

Nursing Services

Building Competency Evaluations



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OBJECTIVES

Participants will:

- Review the Federal regulation at 483.35 Nursing Services and Guidance to Surveyors
- Identify requirements for hiring, training and evaluation to ensure competency



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OVERVIEW 483.35

- **§ 483.35 Nursing Services**
- The facility must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of facility's resident population in accordance with the facility assessment required at § 483.70(e).



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OVERVIEW 483.35

- § 483.35(a)(3) The facility must ensure that licensed nurses have the specific competencies and skill sets necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.
- § 483.35(a)(4) Providing care includes but is not limited to assessing, evaluating, planning and implementing resident care plans and responding to resident's needs.



OVERVIEW 483.35

- **§ 483.35(d) Requirements for facility hiring and use of nurse aides-**
- **§ 483.35 (d)(1) General Rule**
- A facility must not use any individual working in the facility as a nurse aide for more than 4 months, on a full-time basis, unless-
- that individual is competent to provide nursing and nursing related services
- (ii)(A) that individual has completed a training and competency evaluation program or a competency evaluation program approved by the State as meeting the requirements of § 483.151 through § 483.154; or
- (B) That individual has been deemed or determined competent as provided in § 483.150(a) and (b)



OVERVIEW 483.35

- **§ 483.35(d) Requirement for facility hiring and use of nurse aides**
- **§ 483.35(d)(3) Minimum Competency**
- A facility must not use any individual who has worked less than 4 months as a nurse aide in that facility unless certain conditions apply



OVERVIEW 483.35

- **§ 483.35(d)(4) Registry verification**
- Before allowing an individual to serve as a nurse aide, a facility must receive registry verification that the individual has met competency evaluation requirements



OVERVIEW 483.35

- **§ 483.35(d)(6) Required retraining.**
- If, since an individual's most recent completion of a training and competency evaluation program there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services for monetary compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program

OVERVIEW 483.35

§ 483.35(d)(7) Regular in-service education

- The facility must complete a performance review of every nurse aide at least once every 12 months, and **must provide regular in-service education based on the outcome of these reviews.**



OVERVIEW 483.35

(CNA In-service requirements – continued)

- **§ 483.95(g)(1):** Be sufficient to ensure the continuing competence of nurse aides, but must be no less than 12 hours per year
- **§ 483.95(g)(2):** Include dementia management training and resident abuse prevention training

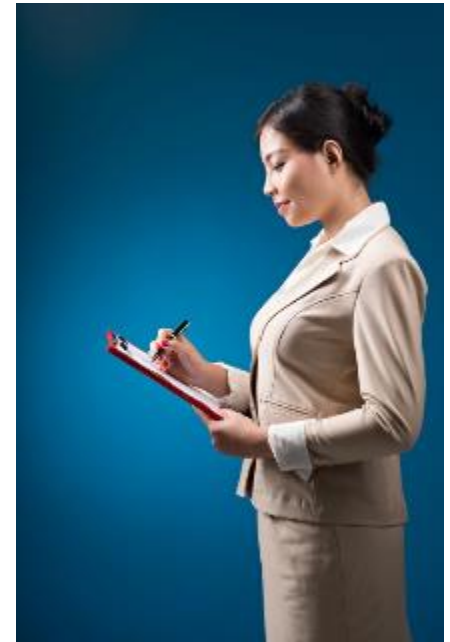
OVERVIEW 483.35

(CNA In-service requirements – continued)

- **§ 483.95(g)(3):** Address areas of weakness as determined in nurse aides' performance reviews and facility assessment at § 483.70(e) and may address the special needs of residents as determined by the facility staff
- **§ 483.95(g)(4):** For nurse aides providing services to individuals with cognitive impairments, also address the care of the cognitively impaired

§ 483.70(e) Facility Assessment

- The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents **competently** during both day-to-day operations and emergencies.



§ 483.40 Behavioral health services

- § 483.40(a) The facility must have sufficient staff who provide direct services to residents with the appropriate **competencies and skills sets** to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population



DEFINITION

Competency (F498 - § 483.35(c) Proficiency of nurse aides) in skills and techniques necessary to care for residents' needs includes competencies in areas such as communication and personal skills, basic nursing skills, personal care skills, mental health and social service needs, basic restorative services and resident rights



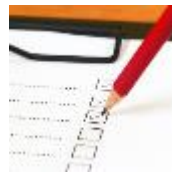
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Procedure

1. Prior to hire, Human Resources will verify from the registry that the nurse aide has completed the training and competency evaluation program approved by the State.
2. Prior to work, Human Resources will seek information from every State registry that the facility believes will include information about the individual



Procedure

3. If the individual has had a continuous period of 24 consecutive months in which no nursing or nursing-related services for monetary compensation was completed, the individual must complete a new training and competency evaluation or a new competency evaluation program



Procedure

New Employee Orientation, in-service education and verification of skills will be completed upon hire for all nursing services personnel. Follow up evaluation of understanding and competency will be obtained with post-test, skills check list, etc., as necessary.



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Procedure

5. The facility will complete a performance review of every nurse aide at least once every 12 months and provide regular in-service education based on the outcome of these reviews. Required in-service training, specific to nurse aides, will include at least 12 hours per year.



Procedure

6. Human Resources will verify prior to working a unit, staff qualifications for professional staff. Verification of Licensure, Certification and/or Registration in accordance with State law will be verified.
7. The facility Director of Nursing will verify licensure for temporary or agency personnel with the professional licensing board.

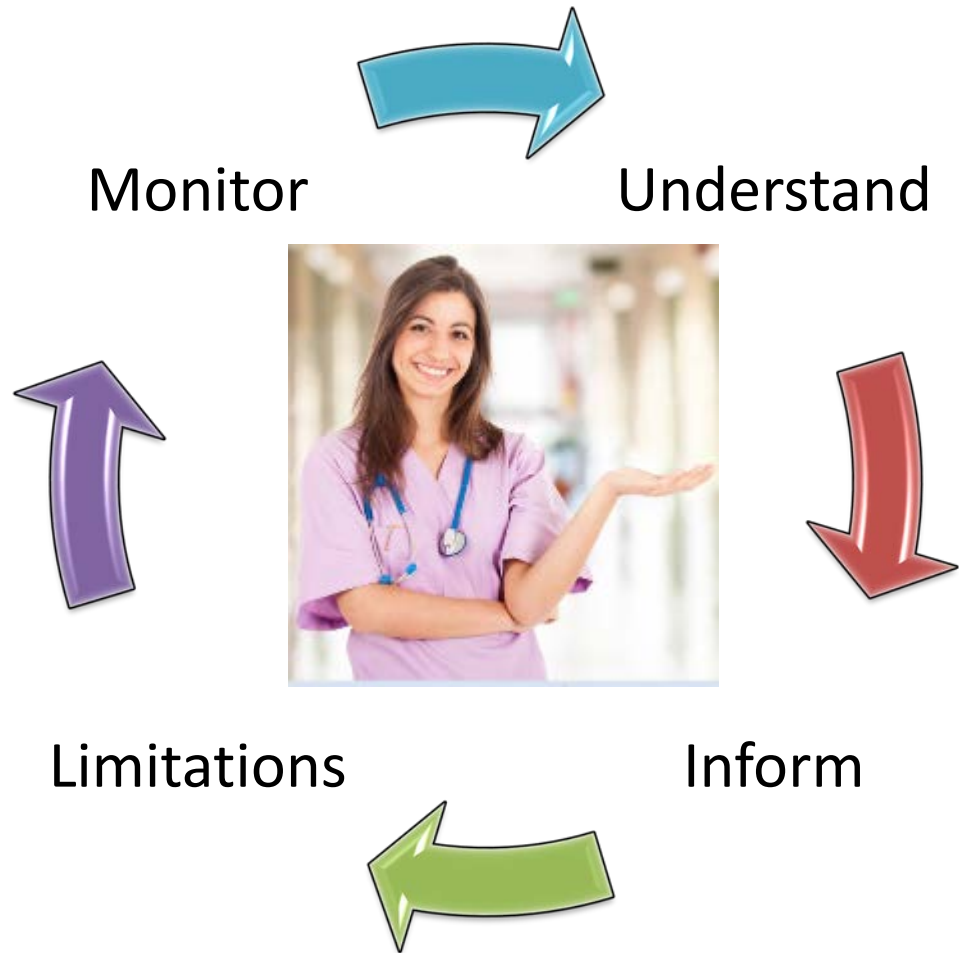


Procedure

8. The Director of Nursing, in collaboration will plan and provide education and evaluation for the licensed nurses based upon the Facility Resource Assessment, outlining resident population needs, standards of practice, regulatory requirements, facility policies and procedures, nursing skills and systems and any new procedures or requirements. Skill competency will be evaluated at hire, annually and with identified need.

Facility Response

- Understand
- Inform
- Limitations
- Monitor



Understand

- How will all nursing staff understand the education and competency requirements?
 - Performance Evaluations
 - Education Posting
 - New Regulations
 - New Policies
 - New Procedures
 - Updated Standards



INFORM

- When will staff be informed of education and follow up evaluations?



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Limitations

- Performance reviews do not identify individualized staff need for education and evaluation
- Staff do not attend all required in-services
- Documentation will need to be complete to ensure compliance

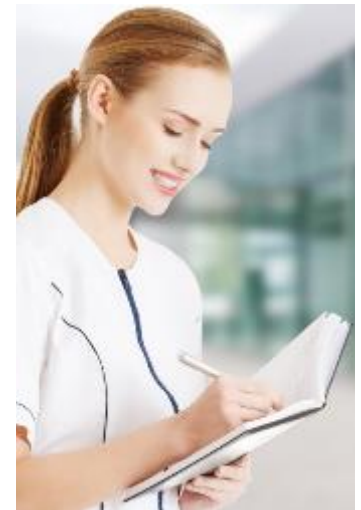


Monitor

- Nurses and Nurse managers will need to monitor nursing staff for competence
- Human Resources and DON will need to monitor renewal of licensure
- Not only does the facility need to monitor hours, but ALL CNA's will need to monitor their OWN hours as well to ensure at least 12 hours of education each year

CONCLUSION

The requirements expect facilities will have nursing services that are adequately prepared with evidence of preparation, registry or licensure, ongoing education, evaluation and monitoring for competence!



Questions?



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REFERENCES

References

Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities 10/04/16:

<https://www.federalregister.gov/documents/2016/10/04/2016-23503/medicare-and-medicaid-programs-reform-of-requirements-for-long-term-care-facilities>

State Operations Manual Appendix PP – Guidance to Surveyors for Long-Term Care Facilities, 06/10/16:

https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf

CMS Memo Ref: S&C 17-07-NH: Advance Copy – Revisions to State Operations Manual (SOM), Appendix PP- Revised Regulations and Tags, 11/09/16:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-07.pdf>

THANK YOU FOR PARTICIPATING IN THIS EDUCATION SESSION!



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