Regulatory Requirements:
Here and Now and the Future

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DISCLAIMER

• The information provided within these slides are current as of May 15, 2017. It provides information related to the CMS' intent to implement the survey process on November 28, 2017 and the policies and procedures based on development to date.

• This presentation will be updated as new information becomes available.
Here and Now...

Survey process overview:
• Review
• Observe
• Interview

Here and Now...

PHASE 1 Implementation:
• Began November 28, 2016
• Nursing home Requirements for Participation
• New Regulatory language was added to ASPEN under existing F-Tags
and the Future...

Phase 2 of LTC Regulations

- Implement by November 28, 2017
- Providers must be in compliance with Phase 2 regulations
- All training on new survey process needs to be completed before go live date

and the Future...

New survey process to begin in November:

- All surveys will be done electronically
- Same survey process for the entire country
- Should be more efficient
- Resident-centered
- Tremendous stakeholder input for interpretive guidance
and the Future...

Sample Size:
• Sample size is determined by the facility census
• 70% of the total sample is MDS pre-selected residents
• 30% of the total sample is surveyor-selected residents.
• Surveyors finalize the sample based on observations, interviews, and a limited record review.
• Maximum sample size is 35 residents

and the Future...

Sample Structure:
• Resident sample size is about 20% of facility census
• Interview, observation and limited record review care areas are provided for the initial pool process
• Surveyors meet to discuss and select sample, may have more concerns than can be added to the sample; may need to prioritize concerns
and the Future...

Initial Entry:
• No formal tour process
• 8 hours on average for interviews, observations, and screening.

and the Future...

Initial Entry continued:
• Surveyors complete a full observation, interview residents, and complete a limited record review for initial pool residents:
  • Offsite selected residents
  • New admissions
  • Vulnerable residents
and the Future...

Group Interviews:
• Resident Council Meeting with active members
• Includes Resident Council minutes review to identify concerns
• The questions asked during the group are different from both current processes.

and the Future...

Phase 2 includes:
• Behavioral Health Services
• Quality Assurance and Performance Improvements (QAPI Plan Only)
• Infection Control and Antibiotic Stewardship
• Physical Environment – smoking policies
and the Future...

Phase 2 includes, but is not limited to:

• Resident Rights and Facility Responsibilities –
  Required Contact Information-
• Freedom from Abuse, Neglect, and
  Exploitation – 1150B
• Admission, Transfer, and Discharge Rights –
  Transfer/Discharge Documentation

and the Future...

Phase 2 includes, but is not limited to:

• Comprehensive Person-Centered Care Planning
• Pharmacy Services – psychotropic medications
• Dental Services – replacing dentures
• Administration – Facility Assessment
and the Future...

Phase 3:
• November 28, 2019
• Requirements that need more time to implement

Help is available!
Available Training for Providers and the Public:
• National Calls and Q&As – Summer/Fall 2017
• Access to Surveyor Training Materials (RO/SA management webinar)
• Videos on Highlights of the Interpretive Guidance
• Training Tools access to Survey Forms and CE Pathways
Help is available!
Submit all questions about the new survey process to NHSurveyDevelopment@cms.hhs.gov

Information about the survey process and implementation can be found at: https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html

That’s all great, but I thought this was an infection control meeting?
Here and Now...

Top 5
Most Frequently
Cited Deficiencies
Health
January 1, 2017-
March 31, 2017

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>F281</td>
<td>Services provided meet professional standards</td>
</tr>
<tr>
<td>F441</td>
<td>Infection control, prevent spread, linens</td>
</tr>
<tr>
<td>F323</td>
<td>Free of accident hazards/supervision/devices</td>
</tr>
<tr>
<td>F371</td>
<td>Food procure, store/prepare/serve – sanitary</td>
</tr>
<tr>
<td>F312</td>
<td>ADL care provided for dependent residents</td>
</tr>
</tbody>
</table>

Top 5 Most Frequently Cited Deficiencies Health January 1, 2017- March 31, 2017

Top Infection Control Issues for Nursing Homes

1. Clostridium Difficile
2. Improper hand-washing
3. Influenza respiratory issues
CLEAN HANDS SAVE Campaign

- Improve healthcare provider adherence to CDC hand hygiene recommendations (https://www.cdc.gov/handhygiene/providers/guideline.html)
- Address the myths about hand hygiene
- Empower residents to play a role in their care by reminding healthcare providers to clean their hands

Complete the new education course

https://www.cdc.gov/handhygiene/providers/training/index.html

For continuing education, complete the evaluation and post-test at

https://www2a.cdc.gov/TCEOnline/ (use course number WD2703).
• Watch and share the new Clean Hands Count video
  https://youtu.be/MzkNSzqmUSY
• Order and distribute free Clean Hands Count print materials