

**Oklahoma QIS Overview**

Oklahoma State Department of Health  
Centers for Medicare & Medicaid Services  
Nursing Home Quality, LLC

August 3, 2011



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**Agenda**

1. Welcome and Introductions – Tom Kress, CMS
2. Background and Development of the Quality Indicator Survey (QIS) – Tom Kress, CMS
3. National QIS Training Process – 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



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**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



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## 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)

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## 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

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## 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

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## 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



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## 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)



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## 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)



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## 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



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## Description of State-specific Implementation Plan and Timing

Primary: Mike Cook, QIS State Lead  
Oklahoma State Department of Health  
Email: [mikec@health.ok.gov](mailto:mikec@health.ok.gov)

Oklahoma State QIS Resource url: [itc.health.ok.gov](http://itc.health.ok.gov)



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## Quality Indicator Survey: Comparison with Traditional Survey and Overview

Robin Harper  
Master QIS Trainer  
Nursing Home Quality, LLC



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## Comparison of QIS and Traditional Survey Process




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## Automation

<u>Traditional</u>	<u>QIS</u>
<p>Information recorded on paper throughout process; computers are used for Statement of Deficiencies (CMS-2567)</p>	<p>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</p>




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## Off-Site Preparation

<u>Traditional</u>	<u>QIS</u>
<ul style="list-style-type: none"> <li>➢ Review:           <ul style="list-style-type: none"> <li>▪ OSCAR 3 and 4 Reports</li> <li>▪ QM/QI Reports</li> <li>▪ Results of complaint investigations</li> </ul> </li> <li>➢ Pre-select a sample based on above</li> </ul>	<ul style="list-style-type: none"> <li>➢ Review:           <ul style="list-style-type: none"> <li>▪ OSCAR 3 Report</li> <li>▪ Uninvestigated complaints</li> </ul> </li> <li>➢ Random selection of Stage 1 samples from MDS data loaded onto tablet PCs</li> </ul>




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## 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



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## 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



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## 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



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## Survey Structure

<u>Traditional</u>	<u>QIS</u>
<ul style="list-style-type: none"> <li>➤ Phase I: focused &amp; comprehensive reviews</li> <li>➤ Phase II: focused reviews</li> </ul>	<ul style="list-style-type: none"> <li>➤ Stage 1: preliminary investigation</li> <li>➤ Stage 2: in-depth investigation of triggered concerns from Stage 1</li> </ul>


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## QIS Process Made Easy Two Stages: Three Steps


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## 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


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## Three Steps in Each Stage

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



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## 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



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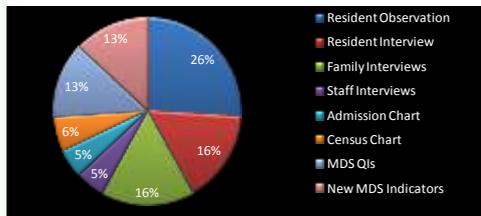
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## Stage 1 Triggers for Stage 2 Investigations



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## 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.



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## 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



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## 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



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## Additional QIS Resources

### **CMS QTSO Website**

<https://www.gtso.com/qisdownload.html>

### **QIS Satellite Broadcast**

<http://surveyortraining.cms.hhs.gov/pubs/Videoinformation.aspx?cid=1082>



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