

ISDH Long Term Care  
Newsletter Issue # 10-23  
December 21, 2010

In Today's Issue:

- QIS Implementation History
- QIS Implementation Plan
- QIS Questions and Answers
- QIS Mock Surveys

## Quality Indicator Survey (QIS) Implementation Update

### Indiana QIS Implementation History

Since the Centers for Medicare and Medicaid Services (CMS) launched the Quality Indicator Survey (QIS) process in 2005, the Indiana State Department of Health (ISDH) has closely followed its development. The QIS process has been a frequent discussion topic at national meetings and regional conference calls. Two CMS Region V States, Ohio and Minnesota, were part of the initial group of states that implemented the QIS process. The ISDH learned from those states as they discussed their experiences at regional meetings.

On August 7, 2009, CMS issued a survey and certification letter, S&C 09-50, on the order of implementation of the QIS system. The letter indicated that Indiana would begin QIS implementation in late 2010 or early 2011. Over the past year, the ISDH has prepared for the implementation. The following are activities that have been completed to date:

1. In early 2009, CMS surveyed states to determine infrastructure capacity for implementing the QIS process. The ISDH conducted a review of its technology capacity and classroom facilities.
2. On August 7, 2009, CMS announced that Indiana would begin implementing the QIS process in late 2010.
3. On August 2, 2010, the ISDH participated in a QIS implementation kick-off call with CMS to discuss initial planning.
4. In September 2010, the ISDH submitted its CMS budget for tablet computers compatible with the QIS system and initiated the purchasing process.
5. On November 4, 2010, the ISDH participated in a QIS conference call with CMS to discuss classroom logistics and requirements.
6. In November 2010, the ISDH upgraded conference rooms to allow for webinars, online conferencing, and group training required for QIS training.

7. On December 6, 2010, the ISDH participated in a webex with CMS on IT logistics and requirements.
8. On December 13, 2010, the ISDH, CMS, and Nursing Home Quality conducted an Indiana QIS Conference Call with nursing homes to provide information on the QIS implementation process.
9. On December 21, 2010, the ISDH distributed tablet computers to the initial group of QIS surveyors and provided training on their use.

## QIS Implementation Plan and Schedule

### QIS Team Leader

The CMS QIS implementation plan calls for the state to designate a QIS team leader. The team leader will oversee and coordinate the training of state surveyors. The ISDH is working to identify a position to be used for this purpose and hopes to designate an individual to this position in the near future. On an interim basis until the QIS Team Leader is named, Brenda Buroker, ISDH Long Term Care Survey Manager, will serve in this capacity and be the contact person for questions pertaining to implementation.

### QIS Implementation Schedule

The following is an overview of the QIS implementation schedule for the initial group of trainees:

1. The ISDH has selected ten surveyors as the initial QIS trainees. Those surveyors will constitute two survey teams. Core classroom training for these ten surveyors begins on January 10, 2011. Several other staff will be auditing the training. The auditing staff includes survey supervisors, directors, and IT support staff.
2. On January 18, 2011, the two teams will begin a mock survey utilizing the QIS process. The mock surveys will be performed at volunteer facilities and are scheduled to conclude on January 21. The facilities will be notified in advance that there will be a mock survey at their facility.
3. On January 24, 2011, the two teams will begin their first survey of record. The surveys will be unannounced as always and the facilities will not be notified in advance that the survey will be under the QIS process.
4. The ISDH expects to use the week of January 31 to complete the initial surveys of record, debrief the survey teams on the process, and provide additional guidance.
5. The second surveys of record will begin on February 7, 2011. The surveys will be unannounced as always and the facilities will not be notified in advance that the survey will be under the QIS process.
6. Upon completion of the second survey of record utilizing the QIS process, the surveyors will be evaluated by the trainers and determined whether additional training is needed on the QIS process. If additional training is needed, there may be additional classroom training or an additional QIS survey. If the surveyors are found by the trainers to have learned the QIS process, the surveyors will be certified on the QIS process and begin regularly surveying using that process.

This process will be repeated for each training group. The ISDH expects the training for each group to take approximately eight weeks.

### What facilities will be surveyed using the QIS process for this initial training group?

One of the initial training teams is from Survey Area 1 in northwest Indiana. It is very likely that facilities

from that area will be used for the mock survey and two official surveys performed by that team. Once the Area 1 Survey Team has completed QIS training, future surveys performed by that team will mostly likely utilize the QIS process. That team could begin regular use of the QIS process as early as February 14, 2011.

The second team in the initial training group is comprised of surveyors from several areas. The facilities surveyed by this team are likely to be from a variety of survey areas rather than one survey area.

Once both teams have successfully completed QIS training, the ISDH, with the consent of CMS Master Trainers, will select four surveyors from this group of initial trainees who will serve as the ISDH QIS Trainers. From February 14 through April 4, the four surveyors selected will complete four additional official surveys using the QIS process with evaluation by the CMS Master Trainers. Those surveys will likely be conducted in a variety of survey areas.

Therefore, from January 18 through around February 11, there will be at least 2 mock surveys and 4 official surveys conducted utilizing the QIS process. From February 14 through April 25, the Area 1 team could potentially conduct four or five surveys using the QIS process. The other team would conduct four surveys using the QIS process as a part of their training.

#### When will the second and subsequent groups begin training?

The ISDH tentatively plans for the second training group to begin classroom training on April 25, 2011. The ISDH is planning on approximately eight weeks per group to complete all training activities. Subsequent schedules will be adjusted based on the length of time needed by the various groups to complete the training process.

#### QIS Surveyor Training Schedule

The ISDH has completed a tentative training schedule for 2011. The plan is to train one team plus a supervisor, complaint, or quality review surveyor for each [survey area](#). Each training group will consist of two teams so there will be two areas per group involved in the training. Once we complete a round of trainings, we will then complete a second and third round following the same order. Attached is a tentative [QIS Surveyor Training Schedule](#) of survey teams assigned to complete QIS training in 2011.

## QIS Questions and Answers

#### Q & A from Conference Call

On Monday, December 13, 2010, a conference call was conducted for Indiana nursing homes to provide information on the QIS process and implementation. Hosting the conference call was CMS, Nursing Home Quality (QIS Project Manager), and the ISDH. At the start of the call, there were 385 participants. The PowerPoint from the call has been placed on the ISDH QIS Resource Center.

During the call, there was an opportunity for participants to ask questions. The ISDH took notes on the questions asked and has prepared written answers. The [QIS Questions and Answers](#) from the conference are attached and will also be placed on the ISDH QIS Resource Center for future reference. The ISDH will continue to post questions and answers both in this newsletter and on the web page.

#### Corrections

On the previous two QIS newsletters and materials provided for the conference call, I provided a tentative QIS timeline. Some of the dates had the year 2010 rather than the intended 2011. I think the intent was clear but obviously I had not yet adjusted my mind to the coming year. The dates have been corrected on the ISDH web site.

More substantive, a question was posed about whether facilities would be notified in advance that the QIS process would be used on their next survey. My initial answer was that the ISDH intends to notify

facilities if possible that the QIS process will be used. In planning details of the implementation, the ISDH will not be able to inform the facilities that will have surveys of record as part of the QIS training. Because the ISDH has already informed facilities as to the survey schedule for the QIS training surveys, informing the facilities would amount to an announced survey. As the ISDH implements the QIS process in each survey area, the ISDH will not be able to inform those facilities selected as part of surveys of record in the training process. Once survey teams complete training and begin performing routine surveys using the QIS process, the ISDH may be able to inform facilities in that area whether they are likely to have a QIS process survey on their next visit. Changes in surveyor schedules may result in some last minute changes.

## Mock Surveys

The ISDH will be looking for facilities to participate in the QIS Training as a mock survey facility. Under the anticipated survey schedule, the ISDH will perform two mock surveys approximately every eight weeks as a new training group begins. Ideally, the mock surveys will be performed in the survey area of the surveyors in training and with a facility that has not yet had a survey utilizing the QIS process. Over the next two years, the ISDH anticipates needing at least 22 facilities for a mock survey . Each survey area will have at least three training teams spread over the next two years so will need at least three facilities for a mock survey.

The ISDH has received inquiries about becoming a mock survey facility. Any facility interested in becoming a mock survey facility should contact Brenda Buroker at [bburoker@isdh.in.gov](mailto:bburoker@isdh.in.gov).

The ISDH is excited about the implementation of the Quality Indicator Survey process. It is an opportunity to improve the efficiency and effectiveness of our survey process. Our expectation is that the implementation will start rather slowly as we get our trainers in place but we anticipate that it will pick up pace in the second half of 2011. We will keep you informed of our progress. Please let us know if you have any questions about the Quality Indicator Survey process and implementation.

Terry Whitson  
Assistant Commissioner  
Indiana State Department of Health

The logo for the Indiana State Department of Health, featuring a green gradient background with the text "Indiana State Department of Health" in white.

For additional information and resources on the Quality Indicator Survey process, go to the ISDH QIS Resource Center at <http://www.in.gov/isdh/25023.htm>.