

Assisted Living/ /Residential Care Facilities/Adult Day Care Provider Call

Wednesday, April 19, 2023

3:00 PM – 4:00 PM

1. Welcome

Beverly Clark

- Session is being recorded
- All participants are muted, please keep phones muted during the call
- Q&A session – **All** participants should submit questions to LTC@health.ok.gov, we will answer as many questions as time allows on the call
 - Online participants may post questions in the Q&A box, these questions will be answered in the FAQ document
 - Only questions sent to the LTC email box will be answered during the call
- Phone number 405.426.8200
- Fax Incidents/Form 283 to 1-866-239-7553.
- To request emails from Gov.Delivery.com email Diane Henry at DianeH@health.ok.gov or email LTC@health.ok.gov
- Please join via Team app on the computer to view presentation
- Reminders:
 - **Guidance for NF/SNF and ICF/IID** comes from CMS QSO Memos and CDC guidance as indicated in the QSO memos.
 - NF/SNF have two key memos that provide guidance on testing and visitation, QSO 20-38 revised 09/23/22 provides information on testing, and QSO 20-39 revised 09/23/22 provides information on visitation
 - ICF/IID should follow QSO 21-14 related to visitation
 - **Guidance for Assisted Living/Adult Day Care/Residential Care** comes from CDC guidance and is considered the standard of care related to infection control for COVID-19

2. Deficiencies

Shayla Spriggs

- You should begin to see the survey teams in the assisted living facilities more often for relicensure surveys
- Issues we are seeing:
 - Failure to follow the regulations in the facility's policies and procedures (Example, completing the required assessments within the regulatory time frames. See 310:663-5-2. Timeframes for completing assessment)
 - As a facility, you should review the regulations and your policies and procedures to ensure compliance, and to ensure you are providing quality care to the residents

3. Reportable Incidents and Complaints

Dr. LaTrina Frazier

- Reportable Incidents are reported on the [Form 283](#) and must be submitted within the regulatory time frames
- LTC is required to review the reportable Incidents and they could be converted into a complaint
- Reportable incidents provide an opportunity for you to identify what has occurred, is this a pattern for your facility, what could have been done to prevent the incident, and what interventions can you put in place to remove a reoccurrence. It gives you the opportunity to do a complete review of your facility, what shift did it happen, what level of staff was involved in the incident. It would allow you to develop some resident specific interventions and provide inservices to staff
- Use the reportable incidents to obtain data about what is happening in your community
- Knowing what is happening in your facility will allow you to have a conversation with surveyors about what you saw and what you learned, enabling you to move through the survey process in less time
- We have had a high volume of reportable incidents and a high volume of complaints
- On average, 12% of the complaints convert to an Immediate Jeopardy (IJ) priority
- We want to get into the facilities on relicensure surveys, but what we plan often gets put to the side in order to work the high priority complaints
- Our goals are to see you before the end of the year for relicensure, however this is dependent on the complaint prioritizations
- Quality Assurance Programs: 310:663-11-1 talks specifically to the Quality Assurance Committee. The incident reports allow you to see areas where you can improve and areas where you are doing great. It allows you to have a discussion with your team that is very fact based. Be sure you have documentation that shows your quality assurance efforts and outcomes. Please reach out if you have any questions about your quality assurance program



LTC Updates

Janene Stewart

- The Public Health Emergency (PHE) will expire on May 11, 2023. We have not received any updated guidance on what will be changing, or any extensions. We will make sure we share any information with you as it is released.
- Mask Requirements: The recommendation is to follow the CDC recommendations located at [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#). Consider what is happening in your facility and in the community. Monitor the [Community Transmission Level](#) of your county. The CDC has been the standard of care over the last three years for COVID-19, and assisted living facilities are expected to follow the standards. If you are following another standard, you need to be able to show what that standard is, what the resource documentation is and how you meet those standards.

No questions were submitted for this call. There will be no Q&A document provided.

Next call to be announced