



# FY 22-23 Facility Assessment Updates

## Laguna Honda Hospital and Rehabilitation Center

**April 11, 2023**

**Presented to JCC**

Presented by: Elizabeth Schindler, MPH  
Director of Performance Improvement  
Chief Quality Officer | Quality Management

# LHH Facility Assessment

Skilled Nursing Homes are required to conduct an annual **Facility Assessment** report to determine the necessary resources required to care for residents competently during normal day-to-day operations and emergencies.

Assessment areas include:

- Resident population served and care needs based on physical and cognitive disabilities
- Staffing and competencies on services provided
- Risk analyses for systems and resources in North and South residence towers and hospital buildings spanning more than 500,000 square foot



# **Facility Assessment Updates and Revisions**

- **Substance Use Disorders**
- **Allegations of Abuse**
- **Education and Training**
- **Infection Control**
- **CMS Phase 3 Requirements**
- **QAPI Program**

# Substance Use Disorder (SUD)

| Special Treatments      | No. of Unique Residents<br>04/01/21 - 06/30/21 | No. of Unique Residents<br>04/01/22-06/30/22 | Percent Change |
|-------------------------|--|--|----------------|
| Substance Use Disorders | 100  | 94   | -6%            |

- **SUD treatment provided by Psychiatry Services**

- Non-specialty level outreach (embedded within clinical encounters) and specialty substance treatment services (individual and group counseling).
- Nursing and Resident Care Team (RCT) provide support and work in collaboration with the Behavioral Health Services team.

- **CMS Phase 3 Requirements**

- LHH Behavior Health Services team developed a Substance Use Disorder training and the team to provide staff with knowledge of signs and symptoms of the disorder.
- SUD related policies have been updated with Phase 3 regulations.

# Allegations of Abuse

- **Abuse and Prevention Services monitored through QAPI**
  - The facility QAPI program will monitor the number of incidents reported, the type of incidents reported, and the timeliness of reporting.
  - Department managers/supervisors are expected to monitor staff performance through performance evaluations and competency checks where applicable.
- **CMS Phase 3 Requirements**
  - LHH updated its Abuse and Neglect Prevention policies to reflect the new requirements and re-educated staff on reporting requirements and timelines to align with the new CMS Phase 3 requirements.

# Education and Training

- **Staff Trainings/Education and Competencies**
  - The LHH Department of Education and Training provides orientation, training, and support to all new and existing employees and contractors through in-person classes, in-services, trainings, and online training modules via SF Learning ELM.
  - The training topics include new trainings, required mandatory trainings based on the Code of Regulations, Title 22, CDPH In-service and Training Program requirements, Plan of Corrections, P&Ps, FRIs, the COVID-19 pandemic, and identified trainings based off of the staff learning needs assessment.
- **CMS Phase 3 Requirements**
  - LHH Education and Trainings specific to CMS Phase 3 requirements have been updated which includes a new Training for Contractors component.

# Infection Control

- **Infection Control Program under the direction of Quality Management**
  - LHH has established a facility wide Infection Control program, implemented through the Infection Control Function of the overall Quality Management program.
  - The Infection Control program complies with regulations and recommendations from the CMS, the CDC, AHA, APIC, and mandates of OSHA, CDPH, EPA, and SFDPH.
  - LHH infection control continues COVID-19 pandemic operations and response as the pandemic transitions into its third & fourth year.
- **CMS Phase 3 Requirements**
  - LHH is in compliance with the new CMS Phase 3 requirements for Infection Control which is centered around a water management plan and resident level review for antibiotic appropriateness especially around urinary tract infections.
  - Infection Control related policies have been updated with Phase 3 regulations.

# CMS Phase 3 Requirements

- **Preparing for CMS Phase 3 Requirements**
  - CMS has released new and updated Phase 3 requirements to which LHH is expected to be in compliance with as of October 24, 2022.
  - After careful review of LHH policies, the areas impacted are as follows:
    - Visitation
    - Freedom from Abuse
    - Neglect and Exploitation
    - Restraints
    - Transfer and Discharge
    - Assessments, Trauma Informed Care
    - Staffing and Behavioral Health Services.
  - Policies impacted by the new CMS Phase 3 regulations were updated.



# QAPI Program

- **Infection Control Program under the direction of Quality Management**
  - The goal of the QAPI program is to provide a systematic, comprehensive, and data-driven approach to maintain and improve safety and quality in care.
  - Performance Improvement and Patient Safety (PIPS) Committee is a vital element of the QAPI program where the goal is to examine and improve care or services in areas that the PIPS committee identifies needing attention.
  - The QAPI program will roll out unit-based meetings focusing on high-risk, high-volume, and problem prone areas for the facility. For FY22-23, this will be:
    1. Wound and Nutrition
    2. Infection Prevention and Control and Antibiotic Stewardship
    3. Psychotropic Medication and Behavior Monitoring
    4. Falls and Restraints
- **CMS Phase 3 Requirements**
  - QAPI related policies have been updated with Phase 3 regulations.



## Questions/Comments