



Indiana State  
Department of Health

# LONG TERM CARE NEWSLETTER

**ISDH Long Term Care Newsletter**  
**Issue 2015-15**  
**July 15, 2015**

**In Today's Issue:**

- New Incident Reporting Policy
- Bed Census Reporting

## New Incident Reporting Policy

The ISDH Division of Long Term Care has revised the Incident Reporting Policy. The new [Incident Reporting Policy](#) is a collaborative effort from the Division of Long Term Care, provider associations, and facilities. The purpose is to provide guidance related the type of incidents to be reported, the timeframe for reporting, and the information to be included in the report. The new policy is effective July 15, 2015. Facilities will have 30 days, or until August 14, 2015, to implement.

The policy is divided into four sections:

1. Comprehensive Care Facilities - includes the types of incidents to be reported according to federal regulations and state rules and types of incidents to be reported according to state rules only.
2. Residential Care Facilities - includes the types of incident to be reported according to residential state rules.
3. Instructions for Reporting - includes timeframes for both comprehensive care facilities and residential care facilities, information to be reported and report submission through the Online Incident Reporting System.
4. Reporting when Online System Nonoperational - includes email and voicemail usage instructions and online reporting when system becomes operational.

**Resources/References:**

- [Incident Reporting Policy](#)
- [Federal Regulations and Interpretative Guidelines](#) - 42 CFR 483.13(c)(2) and 42 CFR 483.13(c)(4)
- [Comprehensive Care Rules](#) - 410IAC16.2-3.1-28(c) and 410IAC16.2-3.1-13(g)(1)
- [Residential Care State Rules](#) - 410IAC16.2-5-1.3(g)(1)
- [Online Incident Reporting System](#)
- [Quick Guide](#) - Instructions for Online Reporting System
- [Frequently Asked Questions](#) - questions and answers related to the Online Reporting System
- [Report of Reasonable Suspicion of a Crime Against a Resident Form](#)
- [Incident Reporting Form](#)
- Email address\* - [incidents@isdh.in.gov](mailto:incidents@isdh.in.gov)  
(\*Only for submitting Report of Reasonable Suspicion of Crime Against a Resident form if NOT associated with an incident **or** reporting incidents when the Online Reporting System is nonoperational.)
- Voicemail number\* - 317-460-7287  
(\*Only to be used for evacuations, events involving Emergency Management Agency **or** when online reporting system AND email system are nonoperational.)

# Bed Census Reporting

All comprehensive and resident care facilities are required to report their bed census data for July 1, 2015, by close of business today. As of Monday, around 450 facilities had submitted their bed census report. Thanks to all of the facilities that have submitted their data. Any facility that has not reported must do so immediately.

## Bed Census Reporting

The [Long Term Care Newsletter 2015-13](#) dated June 29, 2015, provided information and instruction for submission of bed census data. The information is to be submitted through the online [ISDH Gateway System](#). This is the same system that is used to obtain survey reports and for incident reporting. The information must be for facility's census on July 1.

Once all facilities have reported, the ISDH will calculate the July 1 bed occupancy rates and prepare a report. The report will be posted on the State web site.

The bed census is the total number of licensed beds in the facility. All licensed beds (comprehensive care and residential) should be counted in that number. Alzheimer's care beds and ventilator beds should be included in the bed census and then duplicated into the specific Alzheimer's and ventilator bed census reports in the bed tracking system.

## Frequently Asked Questions

Updated: July 15, 2015

1. What beds should be included in the bed census report?

ANSWER: The ISDH is requiring bed occupancy data to be submitted by both comprehensive care facilities (nursing homes) and residential care facilities (licensed assisted living facilities). Census data for all licensed comprehensive and residential beds in the facility should be reported.

2. Does the bed tracking apply to assisted living facilities who participate in the Waiver and Money Follows the Person programs?

ANSWER: The Waiver and Money Follows the Person programs require the facility to be licensed as a residential care facility. A facility in those programs would be required to submit bed census data.

3. Should "bed holds" be counted in the bed census report as an occupied bed?

ANSWER: Yes. A "bed hold" is when a facility is reimbursed to maintain that bed for a resident while the resident is out of the facility. A bed that is being held pursuant to bed hold requirements is considered to be occupied by a resident and should be counted as occupied in the bed census. If a facility is voluntarily holding a bed for a resident but is not required to do so by bed hold requirements, the bed does not count as an occupied bed.

4. Should the beds in an Alzheimer or Ventilator unit be excluded from the bed census reporting and counted only on the separate Alzheimer's and ventilator bed tracking reporting?

ANSWER: No. Alzheimer or Ventilator unit beds should be included in the bed census reporting. The bed census report is intended to include all licensed beds, both comprehensive and residential, in the facility to include special units such as an Alzheimer's or ventilator unit.

In the bed tracking system, there are separate reports specific to any Alzheimer's or Ventilator unit. Those reports are used to identify potential available Alzheimer's or ventilator beds. Bed census for those reports is specific to those units and would be duplicated from the total bed census.

5. Do facilities still need to submit Bed Census Data for the last day of each month?

ANSWER: The new legislative requirement requires the ISDH to determine bed occupancy rates January 1 and July 1. To eliminate confusion and reduce reporting requirements, the bed tracking reporting (to include the bed census, Alzheimer's beds, and ventilator bed tracing reports) will be changed to twice a year. Census reports for January 1 will be due by January 15. Census reports for July 1 will be due by July 15. You will not need to report monthly.

6. Should the facility report personnel changes along with bed census reporting?

ANSWER: Facilities are required to report key personnel changes. Those changes should be reported as the changes occur. The Gateway System's Personnel Tracking System is used to submit personnel changes. When submitting bed tracking reports, it is a good idea to review your personnel tracking data to ensure its accuracy.

7. Facilities occasionally agree with a resident to convert a multi-bed room to a private room. If a facility has converted a room to a private room, should the converted bed be counted as occupied?

ANSWER: No. The bed census reporting is based on licensed beds. A resident can only be assigned to one licensed bed. If a room with two licensed beds is converted into a one-bed room but continues to license both beds, only one bed is counted as occupied in the bed census report.