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Objectives

- Upon completion of this presentation, attendees should be able to:
- Understand the importance of the Facility Assessment in reflecting the individuality of your facility's specific resident population, programs, and services.
 - Learn how the Facility Assessment serves as the foundation for determining necessary resources and services to provide care for residents.
 - Discover how to use the Facility Assessment to develop a person-centered staffing plan for your organization

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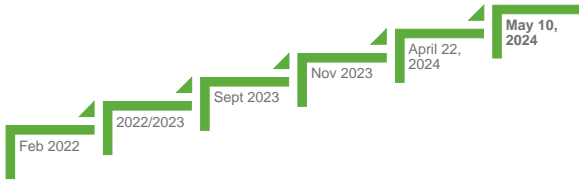
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Where We Have Come From



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Minimum Staffing Standards Rule



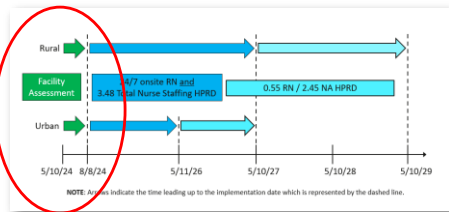
- Four main parts
 - Phase 1 - Facility Assessment
 - Phase 2 - 24/7 RN on-site requirement
 - Phase 2 - Total Nurse Staffing HPRD requirement
 - Phase 3 - RN/NA minimum staffing HPRD
- Medicaid payment transparency
- Staggered implementation

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Staggered Implementation



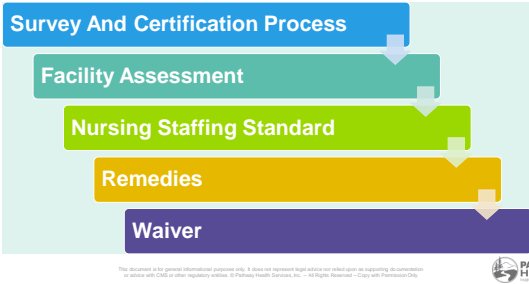
NOTE: Arrows indicate the time leading up to the implementation date which is represented by the dashed line.

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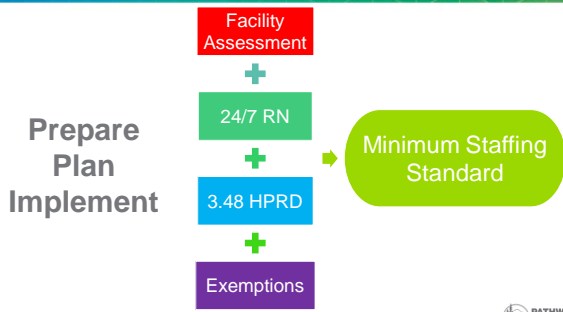
Enforcement



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The Facility Assessment

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The Facility Assessment

2017 (Phase 2 of ROP in 2017)

Key Tool (Resident population, resources)

Strengthen (Safety)



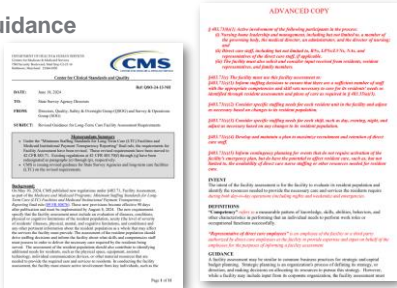
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Additional Guidance

QSO-24-13-NH
June 18, 2024
<https://www.cms.gov/files/document/qso-24-13-nh.pdf>

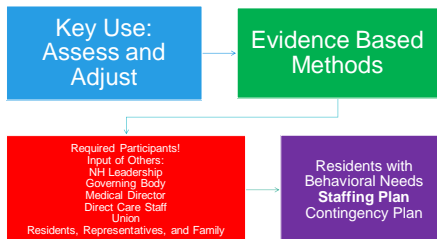


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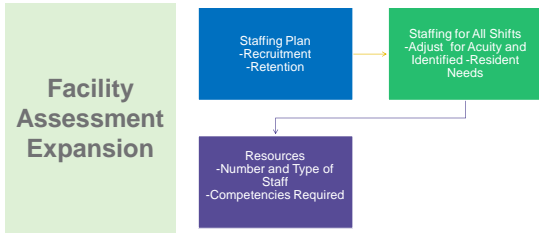
Expansion and Updates



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Facility Assessment

Components and How to Incorporate the New Regulations into the FA

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Intent

“The intent of the facility assessment is for the facility to evaluate its resident population and identify the resources needed to provide the necessary care and services the residents require.”

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

- Assess needs
- Determine required resources
- Document the rationale for decisions
- Determine staffing and other resources
- Financial



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Intent

- May be similar to common business practices for planning
- Defines strategy or direction for making decisions on allocating resources



**Must be conducted at the facility level, including input from various levels

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

To ensure the required thoroughness, individuals involved in the facility assessment should, at a minimum, include the administrator, a representative of the governing body, the medical director, and the director of nursing. The environmental operations manager, and other department heads (for example, the dietary manager, director of rehabilitation services, or other individuals including direct care staff) should be involved as needed.

Although not required, facility staff are strongly encouraged to seek input from the resident/family council, residents, their representative(s), or families and incorporate that information as appropriate when formulating their assessment.

<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforawsandregulations/download/appendix-pp-state-operations-manual.pdf>
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NEW Requirements for 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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Team Roster (example)

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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:

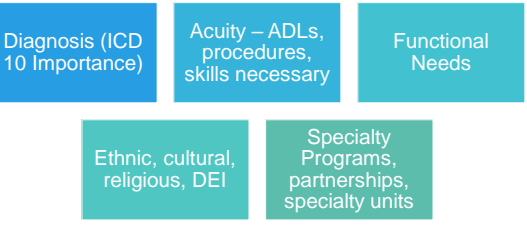


- The number of residents
- Facility's resident capacity
- Care required (i.e., diagnoses, conditions, disabilities, acuity, etc.)
- Staff competencies
- Physical environmental specifics (equipment, services and the physical plant)
- Ethnic, cultural or religious factors that could affect the care

<https://www.cms.gov/files/document/appendix-pg-guidance-surveyor-long-term-care-facilities.pdf>
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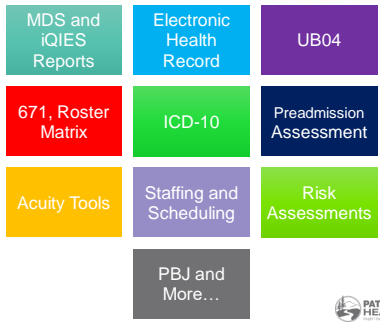
****We need a clear understanding of our resident population**

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Evidence-Based Data Driven



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Utilize Available Data to Support the Facility Assessment

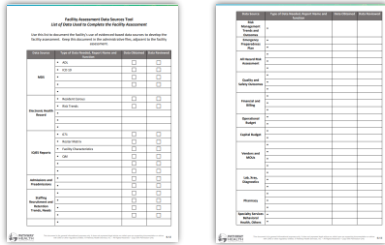


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Evidence-Based Data Driven Tool Example



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Component 2 – Facility 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-2-guidance-surveys-long-term-care-facilities.pdf>
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Resources: Personnel



Staffing Plan – New Requirement

Number and type of Staff

Qualifications of Staff and Competencies

Contingency

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Component 3 – Risk Assessments

The Facility Assessment must address “A facility-based and community-based risk assessment, utilizing an all-hazards approach.”

The facility assessment must be used to create a contingency plan for events that do not require the activation of the facility emergency plan but have the potential to impact resident care, such as the availability of direct care nurse staffing or other resources needed for care of residents. For example, the use of contract licensed nurses to cover several shifts during a holiday.

<https://www.cms.gov/files/document/gso-24-13-nh.pdf>

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Risk Assessments

- Involve the local/county Office of Emergency Preparedness
- Integrate with your facility’s emergency Preparedness Plan when conducting the community-based risk assessment
- Review your Hazard Vulnerability Assessment
- Include your Infection Prevention and Control Risk Assessment

***“Potential loss scenarios should be identified first during the risk assessment” (This will assist in conducting a Business Impact Analysis)

<https://www.cms.gov/files/document/gso-24-13-nh.pdf>

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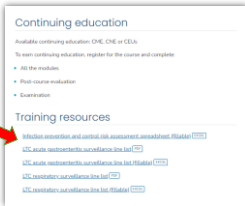
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Infection Prevention and Control Risk Assessment Resource Example



<https://www.cdc.gov/dng-tom-care-facilities/hcp/training/index.html>

Scroll Down



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Staffing and Competencies

How to Use the Facility Assessment to Inform Decisions

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Facility Assessment and Staffing Plan – MUST be Interrelated

- Start with assessment of your residents
- Identify the acuity of your residents
 - Physical
 - Behavioral Health
 - Cognitive Needs
 - Disease/Diagnoses
 - Co-morbid conditions
 - Etc.

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Staffing Plan



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Recruitment and Retention



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Staffing Plan Based on FA



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Next Steps – Where to Start



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Audit and QAPI

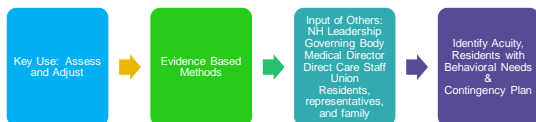


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Summary



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Questions and Discussion



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References and Resources

- Centers for Medicare & Medicaid Services. QSO-24-13-NH. Revised Guidance for Long-Term Care Facility Assessment Requirements, June 18, 2024. <https://www.cms.gov/files/document/qso-24-13-nh.pdf>
- Centers for Medicare & Medicaid Services. State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities: <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>
- Medicare and Medicaid Programs, Minimum Staffing Standards for Long-Term Care Facilities and Medicaid Institutional Payment Transparency Reporting final rule (CMS 3442-F). May 10, 2024. <https://www.federalregister.gov/documents/2024/05/10/2024-08273/medicare-and-medicare-programs-minimum-staffing-standards-for-long-term-care-facilities-and-medicare>

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