December Reflections

On January 26th the Survey Consistency Taskforce was held at the KDADS office in Topeka. Participants from KDADS included Denise German, Director; Melissa Mille, QA; and Shirley Boltz, RAI Coordinator and facility consultant. Denise presented a summary of 2016 Immediate Jeopardy tags with the following information: (Note that verbiage following tag numbers was discussion that addressed each tag)

F155 (CPR): 9: 5 IJs for not performing CPR on residents choosing to be a full code; other tags resulted from facility not having a system to inform staff on residents’ code status in a timely manner; facility lacked appropriate staff CPR certification at all times

F223 (Occurrence of abuse): 17: primarily resident to resident sexual interactions; surveyors are looking for measures in place, family involvement and negative outcomes; 15minute checks are not an appropriate intervention to protect other residents; REMEMBER: in case of resident to resident altercations, the first step doesn’t have to be to transfer to a geri-psych unit but do have to protect all other residents. There was also discussion that a resource for difficult resident behaviors is the regional manager and Shirley Boltz from KDADS staff and ensure the home is keeping the regional manager “in the loop” about particular issues the home is having. Communication is the key.

F225 (Protection & investigation of abuse): 32: 1-2 staff abuse; Not concerns about kissing or holding hands but needs documentation and should be called in to abuse hotline; many fewer inappropriate videos recently

F226 (Policy for abuse): 1

F257 (Temperatures in facility heat not working): 1: Must take measures to protect residents from temperatures outside regulatory requirements

F309 (Assessments/fecal impaction): 3: Documentation, appropriate assessments & communication of monitoring in documentation to address adverse events

F312 (ADL care): 1: mold growth in abdominal fold that resulted in pneumonia with adverse outcome

F314 (Pressure Ulcers): 2: lacked interventions to prevent & development of infections

F315 (Catheter & UTI management): 1: Urosepsis: must educate staff on urosepsis including signs & symptoms & reporting s/sx timely; ordered antibiotic but failed to administer

F323 (Accidents, elopements, water temps, falls): 30: 17 IJ elopements; RED FLAG: systems not working; lift chairs an issue w/o safety assessment; water temps; side rail entrapments

F329 (Medication management/monitoring): 1: Coumadin wrong dose & failed to obtain INRs

F333 (Significant med error-chemo med not administered): 1

F360 (Wrong diet, choking): 1

F367 (Wrong diet, choking): 1
Denise relayed that many complaint calls come from hospital ERs and some urban hospitals have now employed forensic nurses for ERs who make calls to complaint hotline. Denise also stated that more complaints are being reported by agency staff (3 of last 5) and family members. Denise shared that the number of IJs cited in the past 2 months had reduced dramatically and she reminds all participants that if a facility intentionally does not report a potential abuse to the state agency, the surveyors will be writing F490 (Administration) as a deficient practice.

Denise shared that the amount of the Civil Money Penalties is very concerning but reminded participants that KDADS has no control CMPs that CMS imposes and that CMS is about 2 months behind in sending out CMP letters. KDADS is required to site what is found when reviewing a facility’s systems and practices.

Alayna Johnson is now the regional manager for the NW region (took Sue Hines place when Sue retired). There is no current KC regional manager but Denise has been given permission to fill that position, so if anyone is or knows of someone who is interested in the position, contact Denise.

Surveyor retention is improving and comment sheets have been positive in the post-survey comment sheets.

Denise reminded participants that one of the changes with the final rule includes the requirement that changes to any/all charges requires 60-day notice rather than the previous 30-day notice.

Denise informed participants that the late surveys are improving and her goal is to be “caught up” in 6 months by completing surveys within 16 months.

Mary Ann, from KDADS has been selected (1 of only 14 across nation selected) to participate in the new survey pilot program, called “New Generation Survey”. Kansas will be participating in piloting the new survey prior to implementation on November 28, 2017.

Denise announced that the MDS Focus Surveys will continue this year with only some minor changes implemented but using the same protocols.

Denise announced that she is requesting 2 regional roundtables/year rather than 1/year as previously held. She also encourages participants to speak up freely during those roundtable discussions.

This was a very productive meeting with open discussion. If you have issues that you would like brought up at this taskforce, feel free to contact me.

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