



Twogether Consulting, Limited

presents

“Changes In The HCS Survey Process”

**Waiver Survey & Certification:
What Do They Do?**

- **Waiver Survey and Certification (WS&C)** is a unit of Regulatory Services at the Department of Aging and Disability Services (**DADS**).
- WS&C conducts certification reviews for:
 - Home and Community-based Services (HCS) and
 - Texas Home Living (TxHmL) waiver programs, and
 - residential reviews for host home/companion care and three- and four-person homes in the HCS program.
- WS&C also reviews:
 - complaints and deaths in the HCS and TxHmL waiver programs
 - follows up on abuse, neglect and exploitation (ANE) allegations related to individuals served in the HCS and TxHmL waiver programs.

When Can A Survey/Review Happen?

- In accordance with Title 40, Texas Administrative Code (TAC), Chapter 9, [Subchapter D](#), §9.171(a), all **HCS program providers must be in continuous compliance with the HCS Program certification principles.** (See §§9.172-174 and §§9.177-180.)
- In accordance with 40 TAC, Chapter 9, Subchapter D, §9.171(e), WS&C may conduct announced or **unannounced reviews of HCS program providers at any time** to ensure compliance with the HCS program certification principles

Types of Certification Reviews

- **Provisional Review**
- **Initial Certification Review**
- **Annual Certification Review**
- **Concurrent Review**
- **30 Day Follow-Up Review, Vendor Hold and Denial of Certification**
- **Intermittent Reviews**

Types of Certification Reviews

- Waiver Survey and Certification (WS&C) conducts on-site certification reviews of HCS program providers, **at least annually**, to evaluate evidence of the program provider's compliance with certification principles.
- **Provisional Certification**
 - A prospective provider for the HCS Program must complete an application packet and attend provider applicant training to obtain a contract with DADS. If the applicant passes a competency exam at the end of the training, DADS provisionally certifies the contract.

Types of Certification Reviews

- **Initial Certification/Review**
 - After a program provider has obtained a provisional contract, WS&C conducts an initial on-site certification review within 120 days after the date DADS approves the enrollment or transfer of the first individual to received HCS Program services from the provider under the provisional contract.
- **Annual Certification/Review**
 - An HCS program provider's certification period is for no more than 365 calendar days and must be renewed annually prior to the expiration of the current certification period.

Types of Certification Reviews

- **Concurrent Review**

- A concurrent review is conducted if principles of noncompliance were cited during the previous review visit and not corrected prior to the exit conference. This review may be in conjunction with an annual certification or intermittent review. The provider must be in compliance with the previously cited principles by the end of the current certification period in order to be re-certified. If principles cited during the previous review remain in noncompliance at the time of the exit conference of the following review, the program provider must submit a corrective action plan with supporting evidence that these principles have been corrected.

Types of Certification Reviews

- **30 Day Follow-Up Review, Vendor Hold and Denial of Certification**

- If WS&C determines at the end of a review that a program provider is in noncompliance with one or more of the certification principles that results in a condition of a serious nature, WS&C will require the program provider to complete plans of correction within 30 calendar days after the date of the review exit conference. An onsite follow-up review will be conducted after the 30-day period to determine if the program provider completed the corrective action.
- If the program provider fails to correct all principles of noncompliance remaining from the 30-day follow-up review, WS&C will recommend a vendor hold be imposed.
- If a vendor hold is imposed for a program provider with a provisional contract, DADS will initiate termination of the program provider's contract in accordance with Texas Administrative Code (TAC) [§49.534](#), Termination of Contract by DADS.
- If a vendor hold is imposed for a program provider with a standard contract, WS&C will conduct a follow-up review to determine if the program provider completed the corrective action required to release the vendor hold. If the program provider completed the corrective action, DADS will release the vendor hold. If the program provider has not completed the corrective action, WS&C will recommend denial of certification and termination of contract.
- See 40 TAC, Chapter 9, [Subchapter D](#), §9.185, Program Provider Compliance and Corrective Action.

Types of Certification Reviews

- **Intermittent Reviews**

- Intermittent reviews are conducted at the discretion of WS&C and are usually based on:
 - complaints;
 - follow up to abuse, neglect or exploitation allegations; or
 - deaths

WS&C: Contact Prior To Reviews

- HCS program providers will generally be contacted before a certification review by the review facilitator, **unless there is cause for Waiver Survey and Certification (WS&C) to conduct an unannounced review of the program.**
- WS&C can and may conduct unannounced certification reviews or on-site visits at any time.
 - When the review facilitator contacts the HCS program provider to notify the provider of an upcoming certification review, **the facilitator will fax a copy of the Provider Information Request form to the program provider.**
 - The facilitator will also fax [Form 8576, Individual Profile Information](#), to the HCS program provider with a requested date for the information to be completed and returned to the review facilitator.

Entrance Conference

- At the beginning of every certification review, the WS&C review team will conduct an **entrance conference** with the program provider and any program staff who are present.
- The WS&C review facilitator will explain the review process and summarize the tentative review schedule.
- The review team will **review a sample of 10% or more of the individuals in the HCS program provider's contract.**
- The team uses standardized checklists to ensure that all principles are reviewed for compliance.
 - These checklists can be found at: www.dads.state.tx.us/providers/HCS/certificationreviews.html

Certification review activities

- **Activities Include, But Not Limited To:**
 - **talking** with individuals, family members, Legally Authorized Representatives (LARs) and staff;
 - **visiting** homes and day habilitation sites;
 - **reviewing individuals' records** (including medical records);
 - **reviewing personnel and staff** training records;
 - **reviewing financial records** of the individuals for which the program provider handles finances;
 - **reviewing complaint information, satisfaction surveys and Consumer Advocacy Meeting minutes;**
 - **reviewing information regarding any deaths, discharges** (permanent or temporary over 90 days) and allegations of **abuse, neglect and exploitation;**
 - **reviewing fire drills and emergency evacuation plans, as well as four-person home approvals and fire marshal inspections for four-person homes;** and
 - **reviewing critical incident data, restraints and restrictive behavior support plans.**

Can You Still Make Corrections During The Survey?

- According to Most Recent Discussion About This Question, with the WS&C representative from HHSC
 - (Will Medina, Director of Services for WS&C)
- Yes, we will still be allowed to make corrections during survey!
They also discussed Administrative Penalties.
- They still don't know what those amounts will be, but please note the following information we do know about
Administrative Penalties:

Final Debriefing

- As a part of WS&C reviews, reviewers note any issues related to service coordination and forward these notations to DADS **Contract Accountability and Oversight (CAO)** for follow up. HCS program providers may view notations related to their programs in the **C-97 screen** of the **CARE** system.
- **The review team will hold a final debriefing at the end of the review.**
 - The program provider is allowed to submit evidence of corrections prior to the exit conference in order to attempt to clear citations.
 - The review team may determine that specific citations may not be corrected if one or more individuals' health, safety or welfare has been jeopardized as a result of the provider's non-compliance.
 - (of a serious nature)

Exit Conference

- WS&C conducts an exit conference at the end of all on-site reviews, at a time and location determined by WS&C.
 - WS&C gives the program provider a written preliminary review report at the exit conference.
 - (Names of consumers will appear on this report, but not the final draft. Be sure to document the name and # and correspond to final report)
- » **Note**
- If the review team determines any of the individuals enrolled in the program **are in imminent danger due to a hazard that threatens their health, safety or welfare, the program provider is expected to eliminate this hazard before the end of the review exit conference.**
 - **If the hazard cannot be eliminated, DADS will deny certification and, in conjunction with the Local Authority, will immediately coordinate development of alternative services for all individuals enrolled in the program provider's contract.**

CORRECTING A CITATION

Evaluating a **Plan of Correction (POC)**, or any citation, as a provider &/or surveyor requires **three areas** to be corrected:

- **Past**
 - Corrected for everyone it was out of compliance for when the original citation was written.
- **Present**
 - The Expectation would be: No instances of non-compliance for a new sample surveyed.
- **Future**
 - Demonstration of a policy/procedure that is in place to prevent future occurrences of noncompliance for that principle.
 - This **does not have to be a new written policy**, it can be:
 - An Email/Memo to your staff stating an operational change
 - Identified lapse in current system and actions taken to correct the issue
 - A modification of current policy/procedure

POC AND CAPS

1. The policy/procedure should be written/modified to ensure that it **does not infringe upon the right of the individual to live in their current home.**
2. The policy/procedure should **encompass the entire census of the contract**, not just one person/situation.
3. The policy/procedure **should not violate the TAC or HCS/TxHmL guidelines.**
4. The policy/procedure **should be feasible and implementable.**
5. The policy/procedure **should prevent future occurrences of noncompliance.**

Submitting Plans of Correction

- The program provider must submit **Form 8581, Plans of Correction, for each HCS principle that is found out of compliance at the end of the review and is determined to be non-serious in nature.**
- The Plan of Correction (POC) is a written plan that establishes a process by which the program will prevent reoccurrence of the issues that resulted in the principle being found out of compliance.
 - How Did you Correct The Citations,
 - How Will You Prevent It In the Future,
 - Deadlines for Corrective Action Must Be in the PAC,
 - Additional Evidence can be submitted, but it does not have to be sent it.

POC

- This plan (Form 8581) **must be submitted to DADS Waiver Survey and Certification (WS&C) for approval.**
 - A copy of the POC will be given to the provider during the review.
- DADS must receive the POC **no later than 14 calendar days following the program provider's receipt of the review report.**
 - The time line for the provider's completion of the POC must not exceed 90 calendar days from the date of the exit conference.
 - *If the POC is submitted by the due date, and is approved, the provider will be certified.*

POC (cont.)

- If the POC is submitted by the due date but is inadequate, the facilitator will notify the program provider and offer detailed information as to why the POC is inadequate.
- If the facilitator is unable to assist the program provider to reach compliance within two months of the review exit, written notification that its contract may be terminated will be sent to the program provider if an approvable POC is not received within seven days of receipt of the letter.
- If the program provider does not submit a PQ as required, or DADS does not approve the POC, DADS will either:
 - impose a vendor hold against the program provider until the program provider submits a corrective action plan approved by DADS or
 - deny or terminate certification of the program provider

Plan of Correction

- Upon a return survey, they will review the evidence for the correction of serious citations
- According to alert letter (55) they will not look at your non-serious citations.
- They will instead review your POC's *(that you submitted to DADS at the time of your survey for non-serious citations)* and your evidence of corrective action at your next annual survey review.

For Return Visit For “**Serious Citations**”: Can New Citations Occur?

- **Yes**, if the surveyors on the return visit
 - (within 30 days of exit from survey)
 - find other/new “**serious health and safety issue/s**” it is possible to cite the provider on something new, even if you clear the initial “serious citations”.

Home and Community-based Services Review Checklists


Go to:

www.dads.state.tx.us/providers/HCS/certificationreviews.html

to view checklists and reports used by DADS during the certification review process.

Residential Reviews

40 TAC, Ch 9, Subchapter D 9.171 (h)

- **14400 Residential Reviews**
- Effective Sept. 1, 2009, the 81st Texas Legislature, Regular Session, required DADS to conduct **annual unannounced inspections of HCS three- and four-person residences**. In addition, the legislature funded annual inspections of HCS **foster/companion care residences**.
 - (Now called **Host Home /Companion care residences**)
- In accordance with 40 TAC, Chapter 9, [Subchapter D](#),  §9.171(h), DADS WS&C conducts annual unannounced visits to each residence in which foster/companion care, Residential Support Services or Supervised Living is provided to **verify that these residences offer environments that comply with the Form 3609, Waiver Survey and Certification Residential Checklist**. **(Basically that they are healthy & safe environment)*

Issues During Residential Review

- **If the Address in CARE is Invalid**
 - If the residential reviewer arrives at a home that is no longer associated with the HCS Program, or cannot find the address provided for a location code in [CARE](#), the residential reviewer will fill out Form 3609 noting the incorrect address. A letter notifying the provider of the inaccuracy in CARE will be sent to the HCS program provider's CEO.
- **If No One is Home**
 - If a residential reviewer finds no one at home after three attempts to visit the home, the reviewer contacts the program provider to find out when the residential staff or foster/companion care provider is most likely to be home.
- **If the Residential Reviewer Is Not Allowed to Access the Home**
 - If a residential reviewer is not allowed access to a group home or a foster/companion care home, the residential reviewer will notify the program provider for resolution. It is the program provider's responsibility to ensure that regular or contracted employees cooperate with the residential review process.

Evidence of Correction

- **No Evidence of Correction Needed**
 - If a residence has no items marked "fail" on the Residential Review Checklist, no follow-up action is taken by Waiver Survey and Certification (WS&C).
- **Evidence of Correction Needed**
 - If a residence has any items marked "fail" on the Residential Review Checklist, the program provider must (unless immediate action is required as described below) submit evidence of correction for every item marked "fail." Evidence of correction must be received by DADS at the address listed on the residential visit report within a time period determined by DADS.
 - Evidence of correction may be mailed, emailed or faxed to DADS using [Form 1573](#), Residential Review Evidence of Correction. If the evidence of correction is not approved by DADS, DADS requires the program provider to submit additional information as directed by DADS.

Significant Risk Identified

- **A significant risk is an act or failure to act by the program provider that could have a major adverse effect on the health, safety or welfare of one or more individuals, including emotional or physical harm, or death.**
- If DADS determines that an item marked "fail" on the Residential Review Checklist results in a significant risk, DADS requires the program provider to take one of the following actions:
 - **Immediate Action** – An intervention or correction that must be taken while the residential reviewer is onsite; or
 - **Prompt Action** – An intervention or correction that must be taken within 48 hours after the conclusion of the residential review.

Significant Risk-Actions Taken

- **Significant Risk Requiring Immediate Action** – If DADS concludes that the significant risk requires **immediate action**, such as movement of one or more of the individuals from the residence, the residential reviewer will not leave the residence until the program provider has taken immediate action and the significant risk is removed.
- **Significant Risk Requiring Prompt Action** – If DADS concludes that the significant risk requires **prompt action**, the residential reviewer will call the persons identified in the Client Assignment and Registration (CARE) screen C70 as the “program provider contract contacts” (the HCS provider or a representative of the HCS provider) and inform such persons of the following:
 - The significant risk identified requiring prompt action; and
 - The date, as determined by DADS, by which the program provider must submit evidence of correction to DADS that prompt action has been taken and the significant risk removed.

Survey Process



- **Survey Is Performed By DADS by WS&C Department.**
- **Within 45 up to 120 days of 1st Client, The Provider Has Initial Survey**
- **Approximately 9-months From Initial Survey You Will Have Your 1st Annual Survey**
- **Annual Survey Can Be Up To 90 Days Prior To Certification Date**
- **Will Normally Give 7-14 day Notice Of Survey**

Death Reviews

- In accordance with 40 TAC, Chapter 9, [Subchapter D](#), §9.178(w),
 - HCS program providers must report the death of an individual in their HCS program to DADS and the service coordinator by the end of the next business day following the death or the program provider's learning of the death.
 - [Form 8493](#), Notification to DADS Regarding a Death in HCS, TxHmL and DBMD Programs, **must be faxed to 512-438-4148**, Waiver Survey and Certification (WS&C).
 - The **risk assessment coordinators (RACs)** collect specific information regarding the death from the program provider and may request additional records, depending on the conditions existing at the time of death.
 - The **Death Review Group (DRG)**, which is made up of:
 - the **WS&C RACs, RAC RNs and RAC manager**, meets routinely to review the circumstances surrounding each death.
 - Additional regulatory follow up, including an intermittent review, may be scheduled to evaluate the program provider's compliance with HCS or Texas Home Living certification principles as the result of the DRG review.

Policy & Procedure

- Risk assessment coordinators collect the following information:
 - Date of death
 - Provider contract number and component code
 - Person reporting the death, including contact telephone, email address and fax number
 - Individual's Client Assignment and Registration (CARE) System identification number
 - Type of setting – HCS, Texas Home Living (TxHmL) or Deaf Blind with Multiple Disabilities (DBMD)
 - Cause of death
 - Date provider notified of death
 - Admission date to the provider
 - Dates of hospitalizations in the last three months (if applicable)
 - Dates of hospice (if applicable)
 - If the Department of Family and Protective Services (DFPS) was notified
 - Types of residence (Family Care, 3-Person, 4-Person, Own Home or Family Home)
 - Place of death
 - Type of death (expected, unexpected, or accident)
 - Description of events surrounding the death
 - Whether autopsy was ordered

Other Documentation Requested

- **Information Gathering**
 - If abuse or neglect is suspected in relation to the death of the individual, the risk assessment coordinator will immediately contact DFPS.
- **Requests for Additional Information**
 - The following records may be requested by the risk assessment coordinator for specified time frames, depending on the conditions existing at the time of death.
 - Most recent person directed plan and implementation plan(s)
 - Any training regarding the individual's special needs provided to service providers
 - Last two months of medication administration records
 - Most current nursing assessment
 - Last three months of nursing notes, physician orders and lab work
 - Last three weeks of Residential Support Services, Supported Home Living, Community Support or Foster/Companion Care notes
 - Last week of day habilitation notes
 - State supported living center transition notes (if applicable)
 - Hospice notes (if applicable)
 - RN/LVN names/signature sample key
 - Additional documents may be requested after the initial review by the DADS Waiver Survey and Certification (WS&C) risk assessment coordinator nurse.

Suspicious Deaths

- If any circumstances surrounding the death are suspicious, WS&C may take further actions, including, but not limited to,
 - referral to local police departments and DFPS,
 - completion of an intermittent certification review or referral to DADS to pursue contract actions.

The WS&C assistant unit manager is informed immediately of suspicious circumstances surrounding a death or if other issues of concern are noted.
- **Follow-up Activities**
 - Risk assessment coordinators may conduct a desk review based on the information received from the provider, requested records and/or the information received from DFPS.
 - The WS&C risk assessment manager may authorize an on-site visit based on the circumstances of the death, information obtained from a desk review or information obtained from DFPS.
 - If the review team determines that the provider is in non-compliance with one or more of the HCS program certification principles during an on-site visit, an intermittent review will be opened.

Possible Outcomes Of The Survey

- **Passing Survey/Meeting Compliance with HCS Principles (TxHmL)**
 - **Now:** If no "serious" citations (CAP's only, no return)
 - POC's due in 45 days from exit
 - Could return request to see or come on site to see corrections in 45 day, but most likely will not.
 - However, they will review at the annual survey or if another intermittent occurs, they can look at these POC's to see if they were completed.
- **Sanction I (Return Survey Required)**
 - **Now:** If any "serious citation" occurs
 - Turning in a POC to DADS/HHSC is usually not required, but check your "statement of concern" and or any letters received with final report. They may ask for it.
 - We advise you complete POC's for citations "of a serious nature", to guide your staff in corrections,
 - Keep with your evidence for return survey.
 - Evidence Required in 30 days from exit at the time of return
- **Sanction II (Vendor Hold)**
 - **Now:** For any # of "serious" citations, dependent on situation or if a repeat serious citation.
 - Evidence Required in 30 days from exit at the time of return
- **Vendor Hold can occur for other reasons**
 - No specific # of citations
 - May Be Based on Health & Safety
 - May Be Based on Passing/Failing Return Survey
 - Based on having same citation the year before.



How To Address POC/CAP's

- **Review Results:**
 - **OUT** (outstanding)
 - **CDV** (corrected during visit)
 - Must fill out CAP form available on line if not returning
- **Follow-up (Return Survey)**
 - **CPV** (corrected prior to visit)
 - **CDV**
 - **OUT**
 - must provide evidence on-site, if returning



Informal Review Process

DADS Form 3610 is now called [Informal Review Request](#).

- Reports are to be sent to Compliance and Oversight.
- Timelines have changed.
- Informal Review Requests will be based on Draft Report.
- No changes will be made to the Draft Report.



Informal Review Process

- Program providers will be notified during HCS and TxHmL reviews of their right to request an Informal Review.
- Program providers may request an informal review of any citation remaining in noncompliance.



Informal Review Process

- **§9.171(h) (1)-(3)**
 - (h)If a program provider disagrees with any of the findings in a preliminary review report, the program provider may request that DADS conduct an informal review of those findings.
 - This means:
 - A program provider may submit an Informal Review (IR) request **for any citation written on the final report.**
 - A program provider **may also request an (IR) to determine whether or not a citation is “serious.”**

Submission of Informal Review Request



To request an informal review **of a draft report finding:**

- **Program provider must submit a completed DADS form 3610 “Informal Review Request” to DADS, as instructed on the form.** *(Any evidence should be sent with it)*
- **DADS must receive the completed form within 5 business days after the date of the review exit conference. (**new)**
- **mail or fax the completed DADS Form 3610 to the address or fax number listed on the form.**



Results of Informal Draft Review

If DADS receives a timely request for an informal review, DADS conducts an informal review and:

- notifies the program provider, in writing, of the results of the informal review **within 10 business days of the informal review request/receipt of the request; and**
- sends the program provider a final review determination report **within 5 business days** of the final (IRD) Informal review report due date.
- **Revised final Report (Survey)/Enforcement Report** (Admin Penalties) is sent **within 5 business days** of final IR Determination Report due date.



- The Informal Review results letter and the final report will be sent together to the program provider.

Results of The (IR)- New Timeline

Current timeline:

- DADS has 10 calendar days to return the IR decision to the program provider and 21 calendar days to return the final report.

New timeline:

- DADS has 10 business days from receipt of IR request to return the IR decision and the final report to the program provider.

Final Review Report

- (i) If a program provider does not request an informal review as described in subsection (h) of this section, DADS sends the program provider a final review report within 21 calendar days after the date of the review exit conference.

Current timeline:

If no IR is received, DADS has 21 calendar days from the date of exit of the survey to mail the final report.

New timeline:

DADS has 10 business days to return the final report.

Training Opportunities

- DADS will send out alerts for all trainings hosted by Waiver Survey and Certification.
- Goals:
- At least quarterly trainings on various topics that are important to the provider base.
 - Administrative Penalty trainings.
 - Top 10 citation trending reports.

WSC Policy Specialist

James Crawford specifically set up to monitor primary HCS or TXHML policies contact.

james.crawford@dads.state.tx.com

Waiver Survey & Certification | Regulatory Services
Texas Dept. of Aging and Disability Services
701 W. 51st St.
Austin, Texas 78571

- Ph. (512)438-5505
- Fax (512)438-4148

Additional Helpful Info.

- No more than \$5000 per day per incident. But that is the worst or most extreme. Each day out of compliance another 5000. We will have schedule of penalties. A gradual penalty that goes up. Especially for repeated penalties!!
- Is it a recoupment or does the provider pay out of pocket?
 - They don't know for sure yet.
 -You could be under recoupment from cost reporting and/or billing and have an admin penalty
- Are there parameters for deciding whether or not something counts as corrected during visit. Most likely if serious no, but it could be, but your facilitator at the survey needs to convey with their supervisor.
- What do you do if a surveyor comes back that is not supposed to?
 - They will explain more in depth later.
 - Contact Will Medina directly
- Appeal process built into admin. Penalties. Clock starts as soon as you get your letter, to appeal.
- Interpretive guidelines coming soon, finally
 - Will be just like ICF SOMA (state operational manual that surveyors use as guidelines)

Administrative Penalties

- If you correct something before WSC leaves, then you can't get administrative penalty.
 - Ex: Depending on serious ones, you will get admin penalty.
 - That is why you want to IR the seriousness at least.
- On the non serious,
 - won't get admin penalties, as long as corrected within first 45 days from exit.
 - Does not mean they will be there in 45 days, but they could be, due to other f/u
 - Complaint, ANE follow up, Residential Review follow up, etc..
- if you get the same one within the year of when your next annual survey due and when it is next due, you will get administrative penalty, even if corrected.

What Does Vendor Hold Mean For The Provider?



No payment for any services -from the date they notify you in writing that the provider is actually on vendor hold, you will not be able to bill for anymore services in CARE

If a surveyor tells you at exit they are recommending that the provider be put on "vendor hold", the facility needs to be sure and bill for all services that are billable immediately, that have been completed and you have proof of course. Continue to do so daily, until you are unable to do so I CARE


You will not be able to bill again **until they return, and recertify you**, and CARE lets you back in.

How Do I Prepare For Survey?


- **Review HCS TAC Ch 9, Subchapter D**
 - The HCS TAC Codes are (9.151-9.193)
 - Concentrate on 9.174-Service Delivery & 9.178-QA
 - Chart Reviews of Your Consumers
 - Complete Separate Medical Chart Reviews
 - Physical/on-site Review of Group Homes/FC homes
 - Prep Your Direct Care For Interacting With Surveyors and Answering Their Questions
 - A/N/E Questioning By Surveyors
 - Being Aware Of Special Needs
 - Are They Delegated Or Not? Did Nurse Train Them?
 - Review Any Health & Safety Issues




Survey Expectations For Nursing

- **TAC Code 9.174 (31) (A-K) -** 
 - In particular- no delays in service, ensure consumer sees appropriate physicians/specialists, follow –up on medical recommendations & referrals, provide medical care and ensure emergency care obtained, monitor medical needs as needed, follow up on medical issues til resolved.
- **Be knowledgeable concerning delegation.** Look at **Ch. 225 and 224** on BON website from **Texas Occupational Code**, on RN Delegation
- **Follow nursing practice act & be aware of your “scope of practice”**
- **Ensure not neglecting consumer concerning health/safety issues**

Different Quality Assurance Tools


- **9.178 QA Checklist**
 - (Please Review)
- See **HCS QA Tool** From Together Consulting
- See **HCS Nursing/Medical QA Tool** From Together Consulting
- **RN Delegation Checklist- DADS** 
 - (Please look at and review now)
- **HH/CC Exemption Citations List-DADS**
- Have Appropriate Nursing Policies to Avoid Citations

Review of RN Delegation Checklist

- **Not just for RN Delegations!**
- **SB1857-** Admin of Meds per UAP without Delegation for **oral, topical, and metered-dose inhaler** routes only. 
- **FC/HH Exemptions**
- **RN Delegation**
 - Special Rules For Insulin & Pill Box Minders
 - HMA's vs. ADL's



Nurse Screening Tool (Form 1572)

- Provider completes the Nursing Tasks Screening Tool
– or at least SP team reviewing individual with this tool,
if the individual refuses nursing services &
lives in their OFH 
- Nursing must generally be a service provided if the
individual receives: RSS, SL, or HH. However the
individual or LAR can refuse. If so the Nursing
Screening Tool must be completed and it is up to the
provider to decide if they are comfortable with the
individual not having some nursing for monitoring in
the program.
- FYI-TXHmL must use this tool for all individuals

Nursing Section of the IP

- Need Proof Nurse Is A Part of The
Development of the Nursing Section of the IP.
- Many Providers Have Been Cited
- Please Ensure the RN has completed CNA's on:
 - **any individual receiving Nursing Services**
 - **any individual receiving assistance (includes
supervision) with med. administration or
medical task from a UP/UAP.**
- Provider Needs to Ensure CNA contains
 - **a Nursing Service Plan, IP/Nursing Objectives,
Strategies, and Justifications.**



Life Safety Code Changes

- DADS is updating the HCS rule regarding Life
Safety Code inspection requirements for four-
person residences.
- Effective April 1, 2014, the HCS rule will
reflect the HCS program providers'
requirement to be in compliance with their
local fire safety authority regulations for their
four-person homes.







Life Safety Documentation

- Effective April 1, 2014, program providers must ensure the following documentation is available in each four person home:
 - Most recent inspection by the local fire authority;
 - Most recent evacuation scores (E-scores) completed for the home;
 - Most recent sprinkler system inspections if applicable;
 - Documentation of the heat detection system if the home has a sprinkler system;
 - Documentation regarding flame spread (Class A, B, or C) for the home (if the ceiling and wall finish is anything other than gypsum board);

Life Safety Documentation (cont.)

- Most recent fire alarm system check; and 
- Documentation to prove that drapery, curtains or other similar loosely hanging furnishings (**but not shower curtains**) meet the flame propagation performance criteria required under the National Fire Protection Association (NFPA) 701 (**not needed if the home has a sprinkler system**).
- DADS will provide technical assistance if requested. 
- Email questions to:
waiversurvey.certification@dads.state.tx.us
