Immediate Jeopardy Triggers By Laura Essay

Immediate Jeopardy is a situation in which the nursing home’s non-compliance with one or more requirements has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident. According to experts, Immediate Jeopardy triggers can be used as quality assessment tools.

Joan Redden, the vice president of regulatory and consumer affairs at Skilled Healthcare stated, “Using the triggers can help you figure out things.” Appendix Q of the Center for Medicare & Medicaid’s State Operations Manual, for example, discusses criteria for Immediate Jeopardy that includes failure to protect from psychological harm, failure to protect from undue adverse medications and failure to protect from abuse. Long-term care facilities can use the guidelines to develop and improve their quality assurance plans.

When Immediate Jeopardy exists, the state can recommend the state Medicaid agency or regional office impose remedies, and assess a per-day or per-instance civil monetary penalty. A per-instance remedy can be $1,000 to $10,000, and a per-day remedy can range from $3,050 to $10,000.
Norovirus Outbreaks Related to Nurse Staffing By Jeanelle R. Lust

A recent study of norovirus outbreaks in nursing homes in Oregon, Pennsylvania and Wisconsin found an increase in mortality and hospitalizations due to norovirus in homes with higher average age rates and RN hours of less than .75 per bed. The abstract of the study was recently presented https://idsa.confex.com(idsa/2012/webprogram/Paper35319.html and will be published in the Journal of the American Medical Association in the October 24/31, 2012 issue. According to the abstract, “Norovirus outbreaks are common in nursing homes in the U.S. and affect vulnerable, elderly populations.” The study found that “Homes with older resident populations and lower RN hours-to-bed ratios may be the most at risk for increased mortality during norovirus outbreaks.”

QAPI All About Training By Tammy Schroeder

In 2013, the final rule for Quality Assurance Performance Improvement (QAPI) is due from CMS and a year later, nursing homes must have their QAPI set up. The facility’s QAPI plan should have these five elements:

1. Design and Scope;
2. Governance and Leadership;
3. Feedback, Data Systems and Monitoring;
4. Performance Improvement Projects; and

Tamar Abdell, President of Care2Learn/Upstairs Solutions stated that the QAPI is all about systems. She states that providers, in addition to having the data must be able to explain it as well. The provider should be able to do a root-cause analysis so that they can understand what is resulting in a problem.

Abdell recommends that when a provider is developing their QAPI they choose two areas that need attention, one a clinical issue and another, such as housekeeping or laundry, that can involved the entire staff and that focuses on a cultural change. Abdell states that a critical part of the plan is to look at how you are training and how you are tracking that training.

QAPI allows nursing homes to develop comprehensive and proactive performance improvement programs which are suited to their own needs and programs.
In a recent study, the Office of the Inspector General concluded that:

- Emergency plans lacked relevant information—including only about half of the tasks on the CMS checklist. Nursing homes faced challenges with unreliable transportation contracts, lack of collaboration with local emergency management, and residents who developed health problems. LTC ombudsmen were often unable to support nursing home residents during disasters; most had no contact with residents until after the disasters.

While the study recognized that most nursing homes were complying with the federal regulations to develop a plan, the OIG was still concerned about these implementation problems.
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