National Public Health Week - April 6-10, 2015

In 1995 the first full week of April was proclaimed as National Public Health Week. Each year since then, the nation’s public health community has celebrated this observance by focusing on issues that are important to improving the lives of children and adults; and supporting public health programs that result in healthier communities and reduce disease treatment costs, leading to better economic productivity and an improved quality of life.

The American Public Health Association (APHA) champions the health of all people and all communities. APHA brings together communities across the United States to observe National Public Health Week as a time to recognize the contributions of public health and highlight issues that are important to improving our nation. For more information about National Public Health Week, see http://www.nphw.org/about.

Learn how Indiana rates on health measures, such as smoking, obesity and physical inactivity, and compare to other states over a span of 25 years at http://www.americashealthrankings.org.

CMS Update

MDS 3.0 Focus/Staffing Surveys Rollout

In 2014 the Centers for Medicare & Medicaid Services (CMS) piloted a short-term focused survey to assess Minimum Data Set, Version 3.0 (MDS 3.0) coding practices and the relationship to resident care in nursing homes. After completing the pilot CMS announced that these surveys would be conducted nationwide in 2015. The surveys are also being conducted in conjunction with CMS'efforts to strengthen the Nursing Home Five-Star Quality Rating System.

Indiana surveyor training for the nationwide rollout of the MDS 3.0 Focus/Staffing Surveys will be starting in April 2015. These surveys will focus on compliance with MDS accuracy and staffing regulations. The surveys are designed to be conducted by two
surveyors over approximately two days onsite. Actual surveys will begin in May 2015. These focused surveys are to be unannounced and may not be combined with a standard recertification survey. These surveys however may be done immediately before or after a complaint survey while the surveyors are onsite. Facilities are also subject to an assessment of compliance with any applicable regulations based on what surveyors identify during the investigatory process. CMS will identify potential facilities to be surveyed. Surveys must be completed by September 30, 2015.

MDS Assessment Compliance

The CMS regulations for the Resident Assessment Instrument (RAI), including the MDS 3.0 and the Care Area Assessments (CAAs) are found at 42 CFR 483.20, and the guidance is found in Appendix PP of the State Operations Manual (SOM) at F-Tags F272 through F287. These requirements apply to all residents in Medicare and/or Medicaid certified nursing homes. These regulations relate to assessment accuracy (42 CFR 483.20(g) Accuracy of Assessment) as well as completion and timing (42 CFR 483.20(b) Comprehensive Assessments and 42 CFR 483.20(c) Quarterly Review Assessment). In 42 CFR 483.20(i) Certification, CMS requires that each individual who completes a portion of the assessment must sign and certify the accuracy of that portion of the assessment and that a registered nurse (RN) must sign and certify that the assessment is completed. Federal regulations state at 42 CFR 483.20(j) Penalty for Falsification that those who falsify assessments are subject to civil monetary penalties. Additionally, when such patterns or practices are noticed, they should be reported by the State Agency to the proper authority.

Staffing Compliance §483.30 Nursing Services

The facility must have sufficient nursing staff to provide nursing and related services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care. To assure that sufficient qualified nursing staff are available on a daily basis to meet residents' needs for nursing care in a manner and in an environment which promotes each resident's physical, mental and psychosocial well-being, thus enhancing their quality of life. CFR §483.30(e) describes specific requirements for the posting of nurse staffing information. The guidance is found in Appendix PP of the SOM at F-Tags F353 to F356.

MDS coding is a core component of nursing home care and assurance of quality. Inadequate coding may reflect inadequate resident assessment, and inaccurate coding can lead to inadequate care plans. Such deficiencies can potentially lead to harm or prevent a resident from reaching their highest practical well-being. Deficiencies identified during the surveys will result in citations and enforcement actions in accordance with normal and existing CMS policy and regulations. This includes policies and guidance for imposing required and optional remedies, including civil money penalty (CMP), for each level of deficiency.

For any questions regarding the MDS surveys, contact Courtney Hamilton, RN, Director of Health Care Education at 317-233-7480 or CHamilton@isdh.in.gov.

S&C 15-34 NH - Grant Award: Reinvestment of Federal Civil Money Penalty (CMP) Funds to Benefit Nursing Home Residents

In May 2014, the Centers for Medicare & Medicaid Services (CMS) invited proposals for a grant opportunity to utilize Federal CMP Funds for the support and further expansion of the National Partnership to Improve Dementia Care in Nursing Homes. The Eden Alternative, Inc. has been awarded a grant for their project entitled, "Creating a Culture of Person-Directed Dementia Care." The project goal is to support the continued reduction of antipsychotic medications through person-directed care practices that redefine perceptions of and approaches to dementia care. The Eden Alternative plans to engage direct care staff from nursing homes across five states (Georgia, South Carolina, Kansas, Illinois and Texas).

Fire Marshal Request

Indiana State Department of Health (ISDH) is the authority having jurisdiction related to locked/secure areas in facilities. Local fire marshals may be requesting the facility’s most recent ISDH Life Safety Code survey for information to complete their reports. This only pertains to comprehensive care facilities.

Coming Events
Infection Prevention Course

The ISDH, in partnership with the University of Indianapolis Center for Aging & Community, is offering an Infection Prevention Course. This course includes a two day face to face session in April, three online modules and a second two day face to face session in August. Participants will learn the fundamentals of epidemiology and infection prevention in a long term care setting and will be prepared to sit for the APIC Certificate of Training exam. Sessions will be held April 13-14 and August 3-4 in South Bend. Spots are still available for the South Bend course, register here. A second course scheduled for April 16-17 and August 6-7 in Indianapolis is full.

Long Term Care Newsletter Subscription

As a subscriber, you have received this newsletter of the Indiana State Department of Health (ISDH) Healthcare Quality and Regulatory Commission. You are welcome to share this newsletter with others. If you are not a subscriber to the newsletter, you may subscribe to the newsletter at http://www.in.gov/isdh/24526.htm.

The purpose of the Long Term Care Newsletter is to provide program updates related to licensing and healthcare quality. The following are items that are regularly included in the newsletters:

- Emergency information
- Epidemiologic outbreaks and updates
- Program updates
- CMS survey and certification updates
- Healthcare quality improvement projects
- Coming events

The newsletter is available to anyone. There is no limit on the number of individuals from a facility allowed to subscribe. The ISDH encourages all long term care providers and staff to subscribe. The newsletter is free.