# Long Term Care Stakeholder Meeting
# April 18, 2023 3:30-5:00 pm
# Agenda

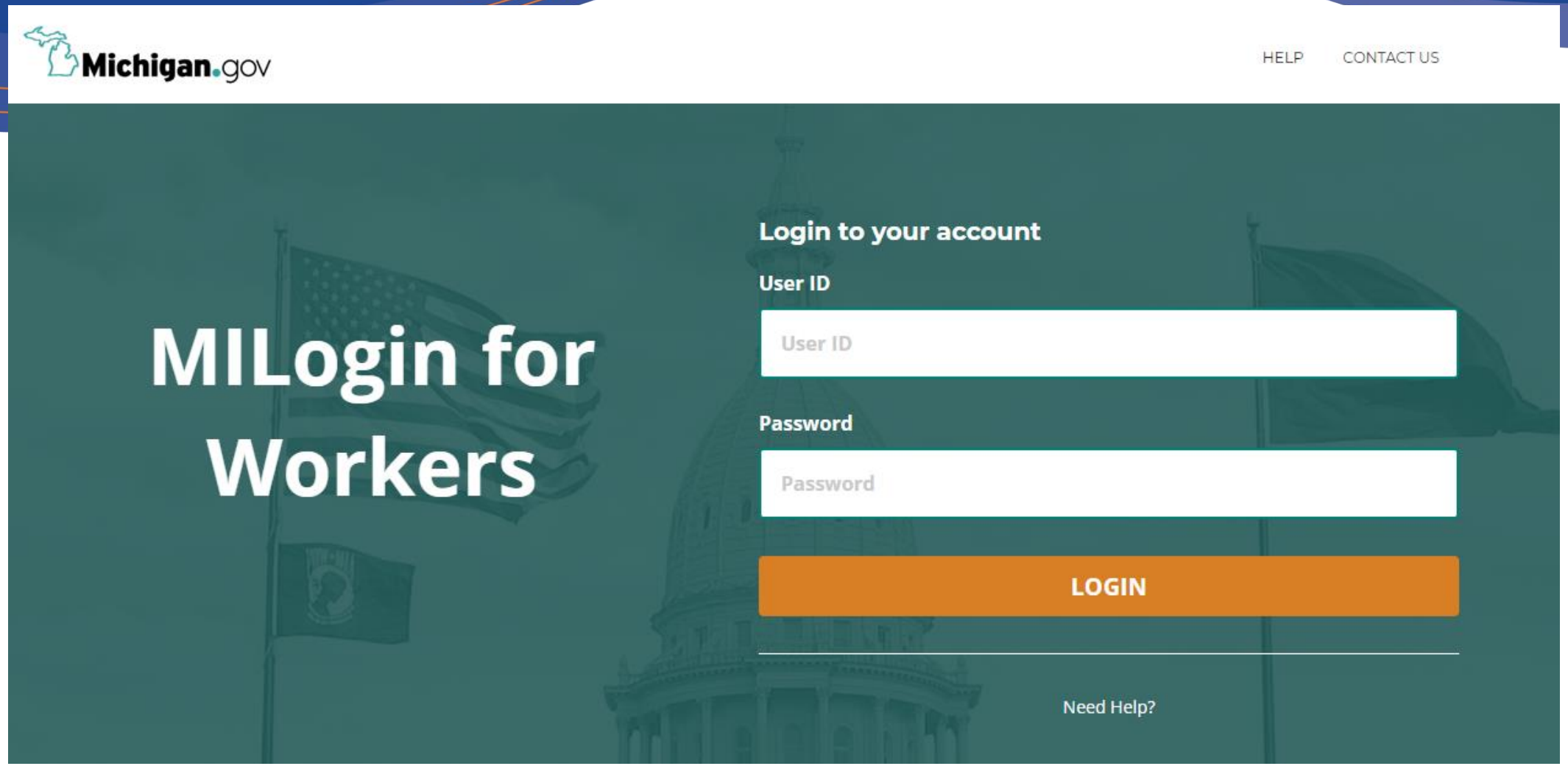
| Time | Discussion Item | Presenter |
|---|---|---|
| **3:30-3:40 pm** | Welcome, BSC Overview and Contact Information | Jennie Belden, Bureau Director |
| **3:40-3:50 pm** | Bureau Changes re: PA 187 | Jennie Belden, Bureau Director |
| **3:50-4:00 pm** | MIFRI Changes and Process for Reporting During Outages | David Donahue, LTC Division Director |
| **4:00-4:15 pm** | Document Submission Limitations During Survey | Jennie Belden, Bureau Director |
| **4:15- 4:30 pm** | Past Noncompliance | David Donahue, LTC Division Director |
| **4:30- 4:40 pm** | Survey Feedback Form | David Donahue, LTC Division Director |
| **4:40-5:00 pm** | Open Chat Box Q &A | |

# MI-Facility Reported Incidents (MI-FRI)

- Major updates to F609 from CMS - QSEP
- Process for Reporting During Outages and MI-FRI Changes
- MI-FRI outage less than 1 hour
- MI-FRI outage greater than 1 hour:
  - *The MI-FRI state application is not available at this time. Providers should print the MI-FRI screen or message to demonstrate that the state reporting system was unavailable. If the print screen or message does not contain a date or time, the provider should document the date and time to demonstrate attempted compliance with the reporting requirement. The facility is still responsible for submitting the incident into the State of Michigan's MI-FRI system via MILogin as soon as possible.*

# MI-Facility Reported Incidents (MI-FRI)

- All incidents/investigations must be submitted through MI-FRI
- Managers can not accept submission via email
  - If after submission something needs to be added
- Each facility can have up to six active users
  - This is in addition to corporate access


Michigan.gov
HELP
CONTACT US
MILogin for Workers
Login to your account
User ID
User ID
Password
Password
LOGIN
Need Help?

Michigan.gov

HELP CONTACT US

# MILogin for Workers

HOME | REQUEST ACCESS | UPDATE PROFILE | LOGOUT

LARA Licensing and Regulatory Affairs (LARA)

MI-FRI: Michigan Facility Reported Incidents for Long Term Care

**Long Term Care Provider Portal - MI-FRI**
LARA - Bureau of Community and Health Systems

Michigan.gov


Home

INCIDENT

Search/Update

History
Reports
Task List

MAINTENANCE

Worker Profile


# WELCOME TO MI-FRI: MICHIGAN FACILITY REPORTED INCIDENTS FOR LONG TERM CARE

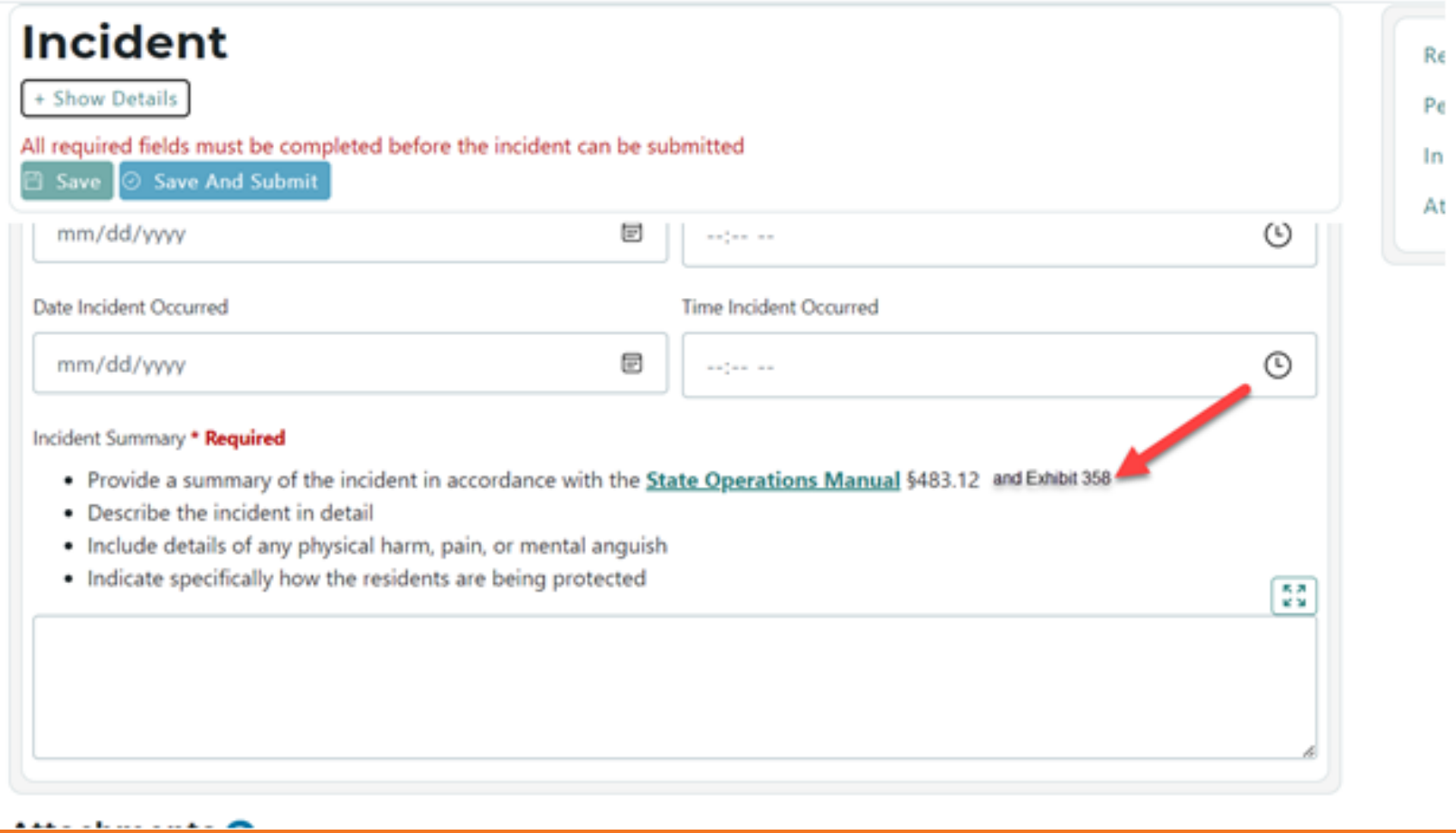
MI-FRI is the state's online reporting system for federally certified long term care providers to submit federally required facility reported incidents to the state agency.

PLEASE NOTE: In order to keep your account active, please login to MI-FRI at least every 60 days. Login to the MI-Login portal and open MI-FRI (you do not need to r

If you encounter technical issues within the MI-FRI application call 517-335-0204 or email LARA-MDS-OASIS@michigan.gov.

- MI-FRI User Guide for Facilities
- MI-FRI Seminar Video
- MI-FRI Facility User Authorization Form
- MI-FRI Corporate User Authorization Form
- February 27 PowerPoint
- MI-FRI FAQs

# Update to MI-FRI



# Update to MI-FRI

## Investigation

+ Show Details

Print **This record is currently locked by Andrea Pulido and has been opened in read only mode**

Date Incident Occurred

01/05/2023

Time Incident Occurred

01:00 PM

Facility Investigator Last Name * **Required**

Facility Investigator First Name * **Required**

Investigation Summary/Actions Taken * **Required**

- Provide detailed results of the investigation, including all corrective actions taken in accordance with the **State Operations Manual** §483.12 and Exhibit 359
- Include any corrective actions taken by the facility and the details of your investigation findings
- Indicate if the allegation was verified

# Facility Reported Incidents (FRI)

- EXHIBIT 358 Sample Form for Facility Reported **Incidents**
- EXHIBIT 359 Follow-up **Investigation** Report

# Documents during survey

- All surveys should be completely paperless
- Have your EHR Information sheet update and available upon entrance

# ENTRANCE CONFERENCE WORKSHEET
# ELECTRONIC HEALTH RECORD (EHR) INFORMATION

**Please provide the following information to the survey team before the end of the first day of survey.**

| Provide specific instructions on where and how surveyors can access the following information in the EHR (or in the hard copy if using split EHR and hard copy system) for the initial pool record review process. Surveyors require the same access staff members have to residents' EHRs in a read-only format. | |
|---|---|
| Example: Medications | EHR: Orders – Reports – Administration Record – eMAR – Confirm date range – Run Report |
| Example: Hospitalization | EHR: Census (will show in/out of facility)<br>MDS (will show discharge MDS)<br>Prog Note – View All - Custom – Created Date Range - Enter time period leading up to hospitalization – Save (will show where and why resident was sent) |
| 1. Pressure ulcers | |
| 2. Dialysis | |
| 3. Infections | |
| 4. Nutrition | |
| 5. Falls | |
| 6. ADL status | |
| 7. Bowel and bladder | |
| 8. Hospitalization | |
| 9. Elopement | |
| 10. Change of condition | |
| 11. Medications | |
| 12. Diagnoses | |
| 13. PASARR | |
| 14. Advance directives | |
| 15. Hospice | |
| 16. COVID-19 test results | |

# Documents during survey

- All surveys should be completely paperless
- Have your EHR Information sheet update and available upon entrance
- BSC is researching other means to collect documents
- SOM email limited to 25mb – this includes attachments and the email itself
- Other observations?

# Past Noncompliance (PNC)

- What is Past Noncompliance?
  - Past noncompliance may be identified during any survey
  - The survey team is expected to follow the investigative protocols and surveyor guidance
  - To cite past noncompliance with a specific survey data tag, all criteria must be met:

    1. The facility was not in compliance at the time the situation occurred;

    2. The noncompliance occurred after the exit date of the last standard and before the current survey; and

    3. There is sufficient evidence that the facility corrected the noncompliance and is in substantial compliance at the time of the current survey; has the facility ran through the POC and QAPI process

# Past Noncompliance (PNC)

- A nursing home does not provide a plan of correction
- Past noncompliance may be cited on any type of survey
- Data about past noncompliance tags are not carried forward to subsequent revisit surveys.
- Past noncompliance is documented at the actual deficiency tag
- A scope and severity determination is assigned to a past noncompliance citation
- Surveyors document on the CMS-2567 the nursing home's actions to correct the past noncompliance
- Surveyors use an in-house tool to assist them