Facility Assessment HOW do we do it?

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F838 Facility Assessment

- The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents competently during both day-to-day operations and emergencies.

- The facility must review and update that assessment, as necessary, and at least annually.

- The facility must also review and update this assessment whenever there is, or the facility plans for, any change that would require a substantial modification to any part of this assessment.

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Assessment can be divided into 3 parts:

1. Resident profile:
   - ✓ numbers
   - ✓ diseases/conditions
   - ✓ physical and cognitive disabilities
   - ✓ acuity
   - ✓ ethnic/cultural/religious factors that impact care

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Assessment can be divided into 3 parts:

2. Services and care offered:
- ✓ based on resident needs
- ✓ includes types of care your resident population requires
- ✓ the focus is not to include individual level care plans in the facility assessment

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Assessment can be divided into 3 parts:

3. Facility resources needed to provide competent care for residents:
   - ✓ staff
   - ✓ staffing plan
   - ✓ staff training/education & competencies
   - ✓ education and training
   - ✓ physical environment and building needs
   - ✓ other resources

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Where do we get this information?

Some examples of resources:

- ✓ MDS reports
- ✓ Quality Measures
- ✓ Resident Census & Conditions of Residents
- ✓ Roster/Sample Matrix Form
- ✓ Payroll-Based Journal
- ✓ In-house designed reports

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Who should be involved?
- ✓ Administrator
- ✓ Representative of governing body
- ✓ Medical Director
- ✓ Director of Nursing
- ✓ Other department heads: i.e., Dietary, Social Services, Activities, Environmental Operations, Rehab Services, even direct care staff

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✓Must be updated annually, or
✓Whenever there is a change that requires modification or revision

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CMS State Operations Manual (SOM) states:

✓ "If systemic care concerns are identified that are related to the facility's planning, review the facility assessment to determine if these concerns were considered as part of the facility's assessment process."

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Components:
- ✓Facility Name
- ✓Persons/names/titles involved in completion
- ✓Date(s) assessment completed or update
- ✓Date(s) assessment reviewed with QAA/QAPI committee
- ✓Overview of facility

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Part 1: Resident Profile:

- ✓ Number of beds licensed - designate type
- ✓ Indicate average daily census
- ✓ Admissions/discharges numbers
- ✓ Diseases/conditions, physical & cognitive disabilities (Most list top 10 diagnoses)

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Resident Profile:

✓Decisions regarding caring for residents not listed in those diagnoses (admission of someone with a totally different condition/diagnosis than you have normally admitted)

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Resident Profile:

✓ Acuity - Describe acuity levels that help you understand potential implications regarding the intensity of care and services needed. (Can be over the past year, or over the past month)

✓ Potential data sources: RUGs, MDS data, and any resident/patient acuity tools.

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Resident/Patient Acuity Tools:

- ✓ http://www.hcpro.com/NRS-279130-975/From-the-staff-development-bookshelf-Patient-classification-systems-to-coordinate-patient-care.html
- ✓ http://www.americannursetoday.com/a-new-patient-acuity-tool-promotes-equitable-nurse-patient-assignments/

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Ethnic, cultural, or religious factors:

- ✓ Describe ethnic, cultural, or religious factors or personal resident preferences that may potentially affect the care provided to residents.

- ✓ Examples: activities, food and nutrition services, languages, clothing preferences, religious services, or religious-based advanced directives.

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Other:

✓ Describe other facts/descriptions of resident population affecting staffing & resource needs (residents' preferences - daily schedules, waking, bathing, activities, naps, food, going to bed, etc.

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Part 2: Resident Support/Care Needs

✓List the types of care that your resident population requires and that you provide.

✓List by general categories, adding specifics as needed.

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Part 2: Resident Support/Care Needs (Some examples…)

✓ADLs - bathing, showers, oral/denture care, dressing, eating, support with needs related to hearing/vision/sensory impairment; supporting resident independence - allowing to do for self

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Part 2: Resident Support/Care Needs (Some examples…)

- ✓ Mental health & behavior - manage medical conditions & medication-related issues causing psychiatric symptoms and behavior, identify & implement intervention to help support individuals with issues such as dealing with anxiety, cognition deficit, depression, trauma/PTSD, other psychiatric diagnoses, intellectual or development disabilties.

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Part 2: Resident Support/Care Needs (Some examples…)

- ✓ Bowel/bladder - toileting programs, incontinence prevention/care, catheters, ostomy, responding to requests for assistance to bathroom in order to maintain continence and promote resident dignity
- ✓ Provide person-centered/directed care: Psycho/social/spiritual support

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Staff type - Identify the type of staff members, other health care professionals, and medical practitioners that are needed.
- ✓ Potential data sources: staff records, organizational chart, PBJ reports

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Staff plan - based on your resident population and their needs for care and support, describe your approach to staffing.
- ✓ Licensed Nurses, Direct care staff, Other departments - outline specific departments/assignments/ratios

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Staff Training/Education and Competencies
- ✓ Begin with training topics as specified in new requirements:
  - ➡ Communication
  - ➡ Residents rights/responsibilities
  - ➡ Abuse, neglect, exploitation
  - ➡ Etc.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Competencies
  - ➡ Person-centered care
  - ➡ ADLs
  - ➡ Disaster planning & procedures
  - ➡ Infection Control
  - ➡ Caring for persons with Alzheimer's or other dementia
  - ➡ Caring for residents with mental/ psychological disorders/traumas
  - ➡ Etc.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

 ✓ Policies & procedures for provision of care - describe how you evaluate what policies & procedures may be required in the provision of care, and how you ensure those meet current professional standards of practice.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Working with medical practitioners - describe your plan to recruit and retain enough medical practitioners who are adequately trained and knowledgeable in the care of your residents/patients.

- ✓ Describe how management and staff familiarize themselves with what they should expect from medical practitioners and other healthcare professionals related to standards of care and competencies that are necessary to provide the level and types of support/care needed for your population.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Physical environment and building/plant needs - list physical resources for the following categories:
  - ➡ Buildings and/or other structures
  - ➡ Vehicles
  - ➡ Physical equipment
  - ➡ Services
  - ➡ Other physical plant needs
  - ➡ Medical supplies (if applicable)
  - ➡ Non-medical supplies (if applicable)

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ List contracts, memoranda of understanding, or other agreements with third parties to provide services or equipment to the facility during both normal operations and emergencies. How do you oversee?
- ✓ List health information technology resources, such as systems for electronically managing patient records and electronically sharing information with other organizations.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

✓ Describe how you evaluate if your infection prevention and control program includes effective systems for preventing, identifying, reporting, investigating, and controlling infections & communicable diseases for all residents, staff, volunteers, visitors, and other individuals providing services under a contractual arrangement, that follow accepted national standards.

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Part 3: Facility Resources Needed to Provide Competent Support and Care for Resident Population

- ✓ Provide your facility-based and community-based risk assessment, utilizing an all-hazards approach (an integrated approach focusing on capacities and capabilities critical to preparedness for a full spectrum of emergencies and natural disasters).
- ✓ It ACCEPTABLE to refer to the risk assessment of your emergency preparedness plan and focus on high-volume, high-risk areas.

Sufficient & Competent Nurse Staffing Review - General Observations

✓The Facility Assessment is used to assess if the facility appropriately considers the facility's census and residents' acuity to determine the number and competency of staff required to meet each resident's needs.

Staff Sufficiency (list of probes addressed during the initial pool process) During team meetings, the team should discuss whether any of the areas listed below were concerns to alert the team of potential concerns with sufficient or competent staff.

✓ Do you feel that there is enough staff to meet your needs and concerns, such as answering your call light timely or responding quickly to your alarm if you have one? If not, why, and what care or services do you feel are not provided, such as receiving or refilling a cup of water, toileting, dressing, eating, going to activities? Is there a specific time of day or weekends that are more problematic?

✓ Has anything occurred because you had to wait for staff to respond and assist you, such as being incontinent, missing a shower, or falling? How often does this occur?

✓ Do you routinely eat in your room? If so, is this your choice and if needed, is assistance provided to help you? Are room trays delivered

Staff Sufficiency (list of probes addressed during the initial pool process): During team meetings, the team should discuss whether any of the **areas listed below were concerns to alert the team of potential concerns with sufficient or competent staff.**

✓ Are you able to wake, dress, eat, or engage in other activities at times that are preferable to you?

✓ Does staff interact with you and explain to you what care or services they are providing and why? Does staff rush you when they provide care? Do you get your medications on time?

✓ Do you now or have you ever had a position-change alarm used -- for example, a device that makes a sound when you change your position while sitting or in bed? If so, do you know why these alarms are used for you?

✓ Do you receive medications that make you sleepy, tired, lethargic, or

Staff Competency (surveyors should ask residents about staff competency throughout the survey):

✓ Do you feel safe and comfortable when staff assist you?

✓ Do you think the nursing staff are experienced and knowledgeable when providing your care? If not, what concerns have you experienced?

✓ Do you recall a time when you didn't feel well? Did you tell a staff member? What happened? For example, did you get better or worse?

✓ Have you been transferred to the hospital? For what reason?

Nursing Aide and Licensed Nurse Interview: If concerns are identified with sufficient or competent staff, complete the following interviews. Staff Sufficiency:

✓ How many residents are you responsible for on a regular basis during your shift?

✓ Do you have enough time to complete your required assignments each day? If not, why not, and what assignments are you not able to complete? How often does this occur?

✓ How often are you asked to stay late, come in early, or work overtime?

Nursing Aide and Licensed Nurse Interview: If concerns are identified with sufficient or competent staff, complete the following interviews. Staff Sufficiency:

✓ Are there any devices used to help keep residents from falling, moving in certain ways, or wandering into certain areas? If so, why? Which residents?

✓ Are you able to complete rehabilitation services as ordered for the residents?

✓ How are current staffing needs determined? Does management ask for your input into their facility assessment for sufficient staffing? If so, can you provide some examples of what you provided and if you know

Staff Competency:

✓ How are you made aware of the care and services the residents require as directed in their plan of care and what their individual choices are?

✓ How do you identify a resident's change in condition? Can you provide some examples?

✓ How are changes in a residents' care communicated to you and how do you communicate a resident's change in condition or concerns to other staff?

✓ Is there a structured tool (e.g., INTERACT or a process for identifying, communicating, and caring for changes in a resident's condition)?

✓ How often are residents sent to the hospital? For what

Staff Competency:

✓ How have you been trained to provide care, use equipment, and ensure proper infection control techniques are used?

✓ Do you receive periodic evaluations on your skills, knowledge, and abilities? If so, how often? For what areas have you been assessed? What areas do you believe you need more assistance or training?

✓ Do you have regular in-services on abuse, resident rights, dementia care, and specific resident needs (e.g., ventilators, dialysis, hospice, medication side effects, pain, or changes in condition)? Are you provided training on each resident? How often?

✓ Does your facility use agency staff? If so, how does that

Staff Sufficiency (DON/Staff Development Interview):

✓ How does the facility's census impact staffing levels? For example, are staffing assignments routinely changed based on census? If so, how do you accommodate for the changes and for weekend staffing adjustments? How do you handle call-ins?

✓ What is your turn-over rate? Do you conduct exit interviews with staff? Do you report interview findings to your QA&A meeting? Do you use position-change alarms? Why?

Staff Competency (DON/Staff Development Interview) :

✓ How do staff identify residents' changes in condition and what process should they follow if they identify something (e.g., INTERACT, facility- developed tool or process)?

✓ What are the most common reasons why residents are transferred to the hospital?

✓ How do you assure that staff are appropriately assigned to meet the needs of residents and are implementing care-planned approaches for each

Staff Competency (DON/Staff Development Interview):

✓ Do you use temporary/contract staff? If so, how often and why? How do you ensure these staff are competent and have the knowledge and skills to care for residents? What is covered in your agreement with the staffing agency regarding the skill set of contract staff? How do you ensure the work assigned to contract staff is within their skill set?

✓ Is ongoing training provided for all staff, (permanent, temporary/contracted, etc.)? If not, why not? If yes, how often is this conducted and what areas are covered?

✓ Who is responsible for competency oversight? How often is staff evaluated to access their competencies, skills, and knowledge? What type of education or training has been

Facility Documents/Records:

✓ Review the Facility Assessment: Does the facility assessment include a determination for the level and competency of staff needed to meet each resident's needs each day and during emergencies? For example, is staffing based on the census, resident's acuity, resident assessments, plans of care, needs, diagnoses, and the skill sets of the staff? How does the facility assessment compare to the observations of the resident population, staffing structure, and competency of staff?

✓ Review the staffing schedule, including call-ins and staff postings for the past month. Depending on identified concerns, it may be necessary to expand your review.

✓ Review the list of nursing staff compared to the staffing schedule the facility provided/posted. If there are discrepancies between the duty

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