

Policy and Procedures Required in the State Operations Manual, Appendix PP  
Reflecting Draft F tags effective November 28, 2017

F-Tags	Policy/Procedure/Process
563	Visitation rights of residents-reasonable clinical and safety restrictions/visitor access
565	Policy for how resident and family groups will be informed of facility policies and changes
572	Share pertinent policies at admission
578	Resident's rights to formulate an advance directive, refuse medical/surgical treatment. The policy delineates the steps necessary to promote these rights
580	Notification of changes: accident with injury, change in status, need to alter treatment, decision to transfer, room or roommate change, change in rights
583	Protecting resident privacy and confidentiality. (Social media, photographs)
585	Grievance Policy
600	Abuse-policy to identify when, how and by whom determination of capacity to consent to a sexual contact will be made and where this document will be recorded. Prohibit, Identify, report abuse Policy for Abuse prevention training Policy r/t aspects of Quality of Life and/or care, Advance directive, intimacy and relationships Policies re: care & services per current standards of practice
602	Policy for investigation of drug diversion as misappropriation of resident property
603	Secured locked units-including criteria for placement Policy for placement of residents for transmission precautions related to seclusion in the room
604	Policy re: wo can initiate emergency restraint
606	Screening procedures prior to employment
607	Prohibit and prevent abuse, neglect and exploitation and misappropriation Policies to investigate allegations Policy and procedure for training new and existing NH staff and in-service training for NA Prevention prohibit all types of abuse Written procedures to assist staff in identifying abuse, neglect Procedures for investigation Written procedures for protecting residents Written procedures for reporting allegations
608	Ensure reporting of crimes-including examples of crimes Written procedure notifying covered individuals annually of their obligation P&P promote culture of safety and open communication in the work environment Posting a conspicuous notice of employee rights Prohibiting and preventing retaliation
620	Admissions policy-stipulate limited conditions for transfer or discharge For room changes P&P to safeguard resident's personal property Process to document high-value personal property
621	Equal access to care and identical policies regarding transfer regardless of payment
625	Policy holding resident bed during periods of absence
626	Policy permitting resident to return to the facility
639	Policy for electronic storage of MDS with hard to copy to surveyors upon request

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642	Policy for electronic signatures- computer security measures
646	Process to notify appropriate state mental health or intellectual disability authority when a resident with a Level II PASARR has a significant change in mental or physical status
660	Process for discharge Against Medical Advice
678	CPR Systems and processes for Adequate # of staff present at all times who are properly trained Procedure to document a resident's choices regarding issues like CPR Code status
684	Care policies that are consistent with current professional standards of practice not only pain management about symptom control, but for assessing resident's physical, intellectual, emotional, social, and spiritual needs as appropriate. Policies must identify the ongoing collaboration and communication process between the nursing home and hospice
686	Skin Integrity Treatment protocols with Medical Director approval
688	Resident care policies restorative/rehab tx/services, also equipment use, cleaning and storage
689	Safety policies with input from staff Wandering/elopement Smoking Plan to locate missing resident Disaster and emergency preparedness
690	Catheter care and services Policy obtaining urine for culture
693	P&P Monitoring feeding tube Care of feeding tube Feeding tube replacement Complications
694	IV's - Policies for preparation, insertion administration, maintenance and discontinuance of IV as well as prevention of infection at site to extent possible. Care and use of all IV equipment, such a pumps, tubing, syringes, fluids
695	Respiratory-P&P for respiratory care and services prior to admission of a resident requiring specific types of respiratory care and services
698	Dialysis-monitoring of access site Types of dialysis that are provided in NH are consistent with current standards Cleaning policies if dialysis in-house Emergency meds for in-house dialysis
700	Process for scheduling for routine maintenance of beds and bed rails correct use
711	Facility practice of progress notes written, signed and dated at each physician visit in a chart of HER Policy for standing orders for influenza and pneumococcal vaccine

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	Use of rubber stamp signatures
712	Policy if the resident leaves the grounds for medical care – (expectation that visit occurs at the facility) Policy for NP to conduct required visits
713	Agreement with another MD to provide physician services in the absence of the attending physician
714	Physician delegation of tasks to NP, CS, PA
715	Policy allowing physician to delegate the task of writing orders to qualified dietitian and qualified therapist-according to state law - how does the facility ensure the physician supervision of individuals performs these tasks
755	Policy for consulting pharmacist System of records of receipt and disposition of all controlled drugs Procedure acquiring controlled drugs process for medication orders, receiving and administering medications including transfer orders, admission orders, telephone orders order renewals and the MAR Policy for reporting controlled med count discrepancy
756	Drug Regimen Review –time frames for the different steps in the process and steps the pharmacist must take when irregularities require urgent action to protect the resident MRR for residents who are anticipated to stay < 30 days MRR for residents who experience an acute change of condition Procedure to resolve situation where physician does not concur with or take action on identified irregularities Procedure to resolve situation where the attending physician is the Medical Director
758	Med Management Stop orders for certain meds Policy for continuing antibiotic beyond recommended clinical guideline
759	Policy for checking feeding tube placement before med administration Policy for medication dosing schedules Policy for identification of residents prior to med admin
760	Policy or system for identification of resident system to limit who has security access and when access is used for controlled meds (scheduled II-IV) Procedure for control and safe storage of meds for those who can self-administer medication Procedures that address and monitor safe storage and handling of medications
761	Policies for quality and timeliness of Lab services
770	Labs-P&P for the quality and timeliness of services whether services are provided by the facility or an outside service
771	Prevent transfusion reactions Positive ID of blood components
773	P&P defining categories that are considered outside clinical reference ranges for lab values, the urgency of reporting values and a process for monitoring the effectiveness of communication

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774	Procedure for making transportation arrangements to and from source of service
777	Radiology-procedure for defining categories where follow-up is required, the urgency of reporting specific concerns and a process for monitoring the effectiveness of communication to ensure that communication was received and delegation by the ordering provider
790	Dental Services-identification of circumstances when the loss or damage of dentures is the facility's responsibility and may not charge a resident
811	Paid Feeding Assistants-Knowledge on how to obtain assistance in an emergency Process for verification of state approved training course
812	Food receiving and storage- Maintaining and harvesting the gardens, including ensuring manufacturer's instructions are followed if any pesticides, fertilizers or other topical or root-based plant preparations are applied Process for monitoring temperatures for refrigerators P&P to prevent the spread of foodborne illness and minimize food storage, preparation and handling practices that could cause food contamination and could compromise food and safety Cleaning schedule for kitchen and food service equipment Pot luck events Food from visitors Sufficient staffing No sick employees to work
813	Use and storage of personal food items-give to families and residents Personal refrigerator Food brought to residents by family and other visitors Staff assisting residents in accessing and consuming the food
837	Governing Body- Process by which administrator reports to governing body, the method of communication, how the governing body responds back How the administrator is held accountable and reports information Active governing body that is responsible for establishing and implementing policies regarding management of the facility
840	Timeliness of outside resources
841	Medical Director- Job description or policy for how Med Director will carry out responsibilities to effectively implement resident care policies and coordinate medical care If the medical director is also an attending physician there should be a process to ensure there are no concerns with the individual's performance as a physician-facility must have a process how to address this situation. Be involved in corporate policies and facility unique policy development Show participation in policy development System development to monitor performance of health care practitioners including mechanism for communicating and resolving issues r/t medical care and other licensed practitioners act within scope of practice

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842	Electronic Signatures- P&P maintaining confidentiality of resident records Storage including archiving
843	Emergency resident transfer policy
846	Facility Closure-P&P must be in place at all time Administrator's duties and responsibilities Communication to receiving entities Roles and responsibilities of owners Provisions of ongoing operations during closure process Interview of residents and their legal for goals, preferences, offering community options, providing residents with information, access of another entity(s)
849	Hospice-written agreement Orientation of Hospice staff to facility policies
865	QAPI
866	Program feedback, data systems and monitoring Systems to obtain and use feedback Maintenance of effective system to identify, collect and use data and information Methodology and frequency for development, monitoring and evaluation of data
867	Use of a systematic approach to determine underlying causes of problems impacting larger systems Development of corrective actions that will be designed to effect change at the system level to prevent quality of care, quality of life or safety problems How the facility will monitor the effectiveness of its performance improvement activities to ensure that improvements are sustained
868	If Medical Director not present at QAA the process of communication of the content of the meeting to the Medical Director with his/her acknowledgement of the information
880	Infection Control System of surveillance When and to whom possible incidents of communicable disease or infections should be reported Standard and transmission-based precautions When and how isolation should be used The circumstances under which the facility must prohibit employees with a communicable disease Hand hygiene procedures to be followed P&P safe use of insulin pens Laundry Services-including off-site
881	Antibiotic Stewardship
883	Influenza and pneumococcal immunizations
895	Phase 3-compliance and ethics program
908	P&P for inspection of equipment, mattresses

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922	Procedure to ensure water is available to essential areas when there is a loss of normal water supply
926	Smoking policies
945	Train about Infection control policies

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