

ISDH Long Term Care Newsletter
Issue 2017-05
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Today's Issue:

- CMS Update
 - SC 17-27-NH - Implementation Issues, Long Term Care Regulatory Changes
- Quality Improvement Course - Registration Open
- Expressive Arts Course - Registration Open
- Mumps in Indiana Long Term Care Facility

CMS Update

CMS Survey and Certification Letter SC 17-27-NH: Implementation Issues, Long Term Care Regulatory Changes: Substandard Quality of Care (SQC) and Clarification of Notice before Transfer or Discharge Requirements

Substandard Quality of Care (SQC)

A new definition of substandard quality of care (SQC) was added to 42 CFR 488.301 by the Final Rule to reform the requirements for long term care facilities that went into effect on November 28, 2016 (81 FR 68688). There were no substantial or substantive changes to the content of what types of deficient practices would result in substandard quality of care, however, the regulatory citations to the relevant requirements have changed. The new definition reflects this general reorganization of the regulations. Some regulations may have been moved from their previous regulatory grouping to a new regulatory group.

The Final Rule specifies a staggered, three-phased implementation process for the regulatory provisions. As a result of that regulatory implementation schedule, the new definition of substandard quality of care and the associated participation requirements will also be implemented as described below. Phase 1 includes those regulatory requirements that were in existence and not changed in the Final Rule and those that were minimally amended so that they are relatively straightforward to implement. Phase 2 implementation includes those changes that are significant, require additional guidance, and re-numbering of the F Tags.

Phase 3 includes implementation of those elements that are more complex and may involve hiring or physical construction. The regulatory definition of substandard quality of care does not change. It will however be implemented slightly differently across the phases.

Notice of Transfer or Discharge

The regulation at 42 CFR 483.15(c)(3)(i) requires, in part, that before a facility transfers or discharges a resident, the facility must "notify the resident and the resident's representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand...." The facility must also "...send a copy of the notice to a representative of the Office of the State Long Term Care Ombudsman." Sending a copy of the notice to a representative of the Office of the State Long Term Care

Ombudsman provides added protection to residents and ensures the Office of the State Long Term Care Ombudsman is aware of facility practices and activities related to transfers and discharges.

Notice of transfer or discharge includes the following situations:

- Facility-Initiated Transfers and Discharges
- Emergency Transfers
- Resident-Initiated Transfers and Discharges

Additional information and explanation is available:

[SC 17-27-NH - Implementation Issues. Long-Term Care Regulatory Changes: Substandard Quality of Care \(SQC\) and Clarification of Notice before Transfer or Discharge Requirements](#)

Advanced Education Phase 2 - Quality Improvement Course

The Indiana Nursing Home Advanced Education Project was developed to improve educational opportunities for healthcare professionals working in long term care facilities. The project includes courses on quality improvement, wound care, infection prevention, and dementia. The University of Indianapolis is the Project Coordinator. The courses are funded through the CMS Civil Money Penalty Fund.

The second phase of the project began on February 1, 2017 and will continue through January 19, 2019. Phase 2 will offer the same course topics as were in the first phase but at different locations throughout the state. Continue to watch this newsletter for course announcements as dates are scheduled.

Two courses on Quality Improvement will be conducted:

- June 19-21, 2017 - South Bend, IN
- July 10-12, 2017 - Indianapolis, IN

These identical three-day courses, include face-to-face Lean Six Sigma Yellow Belt Quality Improvement training presented by Evelyn Catt MHA, Lean Six Sigma Black Belt, TTAC Consulting, LLC. The courses assist facilities in preparing for the new CMS Quality Assurance and Performance Improvement (QAPI) requirements that will be implemented in November. Registration fee is \$100 to cover food costs.

Additional information and registration, [click here](#).

Expressive Arts Course - Registration Open

The Indiana State Department of Health has teamed with the University of Indianapolis Center for Aging & Community (CAC) to help facilities find innovative ways to improve quality of care and quality of life for nursing home residents. The ISDH and University of Indianapolis are offering four-day [Expressive Arts in Long Term Care workshops](#). This course is an exciting and fun way to meet your facility's goals of better resident care, better quality measure ratings, and more engaged staff. This is not art therapy but easily implemented best practices to infuse activities to help facilities decrease doctor visits, decrease medications, decrease falls, and decrease depression for residents. The goals are to improve resident engagement along with improving resident and staff morale.

Long term care staff will learn best practices for using visual art, dance, drama, music, writing/memoir in individual and group settings for residents living in long term care facilities. These techniques can improve not only quality of life, but measurable health outcomes for residents. You don't need to be an artist, just have an interest in helping your residents!

The following Expressive Arts Courses are now open for registration:

- Merrillville, IN - June 5-7, 27, 2017
- Columbus, IN - August 7-9, 29, 2017
- Evansville, IN - October 9-11, 24, 2017

Visit the [CAC webpage](#) for more information or [click here to register](#).

Special Registration - Facilities or corporations wishing to send multiple people can do so at a discount - see the registration page "Group Registration Option".

Mumps in Indiana Long Term Care Facility

Mumps is a relatively mild short-term viral infection of the salivary glands that usually occurs during childhood. Typically, mumps is characterized by a painful swelling of both cheek areas, although the person could have swelling on one side or no perceivable swelling at all. The salivary glands are also called the parotid glands, therefore, mumps is sometimes referred to as an inflammation of the parotid glands (epidemic parotitis). Mumps is a very contagious infection that spreads easily in highly populated areas.

Recently, an Indiana long term care facility reported an incident of mumps. The following are recommended guidelines to follow:

- Report information to local health departments and/or ISDH Long Term Care Division - Reportable Incident Policy
- Droplet Precautions - [CDC guidance](#) recommend droplet precautions and isolation as much as possible for 5 full days from the 1st day of parotid swelling onset. After 5 days, the individual is no longer considered infectious and precautions and isolation can be discontinued.
- Screening of Other Individuals - No screening of other individual is required unless they display symptoms consistent with mumps.
- Lab Testing - the infected individual should be tested because many different things can cause symptoms similar to mumps. This [flowchart](#) can help to determine appropriate testing.

Additional information is available at the [Epidemiology Resource Center](#).