



# Questionnaire

## STAFF & PATIENT QUESTIONS FROM THE SURVEYOR

(updated 2023)

**The State Operations Manual (SOM) 100-2 update was published February 6th, 2023.** It directs the surveyors to focus on observation, interviews and documentation review as a balancing trifecta to determine quality and compliance. Below are excerpts that give context for the interviews, and the interview questions.



### Home Visit Questions for Patients and Families:

Assess whether the patient or caregiver(s) (if any), were informed that, as a Medicare beneficiary, they are entitled to certain rights. Interview the patient or caregiver to determine:

1. **If they received a verbal description and a copy of their rights.** If the patient has difficulty recalling information about the written notice of rights, ask if the patient kept any written information that the hospice may have provided to them and review that material with the patient, if the patient agrees.
2. **If the patient/family know how and whom to contact if they have a complaint.** Ask the patient, the patient's family, guardian, or other legal representative, if they have any comments or concerns, or have registered any grievances or complaints about the hospice or its services. If this has already occurred, ask how it was handled and what were the results or outcomes.
3. **Whether the hospice informed the beneficiary of the following patient rights in a language and manner that the patient understands.**
  - a. Informed the patient concerning its policies on advance directives, and provided the patient with written information;
  - b. Informed the beneficiary about the scope of services that the hospice identified on the election statement.
  - c. **Informed patients of their specific rights to:**
    - Receive effective pain management and symptom control for conditions related to the terminal illness.
    - Be involved in developing the plan of care;
    - Have his or her property treated with respect;
    - Have the right to refuse care or treatment; probe further if a trend emerges where a majority or all patients are refusing a particular service (e.g., social work, spiritual counseling, volunteers, etc.,) to assure the hospice is fully prepared to provide the service with qualified personnel;
    - Choose an attending physician;
    - Have a confidential clinical record;
    - Be free from mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown origin;
    - Be free from misappropriation of property;
    - Receive information about services covered by the hospice benefit;
    - Receive information about the scope of services the hospice will provide and any limitations;
    - Express dissatisfaction or concerns (voice grievances) regarding treatment or care, and not be subject to discrimination or reprisal for exercising his or her rights and if patient/caregiver was encouraged to provide input into the plan of care and the type of services they receive; and
    - File a complaint and how to do so; ascertain that the hospice election form used by the hospice includes the name and phone number of the appropriate Beneficiary and FamilyCentered Care Quality Organization (BFCC-QIO) and is signed by the beneficiary and/or legal representative.



 (cont'd) Home Visit Questions for Patients and Families:

4. **During the home visit, ask patient/family how quickly the hospice satisfies the patient's request for pain medication or symptom control, during the daytime hours, nights, and weekends.**  
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5. **Observe the patient for any signs of discomfort.** Ask the patient or family, as appropriate, if the patient has been experiencing pain or other symptoms, and if so, did they report this to the hospice? If reported, what was the hospice's response?  
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6. **Determine if there have been any instances where the hospice failed to respond promptly to the patient's request for pain medication or symptom management?**  
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7. **During home visits, ask the patient/family if they know how and whom to contact if they have a complaint.** Ask the patient, the patient's family, guardian, or other legal representative, if they have any comments or concerns, or have registered any grievances or complaints about the hospice or its services. If this has already occurred, ask how it was handled and what the results or outcomes were.  
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8. **Determine if the rights of a patient adjudged incompetent or who has a representative acting on his/her behalf are exercised by the legally appointed individual.** If the hospice is currently caring for a patient who has been adjudged incompetent, and you have questions concerning the exercise of the patient's rights, you may contact the patient's legal representative about their involvement in planning care, treatment, and services decisions. If the patient is selected for a home visit, obtain the legal representative's approval for the visit.  
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9. **If the patient is informed about the services they are receiving and when they will receive them, for example, who is scheduled to visit, how often and for how long;**  
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10. **If the hospice informed them of any uncovered services by Medicare and if so, and options to address them.** If a notice of Medicare non-coverage was provided to the patient, confirm that it was received prior to the care being provided.  
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11. **How often the patient/caregiver feels that the hospice team listens carefully when discussing problems with hospice care?**  
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12. **Was the patient advised that they could keep their own physician when hospice was elected?**  
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**Other Patient/Family Questions to Consider:**

- *What are the purposes of the hospice services you are receiving?*
- *What is your experience with contacting the hospice team during evenings, weekends, or holidays with questions or concerns?*
- *How often do you get the help you need from the hospice team during evenings, weekends, or holidays?*
- *Do you receive the care and support that you need to manage your illness?*
- *When you call with an urgent need, how long does it take for someone from the hospice team to respond?*
- *How does the hospice team keep you informed about when they will arrive to care for you?*
- *When there is an unexpected delay or re-scheduling of a visit, how does the hospice notify you? How often do either of these situations occur?*
- *Are you aware of the IDG?*
- *(When applicable) Does the hospice team give you the training you need about if and when to take more pain medicine?*
- *(For dementia terminal diagnosis) How has the hospice educated you on the death and dying process of a patient with dementia?*
- *How much support for your religious and spiritual beliefs do you get from the hospice team if you have indicated that you wanted that?*



## INTERVIEW: Patient/Family

1. **Identify** what grief assessments, surveys, questionnaires the provider uses to screen/identify bereavement needs of the patient and family/caregiver;

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2. **Ask** the patient/family if they were involved in identifying goals of care;

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3. **Identify** how follow-up is conducted including frequency and method (phone, in-person, email/mail);

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4. **Review** other resources (e.g., organizations, group therapy, programs etc.) that are provided to patient family/caregiver;

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5. **Ask** how the hospice determines the need to refer a patient or family member(s) to appropriate health professionals for further evaluation.

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6. **Ask** patient and family if infection control education has been provided to the patient in prior treatments, inquire with the patient regarding the information to assess their knowledge and recall of the information.

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7. **Ask** the patient if hospice staff perform hand hygiene, use personal protective equipment, clean reusable equipment, and handle/dispose of needles and sharps safely.

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8. **Interview** the patient to determine how satisfied she/he is with the services provided by the aide.

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9. **Determine** if the patient is aware of the aide's visit schedule if the visits are made as scheduled, and if the hospice communicates any changes to that schedule in advance.

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10. **Inquire** if the patient feels that the hospice aide is respectful of her/him and their property.



## STAFF INTERVIEWS: Key Staff

1. **Ask** about the hospice's system of documentation and retrieval of patient specific data elements.

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2. **Ask** to see a copy of the data elements that comprise the hospice's comprehensive assessment.

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3. **Have the hospice explain** how they use these data elements in care planning, coordination of services and in their quality assessment and performance improvement (QAPI) program.

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4. **Ask the hospice** to describe its policy for assessing, managing, and reassessing pain and other symptoms, and how it defines effective pain management and symptom control.

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5. **Determine** how the hospice assures that the patient receives the needed medications in a timely fashion

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6. **Ask clinical staff** to describe how they obtain all relevant information necessary to complete the comprehensive assessment.

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7. **Ask clinical staff to describe their process/policy of drug regimen/medication review including:**
  - *What process is followed when a patient/family is found not to be following the patient's drug/medication regimen?*
  - *What non-pharmacological methods are considered to relieve pain and other symptoms?*
  - *How are patients and families educated about effective pain and symptom management?*
  - *What process does the hospice utilize to assess and measure pain and other uncomfortable symptoms?*
  - *How does the hospice monitor a patient when they begin a new medication, increase/decrease a dosage, or discontinue a medication?*
  - *Ask the staff what training they received in infection control and how often they receive the training. Training should include but not be limited to identification of infection signs and symptoms, routes of infection transmission, and the components of standard precautions.*



**INTERVIEWS WITH STAFF**

## Responsible for Coordinating Care and Direct Care (RN Coordinator)

1. **How** the hospice communicates the hospice plan of care and all updates with the facility.  
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2. **How** do the hospice and the facility communicate with each other during and between patient visits, as appropriate, to share information about the patient's needs and response to the plan of care?  
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3. **Does** the hospice staff have access to and the ability to communicate with facility staff about the patient's care as often as needed?  
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4. **How** staff are involved in the coordination of patient care services;  
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5. **How** often they participate in IDG meetings;  
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6. **What** kind of training do they receive by the hospice about the hospice philosophy and approach to care?  
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7. **Has** the family been satisfied with communication of hospice staff and availability to hospice staff after hours and on weekends/holidays?  
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8. **Interview** the patient and caregiver to determine how satisfied she/he is with the services provided by the clinicians identified in his/her plan of care.  
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9. **Does** the patient/caregiver know the visit schedule of the clinician and are visits made as scheduled. If home visits are missed does the patient/caregiver know why and are they able to easily contact the hospice if a need arises?  
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10. **How** does the hospice introduce and offer medical social work services to the patient/family?  
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**STAFF INTERVIEWS:**

## Social Work

1. **Ask the social worker or clinical manager** to describe the factors that are included in the psychosocial assessment and how this information is used in the care planning process to benefit the patient/family.

**STAFF INTERVIEWS:**

## Nursing

1. **Ask the clinical manager how the hospice meets the needs of patients and families who experience challenges and conflict with end-of-life care dietary issues.** This may include providing education about how the dying process naturally results in lack of appetite and intake and how this may relate to the patient's decreasing appetite and food intolerances during the end of life.  
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2. **Ask the clinical manager how the hospice meets the needs of patients who experience dysphasia, problematic enteral feedings, or unresolved nutritional issues secondary to nausea, vomiting, or the dying process.**

**STAFF INTERVIEWS:**

## Nutrition/Dietary Counseling

1. **Ask the clinical manager how the hospice meets the needs of patients and families who experience challenges and conflict with end-of-life care dietary issues.** This may include providing education about how the dying process naturally results in lack of appetite and intake and how this may relate to the patient's decreasing appetite and food intolerances during the end of life.  
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2. **Ask the clinical manager how the hospice meets the needs of patients who experience dysphasia, problematic enteral feedings, or unresolved nutritional issues secondary to nausea, vomiting, or the dying process.**

**STAFF INTERVIEWS:**

## Spiritual Needs

1. **Determine** through clinical record review, interview, and home visits how the hospice addresses the spiritual needs/concerns of the patients and families.  
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2. **How** does the hospice introduce the availability of spiritual counseling?
3. **What** mechanisms are in place to meet the patient/-family spiritual needs?



**STAFF INTERVIEWS:**

## Volunteers

1. **Conduct an interview with the individual designated to supervise the volunteers regarding the use, training, and supervision of volunteers.**

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2. **How does the hospice supervise the volunteers?** Is there evidence that all volunteers receive the supervision necessary to perform their assignments?

**INTERVIEW WITH ADMINISTRATOR/STAFF**

## Regarding Patient Abuse &amp; Neglect Policies

1. **The hospice must ensure that all hospice employees and contracted staff are trained on how and when to report allegations involving mistreatment, neglect, or verbal, mental, sexual, and physical abuse by anyone furnishing services on behalf of the hospice.** This includes reporting injuries of unknown origin, as well as misappropriation of patient property.

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2. **Determine how the agency complies with these requirements:**
  - Is there evidence that the hospice staff is aware of and follows the hospice's policy for complaint investigation when a patient/family makes a complaint to a staff member?
  - Pay close attention to staff remarks and staff behavior that may represent deliberate actions to promote or to limit a patient's autonomy or choice.
  - Who in the hospice is ultimately accountable for receiving, investigating, and resolving any patient concerns or problems that cannot be resolved at the staff level?

**STAFF INTERVIEWS:**

## SNF/NF or ICF/IID Facility Staff

**Interview a facility staff person knowledgeable about the needs and care of the patient and provides direct care to determine:**

- Ask how the facility staff is trained in the hospice philosophy of care.
- If the patient/representative and facility staff, are not familiar with hospice philosophy, policies and procedures regarding methods of comfort, pain control, symptom management, as well as principles of death and dying, patient rights, appropriate forms, and record keeping requirements, then interview hospice staff on how they have provided education to the facility staff in these matters.
- How facility staff communicate with the hospice when there is a change in the patient's physical, mental, social, or emotional status.
- If the patient receives pain medication (including PRN and adjuvant medications), how, when, and by whom the results of medication effectiveness are evaluated (including the dose, frequency of PRN use, schedule of routine medications, and effectiveness). Is there evidence that the hospice provides services and medications, equipment and supplies necessary for pain control and symptom management on a 24-hour basis?
  - How staff monitor for the emergence or presence of adverse consequences of interventions.
  - How the hospice and the facility coordinate their approaches, communicate about the patient's needs, and monitor the outcomes (both effectiveness and adverse consequences).
  - What system is in place to assure that the facility knows how to notify the hospice when necessary on a 24/7 basis?
  - Is there any evidence that the communication is not occurring as needed during various times of the day or week or specific shifts?
  - How does the hospice ensure that facility staff are able to recognize the individuals who are receiving hospice services and know that the services provided to this patient should be in accordance with the coordinated plan of care?
- What evidence is there that the hospice and the facility communicate with each other during and between patient visits, as appropriate, to share information about the patient's needs and response to the plan of care?
  - Does the hospice staff have access to and the ability to communicate with facility staff about the patient's care as often as needed?
  - Is there evidence that facility personnel assist in the administration of prescribed therapies included in the plan of care that exceed what a hospice family member might implement?
- How do the hospice and the facility identify the therapies that facility staff will be allowed to perform?

