



# HOME AND COMMUNITY BASED CARE NEWSLETTER

**HCBC Newsletter 2023-02**  
**April 11, 2023**

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## **HCBC Update:**

- **Revised Hospice Regulations**
- **Interviews During the Survey Process**
- **Accrediting Organization Surveys In Lieu of a State Licensure Survey**
- **CNA Competency and Training**

## **Revised Hospice Regulations**

CMS released [QSO-23-08-HOSPICE](#) on Jan. 27, with revisions to [Appendix M](#) and complementary revisions to surveyor training to focus on the quality of care and facilitate consistency.

## **Interviews During the Survey Process**

IDOH has been receiving feedback about HCBC surveyors asking open-ended questions during interviews. This is how CMS has recommended surveyors ask questions. When asking open-ended questions, surveyors determine the agency process and knowledge of the process in order to determine compliance. As part of the survey process, the surveyors will need to interview various staff members in regard to home visits, orders and visit notes.

## Accrediting Organization Surveys In Lieu of a State Licensure Survey

According to 410 IAC 17-10-1(r), an agency must request in writing an in lieu of survey after having their accrediting organization (AO) complete their federal survey. A copy of the AO survey report must accompany the written request. The state agency will review the survey report and if acceptable, will use the AO survey in lieu of state licensure survey. The approval will be for one year from date of exit of the AO survey.

## CNA Competency and Training

While the regulations at §484.80(a)(1) allow for CNAs to meet the requirements of a home health aide, the CNA would have received generalized training/competency, not specific to the home health agency (HHA) itself. In other words, CNA certification does not exempt the HHA from its responsibility for ensuring staff are competent for their expected roles. Note the following regulations and interpretive guidelines under various tags which indicate the HHA needs to retain competency documentation for new hires (for example: checklists, training sign-in sheets, etc.). The following are various regulatory requirements and interpretive guidelines that talk about training and competency of staff – specific to the services provided and expected roles/policies/procedures in the HHA.

- Tag G686 §484.70(c) "... Infection control education provided to staff at periodic intervals consistent with accepted standards of practice. Such education must be provided at orientation, annually, and as needed to meet the staff's learning needs to provide adequate care;
- The interpretive guidelines for tag G754 note that "the HHA must ensure that all of its HHA aides, including HHA aides trained and evaluated by another HHA or other organization, are competent to carry out assigned patient care tasks, in a safe, effective, and efficient manner."
- Tag G774 - §484.80(d): "...the HHA introduces a new procedure that would indicate the need for further HHA aide in-service training..."
- Emergency preparedness training under: 42 CFR 484.102(d)(1)(i) - Initial training in emergency preparedness policies and procedures to all new and existing staff, individuals providing services under arrangement, and volunteers, consistent with their expected roles.

According to CMS, the CNAs will not be grandfathered in from 2018. IDOH recommends that this be part of your PIP/QAPI.