




~welcome~

We're so happy you're here!

We'll get started shortly.

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Federal Staffing Mandate: Preparing for the Facility Assessment Expansion



Tech. Challenges? Reach out to Brandon (Zoom) via the Q&A



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Housekeeping

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Federal Staffing Mandate Preparing for the Facility Assessment Expansion

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Agenda

- Welcome and Introductions
- Overview of Final Rule and Purpose
- Timeline
- Facility Assessment – Overview and Use
- Changes
- Next Steps
- Education and Resources



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Facility Assessment



Requirement of Participation – Phase 2 - 2017



Regulation F 838



Final Rule (May 10, 2024) – Strengthen the Facility
Assessment Requirement



Update and implement the FA within 90 days (August
8, 2024)

Facility Assessment – Final Staffing Mandate Rule

- **Federal Rule – Strengthening the Facility Assessment Requirement**

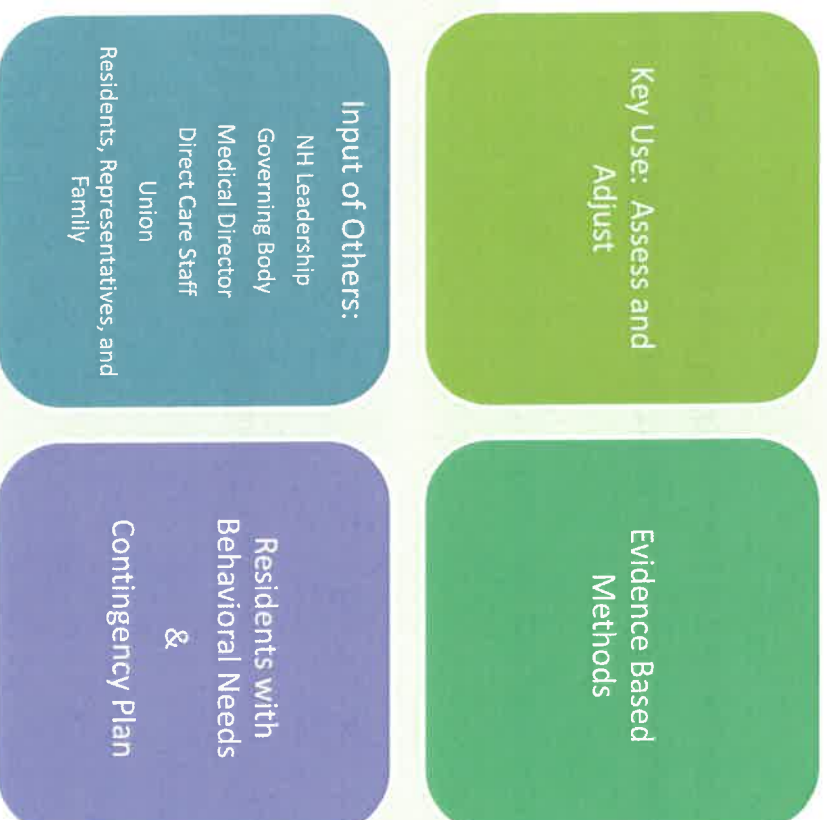
- Improve the safety of residents
- Comprehensive approach to staffing standards
- Informed staffing plans and decisions
- Focused on meeting the resident's needs



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Facility Assessment – NEW



Facility Assessment

Evaluate

- Access to electronic medical record (EMR) systems
- Manual acuity-based staffing methods
- Revisiting policies and procedures to align with the new requirements.

Develop Staffing Plan

- Recruitment and Retention
- Acuity based
- Change when needed
- Evaluate access to electronic medical record (EMR) systems, manual acuity-based staffing methods, and revisiting policies and procedures to align with the new requirements



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Overview and Next Steps

FACILITY ASSESSMENT



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The Final Rule - NEW

- Modifying the requirements
- Efficient Process for consistently assessing and documenting necessary resources and staff
- Ongoing care
- Based on specific needs
- Competency requirements



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400376 Federal Register / Vol. 88, No. 92 / Friday, May 10, 2023 / Rules and Regulations

DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Medicare & Medicaid Services

42 CFR Parts 439, 442, and 483
(CMS-3443-F)
RIN 0381-AV25

Medicare and Medicaid Programs: Long-Term Care Facilities and Long-Term Care Facilities and Medicaid Institutional Payment Transparency Reporting

Agency: Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services (HHS).
Action: Final rule.

SUMMARY: This final rule establishes minimum staffing standards for long-term care facilities, as part of the Biden administration's nursing home reform initiative. The rule requires long-term care facilities to submit a staffing plan to the State, which will be used to monitor and enforce the rule. The rule also requires facilities to submit a staffing plan to the State, which will be used to monitor and enforce the rule. The rule also requires facilities to submit a staffing plan to the State, which will be used to monitor and enforce the rule.

DATES:
Effective date: These regulations are effective on June 21, 2023.

Anticipated start date: These regulations are anticipated to start on June 21, 2023.

Comments and public participation: We invite interested parties to submit comments on this rule. Comments should be submitted to the Office of Management and Budget.

Regulations at 483.271 must be implemented by August 6, 2023, for all facilities.
The regulations at 483.250(b)(1) and (c)(1) must be implemented by May 31, 2026, for non-rural facilities and 31, 2026, for rural facilities as defined by the Office of Management and Budget.

The regulations at 483.250(b)(1) and (c)(1) must be implemented by May 31, 2026, for rural facilities as defined by the Office of Management and Budget.

The regulations at 483.250(b)(1) and (c)(1) must be implemented by May 31, 2026, for rural facilities as defined by the Office of Management and Budget.

The regulations at 483.250(b)(1) and (c)(1) must be implemented by May 31, 2026, for rural facilities as defined by the Office of Management and Budget.

Anne Blachfield, (410) 786-0018, for information related to Medicaid institutional payment transparency reporting.
SUPPLEMENTARY INFORMATION: To assist in understanding this rule, we are providing the following Table of Contents.

Table of Contents

I. Executive Summary

A. Purpose

B. Summary of Institutional Payment Transparency Reporting

C. Minimum Staffing Standards for Long-Term Care Facilities in Response to the A. Background

D. Purpose of the Proposed Regulations and Analysis of and Response to Public Comments

E. Definitions

F. Regulatory Requirements

G. Regulatory Requirements

H. Regulatory Requirements

I. Regulatory Requirements

J. Regulatory Requirements

K. Regulatory Requirements

L. Regulatory Requirements

M. Regulatory Requirements

N. Regulatory Requirements

O. Regulatory Requirements

P. Regulatory Requirements

Q. Regulatory Requirements

R. Regulatory Requirements

S. Regulatory Requirements

T. Regulatory Requirements

U. Regulatory Requirements

V. Regulatory Requirements

W. Regulatory Requirements

X. Regulatory Requirements

Y. Regulatory Requirements

Z. Regulatory Requirements

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Three Components



Resident Population



Facility's resources



Risk Assessment



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Component 1 – Resident Population

The assessment must include:

- The number of residents
- Facility's resident capacity
- Care required (i.e., diagnoses, conditions, disabilities, acuity, etc.)
- Staff competencies
- Physical environmental specifics (equipment, services and the physical plant)
- Ethnic, cultural or religious factors that could affect the care



<https://www.cms.gov/files/document/appendix-pp-guidance-surveyor-long-term-care-facilities.pdf>



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Data Sources

MDS

Electronic Health Record

UB04

671

Roster Matrix

Preadmission Assessment

Acuity Tools

Staffing and Scheduling

Risk Assessments

More...

Component 2 – Facility Resources

Resources:

- Building, structures, vehicles, etc.
- Equipment
- Services (PT, OT, ST, resp. therapy, pharmacy, etc.)
- Staffing to meet the needs of the population
- All types of staff and volunteers and training
- Contracts and other agreements
- Health Information technology resources

<https://www.cms.gov/files/document/appendix-pp-guidance-surveys-of-long-term-care-facilities.pdf>



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Facility Assessment Toolkit



Facility Assessment 444.7700 / 774.111

Introduction

The Requirements of Participation for Skilled Nursing Facilities (2015) includes a required facility assessment. The intent of this assessment is for the individual facility to evaluate its resident population and identify the resources needed to provide its necessary care and services. The assessment is a tool for the facility to determine the appropriate resources to care for residents on a daily basis as well as in emergency situations.

As identified in §443.20(c) (2)(2), the facility assessment shall include specific evaluation of key components:

- resident census
- facility capacity with imposed restrictions as applicable
- specific resident population demographics (i.e. specific classes, age group, cognitive condition, physical/clinical populations, infections, behavior, etc.)
- common types and timing of staff necessary to provide the necessary care and services
- staff resources – including staffing and non-staff personnel as it relates to the resident population needs
- cultural, ethnic and religious needs
- specific services and resources for the provision of those services such as pharmacy, dietary, laundry, and other facility, regulatory and other special services
- other resources such as medical equipment, information technology, etc.
- access to services via third parties and correlating provisions of services day to day and in emergency situations, including the review of all agreements with provision providers
- facility program evaluation
- health care services and sharing of resident information
- completion of a community and facility risk assessment, utilizing an all-hazards approach, in conjunction with the required emergency preparedness plan
- process for identification of gaps in performance related to adverse events
- integration into the facility quality assurance and performance improvement process
- facility's assessment that would require a substantial modification in the assessment will be needed.

The facility assessment is not to be a "checkbox" or "one size fits all" approach to determining assessment findings; rather it should reflect the individuality of the facility's specific resident population.



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- 1 Overview
- 2 Implementation Guide
- 3 Data and Importance of Data
- 4 Facility Assessment Policy and Procedure
- 5 Facility Assessment Templates
- 6 How to Use the Toolkit
- 7 Section Insight and Overview
- 8 Facility and Resident Population
- 9 Personnel Resources
- 10 Training Programs - Evaluation
- 11 Infection Control
- 12 Policy and Procedure Review
- 13 Facility Community Risk
- 14 Physical Plant and Equipment
- 15 Health Information Tech
- 16 Third Party Agreements
- 17 QAPI
- 18 Training Plan, Presentation, Post Test
- 19 Additional Resources

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Component 3 - Risk Assessment



FACILITY-BASED AND COMMUNITY-
BASED RISK ASSESSMENT



ALL HAZARDS APPROACH



INFECTION CONTROL RISK
ASSESSMENT



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Infection Risk Assessment Resource

IPC Risk Assessment Spreadsheet

CDC Centers for Disease Control and Prevention
Licensing and Accreditation Division
Longterm Care Facilities (LTCFs)

Get Email Updates
To receive email updates about this page, enter your email address:
First Name: _____
Last Name: _____
Email: _____

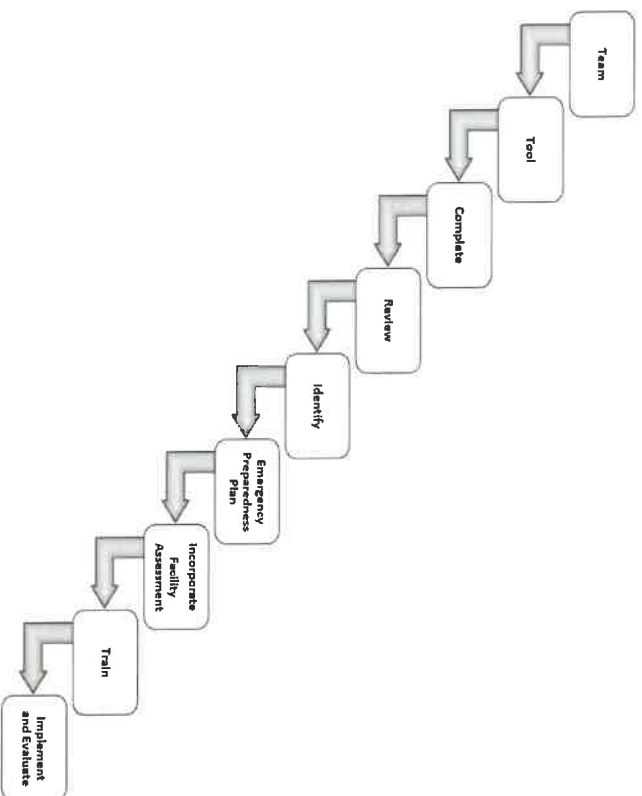
Infection Prevention Training
The Nursing Home Infection Prevention Training course is designed for individuals responsible for infection prevention and control (IPC) programs in nursing homes.
This course was developed by CDC in its partnership with the Centers for Medicare & Medicaid Services (CMS).
This is a self-paced, online training course.
* Core activities of effective IPC programs.
* Recommended IPC practices to reduce:
 • Pathogen transmission
 • Healthcare-associated infections
 • Antibiotic resistance

Available Continuing Education
The course is made up of 25 modules and is designed to provide continuing education for individuals responsible for infection prevention and control programs.
* Core competencies
* At the program
* Performance evaluation
* Evaluation

Start the Training
Click on the link to start the training.

CMS Memo Detailed Description
Click on the link to view the CMS memo.

Infection Prevention and Control Resources
This section provides additional resources for individuals responsible for infection prevention and control programs.
* [Infection Prevention and Control Resources](#)
* [Infection Prevention and Control Resources](#)
* [Infection Prevention and Control Resources](#)



Facility Assessment Toolkit



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Data Collection Tools and/or Resources

The following Tools and Resources are included in this Section of the HoP Facility Assessment Toolkit ©

Item	Description	Source (if Applicable)
Hazard Vulnerability Assessment	This template will assist the facility complete their HVA to identify potential vulnerabilities. Search local state Emergency Preparedness Website for potential state specific HVA tools and resources	
S&C Memo 17-29	Advanced Copy – Appendix Z Emergency Preparedness Final Rule Interpretive Guidelines and Survey Procedures	OnE S&C Memo 17-29 (2017, June 2) Retrieved August, 2017 from https://www.fda.gov/oc/ohrt/2017-06-02-s&c-memo-17-29-emergency-preparedness-final-rule-interpretive-guidelines-and-survey-procedures
S&C Emergency Preparedness Checklist	CMS Checklist to assist with the development and implementation of an Emergency Preparedness Plan – also includes Resource Links for provider use	Emergency Preparedness Checklist Recommended Tool for Healthcare Facilities (2015) Retrieved August 2017 from https://www.fda.gov/oc/ohrt/2015-08-04-s&c-checklist-emergency-preparedness
CMS Emergency Preparedness Rule – Website Resources	CMS Resource List for health care providers	https://www.cms.gov/medicare/coverage/coverage-guidance/2015-emergency-preparedness-rule
CMS Survey Tool for the E Tag – Post Acute Care Sample Transfer Agreement	This is a cross walk interactive tool which walks through each E Tag and interprete guidance	OnE E Tag for LTC Emergency Preparedness (2017) Retrieved August, 2017. https://www.cms.gov/medicare/coverage/coverage-guidance/2017-emergency-preparedness-tag
Transfer Agreement – CMS	Sample Transfer Agreement with Emergency Preparedness updates – CMS	https://www.cms.gov/medicare/coverage/coverage-guidance/2017-emergency-preparedness-tag
CMS – Health Coalition By State	CMS Resource List – Health Coalition - serve as resource for completion of HVA	https://www.cms.gov/medicare/coverage/coverage-guidance/2017-emergency-preparedness-tag
Facility Assessment Summary Worksheet	Template for train to use to summary findings and prepare for narrative Facility Assessment inclusion	Pathway Health



Overall Intent

- Assess the needs of its resident population
- Required resources to provide care and services
- Document the rationale for decisions
- Staffing and other resources
- Financial



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Regulatory Guidance

- May be similar to common business practices for strategic and capital budget planning
- An organization's process of defining its strategy or direction and making decisions on allocating resources to pursue its strategy
- Must be conducted at the facility level, including input from various levels

<https://www.cms.gov/files/document/appendix-bp-guidance-surveyor-long-term-care-facilities.pdf>



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Participants

- Required:
 - Administrator
 - Member of governing body
 - Medical Director
 - Director of Nursing
 - Direct care staff, including but not limited to RNs, LPNs/LVNs, and NAs
- Recommended:
 - Environmental Services / Plant Operations
 - Department Heads
 - Dietary Manager
 - Director of Therapy Services
 - Direct care staff
 - Must solicit and consider input from :
 - Residents
 - Representatives/families
 - Resident/family council
 - Representatives of direct care staff



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Individualized Approach

- Foundation to determine staffing levels and competencies
- Evaluation of overall number of facility staff needed to ensure sufficient numbers of qualified staff are available to meet resident needs
- Policies and procedures
- Competency based approach to determine knowledge and skills required among staff to ensure residents are able to maintain or attain the highest practicable physical, functional, mental, and psychosocial well-being
- Coordination with Emergency Preparedness

<https://www.cms.gov/files/document/pp-guidance-surveyor-long-term-care-facilities.pdf>



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Individualized Approach



- Meet current professional standards of practice
- Ethnic, cultural, or religious factors
- Review of individual staff assignments and systems for coordination and continuity of care

<https://www.cms.gov/files/document/appendix-pp-guidance-survevor-long-term-care-facilities.pdf>

Important Provisions

- If a change in service provision occurs
 - Example: A facility begins to admit residents who have new tracheostomy or ventilator
- Evaluate the training program to ensure staff have the required skills and competencies to care for these residents
- Review policies and procedures that may be required in the provision of this care
- A minimum of annually

<https://www.cms.gov/files/document/appendix-p-guidance-survivor-long-term-care-facilities.pdf>



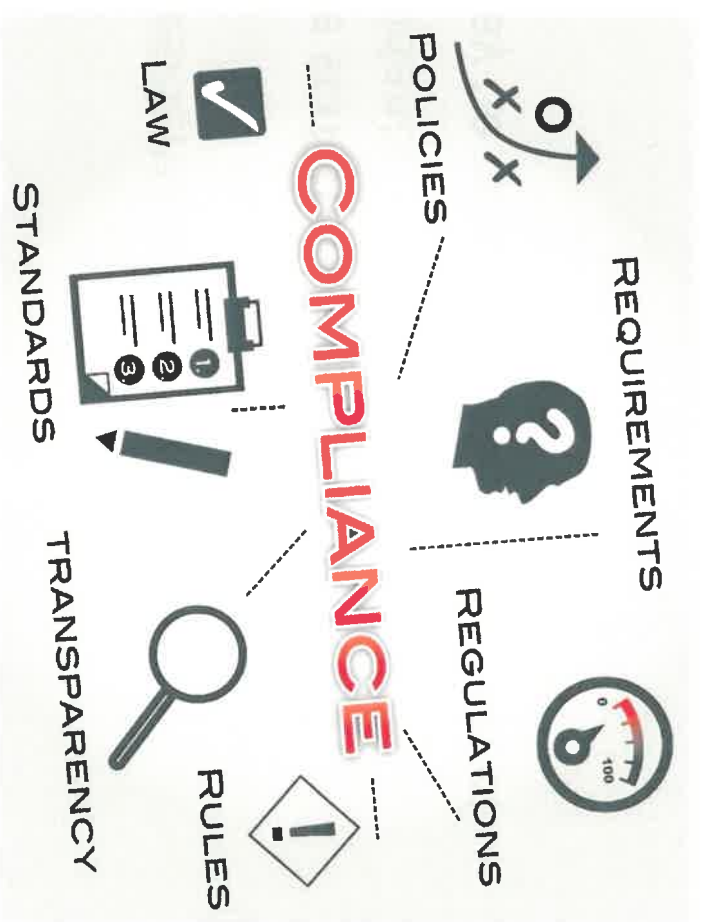
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Survey Procedure Highlights

- Assessment process
- Reflect the population
- Acuity
- Staffing levels
- Skills and competencies
- Who is involved?
- Determination of resources
- Emergency plan



Related Requirements

- Freedom from Abuse, Neglect, and Exploitation
- Admission, Transfer, and Discharge
- Comprehensive Resident-Centered Care Plan
- Quality of Care
- Nursing Services
- Behavioral Health Services
- Sufficient Staff
- Food and Nutrition Services
- Administration
- QAPI
- Infection Control
- Compliance and Ethics
- Training Requirements



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Where to Start?

NEXT STEPS



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Where do I Begin?

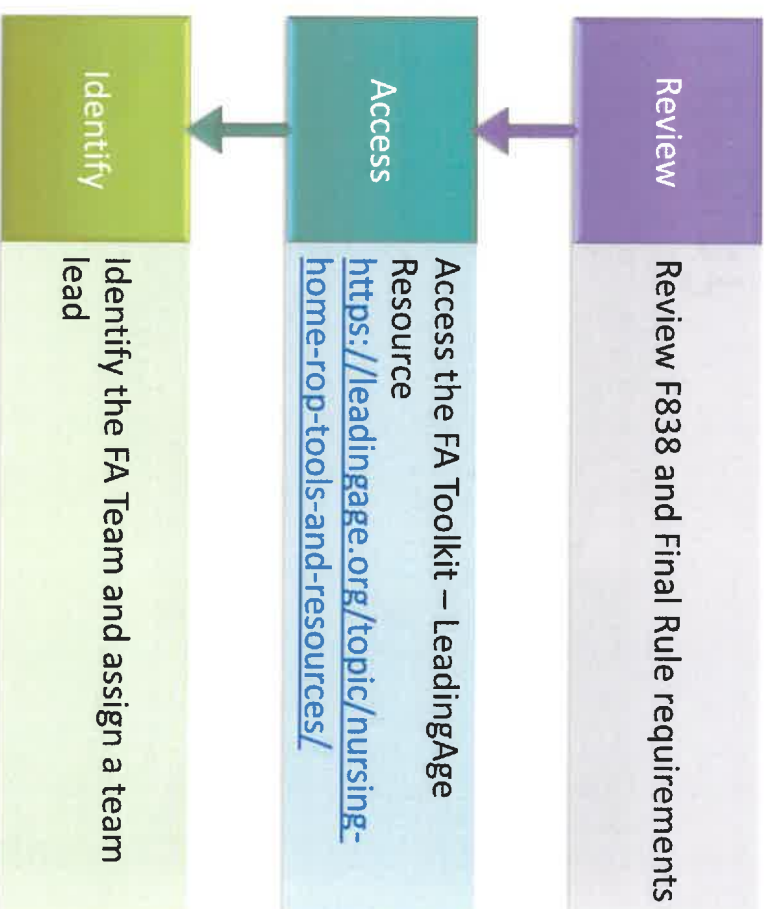
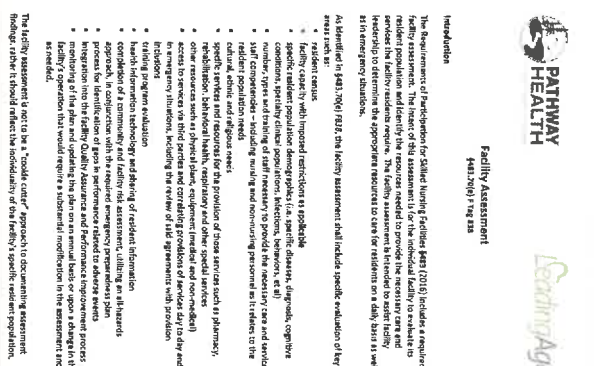


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Next Steps



Next Steps



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Facility Assessment Team Roster

Assigned Onsite	Task	Team Member	Coordination Date	High Scores
Resident and Facility Population	Census and Capacity			
	Diseases and Conditions			
	Physical and Cognitive Disabilities			
	Other Pertinent Factors and Specialty Program/Services			
	Overall Acuity			
	Staff Competencies Necessary per Regulation			
	Staff Competencies Necessary per Regulation			
	Factors Including Food Nutrition, and activities			
	Assisted Technology			
	Individual Communication Devices			
Personal Resources	Physical Space – Resident Room, Common Areas, etc.			
	Staffing Analysis and Ratios			
	Competency-based Training Plan			
	Personal Living, Resources, and Competencies			
	Nutrition Services			
	Specialized Services			
	Continental Services and Personnel			
	Volunteers			
	Training Plan Evaluation			

Data

Identify Data and Sources
Conduct Data Analysis and Review
with the Team

Review

Review Current FA and Changes
Needed

Analyze

Conduct Data Analysis and Review
with the Team



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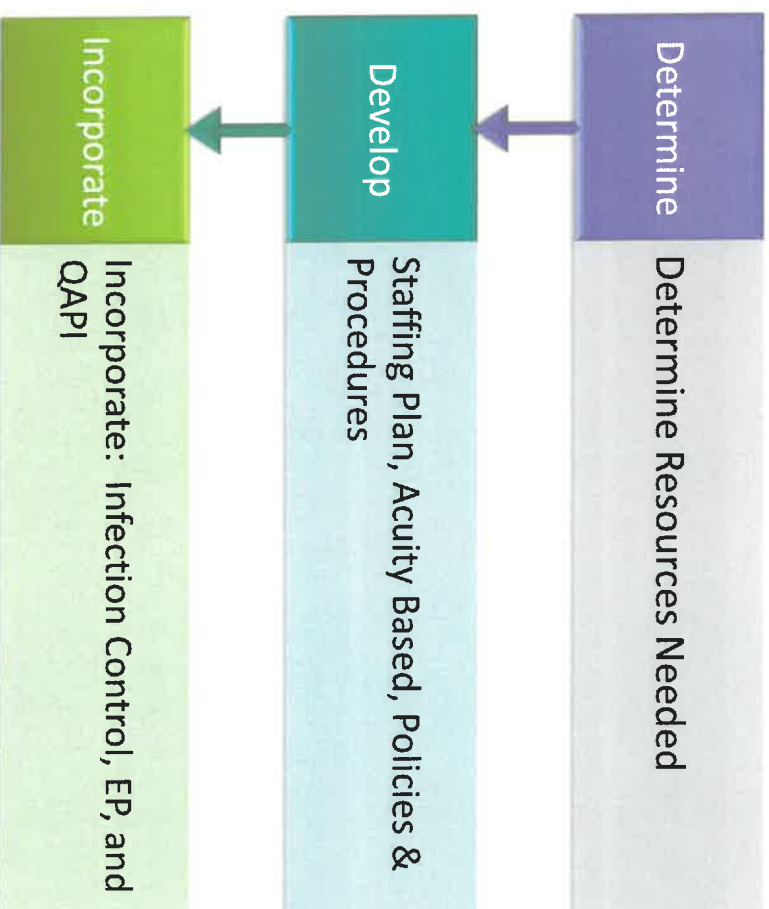
Next Steps



Facility Assessment Leadership QuickTip

Step	Action	Completed
Understand and Review	<ul style="list-style-type: none"> Read and review the §483.70(e) facility Assessment requirements and inter-jurisdictional guidance Review the Facility Assessment F838 Crosswalk Review the Facility Assessment implementation Guide 	<input type="checkbox"/> <input type="checkbox"/>
Assemble the Team	<ul style="list-style-type: none"> Develop a Facility Assessment Policy and Procedure Complete the Facility Assessment Team Roster 	<input type="checkbox"/> <input type="checkbox"/>
Data Source	<ul style="list-style-type: none"> Determine existing and needed data sources per required Facility Assessment element Team members to collect assigned data using data collection tools 	<input type="checkbox"/> <input type="checkbox"/>
Data collection	<ul style="list-style-type: none"> Verify data Summarize initial findings on Facility Assessment worksheets per element 	<input type="checkbox"/> <input type="checkbox"/>
Review and Analysis	<ul style="list-style-type: none"> Analyze and determine trends Determine key business strategies needed and resources needed Review initial findings as a team and correlate to operating budget and strategic plan 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Narrative Completion	<ul style="list-style-type: none"> Complete the final narrative Facility Assessment Integrate the Facility Assessment into the facility QAPI process 	<input type="checkbox"/> <input type="checkbox"/>
Monitor and Update	<ul style="list-style-type: none"> Identify monitoring process with team Determine Annual review data Update and revise per requirement Update corresponding policies and procedures related to Facility Assessment requirement and exhibition findings 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

This tool is developed to serve as a quick checklist for Facility Assessment completion.



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Updated FA Toolkit and New Resources

Person - Centered Staffing Plan

Analysis and Worksheets

Change of Condition and Impact

Recruitment and Retention of Consistent Staff

Workforce Unavailability and Exemptions

Assessing Residents Needs *

Leaders Need to Know *



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Updated FA Toolkit and New Resources

Update to align with new MDS requirements

Updated data accessibility and new MDS data

Update align with new Emergency preparedness requirements

Update align with new Infection Control requirements

Update competency section

Updated implementation guide

Review of all tools, resources, policies, templates, education templates



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Summary



Questions?



Please put your questions in the
QUESTIONS box



Email for more information:

Jodi Eyigor: jeyigor@leadingage.org

Janine Finck-Boyle: jfinck-boyle@leadingage.org



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