



Investigative Skills

Observing
Interviewing
Documenting

Definition



Investigative skills are key cognitive areas of decision making that guide or impact data gathering during any type of survey. These key cognitive areas are vital in guiding the direction of the investigatory work and directing the surveyor to investigate an issue further.

Purpose



Investigative skills:

- Are used to obtain complete and accurate information without creating a hostile or unpleasant atmosphere
- Allow the surveyor to identify relevant information and decide what information needs to be followed up in more depth.
- Are critical to the surveyor's ability to determine compliance, determine the manner and degree of noncompliance, as well as write and prepare to defend deficiency citations.

Investigative Elements



- Observations
- Interviews
- Record or document reviews

****Note that all three elements impact the investigative work and decision making during the survey process**

Observations



- Give surveyors direct knowledge of the facility's operations
- Help surveyors put together pieces of the puzzle and identify areas that may need further investigation
- Are complex: Surveyors need to not only look at what is present, but also think about what they are NOT seeing that should be present
- Provide the most powerful evidence—even more powerful when validated by interviews and record review

Conducting Observations



For example, the regulation requires use of standard infection control practices.

- You see an isolation room with no area to gown and glove.
- You are paying attention to what you DON'T see, as well as what you DO see. Observing will be a key element to most of your investigations.

Interviews



- Allow the surveyor to obtain background knowledge
- Are most beneficial when using open-ended questions
- Are an opportunity to confirm/re-evaluate observations

Interviewing Elements



- Establish a purpose
- Set atmosphere and tone, create rapport
- Listen actively
- Consider time and timing
- Evaluate and make decisions
- Write a summary

Document Review

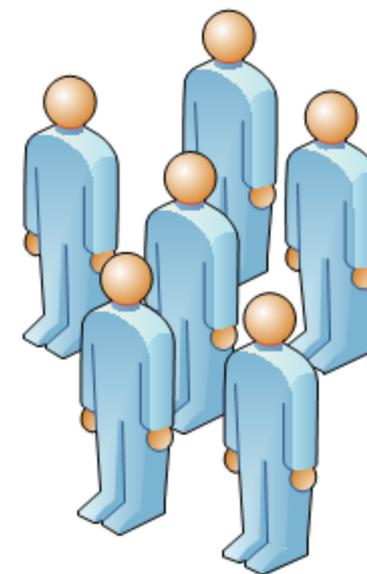
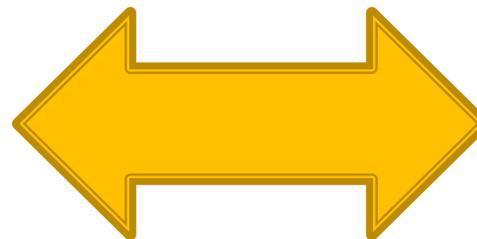


- Validates and clarifies observations or interviews
- Can provide information not otherwise available—e.g., closed medical records can be essential to investigating complaints
- Note difference between reviewing medical records and policies and procedures:
 - Always necessary to review a sample of medical records
 - Routine review of policies and procedures can waste time
 - Better to “back in” to P&P review, when there is evidence of noncompliance, to check whether the problem is with bad policy, or policies not being followed

Conducting a Document Review

- Review standard items in records during every survey.
- Review specific items based on particular issues of concern by the team.
- Be aware of the significance of unrecorded information.
- Focus on documents that provide information on care and services being provided and investigated.

Systems View



Critical Thinking (1 of 2)



- What are the Red Flags?
- What other information do you need to gather?
- Uncover the root cause of problem. What specifically did the facility fail to do?
- Was there a failure? Was the failure in the hospital system, individual performance, or missed patient perspective/expectations? (What system failed?)
- The surveyor decides what information is important and what is not.
- Document findings—paint a picture with words.

Critical Thinking (2 of 2)



For example, in the case above, you also notice that the medical record is missing a pre-anesthesia evaluation, even though general anesthesia was used. This “Red Flag,” suggests that there may be problems with compliance with the Anesthesia Services CoPs as well.

- If this is a full survey, you will want to alert your team leader about what you discovered and make sure the surveyor assessing the Anesthesia CoPs (if that is not you) looks into this.
- If this is a complaint survey of a non-deemed facility, you must now investigate this Red Flag under the Anesthesia Services CoPs, and if you find noncompliance, you must evaluate the whole Anesthesia CoPs.
- If this is a complaint survey of a deemed facility, you must contact your supervisor, who should contact the CMS Regional Office about expanding the survey to include Anesthesia Services.

When is Enough, Enough?

- The goal of our investigation is to provide strong irrefutable evidence regarding the provider's compliance with regulations.
- A new surveyor may have a tendency to stop too soon, due to:
 - Lack of training in event investigation
 - We don't ask enough questions

Summary



- Notice “red flags” (indicators of potential problems).
- Do you need to conduct more observations or interviews, or review other documents to probe the red flag?
- Determine whether the red flags are isolated incidents or more widespread. You need to know this to determine the manner and degree of noncompliance.
- If a red flag concerns another part of the regulations, you will need to expand the scope of your survey.
- Document findings—paint a picture with words.

Putting It All Together



- Use information from observations, interviews, and document review to determine compliance.
- Be open to asking facility staff to help you find information you are unable to locate on your own.
- Remember the expectation is that the provider will be in continual compliance.
- The goal of our investigation is to provide strong evidence to support all deficiency citations.

Investigative Skills Conclusion



Thank you so much for your kind attention!