



Centers for Medicare and Medicaid Services Focused Survey Process

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Introduction

The Centers for Medicare and Medicaid Services (CMS) has created a new survey process for Intermediate Care Facilities for Individuals with an Intellectual Disability or Related Condition (ICFs/IID).



Survey Process Revised



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The survey process will refocus the surveyor's time on increased observation time and effective use of interviews and observations.



Focused Fundamental



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The fundamental survey is revised to a focused fundamental survey with 27 key standards and corresponding cascading standards within the Conditions of Participation.





Certification

The ICF/IID program was established in 1971. Congress provided Federal financial participation for ICFs/IID as an optional Medicaid benefit and authorized ICF/IID services as a state plan option.

To qualify for Medicaid reimbursement, ICFs/IID must be certified and comply with CoPs in eight areas.



Certification (continued)



The eight CoPs are:

- Governing body and management
- Client protections
- Facility staffing
- Active treatment services
- Client behavior and facility practices
- Health care services
- Physical environment
- Dietetic services





Survey Stages

The survey process is divided into three levels

- Focused fundamental
- Extended
- Full



Survey Process Comparison Chart



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Survey Process	Focused Fundamental Survey Process	Fundamental Survey Process
Principle Survey Focus	<p>Primary method of information gathering includes:</p> <ul style="list-style-type: none">▪ observations▪ interview and record reviews as needed to confirm and/or provide additional info for observations	<p>Primary method of information gathering includes:</p> <ul style="list-style-type: none">▪ observations▪ interviews▪ record reviews
Survey Process Stages	Focused Fundamental, Extended, Full	Fundamental, Extended, Full
Fundamental Tags	Key indicator list of 27 tags	55 tags
Entrance	Request a list of all individuals and each Individual Program Plan	Request a list of all individuals with functional levels
# of Tasks	3	8

Focused Fundamental Survey Process

The Focused Fundamental Survey Process consists of the following components:

- an abbreviated survey focused on observations
- review of 27 key standards within the CoPs
- review of active treatment services for Individuals
- completion of three survey tasks



Focused Fundamental Survey Process (cont'd)

The focused fundamental survey involves the identification of key standards.

All other regulations cascade down from the key regulations.





Key Standards

The 27 key standards are:

CoP: 483.420 Client Protections (W122)

- W127 Not subjected to abuse or punishment
- W129 Provided with personal privacy
- W137 Retain & possessions & clothing

CoP: 483.430 Facility Staffing (W158)

- W159 Qualified intellectual disability professional (QIDP)
- W186 Sufficient staff to manage & supervise individuals

CoP 483.440 Active Treatment Service(W195)

- W226 IPP prepared within 30 days of admission
- W249 Active treatment program implemented when IPP formulated
- W255 QIDP reviewed IPP objective and revised when objective completed

Key Indicator Tags (Continued)



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The 27 key standards are:

CoP: 483.450 Client Behavior & Facility Practices(W266)

- W268 P & P promote individual growth/dev/independence
- W278 P & P ensure less intrusive techniques are tried first
- W285 Interventions include sufficient safeguards
- W295 Physical restraints: only if part of IPP leading to less restrictive procedures
- W310 Drug doses do not interfere with activities of daily living (ADLs)

CoP: 483.460 Health Care Services (W318)

- W322 Facility provides preventive & general medical care
- W348 Dental Services must have – comprehensive diagnostic & treatment services
- W362 Pharmacist: drug regimen review at least quarterly
- W382 Drugs & biologicals kept locked except when being prepared for administration

Key Indicator Tags (Continued)



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The 27 key standards are:

CoP: 483.470 Physical Environment (W406)

- W407 Individuals are appropriately housed
- W417 Separate bed of proper size, height
- W424 Appropriate & adequate toilet, bathing facilities
- W435 Sufficient space & equipment to provide needed services
- W455 Prevention, control, & investigation of infection

CoP: 483.480 Dietetic Services (W459)

- W460 Individuals have nourishing, well balanced diet
- W472 Food served – in appropriate quantity
- W473 Food served - at appropriate temperature
- W474 Food served – in form consistent with individual developmental level
- W475 Food served – with appropriate utensils

Extended Survey



During a focused fundamental survey, if a key standard is found to be out of compliance, then the surveyor will review all the cascading tags under that key standard.

If the review of the key standard and corresponding cascading standards could result in a non-compliance at the CoP level, the state agency can decide to review all the tags within that CoP.

However, if Client Protections (W122), Client Behavior & Facility Practices (W266), or Health Care Services (W318) are found to be out of compliance, then the team is required to move to a full survey.

Full Survey



A full survey is a review of all the tags within all eight CoPs and includes all seven tasks.

A full survey is conducted when one or more of the following criteria are met:

- An initial survey
- An immediate jeopardy is called
- An extended survey finds Client Protections (W122), Client Behavior & Facility Practices (W266), or Health Care Services (318) to be out of compliance
- Discretion of the state agency



Entrance Conference

During the entrance conference, surveyors will request a list of all Individuals who reside in the facility for the sample selection task.

After the surveyors select a core sample, they will request the IPP for each individual in the sample.





Review of IPPs

During observations, each IPP will be reviewed to determine:

- Do the individual's skills and needs match the IPP?
- Is the IPP is being followed?
- Do staff understand the IPP?
- What are staff and individuals' interactions during the programs?
- Are health concerns interfering with the IPP?

Task One: Sample Selection

The sample will include a core number of individuals who are selected at the beginning of the survey.

The core sample is selected without regard to developmental levels or location.





Task One: Sample Selection

The core sample should include individuals with these criteria:

- Admitted within the last six months
- Participate in a day program
- On a self-administration of medication program
- Frequent hospitalizations or ER visits



Review of Core Sample

Observation, interview and record review should focus only on the observed areas of concern for the individuals who are added to the core sample.

A full review includes:

- Comparison of CFA to IPP
- Comparison of the IPP to actual activity observed
- Review of documentation of individual participation and progress.
- Behavior program plan development and implementation
- Medical assessments



Adding to the Core Sample

Individuals may be added to the core sample when areas of concern are identified during observations.

Individuals who are added to the core sample do not require the full review as discussed on the previous slide.

Observation, interview and record review should focus only on the observed areas of concern for the individuals who are added to the core sample.



Task Two

Review of systems to prevent abuse, neglect and mistreatment, and to resolve complaints

Task 2 has two phases: Phase One and Phase Two.

In the absence of pre-existing characteristics, surveyors will conduct Phase One review.



Task Two

**Review of systems to prevent abuse,
neglect and mistreatment, and to
resolve complaints**

Phase One review involves individual observations and interviews with staff, individuals and family.

These observations and interviews will identify the specific reporting records or investigation records that the surveyor will review later.





Phase One Observations

Surveyors will observe for:

- Any signs of individual injury
- Individual-to-individual aggression
- Inappropriate staff-to-individual interactions
- Signs of fear
- Signs of mistreatment or punishment
- Current or recent hospitalizations or ER visits

Task Two

Review of systems to prevent abuse, neglect and mistreatment, and to resolve complaints

If the observations, interviews or record reviews during Phase One confirm that the facility is:

- Identifying injuries and mistreatment promptly
- Notifying the appropriate persons
- Doing appropriate investigations
- Applying interventions

Then Phase One is concluded



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Phase One Interviews

If during Phase One, the surveyor identifies any concerns with possible abuse, neglect or mistreatment, then the surveyor will conduct interviews.





Phase One Interviews

The surveyor will conduct interviews with:

- Individuals
- Family, legal guardians, advocates, close friends
- Facility staff



Phase One Interviews

Questions to the families, legal guardians, advocates and close friends may include, but are not be limited to:

- *Have you noticed any bruises or injuries of an unknown source on (individual's name)?*
- *If so, did you speak with the staff?*
- *What did they say?*
- *How does the staff interact with (individual's name)?*
- *Does (individual name) complain of any mistreatment during visits?*



Phase One Interviews

Questions to the individual may include, but are not limited to:

- *Are the staff nice to you?*
- *Do the staff yell, swear, or hit? Who?*
- *Has anyone ever hurt you? Who? When?*
- *Are you ever punished for anything? What was your punishment?*
- *How did you get injured? (If the individual has an obvious injury)*



Phase One Interviews

The goal of Phase One interviews is to determine:

- *How often injuries/mistreatment is occurring*
- *Reporting processes*
- *Timeliness of notifications*
- *Protection from harm during investigations*
- *System changes to prevent further abuse, neglect or mistreatment*

Phase One Record Review

For any specific injury noted during observations, surveyors will request the documentation associated with that injury.

The goal of record review is to verify:

- Information provided by the staff
- Prompt reporting, investigation and protection of individuals with injuries and allegations of mistreatment



Task Two Phase Two

Surveyors will proceed to Phase Two if it is determined in Phase One that there is **insufficient evidence** to show the facility is in compliance with the CoP for Client Protections (W122).





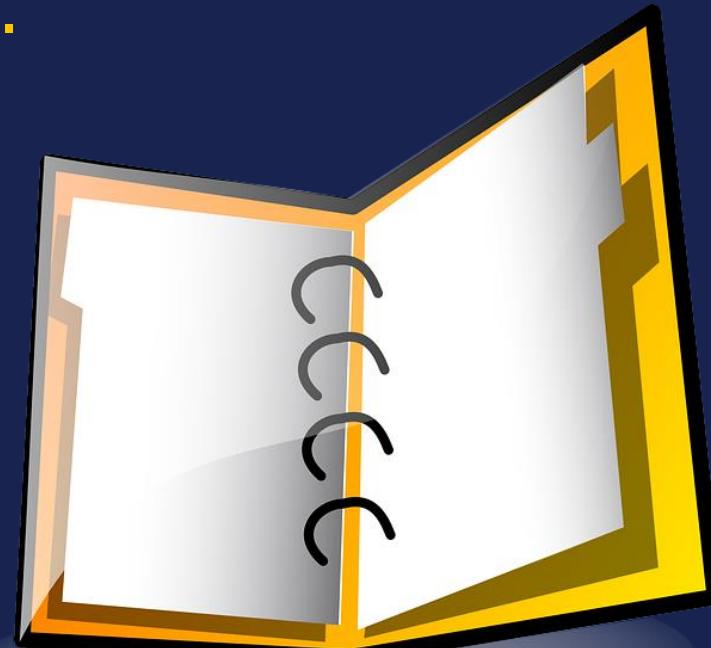
Task Two Phase Two

If there are pre-existing criteria, or if in the course of the survey concerns with individual protections are identified, the surveyor should extend to the Phase Two review. Any one or more of the following are pre-existing criteria that would initiate a Phase Two review:

- Substantiated complaints or facility reported events in Client Protections since the last recertification survey
- A survey history of citations at W127, W153-W157
- Concerns identified by the SA that warrant a Phase Two review

Task Two Phase Two Record Review

Surveyors will request the facility's log of incident reports and select a five percent sample from the incidents that occurred during the last three months (a minimum of 10 if available).



Task Two Phase Two Record Review

Surveyors will request the investigative reports for the reviewed incidents.

Surveyors are looking for:

- Any evidence individuals were abused, neglected or mistreated
- Each incident was reported promptly
- Each incident was investigated thoroughly
- Safeguards were put in place during the investigation
- Corrective measures were taken



Task Two Phase Two Record Review

If a facility has a system in place to prevent abuse, neglect and mistreatment, and to resolve complaints, and takes corrective measures, Task Two is complete.



Task Two Phase Two Record Review

The surveyor will review all the incidents and investigations for the past three months if:

- The 5% sample was inconclusive
- Patterns of possible abuse, neglect or mistreatment were identified
- Incident logs for past three months show an extremely high incident rate



Immediate Jeopardy

If the surveyor believes that issues exist that rise to the level of an Immediate Jeopardy (IJ), then the surveyor will investigate further, using the protocols in Appendix Q.





Task 3 – Focused Observation

It is crucial that observations are done for a sufficient duration across the entire day and at all of the Individual's environments.

A minimum of two meals must be observed, and two medication pass observations must be conducted.





Task 3 – Focused Observation

Initial observations are conducted to access the first impressions of each area.

Surveyors may observe specific issues, which would require additional investigation, or adding additional individuals to the sample.

The state agency may decide to advance to an extended or full survey.





Task 3 – Focused Observation

During initial observations of the environment, the surveyor may note:

- How are individuals dressed? Are they alert?
- What activities are taking place?
- How many staff are present?
- Is the environment calm and peaceful?
- How are staff interacting with individuals?
- Are staff encouraging individuals?
- Are staff using teachable moments?
- How are maladaptive behaviors handled?



Task 3 – Focused Observation

The surveyor will conduct observations for five major areas:

1. Active Treatment
2. Staff
3. Qualified Intellectual Disability Professional (QIDP)
4. Health Care Services
5. Physical Environment





Focused Observation – Active Treatment

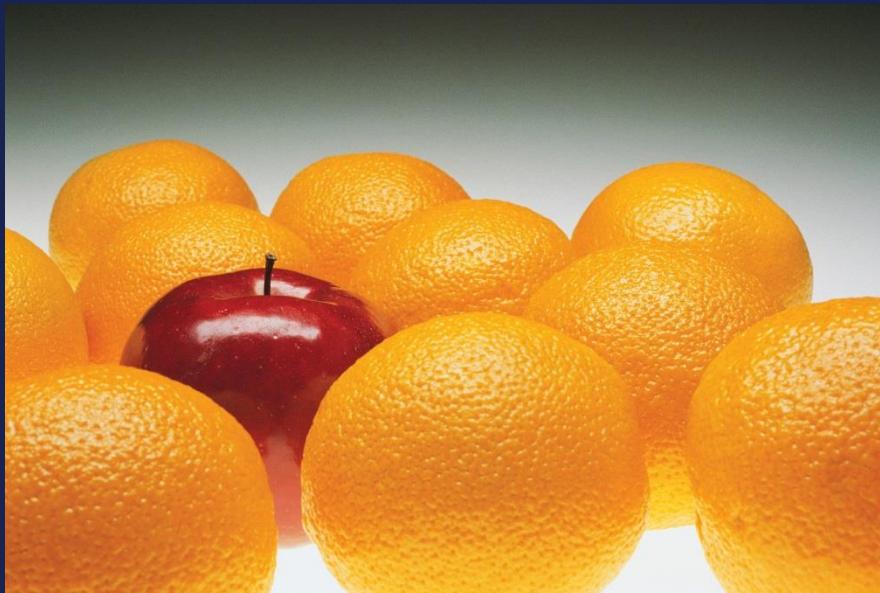
Surveyors must confirm active treatment is being provided for each individual in the sample.

Each IPP must:

- Be appropriate for the individual
- Be based on a current CFA
- Be revised as needed
- Must correspond to current treatment, programs or services

Focused Observation – Active Treatment

If the surveyor notes discrepancies with the IPP, the survey will interview the individual and\or appropriate staff for additional information.



Focused Observation – Active Treatment

The surveyor should ask the staff for records documenting programs.

Generally, the individual should be making steady progress and this should be reflected in the program data.



Focused Observation – Active Treatment



If there is no progress made or if there has been a regression, there should be evidence that the QIDP/ID team is aware of the issue and is addressing it.

Focused Observation – Active Treatment



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Surveyors will interview staff if:

- There is no progress made or if there has been a regression in the IPP
- Actual programs do not match IPP programs
- The IPP does not seem appropriate for the individual based upon the individual's identified skills





Focused Observation – Staff

An inadequate number of staff will result in concerns with individual programming and individual protection.

Effects may include:

- Chaotic environment
- Client-to-individual abuse,
- Self-abuse by individuals,
- Individuals sitting unengaged for long periods of time with little or no staff presence,
- Individuals not given the opportunity to assist in ADLs or participate in the rhythms of life due to the need to “get things done”
- Programs not being carried out due to inadequate on-duty staffing.



Focused Observation – Qualified Intellectual Disability Professional (QIDP)

The surveyor will observe interactions between the QIDP and the staff and the QIDP and the individuals.

- ✓ Is the QIDP familiar with individual programs and individual progress?
- ✓ How much direct interaction is occurring among the QIDP, the staff and the individuals?
- ✓ Is the QIDP intervening when necessary and facilitating revisions to IPP as indicated?

If the surveyor has unresolved discrepancies, any concerns should be discussed with the QIDP.
and the QIDP and the individuals. Is the QIDP familiar with individual programs and individual progress? How much direct interaction is occurring among the QIDP, the staff and the individuals? Is the QIDP intervening



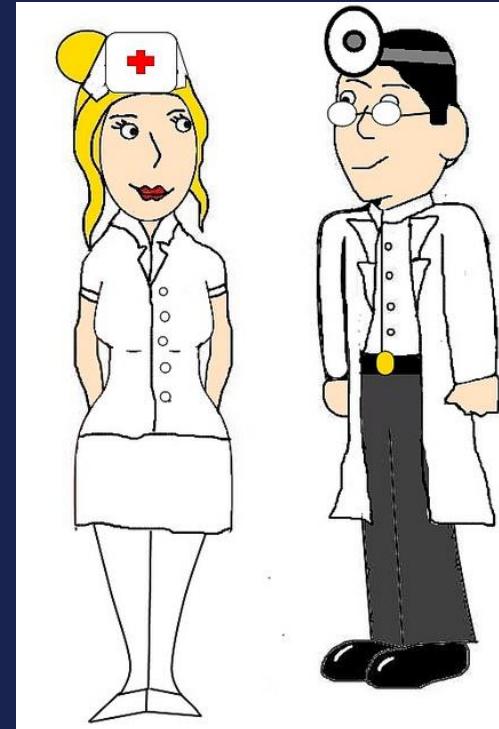
Focused Observation – Health Care Services

The surveyor should determine from observations whether or not the sampled individuals are receiving medical care as indicated:

- Do any of the individuals have acute or chronic medical issues? How are these issues being addressed by the medical staff at the facility?
- Do the individuals seem alert and energetic?
- Are individuals at a healthy weight?
- Do the individuals have good oral health? Have any dental problems been dealt with promptly and appropriately?
- Are the staff trained on first aid and reporting of medical issues?

Focused Observation – Health Care Services

If the surveyor has concerns about the health care of sampled individuals, the surveyor will interview the facility's nurse or other staff with knowledge about the health status of the individual.



Focused Observation – Physical Environment

During observations, the surveyor should observe the facility for cleanliness, comfortable temperature, and any safety hazards (i.e., obstructed walkways, resilient, nonabrasive, and slip-resistant floors).





Focused Observation

In addition to the five focused areas, the surveyor will observe at least:

Two meals

Two medication pass observations

Medication Pass

The purpose of the medication pass observations is to verify all medications are administered without error.



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Individual Record Review

Record review is kept to a minimum during the Focused Fundamental survey level.

Surveyors will conduct record review to completely document or clarify areas of questions or concerns from observations.





Exit Conference

The survey team leader will convey the team's recommendations during the exit conference.

A written list of preliminary findings and recommendations regarding compliance with federal and state requirements will be left with the ICF/IID during the exit conference.



Questions?



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