



Indiana State  
Department of Health

# LONG TERM CARE NEWSLETTER

## ISDH Long Term Care Newsletter

Issue 2015-14

June 30, 2015

### In Today's Issue:

- Incident Reporting - Effective July 1, 2015
  - > Instructions for Reporting
  - > Reporting when Online System Nonoperational
- CMS Update
  - > SC 15-42-ALL - Release of Information and Data to State Medicaid Fraud Control Units (MFCU)
- ISDH Staff Update

## Incident Reporting - Effective July 1, 2015

### Online Reporting of Incidents

In May, it was announced that mandatory reporting via the Online Reporting System would be effective July 1, 2015. Many facilities have been using the system to report incidents for several months. Approximately half of the reports are already being submitted through the online system.

On July 1, 2015, mandatory reporting of incidents via the Online Reporting System will become effective. The system and access is the same Gateway System used by facilities for the Survey Report System. To assist facilities during this transition, a [Quick Guide](#) with instructions for using the Incident Reporting System and [Frequently Asked Questions](#) are available for reference.

Below are instructions that will be part of the Incident Reporting Policy that is currently being revised. These instructions include reporting when the online system is nonoperational.

Any questions about the system or assistance please send email to: [srshelpdesk@isdh.in.gov](mailto:srshelpdesk@isdh.in.gov).

### Excerpt from Incident Policy

## INSTRUCTIONS FOR REPORTING

A. Incident Reporting and Timeframes:

### 1. Comprehensive Care Facilities

- a. An incident identified as mistreatment, neglect, or abuse, including injuries of unknown source and misappropriation of resident property must be reported immediately after providing care and protection for the resident(s) and determining the incident meets the reporting criteria.

**Note: If a resident states that his or her belongings are missing, the facility must determine whether the item ever existed in the facility and/or do a quick search. As soon as it is determined that the item did exist within the facility but was not found during the initial search, the facility must make a report of misappropriation of resident property.**

b. Other incidents must be reported within 24 hours after discovery of the incident.

c. Follow up report (if not included with initial information) must be submitted within 5 working days after the initial report.

## 2. Residential Care Facilities

a. An incident must be reported within 24 hours after discovery of the incident.

b. Follow up report (if not included with the initial information) must be submitted within 5 working days after the initial report.

### B. Report information:

1. The Initial Report - information should include the following:

- a. Facility information
- b. Name and job title of staff completing the report
- c. Actual or Identified Date and Time of the Incident
- d. Name(s) of resident(s) involved
- e. Name and title of staff involved
- f. Brief description of event
- g. Type of injury(s) sustained
- h. Immediate action taken to respond to the event and protect the resident
- i. Preventive measures taken while the investigation is in process

2. The Follow Up Report - information should include the following:

- a. Results of the investigation
- b. Interventions implemented or corrective action taken
- c. Method in which facility will continue to monitor efficacy of plan/interventions
- d. Other persons or agencies to which the incident was reported.

3. Initial and Follow Up Report - can be submitted together if all of the necessary information has been obtained within the timeframe for initial reporting.

### C. Report submission :

1. Online Incident Reporting System through the ISDH Gateway:

a. **All** incident report information must be submitted through the Online Incident Reporting System effective July 1, 2015.

b. Information submitted by fax or voice mail will not be accepted after July 1, 2015.

c. The link to the Online Incident Reporting System is: <https://gateway.isdh.in.gov/>. ([Quick Guide](#) - Instructions for the Online Incident Reporting System & [Frequently Asked Questions](#) are available for assistance.)

2. Submission of the *Report of Reasonable Suspicion of a Crime Against a Resident Form*.

a. If an incident being reported also constitutes a suspicion of a crime, the [Report of Reasonable Suspicion of a Crime Against a Resident](#) form located at <http://www.in.gov/isdh/25766.htm> can be submitted simultaneously through the document upload feature in the Online Incident Reporting System.

b. If the reasonable suspicion of a crime against a resident is not associated with an incident, the form can be submitted through email at [incidents@isdh.in.gov](mailto:incidents@isdh.in.gov). The form should indicate it is **not** an incident.

3. Information related to an evacuation or an event involving the Emergency Management Agency must be reported to 317-460-7287 at any time.

## REPORTING WHEN ONLINE SYSTEM IS NONOPERATIONAL

A. If the Online Incident Reporting System is nonoperational, the [Incident Reporting Form](#) located at <http://www.in.gov/isdh/23638.htm> must be completed and emailed to [incidents@isdh.in.gov](mailto:incidents@isdh.in.gov).

B. Within 24 hours of emailing the Incident Reporting Form, the complete information about the incident **MUST BE** entered into the Online Incident Reporting System and include the date and time the Incident Reporting Form was emailed.

C. If both the Online Incident Reporting System and the email system is not available, the information can be reported by calling 317-460-7287 and leaving a voicemail message that includes the following information:

1. Name & Title of Reporter
2. Name of Facility
3. Address of Facility
4. Type of Incident (examples on Incident Reporting Form)
5. Injury
6. Name of Resident(s)
7. Name of Staff Involved
8. Immediate Action Taken

**Note: The voicemail option is only to be used when both the online and email systems are nonoperational.**

D. When the Online Incident Reporting System is available, the complete information about the incident **MUST BE** entered into the Online Reporting System and include the date and time of the email or voicemail message.

**Note: Failure to make a report in the Online Incident Reporting System after an email or voicemail message may result in an unreported incident.**

## CMS Update

### **SC 15-42-All Guidance to State Survey Agencies Regarding Release of Information and Data to State Medicaid Fraud Control Units (MFCU)**

State Survey Agencies are reminded of the regulatory requirement to share Automated Survey Processing Environment (ASPEN) Complaint Tracking System (ACTS) data, Long Term Care Minimum Data Set (MDS) data, and survey documents with their State Medicaid Fraud Control Units upon receipt of a written request.

Policy memorandum [S&C-11-39](#), released September 16, 2011, provided guidance regarding the release of survey and certification information to MFCUs. The current memorandum is intended to further clarify that survey agencies are required to provide ACTS data, MDS data, and survey documents to their State MFCU upon receipt of a written request.

A core element of the Centers for Medicare & Medicaid Services (CMS) mission is to protect those living in healthcare and residential care facilities from fraud, abuse, neglect, and misappropriation of funds. The survey agencies have an obligation to provide effective support and assistance to State MFCUs in their work investigating and prosecuting these crimes.

MFCUs are State law enforcement agencies that investigate and prosecute Medicaid provider fraud. They also have authority to investigate fraud (with HHS Office of Inspector General approval) in any federally funded health care program such as Medicare and investigate complaints of abuse or neglect, and misappropriation of funds of those living in Medicaid-funded healthcare facilities as well as residential care facilities, regardless of payment source (see Social Security Act § 1903(q), 42 USC § 1396b(q) and 42 CFR § 1007.11).

## ISDH Staff Update

### **Life Safety Code Supervisor**

Amy Kelley was promoted to the Life Safety Code Supervisor on June 15, 2015. She started with the Indiana State Department of Health in July 2006 as a Life Safety Code Surveyor and was promoted to the team leader/training position in 2014. Prior to her service at ISDH she worked at the Grant County Health Department for five years. Amy has four years active duty with the US Navy and retired after seventeen years in the US Navy Reserves. Amy can be reached at 317-234-8502.

### **Long Term Care Supervisor - Area 8**

Debra Holmes was promoted to Area 8 Supervisor on April 1, 2015. She has been with ISDH since August 2014 as a public health nurse surveyor. Her nursing experience includes medical/surgical, hospice, long term care and case management. She received BS in Education from University of Kentucky, MS in Education from the University of Louisville, and a nursing degree from Kentucky State University. Debra taught for 15 years grades 6-12. Debra can be reached at 317-233-7094.