SLCR UPDATE

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MISSOURI DEPARTMENT OF
HEALTH &
SENIOR SERVICES

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STATE LICENSED ONLY INSPECTIONS

State Licensed Only Inspections

Total # of licensed Residential Care & Assisted Living Facilities and Adult Day Programs: 762

- # of locations with no annual inspection in previous 12 months:
  - August 2022-498
  - September 2023-210
- Current # of locations statewide with no annual inspection during the previous 12 months: 177
- Current # of locations in Region 7 with no annual inspection in previous 12 months: 87 (53 ADC)

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FEDERAL WORKLOAD AND PERFORMANCE MEASURES

Overdue (over 15.9 months) Recertification Surveys Out of 492 Medicaid/Medicare certified facilities

- 8/26/24: 54 (24 recertification surveys completed in July)

- 6/24/24: 69 (35 recertification surveys completed in May 24)

- 4/01/24: 89 (32 recertification surveys completed in March 24)

# of facilities over 15.9 months Region 7: 3

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COMPLAINT AND FRI INVESTIGATION TIMEFRAMES-STARTED 10/1/23

	IJ	Non-IJ High	Non-IJ Medium	Non-IJ Low
Complaints	SA must initiate an onsite survey within 3 business days of receipt of the initial report	SA must initiate an onsite survey within an annual average of 15 business days of receipt of the initial report, not to exceed 18 business days	SA must initiate an onsite survey within 45 calendar days of receipt of the initial report.	SA must track/trend for potential focus areas during the next onsite survey, or initiate a new complaint survey.
FRI	With inadequate resident protection, SA must initiate an onsite survey within 3 business days of receipt of the initial report. With potentially adequate resident protection, SA must initiate an onsite survey within 7 business days of receipt of the initial report.	SA must initiate an onsite survey within an annual average of 15 business days of receipt of the initial report, not to exceed 18 business days.	With an inadequate facility response, SA must initiate an onsite survey within 45 calendar days of receipt of the initial report.	With a potentially adequate facility response, SA must track/trend for potential focus areas during the next onsite survey, or initiate a new complaint survey

The above are federal requirements for certified homes – Complaint and Facility Reported Incidents information found in the State Operations Manual Chapter 5 - https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/som107c05pdf.pdf
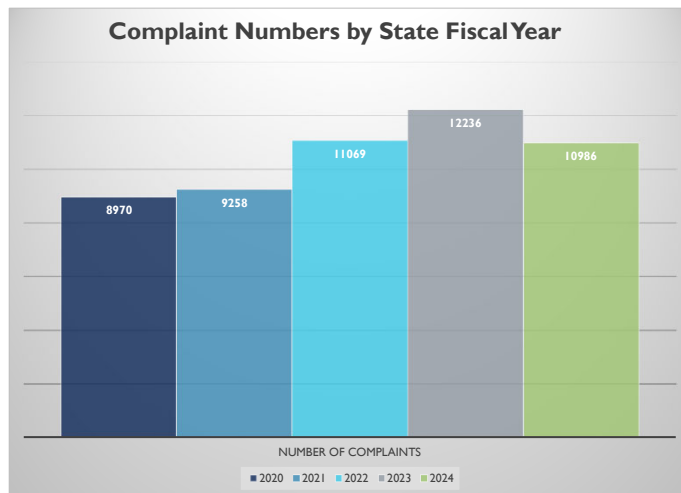
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COMPLAINTS

Complaints investigated within required timeframes.

Priority Code	Aug '23	Sept '23
	data	data
A Onsite within 24 hours/Total Priority As= % within timeframe	151/152 99%	123/123 100%
B Onsite within 10 working days/Total Priority Bs = % within timeframes	476/679 70%	355/597 59%
C Onsite within 30 calendar days/Total Priority Cs= % within timeframes	82/135 61%	82/141 58%

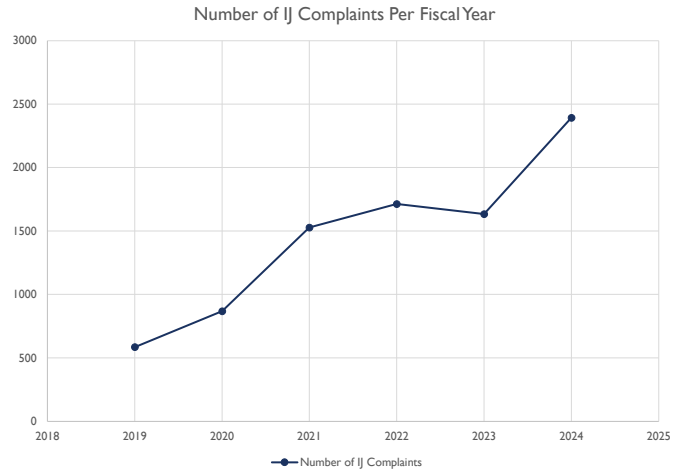| Priority Code	Oct '23	Nov '23	Dec '23	Jan '24	Feb '24	Mar '24	Apr '24	May '24	June '24	July '24
	data	data	data	data	data	data	data	data	data	data
A Complaints Onsite within 3 working days/ Total Priority A Complaints= % within timeframes	112/123 91%	144/146 98%	107/113 94%	138/142 97%	104/110 94%	103/106 97%	105/112 93%	117/123 95%	109/110 99%	126/134 94%
A FRIs Onsite within 7 working days/ Total Priority A FRIs= % within timeframe	91/93 98%	89/91 98%	121/121 100%	127/133 95%	104/105 99%	130/130 100%	119/119 100%	115/117 98%	109/110 99%	111/111 100%
B Onsite within 15 working days/Total Priority Bs = % within timeframes	423/561 75%	469/577 81%	413/548 86%	471/637 73%	342/552 61%	413/528 78%	387/523 73%	371/507 73%	393/472 83%	218/590 36% pending updated data
C Onsite within 45 calendar days/ Total Priority Cs= % within timeframes	92/133 69%	101/128 78%	63/129 48%	84/118 71%	64/107 59%	77/120 64%	76/166 45%	75/139 53%	88/131 67%	41/134 30% pending updated data

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COMPLAINTS

- Complaints have increased overall by ~22.5% (147 in FY2019 to 10,986 in FY2024)

Complaint Numbers by State Fiscal Year

8970	9258	11069	12236	10986

NUMBER OF COMPLAINTS

■ 2020 ■ 2021 ■ 2022 ■ 2023 ■ 2024

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COMPLAINTS

- Largest increase in severe complaints.
  - Immediate jeopardy complaints (within 24 hours-7 business days) have increased by 309% in this same time period (585 to 2,393).
  - Non-immediate jeopardy high complaints (within 15-18 working days) have increased by 4.6% (6,532 to 6,832).

Number of IJ Complaints Per Fiscal Year

—●— Number of IJ Complaints

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COMPLAINTS

Total # of complaints pending onsite investigation:

- August 2024:   569
- September 2023:   514
- February 2023:   1,276
- January 2021:   4,664

Total # of complaints received in July for **Region 7** homes: 242 (average 221/month)

Total # of complaints pending onsite for **Region 7** homes: 255

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COMPLAINTS AND IMPROVING THE RESIDENT EXPERIENCE

- DHSS Quality Assurance Unit has gathered data showing homes with the highest number of complaints and FRIs

- Fall 2024- DHSS will contact those homes and provide data and encourage them to review as part of their quality improvement processes

- QIPMO has committed to working with those homes in an effort improve resident experience and reduce overall complaints

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REGULATION AND COMPLIANCE UNIT

State FY 2024
- Immediate Jeopardy/Class I-102
- Past Non-Compliance/IJ-19
- Uncorrected Class II Notice of Noncompliance-79

2023
- Immediate Jeopardy/Class I- 129
- Past Non-Compliance/IJ- 20
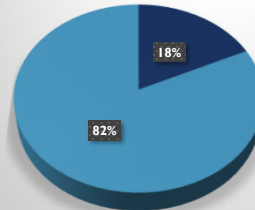- Uncorrected Class II Notice of Noncompliance- 99

2022
- Immediate Jeopardy/Class I- 132
- Past Non-Compliance/IJ- 16
- Uncorrected Class II Notice of Noncompliance- 82

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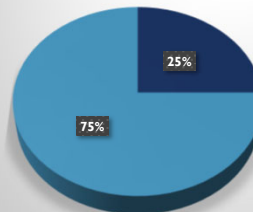## INFORMAL DISPUTE RESOLUTION-IDR

- In State Fiscal Year 2024:
  - 67 deficiencies refuted in IDR/IIDR (41 IDR/IIDR held)
  - HQI recommended upholding 55 deficiencies
  - HQI recommended deletion for 12 (DHSS agreed with and deleted 9 of the 12; upheld 3)

HQI Recommendations for IDRs

- 18%
- 82%

- number HQI recommended to delete
- number HQI recommended upholding

DHSS IDR Decisions to delete

- 25%
- 75%

- number DHSS disagreed with and upheld
- number DHSS agreed with and deleted

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CLASS I/IMMEDIATE JEOPARDY

- Abuse (staff to resident, resident to resident)
- CPR – Certified Homes
- Quality of Care (transitions of care, physician orders)
- Pressure Ulcers

Immediate Jeopardy Language in SOD

The administrator was notified on 5/9/19 at 3:45 P.M. of an Immediate Jeopardy (IJ) which began on **5/8/19.** The IJ was removed on **5/9/19**, as confirmed by surveyor onsite verification.

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CENTRAL OFFICE MEDICAL REVIEW UNIT (COMRU)

In Calendar Year 2023, COMRU processed over 17,856 Level of Care applications.

In Calendar Year 2024, (January to July), COMRU has processed over 12,612 Level of Care applications

- In November 2023 and July 2024 COMRU hired additional RN team members to assist with the review and approval process.

- In June 2024, COMRU hired a part time project specialist to assist with the process and to look for improvements.

- Starting in September there will be monthly trainings offered on 09-10-2024, 10-08-2024, 11-05-2024 and 12-10-2024 (more details will be announced on our listserv!)

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CENTRAL OFFICE MEDICAL REVIEW UNIT (COMRU)

What can you do to help level of care and PASRR processing times?

- **Minimize corrections** by ensuring all staff who complete level of care/Level I applications have viewed online training and understand the process for completion. Preadmission Screening and Resident Review (PASRR) | Nursing Homes & Other Care Options | Health & Senior Services (mo.gov) and double check submissions to make sure key elements are answered correctly.

- **Reduce the amount of time COMRU spends answering phone calls** by using the online application to check application status.

- **Respond quickly to correction requests and answer all questions/corrections** the first time so that determinations are not held up, resulting in further

- **Attend free training** offered by DHSS and DSS

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CERTIFIED NURSE AIDE STATISTICS 9/1/2023-8/30/2024

- 53,497 active nurse aides on the registry as of 8/30/24

- Since 9/1/23:
    - 3,806 new certifications
    - 217 nurse aides renewed their certification
    - 8,556 certifications lapsed (did not renew)
    - 7,627 were approved for reciprocity from neighboring states

- 955 training programs
    - 72.41% pass rate for knowledge test
    - 76.62% pass rate for skills test

- The Health Education Unit is working to increase knowledge for testing opportunities and provide resource information to our training programs to enhance successful outcomes.
- Visit our website for updates and training opportunities at CNA, CMT and Insulin Registry | Health & Senior Services (mo.gov)

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EXCITING NEWS FOR CNA REIMBURSEMENT!!

- **New Reimbursement Rates for CNA Training**
    - Historically CNA training reimbursement rates had the potential for up to $350.00 per student who received the training at a skilled long term care facility.
    - Recently, MO HealthNet passed legislation to increase that rate for CNA training for up to $1500.00 per student.

- **CNA Training Reimbursement Opportunity for Skilled Facilities Webinar**

The Health Education Unit along with Mo HealthNet presented information on CNA training reimbursement opportunities during a webinar in July, 2024. Topics included how facility reimbursement is determined and what data is required to be submitted.

Unable to attend? Recording is available here:
https://stateofmo.webex.com/recordingservice/sites/stateofmo/recording/f32ee24083d4493db16c39c4b0cc825e/playback.

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CMS PLAN OF CORRECTION MEMO JUNE, 2024

Revisions to the Review and Approval of Plans of Correction (POCs) Admin Info: 24-14-ALL

• When noncompliance is cited at a level that requires a mandatory onsite revisit (per existing CMS policy and procedure), CMS and/or the State Survey Agency (the "State") will obtain a POC/AOC for the cited noncompliance.

• CMS and States should prioritize the revisit survey as the primary means of assessing compliance, rather than reviewing multiple submissions of a POC/AOC for approval.

• If CMS or the State are unable to approve a POC/AOC **after two submissions by the facility**, they should reach out to the facility to confirm their readiness and intention to request a revisit, which should then be scheduled accordingly.

POC Webinar for State Licensed Facilities   SLCR Training

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JOINT TRAINING FOR MEDICAL DIRECTORS AND FACILITIES

The Role of an Engaged Medical Director in Long Term Care

Wednesday, November 20, 2024 @ 2pm

Presenter: Dr. Michael Nash, President of Missouri Association of Long-Term Care Physicians (MALTCP) is a section chair of Mercy post acute services in St. Louis, Missouri. He practices exclusively in the nursing home and assisted living setting and teaches residents and fellows as well. Dr Nash is also a Board Member for Cardinal Ritter Senior Services in St. Louis, Missouri.

More details to follow on listserv.

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FREE TRAINING!

- On the SLCR Webpage:
    - Office of Dental Health/Mouth Care Without a Battle [SLCR Training](#)
    - POC Webinar for State Licensed Facilities [SLCR Training](#)

- Upcoming:
    - Second Business and Exceptions staff are preparing a webinar on the second business and exceptions process. For more information, subscribe to our listserv.

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CENTER OF EXCELLENCE FOR BEHAVIORAL HEALTH IN NURSING FACILITIES

The Center of Excellence focuses on increasing the knowledge, competency and confidence of nursing facility staff to care for residents with behavioral health conditions.

- Provides mental health and substance use trainings, customized technical assistance and resources at no cost
- Services are available to all CMS certified nursing facilities throughout United States
- Established by the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with the Centers for Medicare and Medicaid Services

For assistance, submit a request at
[nursinghomebehavioralhealth.org](#)

Contact us:
National Call Center: **1-844-314-1433**

Email: [coeinfo@allianthealth.org](#)

Upcoming:
9/10/24: Changing the Narrative of Suicide by Addressing Suicidal Behaviors in Nursing Facilities
9/12/24 Navigating the Path of Substance Use Recovery in Nursing Facility Residents: Exploring the Stages of Change

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COVID- SNF, ICF, ALF AND RCF

Homes with COVID outbreaks: Currently 106. Last month 47

The ICAR Team Can Help!

- QIPMO has formed an Infection Control and Assessment and Response (ICAR) team with a primary goal to assist Missouri Long-Term Care Facilities navigate the challenges of the COVID-19 and other infectious diseases. https://nursinghomehelp.org/

- **Members of the ICAR Team are available for voluntary, no cost visits (virtual and/or in-person) to any residential care, assisted living, and skilled nursing facility in Missouri.** These visits are intended to consultative and collaborative in nature with a non-regulatory focus to evaluate inflection control practices. Visits will consist of: completion of a standardized assessment of infection control processes, focusing on highly-transmittable infectious diseases, observations of infection control practices, preliminary feedback with supplemental educational resources.

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LTCF RESOURCES

- The listserv has been converted over to the GovDelivery email system. For Long-Term Care updates, subscribe to our weekly listserv at:

  https://public.govdelivery.com/accounts/MODHSS/subscriber/new?preferences=true

  and select "LTCR: Long-Term Care Regulation" under the Subscription Topics.

  - *If you are already signed up for our listserv, you should automatically be converted over to the system.*

- LTC Blog: https://ltc.health.mo.gov/

- CMS QSO Memos: https://www.cms.gov/medicare/regulations-guidance/advisory-committees/executive-order-guidance/policy-memos-states-and-regions

- CMS QSEP: https://qsep.cms.gov/welcome.aspx

- Rules, Statutes, Provider Information and Directories: https://health.mo.gov/safety/nursinghomesinspected/index.php

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THANK YOU

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