Session #: W43

Regulatory Updates: How Do We Operationalize?

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Objectives:

Upon completion of this presentation, attendees will be able to:

1. *Verbalize how to obtain updates to regulations timely for review and implementation*
2. *Describe how to use the new information to update your systems*
3. *Describe steps for successful communication of changes with the interdisciplinary team*

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How To Obtain Updates

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CMS.gov: Nursing Homes (website):

http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/NHs.html

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CMS-Centers for Medicare and Medicaid Services

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CMS

CMS
2012 Nursing Home
Action Plan

Action Plan for Further Improvement of Nursing Home Quality

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CMS

2012 Nursing Home Action Plan

Background

The Mission of the U.S. Centers for Medicare & Medicaid Services (CMS) is to assure effective, up-to-date health care coverage and to promote quality care for beneficiaries. A number of divisions within CMS work together to promote nursing home quality improvement, address reimbursement issues, and enforce Medicare conditions of participation. The combined levers of technical assistance, payment reform, oversight, and enforcement create a powerful system that promotes quality care in nursing homes.

More than 3 million Americans rely on services provided by nursing homes at some point during the year. 1.4 million Americans reside in the Nation's 15,800 nursing homes on any given day. These individuals and an even larger number of their family members, friends, and relatives, must be able to count on nursing homes to provide reliable, high quality care.

The Three-Part Aim

The CMS Nursing Home Action Plan is based on CMS' Three-Part Aim for improving U.S. healthcare.

The Three-Part Aim comprises three objectives:

1. Improving the individual experience of care;
2. Improving the health of populations; and
3. Reducing the per capita cost of care for populations.

All three components of the Three-Part Aim are interconnected (Figure 1). The themes outlined in this action plan will guide our efforts to continue progress in improving nursing home safety and quality. CMS' five actionable strategies will be pursued simultaneously, consistent with the Three-Part Aim.

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State Operations Manual (CMS):

http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf

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State Operations Manual
Appendix PP – Guidance to Surveyors for Long Term Care Facilities
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(Rev. 133, 02-06-15)

Transmittals for Appendix PP

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§483.5 Definitions
§483.10 Resident Rights
§483.10(a) Exercise of Rights
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§483.10(c) Protection of Resident Funds
§483.10(d) Free Choice
§483.10(e) Privacy and Confidentiality
§483.10(f) Grievances
§483.10(g) Examination of Survey Results
§483.10(h) Work
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§483.10(j) Access and Visitation Rights
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§483.10(l) Personal Property
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§483.10(n) Self-Administration of Drugs
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§483.12(a) Transfer, and Discharge
§483.12(b) Notice of Bed-Hold Policy and Readmission
§483.12(c) Equal Access to Quality Care

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Federal Updates

CMS Memo's:

http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions.html

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during on-site reviews, those concerns will be investigated during the survey or, if immediate investigation is not possible, registered with the SA as a complaint for further review.

For questions on this memorandum related to the MDS / Staffing Focused Survey, please email MDSFORSandC@cms.hhs.gov and consult with your CMS Regional Office.

Effective Date: Immediately. The information contained in this memorandum should be communicated with all survey and certification staff (including the State RAI Coordinator), their managers and the State/Regional Office training coordinators within 30 days of this memorandum. More information will be communicated directly with States shortly on the specifics of the next steps for implementing these surveys.

/s/
Thomas E. Hamilton

Attachment- MDS Staffing Focused Surveys Pilot Findings

cc: Survey and Certification Regional Office Management

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H.R. 4302

H.R. 4302: Protecting Access to Medicare Act of 2014

http://www.gpo.gov/fdsys/search/pagedetails.action?packageId=BILLS-113hr4302enr

KNOW THE RULES!

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H.R. 4302

H.R. 4302

H.R. 4302

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MDS 3.0 RAI Manual:

http://www.cms.gov/Medicare/Quality-
Initiatives-Patient-Assessment-
Instruments/NursingHomeQualityInits/M
DS30RAIManual.html

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MDS 3.0 RAI Manual

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MDS 3.0 RAI Manual

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Office of Inspector General Reports (OIG):

http://oig.hhs.gov/reports-and-publications/oei/subject_index.asp

- Reports found under "Skilled Nursing Facilities (SNFs)"

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OIG

OIG

Department of Health and Human Services

OFFICE OF
INSPECTOR GENERAL

**SKILLED NURSING FACILITIES
OFTEN FAIL TO MEET CARE
PLANNING AND DISCHARGE
PLANNING REQUIREMENTS**

OIG

WHAT WE FOUND

For 37 percent of stays, SNFs did not develop care plans that met requirements or did not provide services in accordance with care plans. For 31 percent of stays, SNFs did not meet discharge planning requirements. Medicare paid approximately $5.1 billion for stays in which SNFs did not meet these quality-of-care requirements. Additionally, reviewers found examples of poor quality care related to wound care, medication management, and therapy. These findings raise concerns about what Medicare is paying for. They also demonstrate that SNF oversight needs to be strengthened to ensure that SNFs perform appropriate care planning and discharge planning.

WHAT WE RECOMMEND

We recommend that the Centers for Medicare & Medicaid Services (CMS): (1) strengthen the regulations on care planning and discharge planning, (2) provide guidance to SNFs to improve care planning and discharge planning, (3) increase surveyor efforts to identify SNFs that do not meet care planning and discharge planning requirements and to hold these SNFs accountable, (4) link payments to meeting quality-of-care requirements, and (5) follow up on the SNFs that failed to meet care planning and discharge planning requirements or that provided poor quality care. CMS concurred with all five of our recommendations.

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Work Plan for Fiscal Year 2015:

http://oig.hhs.gov/reports-and-publications/archives/workplan/2015/FY15-Work-Plan.pdf

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OIG

WORK PLAN
Fiscal Year 2015

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Compendium of Unimplemented
Recommendations: March 2015

https://oig.hhs.gov/reports-and-publications/compendium/files/compendium2015.pdf

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OFFICE OF
INSPECTOR GENERAL
U.S. Department of Health and Human Services

COMPENDIUM
OF UNIMPLEMENTED
RECOMMENDATIONS

March 2015

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Centers for Disease Control and Prevention (CDC):

http://www.cdc.gov/

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FDA

FDA: U.S. Food and Drug Administration:
http://www.fda.gov/
- Medication approvals, warnings, recalls, etc.
- Medical Devices: Recalls, Alerts and Medical Device Reporting:

http://www.fda.gov/MedicalDevices/Safety/Report aProblem/default.htm

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FDA: Medical Device Reporting

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FDA: Medical Device Reporting

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FDA

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Webinar ANA and FDA

https://collaboration.fda.gov/p1xty
e7gdwg/?launcher=false&fcsCont
ent=true&pbMode=normal

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ANA

ANA Published "Interprofessional
Standards of Safe Patient Handling and
Mobility"

• Outlines 8 Standards

http://www.nursesbooks.org/Main-
Menu/Specialties/Staffing-
Workplace/SPHM-Standards.aspx

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Resources

CDC: Safe Patient Handling:

http://www.cdc.gov/niosh/topics/safepatient/

Offers a variety of websites and resources for Health Care Professionals and Administrators for learning and planning

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Resources and Helpful Websites

- http://www.fda.gov/ForHealthProfessionals/ucm362857.htm
- http://www.nursingworld.org/MainMenuCategories/Policy-Advocacy/State/Legislative-Agenda-Reports/State-SafePatientHandling
- https://www.osha.gov/ergonomics/guidelines/nursinghome/index.html
- http://blogs.cdc.gov/niosh-science-blog/2008/09/22/lifting/

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State Specific Agencies:

- CMS had a list of State Websites and Contact Information for the public for complaints as well as for information:

http://www.medicare.gov/NursingHomeCompare/Resources/State-Websites.html

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Location, Location, Location:

There are other specific websites and contact numbers of importance:

- State Medicaid or Case Mix Contacts
- Insurance Company Contacts
- Local Health Department Contacts
- Key Hospital Contacts
- State Nursing Home Association Contacts
- Many, Many More!

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How to Utilize the Information to Update Facility Systems!

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Getting Started:

- Review the updated regulatory information and note any updates and changes to the system, expectations, rules and date due.

- Pull out the facility policy and procedures and review to note areas needing updates.

- Discuss the specifics of the updates with the leadership team, cross-referencing the current P&P and addressing updates to be included.

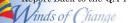Winds of Change **OHCA OCAL OCID**
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Getting Started:

- Involving the direct care workers where possible in the process--as it is essential for input from all staff directly involved in the system
- Involving the residents where possible in the process as well!
- Involve the entire IDT-including the Medical Director, possibly the Pharmacy Consultant and any corporate supports
- Ensure you are using evidence-based

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Getting Started:

- Develop your system
  - Policies and Procedures
  - Approved by the Quality Assurance Committee
  - Action Plan
    - Staff Education and Communication
    - Effective Date
    - Oversight
    - Evaluation and Auditing
    - Report Back to the QA Team

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Action Plan

Area of Need	Corrective Action	Date Due	Responsible Party
Discharge Care Planning	1. Policy and Procedure revision	11/15/13	DON and SS
	2. IDT education on facility policy/procedure for discharge planning	12/1/13	DON or Designee
	3. All current residents evaluated for individualized discharge care plans	12/1/13	DON, SS or Designee
	4. All new admissions will be evaluated for discharge care planning upon admission and ongoing	12/1/13	DON, SS or Designee
	5. Random audits 2x/month will be completed to verify compliance	12/15/13	DON, SS or Designee
	6. Results of audits will be	1/1/14 and ongoing	DON and SS

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Consistent Compliance

How can we ensure staff stay on track?

- Keep the fire burning!
- Audits are ongoing
- Education is not a one-time and done component!
- Use opportunities to demonstrate the importance of the Policy and Procedure Manuals!

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Steps for Successful Communication of Changes with the Interdisciplinary Team

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Communication

- Every week, any new regulatory updates should be addressed with the Department Managers
- All Staff Involvement as necessary
- Residents
- Families
- Medical Director
- Pharmacy Consultant

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4/6/2015

Education

- All policy, procedure or protocol changes need to be communicated with education to all staff PRIOR to date of implementation.

- There should be a system for evidence of training

- It is a good idea to use a variety of training methods
  - Lecture   - Skills Checklists
  - Handouts   - Return Demonstration
  - Etc.

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Education

- What is your system for staff that do not attend your educational programs?

- Do you have an evaluation system for staff to determine effectiveness of educational activity?

- Have you considered including staff in the process?

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Put Your System Into Action!

- Determine a date and begin!

- All hands on deck!

- Ensure there is support
  - Lead Staff
  - Written Materials
  - Supervisory Direction

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Verification

- Audit System
- Facility Rounds
- Documentation Evaluation
- Staff Interviews
- Resident Interviews
- Family/Visitor Interviews
- Medical Director Discussion

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Follow Up

- If during the auditing you determine opportunities for correction:
  - Discuss with all involved
  - If there are multiple "breaks" in the system, take a look at it as possibly a systems issue rather than employee issue
  - Use all of the resources available to come up with a realistic solution and start the system over again!

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Other Suggestions

Other suggestions for keeping current:
- Review trade publications
- See what educational offerings are being offered
- Association Conferences
- DON, Administrator, IDT specific Meetings/Conferences
- Local Industry Groups
- Encourage the ENTIRE team to keep up with their discipline associated network as well!

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Other Suggestions

- Check the CMS Provider Memo website once a week
- All Administration and IDT leaders consider sharing any trade publications, notices, updates, regulatory notices or important correspondence
- Get yourself signed up to receive updates from the CMS website as well!

http://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/EmailUpdates.html

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Let's Keep Our Staff Informed!

"Well-trained and dedicated employees are the only sustainable source of competitive strength."

-Robert Reich

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QUESTIONS?

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Thank You For Attending Today's Presentation!

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