Oklahoma QIS Overview
Oklahoma State Department of Health
Centers for Medicare & Medicaid Services
Nursing Home Quality, LLC
August 3, 2011

Agenda
1. Welcome and Introductions – Tom Kress, CMS
2. Background and Development of the Quality Indicator Survey (QIS) – Tom Kress, CMS
4. Description and Timing of State QIS Implementation – Mike Cook, Oklahoma DOH, QIS State Lead
5. Comparison of the QIS and Traditional Survey Process – Robin Harper, Master QIS Trainer, Director of Training, Nursing Home Quality
6. QIS Overview – Robin Harper, Master QIS Trainer, NHQ
7. Questions and Answers

What is the QIS?
- Approved Federal nursing home survey process designed and developed to promote consistency, reliability and accuracy
- Uses customized software on tablet PCs to guide surveyors through a two-staged systematic review of regulatory requirements using observation, interview, and record review
QIS Development

- Produced prototype (1998-2005)
- Demonstration and Evaluation (2005-2007)
  - Two teams each in KS, OH, CA, CT, LA
- Develop and refine national training model (2006-2007)
  - Three States: FL, CT, KS
- National implementation State-by-State to replace Traditional survey (2007-present)

What Does the QIS Provide?

- Structured approach to promote more accurate and consistent results
- Larger and more diverse randomly selected samples to obtain a more accurate picture of the residents
- Automation to systematically review regulatory areas, synthesize surveyor findings, enhance investigative protocols, and organize surveyor documentation

What QIS Is Not

QIS Does Not Represent:
- Change in the Social Security Act
- Change in the Regulations
- Change in Interpretive Guidance
- Change in enforcement process
CMS Issued Guidance

- State Operations Manual, Appendix P
- Quality Indicator Survey Training Process (State Operations Manual, Chapter 4)
- National Implementation Priority Order (S&C 09-50)
- Admin Info: 10-21-NH/QIS

Training Requirements for Registered QIS Surveyor

- Prerequisites
  - Proficiency with tablet PC functions and computer skills
  - Completion of classroom training
  - Participation in mock training survey
  - Participation in 2 surveys of record with successful compliance assessment
  - Documentation in CMS Learning Management System (LMS)

Training Requirements for CMS-Certified QIS Trainer

- Be Registered QIS Surveyor
- Successfully complete additional requirements
  - Complete at least six QIS surveys of record
  - Attend Train the Trainer workshop
  - Provide the QIS classroom training
  - Monitor surveyor-students in mock survey
  - Conduct compliance assessment for surveyor-students during a survey of record
  - Remain actively involved in QIS training/surveys
- Documentation in CMS Learning Management System (LMS)
QIS National Implementation*

Twenty-four currently participating QIS States

CT, FL, KS, MN, NM, LA, OH, NC, WV, WA, MD, DE, ME, VT, GA, AZ, CO, NY, NE, IN, UT, OR, District of Columbia, HI

*as of presentation date

Description of State-specific Implementation Plan and Timing

Primary: Mike Cook, QIS State Lead
Oklahoma State Department of Health
Email: mikec@health.ok.gov
Oklahoma State QIS Resource url: ltc.health.ok.gov

Quality Indicator Survey: Comparison with Traditional Survey and Overview

Robin Harper
Master QIS Trainer
Nursing Home Quality, LLC
Comparison of QIS and Traditional Survey Process

Automation

Traditional
- Information recorded on paper throughout process; computers are used for Statement of Deficiencies (CMS-2567)

QIS
- Each team member uses a tablet PC to document findings throughout the process; findings are synthesized, organized and loaded to the CMS-2567 by the software

Off-Site Preparation

Traditional
- Review:
  - OSCAR 3 and 4 Reports
  - QM/QI Reports
  - Results of complaint investigations
  - Pre-select a sample based on above

QIS
- Review:
  - OSCAR 3 Report
  - Uninvestigated complaints
  - Random selection of Stage 1 samples from MDS data loaded onto tablet PCs
Onsite Preparation

Traditional
- Roster/Sample Matrix Form CMS 802

QIS
- Alphabetical resident census with room numbers/units
- List of new admissions over the last 30 days

Initial Tour

Traditional
- Gather information about pre-selected residents and identify new concerns
- Determine whether pre-selected residents are still appropriate

QIS
- Brief overall impression of the facility, the residents and the staff
- Not intended for sample selection or supplementation

Sample Selection

Traditional
- Sample size determined by facility census
- Residents selected based on QM/QI percentiles and issues identified offsite and on the initial tour

QIS
- Stage 1 sample size:
  - Admission (30)
  - Census (40)
- Stage 2 sample size based on number of triggered care areas
- Residents selected by software
- Surveyor-initiated sample
Survey Structure

Traditional
- Phase I: focused & comprehensive reviews
- Phase II: focused reviews

QIS
- Stage 1: preliminary investigation
- Stage 2: in-depth investigation of triggered concerns from Stage 1

QIS Process Made Easy
Two Stages: Three Steps

Two Stages of QIS

Stage 1: Preliminary investigation of regulatory areas to determine resident care areas to determine resident care areas and facility practices for Stage 2 investigation

Stage 2: In-depth investigation to determine whether deficient practice exists, document deficiencies, and determine severity and scope
Three Steps in Each Stage

1. Sampling (computer-generated)
2. Investigation
3. Synthesis

QIS Stage 1

- **Sampling** - Random census (40) and admission (30) samples
- **Investigation** - Structured resident, family, and staff interviews; resident observations; chart reviews
- **Synthesis** - 84 resident-centered and 27 facility-level Quality of Care and Quality of Life Indicators (QCLIs) to identify care areas that exceed national thresholds

Stage 1 Triggers for Stage 2 Investigations

- Resident Observation
- Resident Interview
- Family Interviews
- Staff Interviews
- Admission Chart
- Census Chart
- MDS QIs
- New MDS Indicators

26%
16%
16%
5%
5%
6%
13%
13%
Surveyor-Initiated Sample

Surveyors can initiate an investigation of care issues for any resident or of facility tasks. Because of the large QIS samples, surveyor-initiated investigations are a small part of the process.

QIS Facility Tasks

- Completed on every survey:
  - Dining Observation
  - Infection Control & Immunizations
  - Kitchen/Food Service Observation
  - Liability Notices & Beneficiary Appeal Rights Review
  - Medication Administration Observation
  - Medication Storage
  - Quality Assessment and Assurance Review
  - Resident Council President/Representative Interview
- Completed if triggered:
  - Abuse Prohibition Review
  - Admission, Transfer, and Discharge Review
  - Environmental Observations
  - Personal Funds
  - Sufficient Nursing Staff Review

QIS Stage 2

- Sampling – Three residents per triggered Care Area plus surveyor-initiated residents (e.g., complaints)
- Investigation – Specific or general Critical Element pathway or facility task pathway and interpretive guidelines
- Synthesis – Determine compliance with each Critical Element, document noncompliance at the applicable F tags, determine severity and scope
Additional QIS Resources

CMS QTSO Website
https://www.gtso.com/qisdownload.html

QIS Satellite Broadcast