

CITATION REVIEW PROTOCOL

(Pursuant to MCL 333.20155 of Public Act 368 of 1978)

November 2010

Bureau of Health Systems

*Michigan Department
of Community Health*



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**DEPARTMENT OF COMMUNITY HEALTH
BUREAU OF HEALTH SYSTEMS
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Introduction

Public Act 368 of 1978, Section 333.20155 (2) states that the Department of Consumer and Industry Services (now the Department of Community Health) shall develop a protocol for the review of citation patterns compared to regional outcomes and standards and complaints regarding the nursing home survey process. The review will result in a report provided to the legislature.

Protocol

The department will compare citation patterns with regional and national outcomes by charting the ten most cited deficiencies within Michigan and correlating that data with regional and national data. In comparing the citation patterns, we will highlight areas of non-correlation (Top 10 most cited deficiencies where Michigan outcomes deviate +/- five positions from regional and national outcomes). This review will include standard survey deficiencies and complaint investigation deficiencies. The report will be prepared on a fiscal year basis.

Fiscal Year 2010 Standard Surveys

Attachment A represents the Top 10 citation patterns for standard surveys in Michigan for FY2010, and comparison of those deficiency rates with the regional and national outcomes. The one outcome that appears to not correspond with regional and national outcomes is 42 CFR 483.60(d), F431 – Pharmacy Services. The requirement for F431 is that drugs and biologicals used in the nursing home, county medical care facility or hospital long term care unit must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable. The intent of this requirement is that the facility, in coordination with the licensed pharmacist, provides for: safe and secure storage (including proper temperature controls, limited access, and mechanisms to minimize loss or diversion) and safe handling (including disposition) of all medication; accurate labeling to facilitate consideration of precautions and safe administration of medications; a system of medication records that enables periodic accurate reconciliation and accounting of all controlled medications; and identification of loss or diversion of controlled medications so as to minimize the time between actual loss or diversion and the detection and determination of the extent of loss or diversion.

The multidisciplinary composition of Michigan's survey teams (nurses, social workers, sanitarians, pharmacists, and dietitians), could be a factor in this ranking, especially the inclusion of pharmacists as part of our survey teams, as other States merely employ nurses as surveyors. Because of the extensive training Michigan surveyors have received through their disciplines, they instinctively look to the wide range of needs that are covered in this citation.

Fiscal Year 2010 Complaint Surveys

Attachment B represents the Top 10 citation patterns for complaint surveys in Michigan for FY2010, comparing those deficiency rates with the regional and national outcomes. One area of outcome that shows some deviation, based on the FY2010 data, is F223 Abuse, failure to prevent neglect, misappropriation of resident property. Abuse related citations are found in the regulations at CFR 483.13(b) and (c) F223, F224, F225, and F226. The intent of these citations is as follows:

F223 Abuse – Each resident has the right to be free from abuse (verbal, sexual, physical, and mental) corporal punishment, and involuntary seclusion.

F224 Staff Treatment of Residents – Each resident has the right to be free from mistreatment, neglect and misappropriation of property.

F225 Staff Treatment of Residents – The facility must not hire a potential employee with a history of abuse, if that information is known to the facility.

F226 Staff Treatment of Residents – The facility must develop and operationalize policies and procedures for screening and training employees, protection of residents and for the prevention, identification, investigation, and reporting of abuse, neglect, mistreatment, and misappropriation of property.

The data provided by the Centers for Medicare and Medicaid Services (CMS) shows that Michigan citation of F223 ranks higher within Region V (#6 vs. #13) and across the nation (#6 vs. #23). There is insufficient data to explain this variance. Within Region V, Michigan does have the highest citation rate for F223 with 34 citations. However, when all abuse regulations are combined (F223, F224, F225, and F226), Michigan's citation rate (115) compared to Illinois (172), Wisconsin (167), Ohio (162), Indiana (147), and Minnesota (18), is within the region's range, while accounting for merely 14.7% of the total, a decrease from FY2009. CMS has noted concerns with the states' ability to differentiate abuse related citations from the four potential areas of citation and stated its intention to consolidate the citations.

Another outcome that appears to not correspond with regional and national outcomes is 42 CFR 483.15(b), F241 –Dignity. The requirement for F241 is that the nursing home, county medical care facility or hospital long term care unit must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality. "Dignity" means that in their interactions with residents, staff carries out activities that assist the resident to maintain and enhance his/her self-esteem and self-worth. Some examples include (but are not limited to):

- Grooming residents as they wish to be groomed (e.g., hair combed and styled, beards shaved/trimmed, nails clean and clipped);
- Encouraging and assisting residents to dress in their own clothes appropriate to the time of day and individual preferences rather than hospital-type gowns;
- Assisting residents to attend activities of their own choosing;
- Labeling each resident's clothing in a way that respects his or her dignity (e.g., placing labeling on the inside of shoes and clothing);
- Promoting resident independence and dignity in dining such as avoidance of:
 - Day-to-day use of plastic cutlery and paper/plastic dishware;
 - Bibs (also known as clothing protectors) instead of napkins (except by resident choice);
 - Staff standing over residents while assisting them to eat;
 - Staff interacting/conversing only with each other rather than with residents.

- Respecting residents' private space and property (e.g., not changing radio or television station without resident's permission, knocking on doors and requesting permission to enter, closing doors as requested by the resident, not moving or inspecting resident's personal possessions without permission);
- Respecting residents by speaking respectfully;
- Focusing on residents as individuals when they talk to them and addressing residents as individuals when providing care and services;
- Maintaining an environment in which there are no signs posted in residents' rooms or in staff work areas able to be seen by other residents and/or visitors that include confidential clinical or personal information (such as information about incontinence, cognitive status);
- Grooming residents as they wish to be groomed;
- Maintaining resident privacy of body including keeping residents sufficiently covered, such as with a robe, while being taken to areas outside their room, such as the bathing; and
- Refraining from practices demeaning to residents such as keeping urinary catheter bags uncovered, refusing to comply with a resident's request for toileting assistance during meal times, and restricting residents from use of common areas open to the general public such as lobbies and restrooms, unless they are on transmission-based isolation precautions or are restricted according to their care planned needs.

The multidisciplinary composition of Michigan's complaint investigation unit (nurses and social workers) could be a factor in this ranking, as other States merely employ nurses as surveyors. Because of the extensive training Michigan surveyors have received through their disciplines, they instinctively look to the wide range of needs that are covered in this citation.

The data provided for use in these comparisons is gathered from Standard and Complaint Surveys whose results are part of the Centers for Medicare and Medicaid Services data base. Input of the survey results are the responsibilities of each State – including the timeliness of the input. As noted within the database, state-to-state comparisons of recent time intervals must be made cautiously.

Top 10 Citation Patterns Standard Surveys FY2010

Source: Centers for Medicare and Medicaid Services

<u>Citations</u>	<u>Michigan Ranking</u>	<u>Region V Ranking</u>	<u>National Ranking</u>
323	1 (216)	1 (1,235)	3 (4,709)
441	2 (202)	2 (1,074)	2 (4,811)
371	3 (164)	3 (1,004)	1 (4,907)
329	4 (161)	5 (777)	7 (2,769)
309	5 (158)	4 (796)	5 (3,658)
281	6 (156)	9 (608)	4 (3,684)
431	7 (150)	15 (443)	11 (2,148)
253	8 (121)	12 (451)	8 (2,362)
314	9 (82)	8 (624)	13 (2,054)
241	10 (80)	16 (433)	9 (2,302)

Top 10 Citation Patterns Complaint Surveys FY2010

Source: Centers for Medicare and Medicaid Services

<u>Citations</u>	<u>Michigan Ranking</u>	<u>Region V Ranking</u>	<u>National Ranking</u>
323	1 (160)	1 (730)	1 (2,270)
281	2 (66)	6 (254)	4 (1,221)
225	3 (59)	2 (408)	3 (1,244)
309	4 (54)	3 (374)	2 (1,670)
241	5 (39)	14 (112)	13 (455)
223	6 (36)	13 (115)	23 (234)
157	7 (32)	4(370)	5 (1,093)
314	8 (27)	8 (219)	8 (729)
226	9 (23)	5 (263)	7 (814)
279	10 (18)	10 (179)	9 (716)