

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

Delaware State Survey Agency  
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) – Karen Schoeneman, CMS
3. National QIS Training Process – Katherine Lochary, CMS
4. Description and Timing of State QIS Implementation – Robert Smith, Delaware Div. of Long Term Care Residents Protection
5. QIS Overview – Dr. Andrew Kramer, University of Colorado Denver, Division of Health Care Policy and Research
6. Comparison of the QIS and Traditional Survey Process – Dr. Andrew Kramer
7. Impact of QIS on Survey Process – Dr. Andrew Kramer
8. Questions and Answers

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## What is the QIS?

The QIS is an approved Federal process to survey nursing homes developed to increase consistency and reliability in the survey process.

- Uses customized software on tablet PCs to guide surveyors through a systematic review of regulatory requirements using observation, interview, and record review
- Preliminary surveyor findings are combined with MDS data to provide a set of quality of care and life indicators (QCLIs) in Stage I of the QIS
- If QCLIs exceed national thresholds, a comprehensive Stage II investigation is conducted in identified care areas using facility level tasks and critical element pathways

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## What Does the QIS Provide?

The QIS provides:

- Structured approach to surveys resulting in more consistent results
- Larger and more diverse samples
- Use of technology to support the survey
- Enhanced documentation

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## What QIS Is Not

QIS Does Not Represent:

- Change in Social Security Act
- Change in Regulations (e.g., Participation Requirements)
- Change in Interpretive Guidance
- Change in provider communication with State Survey Agency
- Change in enforcement process

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## QIS Development

QIS History -

- Development (1992-2005)
- Demonstration (2005 – 2007)
  - Limited demonstration (2 teams per State)
- Evaluation of QIS in five States
  - KS, OH, CT, LA, and CA
- Develop and refine national training model in three States
  - FL, CT, and KS

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## CMS Issued Guidance

- Federal Minimum Qualification Standards for Long Term Care Registered QIS Surveyors and CMS-Certified QIS Trainers for States Implementing the QIS Process (S&C 08-14)
- Available at:  
<http://www.cms.hhs.gov/surveycertificationgeninfo/downloads/SCLetter08-14.pdf>

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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 two successful compliance assessments
- 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 Training Models

To support States, there are two training models based on surveyor numbers

- For 25 + surveyors - Contractor conducts one round of surveyor training (two survey teams) and then later returns to train four State trainers from Registered QIS Surveyors
- For less than 25 surveyors - Contractor conducts two rounds of surveyor training (four survey teams) and later returns to train two trainers when there is a need to train additional surveyors in QIS (“Turn-Key”)

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## QIS Implementation

- National QIS implementation underway
- Eleven currently selected QIS States
  - QIS is fully implemented in CT
  - QIS training progressing in FL, KS, LA, OH, MN, NC, NM, WV, WA, and MD

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## QIS Implementation Status (05/09)

- Surveys of Record: 1,782
- Registered QIS Surveyors: 393
- CMS Certified QIS Trainers: 40
- CMS RO Registered QIS Surveyors: 15 in six CMS Regions

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## Description of State-specific Implementation Plan and Timing

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DE Division of Long Term Care Residents Protection  
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## Quality Indicator Survey: Overview, Comparison with Traditional Survey, and Impacts

Andrew Kramer, MD  
Professor of Medicine, Division of Health Care Policy and Research, University of Colorado Denver  
President and CEO, Nursing Home Quality, LLC

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## QIS Process Made Easy Two Stages: Three Steps

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### Two Stages

- Stage I: Preliminarily investigate regulatory areas and determine resident care areas/facility practices for in-depth Stage II review
- Stage II: Determine if deficient practice, and document deficiencies including F tags, scope and severity

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### Three Steps in Each Stage

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

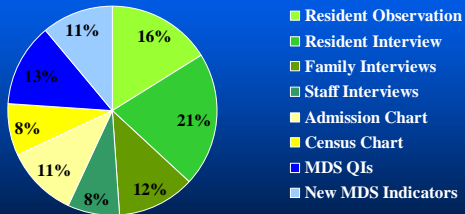
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### Stage I

- Sampling - Large random census (40) and admission (30) samples
- Investigate - Structured resident, family, and staff interviews; resident observations; chart reviews
- Synthesis - 128 resident Quality of Care and Life Indicators (QCLIs) compared with thresholds to determine Stage II areas for in-depth investigation

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## Stage I Triggers for Stage II Investigations



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## Stage II

- Sampling – Computer-generated based on Stage I triggers and complaints
- Investigation – Specific Critical Element Pathway, triggered facility task, or interpretive guidance and general Critical Element Pathway
- Synthesis – Determine non-compliance, scope and severity

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## Facility Level Investigations

- Facility level tasks done on every survey:
  - Demand Billing
  - Dining
  - Infection Control
  - Kitchen/Food Services
  - Medication Administration
  - QAA
  - Resident Council President Interview
- Facility level task if triggered by Stage I findings:
  - Abuse Prohibition Review
  - Admission, Transfer, and Discharge Review
  - Environment
  - Resident Funds
  - Inadequate Staff

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## Surveyor Initiative

At any time in the process, surveyors can initiate investigation of care issues for any resident. Because of the large QIS samples, surveyor initiated investigations are a minor part of the process.

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## Comparison of QIS and Traditional Process

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## Off-Site

- | <u>Traditional</u>                   | <u>QIS</u>                             |
|--------------------------------------|--|
| ➤ Review the OSCAR 3 and 4 Reports   | ➤ Review OSCAR 3 Report                |
| ➤ Review the QI/QM Reports           | ➤ Review complaints to be investigated |
| ➤ Pre-Select a sample based on above | ➤ Download MDS data onto tablet PCs    |
|                                      | ➤ Random selection of Stage I samples  |

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## Entrance Information

### Traditional

- Quality Measure/Quality Indicator Report
- Roster Sample Matrix Form (CMS 802)

### OIS

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

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## Tour

### Traditional

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

### OIS

- No sample selection
- Initial overview of facility

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## Sample Selection

### Traditional

- Reviews and Sample pre-selected based on facility's flagged QIs
- Sample size determined by facility census

### OIS

- Three samples:
  - MDS Admission (30)
  - Census (40)
- Random Selection
- Surveyor-initiated sample

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## Survey Structure

### Traditional

- Phase I = focused & comprehensive reviews
- Phase II = focused reviews

### OIS

- Stage I = preliminary investigations of regulatory areas
- Stage II = in-depth investigation of triggered Care Areas based on Stage I findings

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## Review Process

### Traditional

- Surveyors complete Resident Review
- Includes selected investigative protocols for key regulatory tags

### OIS

- Consistent and structured interviews, observations, and clinical record review in Stage I
- Specific protocols for Stage II review and facility tasks

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## Automation

### Traditional

Information recorded on paper throughout process; computers are used only for Statement of Deficiencies

### OIS

Each team member uses a tablet PC to record findings that are synthesized and organized by computer: findings uploaded to 2567

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## Group Interview

### Traditional

- Meet with Resident Group/Council
- Includes resident council minutes review to identify concerns

### QIS

- More individual resident interviews
- Interview with Resident Council President or Representative

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## Impacts of QIS

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## Citations

- Overall about 40% of facilities had fewer or the same number of citations
- Zero deficiencies still occur
- 2 more citations on average
- Increases in specific regulatory areas
- Citations well documented, less frequently challenged and overturned in IDR
- Certain district offices with low citation rates increased more than district offices with high rates

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## Examples of Deficiencies Cited at Higher Rate in QIS

- Residents Rights
  - Inform resident of services/rights (F156)
- Quality of Life
  - Notice before room change (F247)
  - Activity program meets individual needs (F248)
  - Choices (F242)
- Resident Assessment
  - Comprehensive assessments (F272)

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## Examples of Deficiencies Cited at Higher Rate in QIS

- Quality of Care
  - Provide necessary care for highest practicable well being (F309)
  - Drug regimen is free from unnecessary drugs (F329)
  - Maintain nutritional status (F325)
  - ADL Care Provided for Dependent Residents (F312)
- Nursing Services
  - Nurse Staffing (F356)
- Dental Services (F411,412)

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## Survey Length Related to Number and Severity of Citations

- Takes more time during training period in first couple months
- Surveys range in length from 3 days to more than a week
- Generally completed within 1 week
- Some state variation still exists in average duration

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## Additional Information

**QIS Resource Manual:**

[http://www.uchsc.edu/hcpr/qis\\_manual.php](http://www.uchsc.edu/hcpr/qis_manual.php)

**QIS Electronic Forms and Worksheets:**

[http://www.uchsc.edu/hcpr/qis\\_forms.php](http://www.uchsc.edu/hcpr/qis_forms.php)

**QIS Brochure:**

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

**QIS Training Process:**

<http://www.cms.hhs.gov/surveycertificationgeninfo/downloads/SCLetter08-14.pdf>