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## Office of Quality Assurance Becomes The Division of Quality Assurance

On April 9, 2007, Secretary Kevin Hayden announced that the Governor's Office had approved the Department of Health and Family Services' reorganization request that included creating the Division of Quality Assurance. Implementation of the reorganization began on April 1, 2007. Please watch for an upcoming memo that will detail the changes. As with the last transition from BQA to OQA, the primary purpose and vision of DQA remains the same. We continue to focus on our strategic goals of quality improvement, regulatory flexibility, and person-centered services; as DHFS continues to reform the long-term care system and improve service in the mental health and substance abuse arena. DQA will continue to collaborate with stakeholders on these shared goals to ensure quality of life and quality of care and treatment for Wisconsin's vulnerable citizens.

"I am pleased that Governor Doyle and Secretary Hayden have confidence in establishing DQA as an independent organization within DHFS," said Otis Woods, Administrator of the new Division. "We look forward to focusing on significant issues at the State and Federal levels that impact on the quality of care in Wisconsin healthcare communities."

## **DQA Focus 2007 Conference – Coming Together: Mapping the Journey to Excellence for Wisconsin Health Care Professionals**

The Wisconsin Department of Health and Family Services, Division of Quality Assurance (DQA) is pleased to announce the 7th Annual Conference for health care providers and DQA staff on **August 8, 2007**. This year's conference, developed in collaboration with health care providers and associations, is designed to bring together a variety of experts to share strategies and provide learning opportunities for all conference attendees. The conference will be held at the new Stevens Point Holiday Inn and Convention Center in Stevens Point, WI. The goals of FOCUS 2007 are for attendees to:

- Acquire information from experts to address current and emerging issues;
- Apply learned practices and strategies; and
- Gain opportunities for networking and the exchange of ideas.

FOCUS 2007 - Coming Together: Mapping the Journey to Excellence, will provide numerous formats to engage all participants with a thought-provoking lineup of presenters. The day will start with opening remarks by Kevin Hayden, Secretary of the Department of Health and Family Services, and Otis Woods, Administrator of the Division of Quality Assurance. The keynote speaker for the conference is Donna Manring, Dietetic Technician Registered (DTR), and President of the Wisconsin Dietetic Association. Donna's presentation titled, "The Seven Keys to Expected Exceptional Customer Service," will inspire attendees to ensure consistency in providing exceptional daily customer service. The Focus 2007 Conference will include 24 topical breakout sessions presented by state and national experts on cutting-edge issues, clinical standards of practice, and individualized care. Also, throughout the day there will be opportunities to network and visit 24 exhibits with excellent information and handouts on clinical issues and innovative ideas on individualized care.

The conference program is designed for staff from Assisted Living Facilities, Facilities Serving People with Developmental Disabilities, Nursing Homes, and the Division of Quality Assurance staff. Additional information on the presenters, breakout sessions, and exhibits is available at [http://dhfs.wisconsin.gov/rl\\_dsl/Training/focus07.htm](http://dhfs.wisconsin.gov/rl_dsl/Training/focus07.htm). The FOCUS 2007 Conference brochure will be mailed out in early June, and online registration for the conference will be available at the same time.

### **Focus On Energy: Helping to Improve the Energy Efficiency of Nursing Homes**

Wisconsin's healthcare facility operators know that energy is an essential component to the delivery of quality patient services. These days, energy consumption accounts for a growing percentage of overall operating costs. Wisconsin healthcare facilities typically use more energy per square foot than many other commercial building types.

There are over 400 nursing homes located in the State of Wisconsin. As with other health care organizations, nursing homes are challenged to deliver quality care and maintain patient comfort while minimizing operating costs. Since nursing homes are typically considered continuous-care

facilities, one of the most cost-effective methods to reduce operating costs is to improve on-site energy efficiency.

In order to meet patient needs, many energy systems operate continuously year-round. Depending on the size of the facility, systems that may have savings opportunities include boilers, chillers, ventilation/heat recovery, pumps and fans, domestic hot water, and lighting. Controls and energy management systems can also play a significant savings role.

Focus on Energy is designed to assist healthcare facilities in controlling their energy costs. Energy management in health care today is both a challenge and an opportunity. The Focus on Energy program can help meet this challenge by assisting in the identification and implementation of energy efficiency opportunities.

Focus on Energy can assist your health care facility by:

- Collecting and evaluating energy usage and cost data;
- Developing a Practical Energy Management program;
- Analysis of project feasibility (unbiased third party review); and
- Financial assistance with energy efficiency project implementation.

### Focus On Energy web links

#### Healthcare:

<http://www.focusonenergy.com/page.jsp?pageId=1184>

#### Nursing Homes:

<http://www.focusonenergy.com/page.jsp?pageId=1186>

For additional information, please contact:

Rob Bedelis  
Healthcare Market Manager  
Focus On Energy  
403 West Foster Street  
Port Washington, WI 53074  
(888) 598-4376 toll-free  
(262) 284-3838  
(262) 284-4003 fax  
[rbedelis@franklinenergy.com](mailto:rbedelis@franklinenergy.com)

## Revising the Rule for Corporate Guardians

For the first time in 20 years the Department of Health and Family Services is in the process of revising Chapter 85, the administrative rules relating to non-profit corporation as guardian.

As we move through this rule-revision process, we want to help ensure that we are crafting a rule that reflects current standards of practice, as well as meets the needs of the clients served.

The first step was to get feedback from the 70 plus corporate guardianship agencies throughout the state. We partnered with the Wisconsin Guardianship Association, Coalition of Wisconsin Aging Groups and Disability Rights Wisconsin, Inc., to develop a survey that focused on key sections of the rule that have been identified for possible revision.

The survey asked questions about the clients served, agency staffing, contact with clients, and operational structure. More than 50 percent of the agencies responded to the survey and the information provided is already adding a valuable perspective to the Rule Revision Advisory Committee.

Below is information provided regarding the clients and number of wards served:

<b>Client Type</b>	<b>Percentage of Agencies</b>
Elderly	85 %
Persons who have a developmental disability	77 %
Persons who have a mental illness	57 %

<b>Number of Wards Served</b>	<b>Percentage of Agencies</b>
20 wards or less	52 %
21 through 99 wards	30 %
100 or more wards	17 %

**Staff at Agencies**

Another portion of the survey was devoted to finding out more about the staff working in corporate guardianship agencies. Fifty percent of the agencies responded that they employ full-time staff, while another 35 percent have part-time staff.

While drafting the rule, we are also taking into consideration that many small agencies are operated only by owners and have no paid employees. Fifteen percent of all agencies have part-time volunteers on staff.

All agencies provide initial training to their staff and 93 percent provide ongoing training. Fifty-five percent of agencies conduct criminal background checks on their paid staff, and 22 percent conduct these checks on volunteers.

**Contacts with Clients**

Respondents reported that staff provide in-person visits, as well as make telephone and e-mail contacts with their wards. Forty-two percent of agencies report visiting their wards at least once a month, while 27 percent of agencies see their wards at least once each quarter.

Thirty percent of agencies see their wards more than once each month, or more than once each quarter.

Staff members also attend meetings, participate in court proceedings, and monitor their wards living environment, employment site, and day programming. Additional activities include making

contact with their wards’ families, signing consents for treatment, and providing transportation to appointments and activities.

**Operational Structure**

The Advisory Committee also asked about agency operational structure in relationship to policies, procedures, and case files. Here are some key findings about organizational structure of agencies:

Policies in Place	Percentage of Agencies
Grievance procedures	40%
Abuse and neglect	32%
Advance directives, do not resuscitate orders, personal finances	30%
Adopted policies from National Guardianship Association’s Code of Conduct and Standards of Practice	12%

All agencies maintain case files for their wards that include case notes, medical records, legal documents, financial information, medication records; and personal records such as birth certificates, marriage licenses, and other correspondence.

As the Advisory Committee continues their work revising the rule, they will be able to use the information provided to help draft a rule that reflects current standards and plays an important role in protecting Wisconsin’s citizens.

**Fire Reporting**

Health care facilities that experience a fire or a similar event are required to report to the Department within a specified timeframe. Requirements are as follows:

- Hospitals, per section HFS 124.36 (11), within 72 hours;
- Nursing Homes, per section HFS 132.82(3)(e), within 72 hours;
- Facilities for the Developmentally Disabled, per section HFS 134.82(4)(e), within 72 hours;
- Community Based Residential Facilities, per section HFS 83.19(3)(a), within 3 working days; and
- Adult Family Homes, per section HFS 88.05(4)(e), within 72 hours.

Please use Fire Reporting form **OQA-2500** for such incidents. It is available at: <http://dhfs.wisconsin.gov/forms/OQAnum.asp>. Note that reporting can also be done via other means; such as a fire department report or on facility letter head, signed by the administrator. Reports can be **faxed to: (608) 267-7119**.

If you have any questions, contact David Soens, Fire Authority, at (608) 261-5993.

**Health Care Facilities Make the “80% Club”**

During the 2006-2007 influenza season, the Bureau of Communicable Diseases and Preparedness challenged Wisconsin hospitals and nursing homes to vaccinate at least 80% of their employees against influenza as a way to reduce transmission of influenza virus among their patients and residents. The Division is pleased to recognize the following health care organizations that achieved this important goal.

Area Nursing Home, Colfax
Ashland Health and Rehab Center, Ashland
Aspirus Lillian Kerr Health Care Center, Phelps
Birch Hill Care Center, Shawano
Bloomer Medical Center, Bloomer
Cedar Crossings Subacute Care, West Bend
Cedar Lake Health Care Center, West Bend
Cornell Area Care Center, Cornell
Countryside Home, Jefferson
Cumberland Extended Care, Cumberland
Cumberland Hospital, Cumberland
Door County Skilled Nursing Facility, Sturgeon Bay
Fairview Home, Mauston
Geneva Lake Manor, Lake Geneva
Grancare, Fond du Lac
Gundersen Lutheran Medical Center, La Crosse
Hayward Memorial Hospital, Hayward
Heritage Manor, Rice Lake
Heritage of Elmwood Nursing Home, Elmwood
Hetzel Care Center, Bloomer
Karmenta Center, Madison
L.O. Simenstad Nursing Care Unit, Osceola
Lakeview Medical Center, Rice Lake
Lincoln Village, Racine
Maplewood, Bloomer
Maryhill Manor, Niagara
Osceola Medical Center, Osceola
Osseo Medical Center, Osseo
Prairie du Chien Memorial Hospital, Prairie du Chien
Reedsburg Area Medical, Reedsburg
Sacred Heart Hospital, Eau Claire
Shawano Medical Center, Shawano
St Mary’s Hospital of Superior, Superior
St. Croix Regional Medical Center, St. Croix Falls
St. Joseph’s Hospital, Chippewa Falls
Stoughton Hospital, Stoughton
Tomah Memorial Hospital, Tomah
Upland Hills Health, Dodgeville
Wild Rose Community Memorial Hospital, Wild Rose

### Hospital Medical Orders

Please visit the link below to review DQA Memo 07-007, **Variance of Section HFS 124.12(5)(b)11, Wisconsin Administrative Code: Authentication of Physician Orders in Hospitals.**

[http://dhfs.wisconsin.gov/rl\\_dsl/Publications/07-004.htm](http://dhfs.wisconsin.gov/rl_dsl/Publications/07-004.htm)

The new variance, which updates the state requirements to more accurately reflect CMS regulations, states:

**Medical staff by-laws and rules shall include...a statement specifying categories of personnel duly authorized to accept and implement medical staff orders. All orders shall be recorded, dated, timed, and authenticated. All verbal and telephone orders shall be dated, timed, and authenticated in writing by a practitioner who is authorized to write orders by hospital policy within 48 hours of receipt.**

The new memo also discusses the authority to write, and the limitations on writing, orders by Advanced Practice Nurse Prescribers in hospitals.

### Revised Federal Death Reporting Form

In the DQA Quarterly Information Update of November, 2006, DQA reminded hospitals of the federal requirement to report to CMS all hospital patient deaths that occur while the patient is restrained or secluded for behavior management; and any death where it is reasonable to assume that a patient's death is the result of restraint or seclusion used for behavior management. The link to the federal Survey and Certification Letter 06-31 is:

[www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp](http://www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp). A Restraint/Seclusion Death Report Worksheet was attached to S&C 06-31.

CMS has now issued a more detailed Hospital Restraint/Seclusion Death Report Worksheet. The current Region 5 CMS contact for the reporting of seclusion/restraint deaths prior to the close of business on the business day following the day of the patient's death is:

**Maria Chickering, (312) 886-0326**

The revised Worksheet may be found at:

[http://dhfs.wisconsin.gov/rl\\_DSL/Hospital/HospitalForms.htm](http://dhfs.wisconsin.gov/rl_DSL/Hospital/HospitalForms.htm)

The differences between the prior and the current Worksheet are:

- The revised Worksheet asks for both the hospital CMS Certification Number (CCN, formerly known as the provider number) and the NPI Number (the new billing number).
- Name and phone number of person filing the report are requested.
- All patient deaths related to seclusion or restraint (including chemical restraint), not just those of patients restrained or secluded for behavior management, are addressed.

- Patient deaths while in S/R, within 24 hours of removal of S/R, and within one week, where S/R contributed to the patient's death, are addressed.
- More information is requested concerning drugs used as restraints, orders for S/R, details of S/R use, and monitoring methods.
- Details of orders and evaluation of patients who were secluded or restrained for violent/self-destructive behavior are addressed, but questions about prior deaths are dropped.

### Offsite Complaint Investigations

Because of the recent resignation of survey staff, staff on medical leave, and the increase in non-long term care workload, the Bureau of Health Services (BHS) has implemented an Offsite Complaint Investigation Procedure.

Effective February 22, 2007, BHS implemented the option of Offsite Complaint Investigations in cases where complaint allegations may not warrant an on-site investigation. This procedure is currently an option in BHS complaint-intake process. Surveyors will contact the provider, identify themselves, explain the purpose of the call, and request documentation/interviews to verify compliance or non-compliance. These types of complaints may be rare; however, we will avail ourselves of this option, when appropriate, to maximize our resources.

If you have questions, please contact Crenear Mims, BHS Bureau Chief, at (608) 243-2028 or (414) 227-4556.

### New Medicare Hospital Conditions of Participation For Transplant Centers (March 22, 2007)

The CMS issued a final rule today, setting forth the requirements that transplant centers must meet to participate in the Medicare program, which moves Medicare-covered transplant programs toward an outcome-focused system.

The rule contains comprehensive conditions of participation for transplant programs serving Medicare beneficiaries.

The Division of Quality Assurance (DQA) has not received any further directions on the survey process at this point. DQA will update providers as information becomes available.

### Nurse Aide Testing Update

The Department of Health and Family Services has approved a one-year contract extension with Promissor and their current subcontractor, the American Red Cross of the Susquehanna Valley. The current contract ends June 30, 2007. Survey results collected from over 1,600 nurse aides show that 85% agree or strongly agree that the testing experience was positive. The one-year extension will run from July 1, 2007, through June 30, 2008. Cost for the exam will increase to \$115. The Nurse Aide Testing Issues Stakeholder Workgroup will continue to meet with

Department staff to draft the requirements for a Request for Proposal (RFP) for nurse aide testing and registry services that will be issued in late 2007.

**Upcoming Division of Quality Assurance Educational Events**

Check out the Division of Quality Assurance online educational opportunity information website, at [http://dhfs.wisconsin.gov/rl\\_DSL/Training/index.htm](http://dhfs.wisconsin.gov/rl_DSL/Training/index.htm), for additional information on upcoming events, dates, locations, registration, and webcast viewing links. Below is a list of upcoming opportunities.

<b>Date and Location</b>	<b>Event Title</b>	<b>Target Audience</b>
May 10, 2007 Lodge at Cedar Creek, Rothschild, WI	Minimum Data Set (MDS) Automation Training- Nursing Homes	Nursing home staff who have responsibility for transmission of MDS data including: technology staff, directors of nursing, staff nurses, social workers, administrators, health information professionals, and quality assurance staff
August 7, 2007 Stevens Point Holiday Inn Hotel and Convention Center, Stevens Point, WI	FOCUS 2007 Special Session - Zeroing in on Abuse Prevention	Caregivers, personal care workers, supervisors and managers who care for vulnerable adults in Assisted Living Facilities, Nursing Homes, Facilities Serving People with Developmental Disabilities, Home Health Agencies, Hospices, Hospitals and Division of Quality Assurance (DQA) Staff
August 8, 2007 Stevens Point Holiday Inn Hotel and Convention Center, Stevens Point, WI	FOCUS 2007 Conference- Coming Together: Mapping the Journey to Excellence	Caregivers, supervisors, managers, and administrators in Assisted Living Facilities, Nursing Homes, and Facilities Serving People with Developmental Disabilities and Ombudsmen and DQA surveyors, investigators and program staff
August 2007 Madison, WI Date to be determined	Outcome and Assessment Information Set (OASIS) Automation Training - Home Health	Home health agency staff who have the responsibility for transmission of OASIS data including: directors of nursing, staff nurses, data entry and technical personnel, and quality improvement staff.
September 12, 2007 Appleton, WI Location to be determined	Minimum Data Set (MDS)/Resident Assessment Instrument (RAI) Basic Training - Nursing Homes	Nursing home staff including; clinical nursing staff, directors of nursing, social workers, dietetic professionals, activity directors, rehabilitation therapists,

Date and Location	Event Title	Target Audience
		pharmacists, administrators, health information professionals and quality assurance monitors. Also, hospice staff who interface with nursing homes and want information about the RAI process and MDS.
October 2007 Madison, WI Location to be determined	Outcome and Assessment Information Set (OASIS) Basic Training – Home Health	Home health agency staff new to using OASIS, including: administrators, directors of nursing, staff nurses, therapists, data entry and technical personnel, OASIS team members and quality improvement staff
October 25, 2007 American Family Insurance Training Center Madison, WI	Division of Quality Assurance Joint Industry/Surveyor Hospital Conference	Staff from all hospital types and DQA surveyors and program staff.
<b>DQA WEBCASTS</b>		
*Webcast Date	Event Title	Target Audience
May 15, 2007 (webcast will be available for viewing up to one year after this date)	The Importance of Good Oral Health Care for the Elderly	Health care staff that work in Assisted Living Facilities, Nursing Homes, Facilities Serving People with Developmental Disabilities, Ombudsmen and DQA surveyors, and program staff
Late Spring 2007	Mental Health 2-part webcast series: Part One: Serious and Persistent Mental Illness Part Two: Dementia and Chronic Mental Illness	Health care staff and Division of Quality Assurance staff that work with people with persistent Mental Illness
Fall 2007	Identifying and Responding Appropriately to Resident-to-Resident Abuse, including Sexual Assault, in Facility Setting (This will include a series of 3, one-hour webcasts)	Health care staff who work in Assisted Living Facilities, Nursing Homes, Facilities Serving People with Developmental Disabilities, Home Health Agencies, Hospices, Hospitals, and Ombudsmen, DQA surveyors, investigators, and program staff

\*Webcasts are available for online viewing up to one year after the date of the live broadcast. For handouts and the online link to view a webcast please go to: [http://dhfs.wisconsin.gov/rl\\_DSL/Training/index.htm](http://dhfs.wisconsin.gov/rl_DSL/Training/index.htm).

**Recent DQA Numbered Memos**

MEMO	TITLE	PROVIDERS AFFECTED
07-001	<a href="#">RCRS Regional Boundaries and Assignments, Effective 1/21/07</a>	Nursing Homes, FDDs
07-002	<a href="#">Certification of Waivers and Variances Submitted to Program Certification Unit Memo</a>	Program Certification
07-003	<a href="#">Norovirus Recognition, Transmission Prevention, and Reporting</a>	All Providers
07-004	<a href="#">Variance of Section HFS 124.12(5)(b)11, WI Adm. Code: Authentication of Physicians Orders in Hospitals</a>	Hospitals
07-005	<a href="#">Anniversary of the Wisconsin Caregiver</a>	All Providers

Access these memos via [http://dhfs.wisconsin.gov/rl\\_DSL/Publications/BQAnodMems.htm](http://dhfs.wisconsin.gov/rl_DSL/Publications/BQAnodMems.htm), or from individual providers' publications pages via [http://dhfs.wisconsin.gov/rl\\_DSL/](http://dhfs.wisconsin.gov/rl_DSL/).

**National Provider Identifier Number**

Within the next month the following providers will be receiving a form from DQA requesting their provider NPI number:

- X-RAY;
- Nursing Homes, NF only;
- ICF/MRs;
- ASCs; And
- Medicaid only HHAs.

This number is being requested, because there is no other source for capturing this data for Medicaid providers; and it is required for the federal ASPEN system. Therefore, CMS is asking the State Agencies to gather this information. If you receive one of these notices, please fill in your NPI number(s) and return it to:

Julie Clark  
 Division of Quality Assurance, Room 950  
 1 W. Wilson St., Box 2969  
 Madison, WI 53701-2969

### CMS Webcasts January-March 2007

Listed below are the CMS webcasts that were produced between January-March, 2007. They will be available for one year after the date of broadcast. You may access these webcasts at <http://surveyortraining.cms.hhs.gov/>

- 1/26/07 How to be an Effective Team
- 3/9/07 Being an Effective Witness
- 3/16/07 How to Enhance the Quality of Dining Assistance in Nursing Homes
- 3/23/07 Improving Nursing Home Quality and Payment

### Latest CMS Survey & Certification Letters

Listed below are selected Survey and Certification (S&C) Letters distributed by CMS during the last quarter. Titles pertaining only to state agency operations are omitted. If you have questions about individual letters, contact Jan Eakins of DQA at (608) 266-2055, or email her at [eakinjl@dhfs.state.wi.us](mailto:eakinjl@dhfs.state.wi.us). Please note that the CMS Internet site for all S&C memos is [www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp](http://www.cms.hhs.gov/SurveyCertificationGenInfo/PMSR/list.asp).

TITLE	Memo #	Release Date
<a href="#">Hospitals – Publication of the Hospital Condition of Participation: Requirements for History and Physical Examinations; Authentication of Verbal Orders; Securing Medications; and Post-anesthesia Evaluations Final Rule</a>	07-13	1/26/07
<a href="#">Electronic Signature Guidance in Inpatient Rehabilitation Facilities (IRFs)</a>	07-14	1/26/07
<a href="#">Psychiatric Residential Treatment Facilities (PRTF) Clarification</a>	07-15	2/16/07
<a href="#">Clarification of Provider Number Nomenclature</a>	07-16	3/2/07

### Nursing Homes & Culture Change

On December 21, 2006, CMS issued Survey & Certification (S&C) Letter number 07-07, titled Nursing Home Culture Change Regulatory Compliance Questions and Answers. This memo provided State Survey Agencies and CMS regional offices with:

- o Responses CMS made to questions concerning compliance with health and life safety code requirements in nursing homes that are changing their cultures and adopting new practices;
- o A summarized question and answer document from a June, 2006 CMS Pic-Tel conference with leaders of the Green House Project; and
- o Information about an upcoming series of 4 CMS culture change satellite webcasts.

This S&C Letter can be viewed as a PDF file at the Internet site [www.cms.hhs.gov/medicaid/survey-cert/letters.asp](http://www.cms.hhs.gov/medicaid/survey-cert/letters.asp).

## **Nursing Homes & Government Performance Results Act (GPRA) Goals**

On October 14, 2004, CMS issued Survey & Certification (S&C) Letter number 05-01, titled Guidance on Working with Quality Improvement Organizations. This letter provided further guidance on CMS's expectation that State Survey Agencies (SSA) work with Quality Improvement Organizations (QIOs) in improving care for nursing home residents. This letter also articulated CMS' two Government Performance Result Act (GPRA) goals for nursing homes, i.e., reducing the number of restraints used and reducing the number of pressure ulcers in nursing homes. This S&C Letter can be viewed as a PDF file at the Internet site [www.cms.hhs.gov/medicaid/survey-cert/letters.asp](http://www.cms.hhs.gov/medicaid/survey-cert/letters.asp).

One of the primary ways that CMS has promoted the reduced use of restraints and a reduction in number of pressure ulcers is through the annual survey process. State and CMS surveyors who conduct annual inspections of nursing homes will focus on these areas during every annual survey. In July 2006, CMS Region 5 provided the Division of Quality Assurance (DQA) with regional GPRA goals for pressure ulcers and restraints. The CMS Regional GPRA goal for pressure ulcers is 7.4%. The CMS Regional GPRA goal for restraints is 4.5%. However, Wisconsin's average percentage of restraints is 2.6%. Therefore, prior to each nursing home's annual survey, state surveyors review each nursing home's Quality Measure/Quality Indicator Reports to determine if the nursing home's "observed percent" of pressure ulcers is 7.4% or above, and whether the "observed percent" of restraints is 2.6% or above. The survey team must target these areas for review for any nursing home whose "observed percent" is at or above these thresholds. The DQA encourages all nursing homes to routinely review their Quality Measure/Quality Indicator Reports with their quality assurance committee to determine if their "observed percent" is at or above the thresholds for pressure ulcers and restraints. If you have questions about GPRA goals, contact Vicky Griffin, WI GPRA Goal Coordinator, at (414) 227-4705, or email [griffvl@dhfs.state.wi.us](mailto:griffvl@dhfs.state.wi.us).

## **MDS and OASIS Broadband Connection**

Nursing homes and home health agencies will soon have the capability of using broadband connectivity to transmit MDS and OASIS assessment records to the CMS State MDS and OASIS System. The use of broadband, instead of the currently required dial-up connection, will become available in phases beginning this summer through the end of the year.

Broadband provides a high-speed connection for faster submissions and downloads. Links allowing you to download a new AT&T dialer and detailed installation instructions will be posted on QIES Technical Support Office (QTSO) website at: [www.qtso.com](http://www.qtso.com). The new dialer will support either a high-speed broadband or dial-up connection.

Start planning now to replace your old dial-up service with high-speed broadband so that you may take advantage of this new feature. Watch for alert messages on the QTSO website and the

CMS State MDS and OASIS Welcome pages for updates as additional information becomes available.

## MDS Automation Provider Training

The Division of Quality Assurance will be presenting a training opportunity for nursing home staff who are involved with the transmission of MDS assessment records to the CMS State MDS System. This program will be held on May 10, 2007, at the Lodge At Cedar Creek in Rothschild.

Training brochures and registration forms have been mailed to all nursing homes. The training brochure and online registration are available on the Division of Quality Assurance online educational opportunity information website at [http://dhfs.wisconsin.gov/rl\\_DSL/Training/index.htm](http://dhfs.wisconsin.gov/rl_DSL/Training/index.htm).

## OASIS M0072 Primary Referring Physician ID Entries

CMS requests that State Agencies direct home health agencies to begin entering the physician's NPI number in OASIS Item M0072 – Primary Referring Physician ID beginning May 23, 2007.

To accomplish this, home health agencies should begin gathering NPI numbers from physicians to be entered into OASIS Item M0072 for any assessment completed on or after May 23, 2007. Agencies should also begin working with their software vendors to determine if any changes are required to accommodate this.

The OASIS Data Specifications Version 1.50 and HAVEN 7.1 currently provide 10 spaces for this OASIS item. This space is sufficient to accommodate the Physician's NPI number.

If you have any questions concerning this information, please contact Chris Benesh at [benesce@dhfs.state.wi.us](mailto:benesce@dhfs.state.wi.us), or call 608-266-1718.

## List Of Sanitizers Approved By The Department

Facilities and surveyors should be aware that sanitization is a critical control process for dishwashing. Sanitization can occur by either a hot water method (180 ° generally or 165° in a stationary rack, single temperature machine) or by chemical sanitizer solutions. This article is a reminder that chemical sanitizers are required to be approved by the Department, as indicated in the following Administrative codes:

- Nursing Home Administrative Code HFS 132.63(8);
- Facilities Serving People with Developmental Disabilities Administrative Code HFS 134.64(8); and
- Adult Day Care Certification Standards III.A.(6)(c) and (7)(b).

The following regulations do not specify that sanitizers be approved by the Department.

- Hospitals Administrative Code HFS 124; and
- Community Based Residential Facilities Wisconsin Administrative Code HFS 83.64.

The following regulations do not include language for dishwashing:

- Residential Care Apartment Complex Wisconsin Administrative Code HFS 89; and
- Adult Family Homes HFS 88.

The Food Safety and Recreational Health Unit (FSRH) in The Division of Public Health, Department of Health and Family Services (DHFS), is responsible for testing efficacy of food service sanitizer products submitted for testing by manufacturers. The FSRH develops and maintains a list of approved chemical sanitizers that is an excellent resource and recognized standard of practice. This is the approval list that Wisconsin regulated entities, such as licensed restaurants, schools, and healthcare facilities should use when required to do so. The list is updated three to four times a year. The current edition is maintained on the DHFS web site at: <http://dhfs.wisconsin.gov/fsrl/cert/index.htm>.

Products that have bleach (sodium or calcium hypochlorites) as an active ingredient are not included on the approved list, since bleach used in proper concentration is recognized as a final rinse sanitizer.

## **Revisions to the RAI Manual 2.0**

The March 2007 Revisions to the RAI Manual 2.0 are available on the CMS MDS 2.0 website. Updates can be viewed and downloaded at <http://cms.hhs.gov/> (alternate address [www.cms.hhs.gov/nursinghomequalityinits/20\\_nhqimds20.asp?](http://www.cms.hhs.gov/nursinghomequalityinits/20_nhqimds20.asp?)).

## **New Online Nursing Home Staffing Survey**

In lieu of the Annual Survey of Nursing Homes previously administered by the DHFS Bureau of Health Information and Policy, the Division of Quality Assurance is conducting an abbreviated online survey of federally-certified skilled nursing facilities and facilities for the developmentally disabled to gather data related to staffing levels, staff turnover, and staff retention. This survey will be available on the DQA website beginning May 1, 2007. Facilities will have until May 31, 2007, to complete the survey. Please be aware that completion of the survey is required under the terms of Wisconsin Statutes 50.095(2), which authorizes the Department to collect information needed to prepare the annual nursing home Consumer Information Report. (State licensed-only facilities are not subject to this requirement and do not need to complete the survey.)

Facilities can access the survey by going to the DQA home page at [http://dhfs.wisconsin.gov/rl\\_DSL/bqa.htm](http://dhfs.wisconsin.gov/rl_DSL/bqa.htm) and following the link for the Nursing Home Staffing Survey. Facility staff completing the survey will need to log in using the alphanumeric facility

login ID (WI\*\*\*\*) assigned to their facility for the purpose of submitting MDS assessments. Respondents should also have available the 2-, 3-, or 4-digit license number assigned to their facility by DQA. This number should be used as the password when logging in to the survey tool, and is also a required item in the survey itself. (NOTE: Facilities for the Developmentally Disabled, which are not assigned MDS login IDs, should use their facility license number when prompted for both the username and password).

DQA appreciates the cooperation of facilities in providing this information, and hopes the online survey tool is a convenient means for collecting it. If problems are encountered or questions arise during completion of the survey, please contact Richard Betz, DQA Information Resources Supervisor, at 608-264-9898, or Chris Benesh, Research Analyst, at 608-266-1718.

## **Administrative Rules Update**

### **HFS 83 - Community Based Residential Facilities**

The HFS 83 Rewrite Workgroup completed the initial draft of the proposed rules for Chapter HFS 83. The goal of the workgroup was to eliminate excessively prescriptive language and improve readability and organization. The proposed rule clarifies medication administration requirements and revises staff training standards, establishing a more cost-effective system for providers. Currently, the proposed rule is under review by the DHFS Office of Legal Counsel. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

### **HFS 83 - Community Based Residential Facilities, HFS - 88 Adult Family Homes, HFS 89 - Residential Care Apartment Complexes, HFS 132 - Nursing Homes, HFS 134 - Facilities for the Developmentally Disabled**

On December 15, 2006, the Wisconsin Administrative Register published a Statement of Scope of proposed rules to amend Chapters 83, 88, 89, 132 and 134 relating to involuntary administration of psychotropic medication. 2005 Wisconsin Act 264 created s. 50.02 (2) (ad), Stats., which directed the Department to promulgate rules that require the above-named facilities to provide information to determine a facility's compliance with s. 55.14, Stats. The Advisory Committee met and reviewed the proposed rule language drafted by Department staff and provided comments. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

### **HFS 85 - Non-Profit Corporation as Guardian**

On September 19, 2006, the Wisconsin Administrative Register published a Statement of Scope of proposed rules to amend Chapter HFS 85, Non-profit Corporation as Guardian. Through this initiative, the Department proposes to make the rule reflect current standards of practice; recognizing the increase in the number of adults in need of guardianship, and the increase in the complexity of their needs. An Advisory Committee, including advocates, providers, registers in probate and county adult protective services staff, began meeting regularly to review proposed rule language and make recommendations for revision to the rule. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

**HFS 124 - Hospitals**

On April 1, 2005, the Wisconsin Administrative Register published a Statement of Scope of proposed rules to amend Chapter 124. The Department is planning to update Chapter HFS 124 to eliminate overly prescriptive regulations, clarify the Department's enforcement authority, and make the rule more consistent with the federal Medicare requirements. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

**HFS 129 - Certification Programs for Training and Testing Nurse Assistants, Home Health Aides and Hospice Aides**

On March 31, 2006, the Wisconsin Administrative Register published a Statement of Scope of proposed rules to amend Chapter HFS 129. Through this initiative, the Department proposes to make the rule more consistent with federal regulations, to include the feeding assistant and medication aide training and testing program requirements; and to reflect the Department's decision to standardize administration and operation of nurse aide competency evaluation by contracting for this service. An advisory committee, including advocates, educators, association representatives, workforce development specialists, and representatives from private industry; meets regularly to review the proposed revisions to the rule and make changes, as necessary. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

**HFS 132 - Nursing Homes**

DQA drafted proposed revisions to HFS 132 to eliminate duplicative state regulations that are already contained in other State law or federal nursing home regulations. The intent is to streamline the code by eliminating regulations that provide unnecessary specificity, and to adopt the applicable federal regulatory language. Public hearings were held the last week of July in Milwaukee, Eau Claire, Rhinelander, Green Bay, and Madison. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

**HFS 133 - Home Health Agencies**

The HFS 133 Rewrite Workgroup, working with the advisory committee (including providers, consumers and association representatives) has completed the draft of the proposed rules for Chapter HFS 133. The goal of the committee was to make the rule consistent with federal regulations and to reflect current terminology and practice. The Rule Summary and draft rule are currently under review by the DHFS Office of Legal Counsel. For more information, you may view the Statement of Scope on the Wisconsin Administrative Rules website at <http://adminrules.wisconsin.gov/>.

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