the inspection period if required



Meeting minutes are backed up with the CMMS

# Employee Credentials



## Record Diplomas or Certificates of staff

Define types of diplomas and certificates  
Attach images of the diploma or  
certificate



## Record Vendor Certificates

Create vendor employee  
Attach images of their training

# Equipment Inventory



Maintain a complete inventory of All assets



Easily identify High Risk versus Non-High-Risk Assets (Class)



Easily identify AEM (Alternative Equipment Management/Maintenance) inventory (Procedure Type & Inventory)



Identify devices not eligible for AEM (System)

Medical Lasers  
Imaging  
Radiologic  
Insufficient History / Experience

# AEM vs. OEM Inventory



Procedure module contains a procedure type field: AEM or Manufacturer Recommended



AEM Inventory has an altered procedure

PM frequency: 24-month interval versus 12-month interval

PM tasks: “replace if necessary”, versus “replace”



HEMS uses a one-click report to retrieve inventory on AEM and Manufacturer Recommended procedures



HTM testers are listed as Manufacturer Recommended procedures

*Calibrated with the service manual traceable to NIST standards*

# AEM Criteria



Can not reduce the safety of the device



Can not reduce the reliability of the device



Must have service history with the device



May require “backup” equipment



Evaluate “failure rate” for the device



Make sure your Medical Equipment Management Plan (MEMP) defines your process and procedure for AEM devices

# AEM Dashboard

Evaluate PM & CM failure rates for the device or device type

Identify the number of backup devices in your inventory

Ensure prohibited devices are not placed onto an AEM program

Are you going to place high-risk devices on AEM?

- AEM tool identifies High-Risk devices



# AEM Dashboard

## Equipment on Alternate Equipment Management (AEM) Program

Description: This report provides the list of equipment items that are on Alternate Equipment Management (AEM) program. According to TJC Standard EC.02.04.01, The critical access hospital's activities and frequencies for inspecting, testing, and maintaining the following items must be in accordance with manufacturers' recommendations:

1. High-risk medical equipment on the inventory for which there is a risk of serious injury or death to a patient or staff member should the equipment fail.
2. Medical laser devices
3. Imaging and radiologic equipment (whether used for diagnostic or therapeutic purposes)
4. New medical equipment with insufficient maintenance history to support the use of alternative maintenance strategies
5. Availability of alternative or back-up equipment in the event the equipment fails or malfunctions

This report also provides the list of devices that are on Manufacturer's Recommendation but can potentially be moved to AEM program.

**Backup/Alternative Device:** The Department should have more than 5 devices for the type of device

**History:** There should at least be 15 number of PM work orders for the model and at least 2 years of history

**PM Failure Rate (FR):** Failure rate is by model and is calculated as Numbe of PM Failures / Total number of PM work Orders

**CM Failure Rate (FR):** Failure rate is by model and is calculated as Numbe of CM work orders / Total number Active Devices / Average Age of the Devices for the Model

**Equipment Years:** Number of devices for a model times average age of the devices for the model - used for CM Failure Rate evaluation

On Manufacturer Recommendation											Number of Devices			453
Should stay on Manufacturer Recommendation											Number of Devices			453
Manufacturer	Model #	EQ Count	Equipment Type	EQ Class	EQ System	Department	High Risk	LIR	History/FR	Backup	CM FR	Estimated Hours	Hospital	
PHILIPS	M3860A	7	DEFIBRILLATOR, AED	CRITICAL - LIFE SUPPORT	NONE	NONE			0.1	11	13.6	6.90	EAST	
ACMI CORP/OLYMPUS	M3-30A GOLD	1	ENDOSCOPE, RIGID	NON-CRITICAL	NONE	NONE			0.0	0	0.0	0.80	EAST	
PHILIPS	M4735 A	4	DEFIBRILLATORS, EXTERNAL, SEMIAUTOMATED	CRITICAL - LIFE SUPPORT	NONE	NONE			0.0	3	84.3	5.00	EAST	
DRAEGER MEDICAL INC	VN500	1	VENTILATOR, INTENSIVE CARE, NEONATAL/PEDIATRIC	CRITICAL - LIFE SUPPORT	NONE	NONE			0.0	0	81.1	0.80	EAST	

# Regulatory Compliance Report

- 100% compliant even when not 100% complete
  - Device in Use
  - Unable to Locate
  - Sent to Vendor
- Percent compliant for High Risk and Non-High-Risk and AEM
- Percent closure for Alert / Recall work orders
- Use Error
- Abuse Physical Damage



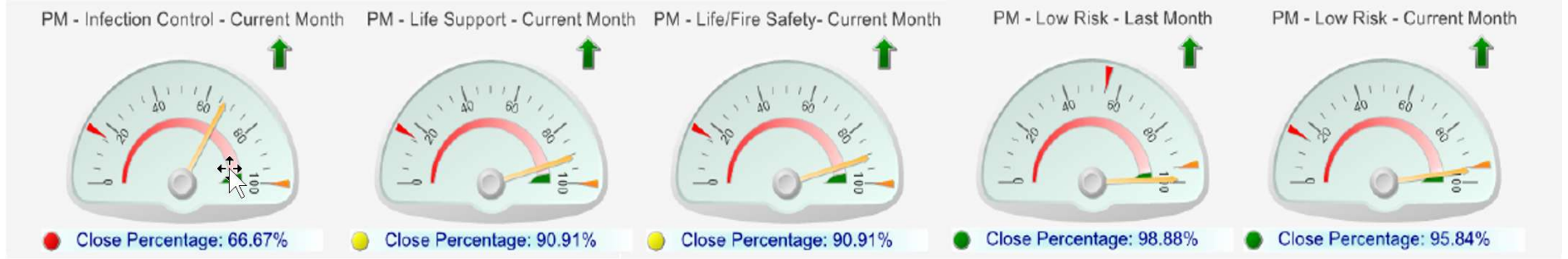
# HTM BI Dashboard & Regulatory Compliance

## Manager's Dashboard - Clinical Engineering - EQ2 EAST

January [REDACTED]



# Facilities BI Dashboard & Regulatory Compliance



## Corrective Maintenance - Current Month - Priority Policy

### Response Time

Priority	Response Policy Met		Not Responded	
	Yes	No	Still Within Limit	Overdue
HIGH	9	1	5	
STANDARD	308		8	

### Close Time

Priority	Close Policy Met		Still pending	
	Yes	No	Still Within Limit	Overdue
HIGH	10		5	
STANDARD	308		8	

## EOC Rounds : December 2015 - January 2016

### Response Time - EOC Rounds

Priority	Response Policy Met		Not Responded	
	Yes	No	Still Within Limit	Overdue
HIGH	1		3	
STANDARD	1	1	1	

### Close Time - EOC Rounds

Priority	Close Policy Met		Still pending	
	Yes	No	Still Within Limit	Overdue
HIGH	1		3	
STANDARD	1		2	

# EOC Rounds

EOC Rounds Maintenance / Engineering | Hello admin | Log off

EOC

Latest Both  Ignore Due Date

<input type="checkbox"/>	WO #	Department	Location	Priority	Status	Issue Date *	Due Date	SA
+	289991	NONE	HALLWAY	STANDARD	NONE	9/27/2018	10/7/2018 4:25 PM	FAC
+	289989	NONE	NONE	STANDARD	NONE	9/27/2018	10/7/2018 4:19 PM	FAC
+	289988	NONE	NONE	STANDARD	OPEN	9/27/2018	10/7/2018 4:18 PM	FAC

Request	Action	
EOC INSP NON PATIENT AREA ----- [ ] 1. FLS - All exits are accessible? (747) [ ] 2. FLS - Exits are clearly marked/illuminated and visible? (756) [ ] 3. FLS - Fire/Smoke Doors are operational, unobstructed and not (761) [ ] 4. FLS - Fire extinguisher locations are clearly marked, (758) [ ] 5. FLS - All extinguishers are fully charged with seal in place, (748) [ ] 6. FLS - Extinguishers are proper for designated area? (757) [ ] 7. FLS - Fire pull boxes are unobstructed and accessible? (760) [ ] 8. FLS - All storage is maintained at least 18" below automatic (750) [ ] 9. FLS - All sprinkler heads are clean and visibly functional? (749) [ ] 10. FLS - The fire plan is accessible? (762) [ ] 11. FLS - Fire procedures signage is posted? (750) [ ] 12. ELS - All visible electrical devices, plugs, cords, outlets, (706) [ ] 13. ELS - Is all electrical equipment properly grounded or double (714) [ ] 14. ELS - Does equipment have an electrical safety inspection (713) [ ] 15. ELS - Do electrical/communications cords obstruct movement? (712) [ ] 16. ELS - Are engineers working in the area aware of lockout/ (709) [ ] 17. ELS - Are Ground Fault circuit interrupting devices in use (710) [ ] 18. ELS - Are prohibited extension cords, portable fans or heaters (711) [ ] 19. EQS - Are moving parts of machinery properly guarded? (740) [ ] 20. EQS - Are all shop tools properly guarded? (737) [ ] 21. EQS - Are emergency stop buttons functional on stationary (738) [ ] 22. EQS - Do step ladders meet all OSHA and other safety (742)		

# Procedures & Scheduling



Use Manufacturer and Model  
for OEM

Philips M3535A



Use ePHI lead for ePHI  
procedures

ePHI SureSigns VS4



Set all PM tasks and frequencies per OEM manual



Schedule PM parts Per OEM manual

# Service and Operators Manuals



Manuals will provide the information for proper maintenance



Manuals can be attached  
electronically to assets/models

PDF  
Word



Manuals can be accessed from OneSource: HTM and Facilities



# Tester Documentation



Document all test equipment and tools on work orders

DNV requirement



Use Tester reports to reverse lookup equipment with tester

Used to demonstrate ability to identify faulty testers

Used to identify which tester was used during recent PM



Schedule all test equipment for PM

Attach vendor report to testers

Tester calibration date matches work order date

# Reporting Faulty Equipment to HTM



End-users must report all faulty equipment



Use Web Request or equivalent application

Service Now



Use a “department email” to inform HTM about equipment needing repair



Web Request will continually update requester of work order status

User satisfaction survey results can be used for performance improvement

# Reporting on PM Work Orders

EQ2 HEMS Web Dashboard WO EQ Projects Stock Management Select Menu Search menu... BIDashboard Hello admin! EQ2 EAST Log off

**Work Order**

WO # 0 Control # Specialty Priority

WO #...	Control #	Issue ...	Depart...
127409	13469	1/1/2021	CLINICAL LAB-BLOOD BANK
127410	19112	1/1/2021	CLINICAL LAB-BLOOD BANK
127411	19113	1/1/2021	CLINICAL LAB-BLOOD BANK
127412	19108	1/1/2021	CLINICAL LAB-BLOOD BANK
127413	19109	1/1/2021	CLINICAL LAB-BLOOD BANK

**Work Order Search**

WO #  Control #  Department  Location

Issue Date - From  Issue Date - To

Status  Pending  Status Date - From  Status Date - To

Priority  Device Inclusion  ECRI / GMDN  Req

Group  Failure / Subcode  Labor Employee  Part #

Serial # / GS1  EQ Type  Model #  Manufacturer

Class  WO Type   Scheduled  Exact

Search

del # Procedure

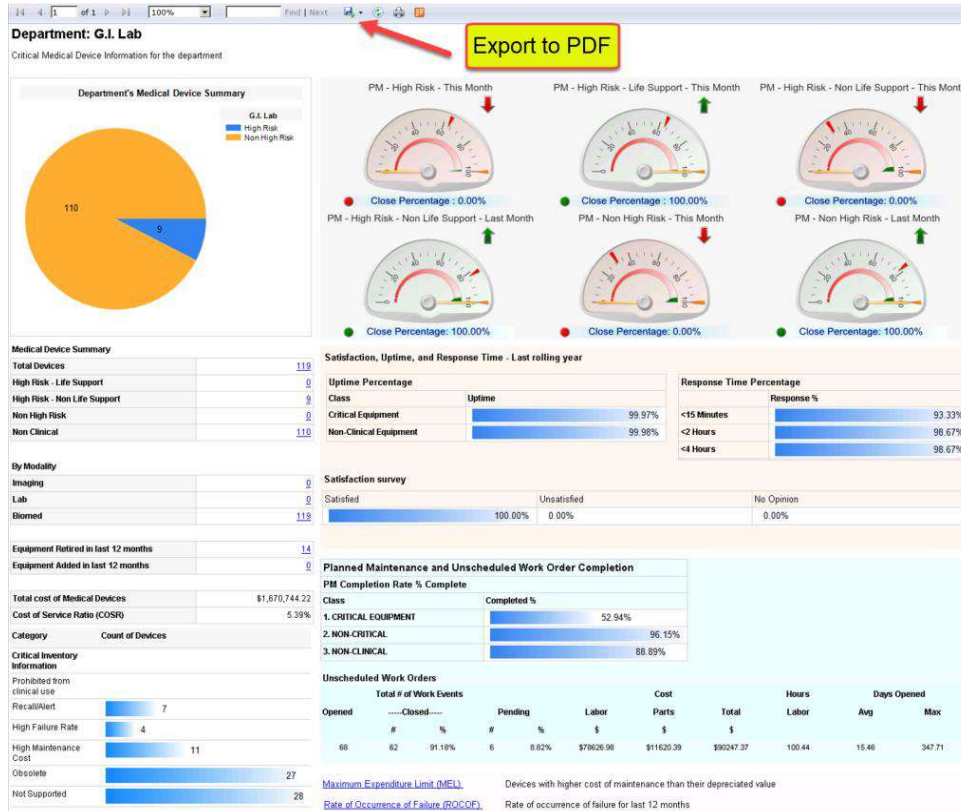
Reset

Service Area EQ2 EAST  
Created By KarlowRM in

	Close Time	Total Time
0.00	-84.77	
0.00		0.25

FREEZER, LABORATORY, GENERAL (10125) (Every  
Rule Next Date : Jan 1 2021 ( Every Year ) )  
-----  
SEQUENCE A5  
ce, No Leads  
JECT EXTERIOR OF EQUIPMENT FOR DAMAGE OR  
WARE.  
JECT THE POWER CORD, STRAIN RELIEF AND PLUG/S  
S 0  
power cord, strain relief and plug/s for any  
page.  
/ UNIT OFF, OPEN USER ACCESSIBLE COVERS AND  
FOR  
f, open user accessible covers and inspect  
page.  
UN UNIT INTERIOR COMPONENTS AND EXTERIOR WITH  
MPR  
interior components and exterior with vacuum or  
air.  
JECT INTERIOR FOR SIGNS OF CORROSION OR MISSING

# Department Managers Dashboard



# Failure Analysis Tools for AEM Selection

## Annual Failure Rate - Equipment Type - Manufacturer - Model

[Back](#)

**Year**

- 2018
- 2019 1
- 2020
- 2021
- 2022
- 2023
- 2024

**Areaname**

- Clinical Engineering
- Shared Information

**Manufacturer**

**Last Production Dat...**

- No
- Unknown

**Max Replacement D...**

- No
- Unknown

**Obsolete**

- False
- Unknown

**Class**

- CRITICAL - LIFE SUPPORT
- CRITICAL - NON LIFE SU...
- Diagnostic

Column Labels ▼

2019

Equipment Type	Failure Rate	Equipment Count	WO CM	Status	Trend
<b>CAMERA</b>		4		●	↓
<b>COLPOSCOPE</b>	16.67%	6	1	▲	↓
<b>EXERCISER</b>	10.87%	46	5	▲	↓
<b>Advanced Therapy Products Inc</b>		1		●	↓
WC-100		1		●	↓
<b>Concept 2</b>		1		●	↓
Model E		1		●	↓
<b>CYBEX</b>		8		●	↓
4815-91		1		●	↓
525T		1		●	↓
5315-91		1		●	↓
5601-91		1		●	↓
5640-91		1		●	↓
5650-91		1		●	↓
600A		1		●	↓
626AT		1		●	↓
<b>Engineering Fitness International</b>	0.00%	1	0	●	↓
Total Gym	0.00%	1	0	●	↓
<b>Fabrication Enterprises</b>		1		●	↓
CanDo Magneciser		1		●	↓

# Minimum Schedule Frequency: Department

EQ2 HEMS One

Dashboard WO EQ Projects Stock Management Select Menu

Search menu... BIDashboard

EQ2 EAST Log off

Departments Add/Edit

Department Name		Cost Center #		<input checked="" type="checkbox"/> Active <input type="checkbox"/> Shared	
ANGIOGRAPHY		1022			
Department Head	Phone #	Budget Account #	Square Footage		
JJK	1-800-888-8888		0		
Code	Common Name	Schedule Date	Schedule Frequency		
		June	▼		
		1	Monthly Quarterly Semi-Annual Annual		
Shift Name	Notes				
M-F Day 3					

**Set Minimum PM Frequency per your AHJ (Authority Having**



# Data Standardization

- Important for Regulatory Compliance & AEM

# Data Standardization is Essential



Data standardization in your CMMS is vital for a well-managed regulatory compliance and AEM program.



It's imperative that device types be standardized to ensure that the PM procedures, risk scores, and device recalls are successfully accomplished.

For example, if two similar device types are named differently in the CMMS, you will miss one or the other during comparison for equipment replacement or moving devices into an AEM program.



Furthermore, your CMMS may contain specialized reports or dashboards that rely on data fields to stratify your equipment inventory.



# Best Practice System (Data Governance)



Standardize PM procedures throughout the enterprise



Standardize PM scheduling throughout the enterprise



Prevent fields from being updated after approval

Ensures data integrity



Standardize equipment nomenclature

Equipment Types  
Equipment Models  
Risk Category and Scores

# Summary

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Surveys are a normal part of life for HDO's

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Surveys are recurring and unannounced

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Always be prepared for a survey

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Review work orders monthly

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Anticipate and act on delays: overtime or outside assistance

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Update policies & procedures regularly, especially with changes

# Summary (continued)



Involve your staff with survey preparation



Ensure staff understands the importance and consequences for poor survey results



Attend internal and external workshops for survey preparation

MD Expo, AAMI, and local HTM groups



Understand your CMMS for reporting under pressure

Strategies to set your data

Train one or more staff members on work order reporting

# Questions & Discussions



SHARE OTHER IDEAS  
FOR PREPARATION



SHARE YOUR CMMS  
STRATEGIES

Thank you for Attending MD Expo Spring 2023

**HEMS**



- Rich Sable, CBET
- EQ2 Product Manager
- [richs@eq2.com](mailto:richs@eq2.com)
- [EQ2, LLC Biomedical & Facility Maintenance Tracking Software \(eq2llc.com\)](http://eq2llc.com)
- **Visit EQ2 at Booth #309 for further discussions or questions**

# References

- [Congress Questions CMS Oversight of Hospital Accrediting Organizations. - Strategic Management Services, LLC \(compliance.com\)](#)
- [The Big Five Healthcare Accreditation Organizations – Side by Side Comparison \(bhmpc.com\)](#)
- [Joint Commission vs. CMS Requirements: What's the difference? \(r1rcm.com\)](#)
- [What is the Joint Commission Survey for Healthcare Organizations? | North America \(bvna.com\)](#)
- [DNV vs. HFAP vs. Joint Commission: What Do They Do For Hospitals? \(vanguard-fire.com\)](#)

# References

- [CIHQ: Welcome: Hospitals](#)
- [CIHQ: Frequently Asked Questions](#)
- [Home - Centers for Medicare & Medicaid Services | CMS](#)
- [A Trusted Partner in Patient Care | The Joint Commission](#)
- [Healthcare assurance services by DNV – DNV](#)
- [Welcome to HFAP – ACHC International](#)
- <http://www.hcahpsonline.org/>
  
- [EQ2, LLC Biomedical & Facility Maintenance Tracking Software \(eq2llc.com\)](#)