

State Survey Agency Implementation of the Quality Indicator Survey (QIS)

**Colorado Department of Public Health and
Environment
Centers for Medicare & Medicaid Services
Nursing Home Quality, LLC**

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Agenda

1. Welcome and Introductions –Katherine Lochary, CMS
2. Background and Development of the Quality Indicator Survey (QIS) – Thomas Kress, CMS
3. National QIS Training Process – Katherine Lochary, CMS
4. Description and Timing of State QIS Implementation – Jennifer McCants, LTC Program Manager, Health Facilities and Emergency Medical Services Division, Colorado Department of Public Health and Environment, QIS State Lead
5. Comparison of the QIS and Traditional Survey Process – Robin Harper, Director of Training, Master QIS Trainer, Nursing Home Quality, LLC
6. QIS Overview– Robin Harper
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)




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
- QIS Brochure (S&C 08-21)
- National Implementation Priority Order (S&C 09-50)




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Training Requirements for Registered QIS Surveyor

- Prerequisites
 - Proficiency with tablet PC functions and computer skills
 - Completion of certain Web based lessons
- Completion of classroom training
- Participation in mock training survey
- Participation in 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 Implementation

- Sixteen currently participating QIS States
 - CT, FL, KS, MN, NM, LA, OH, NC, WV, WA, MD, DE, ME, VT, GA, AZ
 - Surveys of record to date: 4,160



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Description of State-specific Implementation Plan and Timing

Jennifer McCants
LTC Program Manager, QIS State Lead
Health Facilities and Emergency Medical Services Division
Colorado Department of Public Health and Environment
Telephone: (303) 692-2899
Email: jmccants@smtpgate.dphe.state.co.us



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Colorado Department of Public Health and Environment's QIS Webpage

Colorado Stakeholders can find QIS Resources and Updates at:
<http://www.cdphe.state.co.us/hf/ncf/ColoradoQIS.htm>



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Quality Indicator Survey: Comparison with Traditional Survey and Overview

Robin Harper
 Director of Training
 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>
Information recorded on paper throughout process; computers are used for Statement of Deficiencies (CMS-2567)	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




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Off-Site Preparation

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

<p><u>Traditional</u></p> <ul style="list-style-type: none"> ➤ Roster/Sample Matrix Form CMS 802 	<p><u>QIS</u></p> <ul style="list-style-type: none"> ➤ Alphabetical resident census with room numbers/units ➤ List of new admissions over the last 30 days
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Initial Tour

<p><u>Traditional</u></p> <ul style="list-style-type: none"> ➤ Gather information about pre-selected residents and identify new concerns ➤ Determine whether pre-selected residents are still appropriate 	<p><u>QIS</u></p> <ul style="list-style-type: none"> ➤ Brief overall impression of the facility, the residents and the staff ➤ Not intended for sample selection or supplementation
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Sample Selection

<p><u>Traditional</u></p> <ul style="list-style-type: none"> ➤ Sample size determined by facility census ➤ Residents selected based on QM/QI percentiles and issues identified offsite and on the initial tour 	<p><u>QIS</u></p> <ul style="list-style-type: none"> ➤ Stage 1 sample size: <ul style="list-style-type: none"> ➤ 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

<p><u>Traditional</u></p> <ul style="list-style-type: none"> ➤ Phase I: focused & comprehensive reviews ➤ Phase II: focused reviews 	<p><u>QIS</u></p> <ul style="list-style-type: none"> ➤ Stage 1: preliminary investigation ➤ Stage 2: in-depth investigation of triggered concerns from Stage 1
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QIS Process Made Easy Two Stages: Three Steps




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Two Stages of QIS

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

Stage II: 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



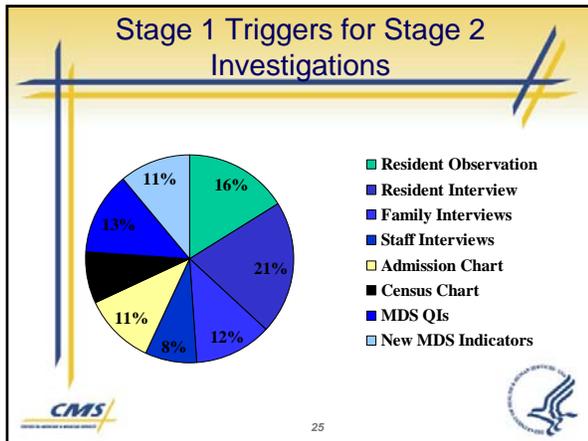

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QIS Stage 1

- Sampling - Random census (40) and admission (30) samples
- Investigation - Structured resident, family, and staff interviews; resident observations; chart reviews
- Synthesis - 128 resident-centered and 34 facility-level Quality of Care and Quality of Life Indicators (QCLIs) to identify care areas that exceed national thresholds




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Surveyor-Initiated Sample

Surveyors can initiate and 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.

CMS 26

- ### QIS Facility Tasks
- Completed on every survey:
 - Liability Notices & Beneficiary Appeal Rights Review
 - Dining Observation
 - Infection Control and Immunization
 - Kitchen/Food Services
 - Medication Administration and Drug Storage
 - QAA
 - Resident Council President Interview
 - Completed if triggered:
 - Abuse Prohibition Review
 - Admission, Transfer, and Discharge Review
 - Environmental Observations
 - Personal Funds Review
 - Sufficient Nursing Staff Review
- CMS 27

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 Information

QIS Satellite Broadcast:
<http://surveyortraining.cms.hhs.gov/pubs/VideoInformation.aspx?cid=1082>

QIS Resource Manual:
http://www.uchsc.edu/hcpr/qis_manual.php

QIS Electronic Forms and Worksheets:
http://www.uchsc.edu/hcpr/qis_forms.php

QIS Brochure:
<http://www.cms.gov/SurveyCertificationGenInfo/downloads/SCLetter08-21.pdf>




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