

LeadingAge
Oklahoma

SNF Requirements of Participation

Part 6

Developing Competency & Skills For Nursing Staff

By: Leah Killian-Smith, BA, NHA, RHIA, HSE
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10:30am-11:45am

Life ON PURPOSE

Consulting | Talent | Training | Resources

PATHWAY HEALTH
Height | Equities | Knowledge

Objectives

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- Identify the elements of competencies and evidenced base education to develop skills
- Develop a facility plan to implement competency based training
- Describe three key strategies for nursing leadership to operationalize the training process

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Phases of Implementation

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Phase 1: November 28, 2016

Phase 2: November 28, 2017

Phase 3: November 28, 2019

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Breaking News!

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- New Survey Process!
-<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html>
- New F-Tags!
-<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Survey-and-Cert-Memo-Revision-SOM-Appendix-PP-Phase-2.pdf>
- New and Revised Phase 2 Requirements!
-<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Survey-and-Cert-Memo-Revision-SOM-Appendix-PP-Phase-2.pdf>
- Notice of delays in enforcement remedies, but regulations will still be in effect

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New F-Tags

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F726 – Competent Nursing Staff
F727 – RN 8hrs, 7 days/week, Full Time DON
F728 – Facility Hiring & Use of Nurse Aide
F729 – Nurse Aide Registry Verification, Retraining
F730 – Nurse Aide Performance Review – 12 hours/year In-service
F731 – Waiver – Licensed Nurses 24hr/day & RN Coverage
F732 – Posted Nurse Staffing Information

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Training Requirements for Phase 2

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Regulatory Area	Training Requirements
Resident Rights	-Add: Aging & Disability Resource Center & Medicaid Fraud Control Unit Contact Information (email too)
Admission, Transfer, Discharge	-Transfer & DC Documentation
Person Centered Care Planning	-Baseline Care Plan (48 hour care plan)
Nursing Services	-Nursing Staffing Plan & Competencies/Skills
Behavioral Health Services	-Dementia Care
Pharmacy Services	-Medical Chart Review & Psych Meds
Dental Services	-Loss or Damaged Dentures Policy -Referrals and Transportation -Provision of Services

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Training Requirements for Phase 2 Consulting | Talent | Training | Resources

Regulatory Area	Training Requirements
Food and Nutrition Services	-Dietary Staffing Plan -Ethnic, Cultural, & Religious Preferences
Administration	-Facility Wide Resource Assessment
Quality Assurance & Performance Improvement	-Provide initial QAPI plan to survey team
Infection Control	-Incorporate Infection Control into FWRA -Antibiotic Stewardship Program
Physical Environment	-Smoking Policies

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- Facility Training Program Consulting | Talent | Training | Resources
- To ensure any training needs are met for:
 - New Staff
 - Existing Staff
 - Individuals providing services under a contractual arrangement
 - Volunteers
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- Facility Training Program Consulting | Talent | Training | Resources
- Consistent with their expected job roles
 - What policies are required
 - Review job descriptions
 - Do they meet professional standards of practice?
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- Nursing Consulting | Talent | Training | Resources
- 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
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F726 – Competent Nursing Staff Consulting | Talent | Training | Resources

“Facility must have sufficient nursing staff with the appropriate competencies and skill sets to provide nursing and related services to assure resident safety

And

Attain or maintain the highest practicable physical, mental, and psychosocial well-being for each resident as determined by:

1. Resident Assessments
2. Individual Plans of Care
3. Considering #, acuity, and diagnoses of population in accordance with the facility assessment

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- F726 – Competent Nursing Staff Consulting | Talent | Training | Resources
- Facility must ensure that licensed nurses have the specific competencies and skill sets necessary to care for resident needs as identified through resident assessments and described in the plan of care
 - Providing care includes but is not limited to assessing, evaluating, planning, and implementing resident care plans and responding to resident needs
- © Pathway Health 2018

Competencies Consulting | Talent | Training | Resources

- Evaluating the ability to perform a task based on clinical skills, knowledge, education, and experience
- Ongoing (Assess, monitor, maintain, and improve skills)
- To prevent negative outcomes
- To provide excellent care and treatment

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Types of Care Consulting | Talent | Training | Resources



25 Bed dementia care
Average census is 22
Competencies Required:

- Dementia Care
- Behavior Training
- Medication Management
- Activities for Dementia Care
- ADLs
- Chronic disease management

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Proficiency of Nurse Aides Consulting | Talent | Training | Resources

“Facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for resident needs as identified through resident assessments and described in the plan of care”

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Peri-Care Return Demonstration Consulting | Talent | Training | Resources

PERI-CARE RETURN DEMONSTRATION

- Knocked on door. Screened resident. Pulled window curtain if necessary.
- Addressed resident, introduced self and explained what was being done.
- Gathered equipment
- Washed hands and put on gloves (universal precautions).
- Removed soiled incontinence product and disposed of properly (put in trash bag, tied shut).
- Did not put soiled incontinence product or linen on floor.
- Told resident before using wipes/washcloth/perineal wash, “Wipe may feel cold.”
- Used clean section for each wipe/washcloth or used a new wipe/washcloth each time.
- Used correct technique for peri-care on female vs. male residents.
 - Female: Spread labia, wipe one side, then the other, and then the middle, wiping toward the rectal area and never wiping back and forth. Proceed to clean the rectal and buttocks area.
 - Male: Pull foreskin back if resident is uncircumcised. Clean the tip of the penis using a circular motion starting at the urethra and working outward. Clean shaft of the penis with firm downward strokes. Clean the scrotum.
- Used no other products unless resident has order.
- Removed gloves before touching clothing, bed rail, cubicle curtain, etc.
- Washed hands before leaving room.
- Correctly disposed of incontinence product in soiled utility room or if in isolation in red barrel in room.
- Used proper body mechanics and proper positioning for resident during entire procedure.
- Maintained resident dignity and privacy throughout entire procedure.

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Competency - Definition Consulting | Talent | Training | Resources

“A measurable pattern of knowledge, skills, abilities, behaviors and other characteristics that an individual needs to perform work roles or occupational functions successfully”

All nursing staff must also meet the specific competency requirements as part of license and certification requirements defined under state law or regulation.

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Competencies listed in SOM Consulting | Talent | Training | Resources

- Preventing and reporting abuse, neglect, and exploitation
- Dementia management
- Infection Control
- Competencies related to an approved nurse aide training and evaluation program
- Medication management
- Change in condition
- Resident rights
- Person-centered care
- Communication
- Basic nursing skills
- Basic restorative services
- Skin and wound care
- Pain management
- Cultural competency

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Change in Condition Consulting | Talent | Training | Resources

- Be able to identify and address a change in condition
- Demonstrate effective actions to address a change in condition

Nurse aide – document and inform supervisor
 Licensed nurse – data collection and assessment/evaluation, inform practitioner or physician

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INTERACT
Version 2.0 Fall

Change in Condition: When to report to the MD/NP/PA

Immediate Notification

Any symptom, sign or apparent discomfort that is:

- **Acute or Sudden** in onset, and
- **A Marked Change** (i.e. more severe) in relation to usual symptoms and signs, or
- **Unrelieved** by measures already prescribed

Non-Immediate Notification

- **New or worsening symptoms that do not meet above criteria**

This guidance is adapted from: AMDA Clinical Practice Guideline – Acute Changes in Condition in the Long-Term Care Setting 2003, and O'Rourke, J., Coleman, G., Morley, J. *Assault Care in the Nursing Home*. McGraw-Hill, 1996.

20

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Agency for Healthcare Research and Quality

Available Tools
Detecting and communicating a change in condition

AHRQ – Agency for Health Care Research and Quality
<https://www.ahrq.gov/professionals/systems/long-term-care/resources/facilities/ptsafety/lcmodule1.html>



INTERACT

INTERACT
https://interact2.net/tools_v4.html

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Cultural Competency

A set of behaviors and attitudes held by clinicians that allows them to communicate effectively with individuals of various cultural backgrounds and to help provide care that is appropriate to the culture and the individual

1. Cultural responsiveness
2. Cultural awareness
3. Cultural sensitivity

National Center for Cultural Competency
<https://hccc.georgetown.edu/index.html>

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Examples of Evaluating Competency

- Lecture with return demonstration for physical activities
- A pre-test and post-test for documentation issues
- Demonstrated ability to use tools, devices, or equipment that were the subject of the training an used to care for residents
- Reviewing adverse events that occurred as an indication of gaps in competency
- Demonstrated ability to perform activities per scope of practice as in license or certification (skills fair)
- Annual Review

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Competency Based Training Program

- a. Evaluates current staff training program to ensure competencies
- b. Identifies gaps in education that may contribute to poor outcomes
- c. Outlines what education is needed based on resident population
- d. Delineates what specific training is needed based on facility assessment
- e. Details the tracking system used to ensure competency program is assessing, planning, implementing, and evaluating effectiveness of training
- f. Ensures the competency training is not limited to online computer based but also test for critical thinking skills as well as the ability to manage care in complex environments with multiple interruptions

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F727 – Registered Nurse

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- Facility must use the services of a registered nurse for at least 8 hours per day, 7 days per week unless there is a waiver in place
- Facility must designate a registered nurse to serve as the Director of Nursing on a full time basis unless there is a waiver in place (35 or more hours)
- Director of Nursing may serve as the “charge nurse” only when the facility has an average daily occupancy of 60 or fewer residents

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F728 – Hiring & Use of Nurse Aides

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Facility must not use any individual working in a facility as a nurse aide for more than 4 months, on a full time basis unless that individual:

- is competent to provide nursing and related services
- has completed a training and competency evaluation program or a competency evaluation program approved by the State as meeting the requirements
- has been deemed or determined competent

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Temporary Employees

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Facility must not use on a temporary, per diem, leased, or any basis other than a permanent employee any individual who does not meet the requirements

*** Agency or any other staff use does give us a “pass” on the requirements

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Minimum Competency

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Facility must not use any individual who has worked less than 4 months as a nurse aide in a facility unless the individual:

- Is a full time employee in a state-approved training and competency evaluation program
- Has demonstrated competence through satisfactory participation in a state-approved nurse aide training and competency evaluation program or competency evaluation program or
- Has been deemed or determined competent

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F729 – Registry Verification

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Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements unless the individual:

- Is a full-time employee in a training and competency evaluation program approved by the state or
- Can prove that he or she has recently successfully completed a training and competency evaluation program or competency evaluation program approved by the state and has not yet been included in the registry (facility must follow up to ensure that the individual actually becomes registered)

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Multi-State Registry Verification

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“Before allowing an individual to serve as a nurse aide, a facility must seek information from every State registry that the facility believes will include information on the individual”

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Required Retraining Consulting | Talent | Training | Resources

If there has been a continuous period of 24 months since the individual has provided nursing or related services for monetary compensation, the individual must complete a new:

- (NATCEP) Nurse Aide Training and Competency Evaluation Program
- Or
- (CEP) Competency Evaluation Program

****Prove one 8 consecutive hour day of nurse aide work in 24 months to keep current*

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F730 – Regular In-Service Education Consulting | Talent | Training | Resources

- Facility must complete a performance review of every nurse aide at least once every 12 months and provide regular in-service education based on the outcome of these reviews
- Each nurse aide must have no less than 12 hours of in-service education based on their individual performance review
- Calculate the date due by the employment date rather than the calendar year

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In-Service Education Probes Consulting | Talent | Training | Resources

- What is the process for reviewing the performance of your nurse aides?
- How are these reviews documented and does the documentation reflect at least 12 hours of in-service training per year based upon the aide's individual performance review?
- What is your evidence that you can produce that demonstrates the in-service education provided addresses
 - Areas of weakness identified on the performance review
 - Special resident needs
 - Needs of residents with cognitive impairments

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F731 – Waiver of Licensed Nurses 24 Hour Basis Consulting | Talent | Training | Resources

- Facility demonstrates that facility has been unable despite diligent efforts (including offering wages at community prevailing rates for nursing homes) to recruit
- State determines that a waiver of this requirement will not endanger the health or safety of the residents
- An RN or physician is on-call to respond immediately to calls from facility
- Subject to annual review

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F731 – Waiver of Licensed Nurses 24 Hour Basis Consulting | Talent | Training | Resources

- The state agency granting the waiver provide notice of the waiver to the Office of the State Long Term Care Ombudsman's Office and the protection and advocacy system in the State for individuals with a mental disorder who are eligible for such services
- The facility must notify the residents and their representatives of the waiver
- In granting or renewing a waiver, facility may be required to use other qualified licensed personnel

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Waiver for RN More Than 40 Hours Consulting | Talent | Training | Resources

- Facility is in a located in a rural area and the supply of skilled nursing facility services in that area is not sufficient to meet the needs of the individuals residing in that area
- Facility has one full-time registered nurse who is regularly on duty at the facility 40 hours per week
- Facility has only patients that do not require services of an RN or physician for a 48 hour period
- Facility has made arrangements for an RN to come in an provide services if needed
- Notices provided to Advocacy Organizations

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F732 – Nursing Staffing Information Consulting | Talent | Training | Resources

- Facility must post the following daily:
 - Facility Name
 - Current Date
 - Total number and actual hours worked by the following categories
 - RNs
 - LPNs or LVNs
 - Certified nurse aides
 - Resident Census

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F732 – Posting Requirements Consulting | Talent | Training | Resources


Facility must post nurse staffing data on a daily basis at the beginning of each shift. Posting must:

- Be in a clear and readable format
- In a prominent place readily accessible to residents and visitors
- Provide access to posted nurse staffing data to public
- Maintain records for 18 months

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Resources / References Consulting | Talent | Training | Resources

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes.html>



Time for Action


1 _____

2 _____

3 _____

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Thank
You

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Questions? Consulting | Talent | Training | Resources

Leah Killian-Smith, BA, NHA, RHIA, HSE
 Director of QA & Government Services
 Pathway Health, Inc.
 11240 Stillwater Blvd N. Lake Elmo, MN 55042
 651-407-8699
Leah.smith@pathwayhealth.com

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