

FAQs For the Phase 3 Roll-Out and Chapter 5 Updates

Q: Payroll Based Journal- how far back do the surveyors need to review?

A: The Payroll Based Journal (PBJ) information is obtained from the CASPER report. The surveyors can go back 1 year when surveying for compliance. Noncompliance would result at F851 if the facility failed to complete data for the entire reporting period, the data was identified as inaccurate or the data was not provided by the required deadline.

If concerns were identified based on the CASPER report the surveyors should refer to the critical element pathway for sufficient and competent staffing.

To access PBJ Frequently Asked Questions, please visit: <https://qtso.cms.gov/>

Q: Also, with regard to the issues with diagnosis of Schizophrenia and potential abuse of this diagnosis to justify certain psychotropic medication use, how far do the surveyors go back to review in the medical record to determine if this is an issue?

A: The State Operations Manual (SOM) directs to go back to the last recertification to survey for compliance. If there is a question as to when they were diagnosed, the Surveyor may go back further if needed to determine if this is a warranted diagnosis.

Q: Are hospital-based nursing homes allowed to have or utilize the Infection Preventionist (IP) from the hospital?

A: Yes, however the IP must be physically on site at least 20 hours a week in the nursing home.

Q: Is the facility Director of Nursing (DON) permitted to be the IP?

A: Yes, however the DON must they have the appropriate training and credentialing, and they have to be able to devote the time responsible in order to fulfill the requirements of the IP position and at minimum of part time hours devoted to IP duties/responsibilities.

Q: Is there a grace period with any of the regulations that are to be in place by October 24th?

A: There's an expectation the facilities will have program requirements in place. At the very minimum, the facilities will need to provide evidence they began implementation with all program requirements.

Q: With regard to the Facility Reported Incidents (FRIs), if 6 people called in the exact same complaint, does this mean there will be 6 separate complaints?

A: Yes, the 6 separate complaints will be linked and cross referenced.

Q: If a facility submits a FRI and has a policy, when a FRI is submitted, this must also be reported to APS, Ombudsman and Law Enforcement and these entities send a report from each, and is the exact same complaint, is this considered 1 complaint or now 4, if all report?

A: Yes, this is a separate report and will be linked and cross-referenced to reflect 4 reports, based on this example. It is based on the sources not just the complaint/allegation.

Q: If there is a complaint or allegation against Administrator, DON or other licensed personnel, does the facility submit a FRI or contact the boards?

A: The facility should do both. The State Agency (SA) will also report to the boards to ensure notification was initiated by the facility.

Q: Will the Administrators receive NAB credit for attendance?

A: Health Facilities Commission is working with NAB and have requested credit for those administrators that attended the presentations. We have provided the necessary information and are waiting for their determination. We will post on the Health Facilities Commission website when we have NAB decision.