### Objectives
- Recognize the key concepts of the new facility wide resource assessment in the new regulations for skilled nursing facilities
- Describe the required elements of the facility wide resource assessment
- Summarize three leadership strategies for operational success

### Intent
- To determine resources necessary to care for residents competently during both day to day operations and in emergencies
- To determine the resources you have and the resources you may need
- To assess and analyze the resident population and resources to competently determine the resources needed to care for residents

### What is it?
- Business Plan
- Staffing Plan
- Identity of the individual skilled nursing facility
- Identification of resources
- Identifies who you are
- Identifies your capabilities as a provider of skilled nursing services
- Shows your competencies

### Why no template from CMS?
- Providers should have the flexibility to create an individual assessment that is specific to each individual skilled nursing facility
- Providers will consult with each other and over time come up with a standard type of document

### Intent
- To have a record for staff and management in the future to understand the reasons for decisions that were made regarding staffing and other resources
Timeline
- Must be available to the survey team on or after November 28, 2017
- Recommend starting the development process early to be ready

Regulations & F Tags
- §483.35 – Nursing Services – F353
- §483.60 – Nutrition Services – F361
- §483.70 – Administration – F490
- §483.80 – Infection Control – F441

Elements
- Capacity of SNF
- Current average daily census
- Types of care offered
- Care required
- Staff competencies necessary
- Facility based risk assessment
- Community based risk assessment
- Training (Amount & Types)

Elements
- Physical Environment
- Equipment (Medical & Non-medical)
- Activities
- Buildings, physical structures
- Vehicles
- Services Provided (PT, pharmacy)
- Personnel
- Contracts, memos of understanding
- HIT

Nursing
- §483.35 Nursing Services

Facility Resource Assessment:
- Incorporate nursing staffing plan
- Competencies and skills

Nursing
- Take into account the responsibility that certain types of staff have such as RNs and LPNs overseeing the medical management of residents with regard to
  - Medications
  - Fall Prevention
  - Pressure injuries
  - Readmission to the hospital
Staffing Analysis

- Make thoughtful and informed staffing plans and decisions based on meeting resident needs, including maintaining or improving resident function and quality of life.

- National Averages
  - RN – 0.85 hppd
  - Total – 4.15 hppd

Competencies and skills
- Based on the identification of the resident population and all of the different types of care and services provided
- Determine what competencies and skills are needed to care for your population

Examples:
- Tube Feeding, Wound Vac, Wound Care

Food and Nutrition

- Dietary staffing plan
  - Number of kitchens
  - In room deliveries vs dining room
  - Family style vs tray line
  - How many dining rooms
  - Number of meals served per day
  - Convenience vs scratch
  - Time to prepare

- Ethnic, cultural, religious preferences
  - Special dietary requests or needs
  - Kosher, vegan, gluten free
  - How are meal requests handled outside of normal dining hours?
  - Types of meal service
    - Scheduled meal times vs rise-to-dine
    - Population (Ex. Hmong unit)
    - Facility garden

Nursing

- §483.60 Nutrition Services

Facility Resource Assessment:
- Incorporate dietary staffing plan
- Ethnic, cultural, religious preferences

Food and Nutrition

- Dietary staffing plan
  - Number of kitchens
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### Administration

- §483.70 Administration
- Facility Resource Assessment falls under administration
- Administrator and DON have core fiduciary responsibility and care of oversight by nursing staff serving residents

### Infection Control

- §483.80 Infection Control
- Facility Resource Assessment
  - Incorporate Infection Control
  - Antibiotic Stewardship Program

### When to review & revise?

- Initial Development
- As necessary
- If you plan for or have a change that would require a substantial modification to any part of the assessment
- Annually

### Census

- Building Capacity
  - 100 beds
- Average Daily Census
  - 92 (20 short term, 72 long term)
- Types of Care - Units
  - 25 bed dementia unit – secured
  - 25 bed short term rehab
  - 25 bed long term care
  - 25 bed long term care

### Types of Care

- 25 Bed dementia care
  - Average census is 22
  - Competencies Required
    - Dementia Care
    - Behavior Training
    - Medication Management
    - Activities for Dementia Care
    - ADLs
    - Chronic disease management
Types of Care

- 25 Bed Short Term Rehab
  - Average census is 22
  - 8-10 admissions / dc per week
  - Pain management
  - Medication management
  - IV Medication
  - Wound Care
  - PT, OT, ST
  - Ortho Care
  - Stroke rehab

- 2-25 Bed long term care units
  - Average census is 22
  - Pain management
  - Medication management
  - Chronic disease management
  - End of Life Care

Staffing Considerations

- MDS - RUG Rates & ADL Scores
- Number of admissions & discharges
- State minimum staffing requirements
- Care plan contents
- Productive vs non-productive hours
- Direct care vs administrative
- Nursing management
- Types of diagnoses/diseases

Competencies & Training

- Not all staff will require the same competencies and training
- Facility cannot avoid compliance by using agency staff – same rules apply
- If a resident requires contact isolation, all staff providing care to that resident must have competency and skills to provide isolation care
  - Skills Checklists
  - Nurses vs nursing assistants

Identify care needs for:
- Behavioral health
- Mental Illness
- Psychosocial disorders
- History of Trauma
- PTSD
- Phase 2 and 3
### Training Considerations

- Traditional in-service education and other approaches may have marginal value in the application of skill and improving performance.
- More value may be found in:
  - Self education
  - Computer based training
  - On the job training
  - Return demonstration
  - Coaching & mentoring

### Third Parties

- Contracts
- Memos of Understanding
- Those providing services or equipment
  - Day to Day Operations
  - Emergencies
  - Ex. Therapy, Food Service, Radiology, Medical Director, Staffing Agencies

### Health Information Technology

- What types of systems do you use to manage health information
  - Electronic health records
  - Other electronic systems
- Interoperability
  - If you share information electronically with another entity what safeguards are in place for HIPAA

### Physical Plant

- The facility resource assessment must address all buildings, structures, and vehicles used for operations
  - Including non-resident areas
- Preventive maintenance plan
  - Would cover equipment
- Inventory of equipment
  - Number of lifts, stands, bladder scanners, items used for patient care

### Risk Assessments

- "All Hazards Approach"
  - Work toward hazard prevention while preparing for unexpected emergencies and unforeseen situations that inevitably occur
  - Identify hazards
  - Identify Vulnerabilities
  - Determine potential impact

### Hazards

Hazards that may cause:
- Injury
- Property Damage
- Business Disruption
- Environmental Impact

- Plan should identify threats or hazards, opportunities for prevention, and risk mitigation
### Scenarios for Emergency Planning

- Resources needed to respond to an emergency
- How to continue business operations in an emergency
- Communication planning during and after an emergency
- IT Recovery Plan
- Employee Assistance
- Incident Management

### Facility Risk Assessment

- Clinical Governance and Leadership
- Ethics and Resident Rights
- Quality Assurance Performance Improvement
- Patient Safety
- Facility Safety and Emergency Management

### Community Risk Assessment

- Identify the knowledge and skill of your community and of yourself as a provider in the community
- Know your consumers and local residents
- Know your facility, your capabilities and your capacities

### Consumer Knowledge & Skill

- Communication access/barriers
- Knowledge of preventive care
- Experience with health systems
- Beliefs about health outcomes
- Cultural norms, healing practices
- Skill in accessing services
- Age of community members
- Education and training of consumers
- Living conditions / homeless
- Poverty – basic needs not met
- Physical access barriers

### Provider Knowledge & Skill

- Knowledge of local culture
- Respect shown to consumers
- Beliefs about what consumers value
- History / reputation in community
- Availability of continuum of care
- Education, competency, skills of staff
- Human resources
- Convenience
- Insurance contracts – who can you take
- Community Involvement

### Leadership Strategies

- Start early on the plan
- Tap into resources available
- Break the plan into sections
- Use a binder to collect and keep information
- Utilize a checklist to keep track of collected information
- Check for state requirements
- Network with peers for ideas
References

- www.score.com
- https://www.jointcommission.org/standards_information/tic_requirements.aspx

Thank you!

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