

Regulation Placement and Severity Activity
Long-Term Care Learning Activity

Item	Description
Objective:	Given a scenario, the surveyors will identify the potential regulation related to the deficient practice and use CMS guidance provided in the State Operations Manual to determine scope and severity.
Prerequisites:	<p>Prior to completing this exercise the surveyor should have a basic understanding of the following:</p> <ul style="list-style-type: none"> • The Scope and Severity Grid • Psychosocial Outcome Severity Guide in Appendix P • Appendix PP and guidance provided in the Investigative Protocols
Prior to Class:	Print one copy of the worksheet for each surveyor. This will include the directions for the exercise. Have the long term care regulations (referenced in Appendix PP) available. Have flip charts and markers available. Provide copies of the Severity and Scope grid to each new surveyor.
Total Time for Activity:	60 minutes (The time given is approximate.)
Set-Up:	Distribute one answer sheet to each surveyor. Ideally, allow surveyors to work on their worksheet independently. The surveyor should be prepared to identify regulations related to deficient practice as well as scope and severity. Divide the class into small groups; however, if this is not possible, work through the answers together as a class.*

Step:	Preceptor Instructions:	Activity Time:
1.	Give the new surveyors time to read the directions and review the list of the scenarios.*	5 min.
2.	The surveyor will read the scenario and identify the regulations that apply to the deficient practice and determine scope and severity. The surveyors will prepare to defend their answers based on the Psychosocial Outcome Severity Guidance in Appendix P and/or Interpretive Guidance in Appendix PP.	30 min.

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Step:	Preceptor Instructions:	Activity Time:
3.	Each group (or the large group) will verify which regulation and scope and severity the surveyor found deficient for each of the scenarios. If there are differences of opinion within the group, the surveyor should be prepared to discuss their answer. Each group will present one answer for each scenario.	20 min.
4.	The Preceptor will call on each group in order to present their answers.	10 min.
5.	Debrief by providing the correct answers contained within the Preceptor Answer Sheet and discuss any differences. The answer sheet is not intended to indicate that the only valid citation would be the one listed in red. It provides one that should be considered in team discussion.	2 min.

**For individual assignment, provide direction and support where appropriate during the completion of the scenario. Once completed, review answers against the answer sheet, and discuss the key points together from the scenario.*

Date:

Surveyor Name:

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Survey Scramble Surveyor Work Sheet

Directions: The survey team has already determined that the facility's practice is deficient. You have 30 minutes to read each scenario and determine which citation (F tag) would apply to the deficient practice and assign scope and severity. You may use the resources listed below to make these determinations:

- The Scope and Severity Grid
- Psychosocial Guidance in Appendix P
- Appendix PP and the severity guidance provided in the Investigative Protocols

1. A resident listed on admission as "active and vocal." Was restrained six months ago by the facility with no medical symptoms. According to the facility records and staff interviews, the resident is now "withdrawn and does not attend activities." Upon interview the resident stated she is "down in the dumps."

Answer:

2. One of five residents reviewed for pressure ulcers developed an avoidable Stage III pressure ulcer and the soft tissue has become infected with MRSA.

Answer:

3. For six residents, activities are not being provided as directed by their care plans. They are repeatedly observed sitting around the nurses' station or in their rooms. Two residents who can communicate say they are bored and there is nothing to do. The other four cannot communicate. They are often observed apparently asleep in their wheelchairs.

Answer:

4. Two food service staff were observed taking trash to the dumpster. When they returned to the kitchen, they joined the tray line, put on gloves, and began dishing up food without washing their hands.

Answer:

Date:

Surveyor Name:

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5. Two residents with dementia who have indwelling urinary catheters are repeatedly observed out in the hallway without covers on the catheter bags. The residents show no reaction to this and family members are not available for interview.

Answer:

6. Thirty of the facility's 103 residents are in restraints. For eight of them, the MD orders read, "Poor safety awareness."

Answer:

7. Two staff members performing treatments were observed not to wash their hands between residents on Wing A. A review of facility records showed the facility failed to document and monitor the infections of residents on Wing A. One of the residents on Wing A came from the hospital with MRSA and two more residents with wound infections on Wing A have facility-acquired MRSA and had to be hospitalized.

Answer:

8. The Statement of Deficiencies was not posted, nor was there any sign indicating where it was. The surveyor inquired and was told it was kept in the business office and residents could ask for it.

Answer:

9. A dependent resident with Alzheimer's disease was admitted to the Skilled Nursing Facility/Nursing Facility (SNF/NF) the first day of the survey. The surveyors observed this resident three times during the survey in wet clothing for an hour or more after incidents of incontinence. The resident was observed pulling at the crotch of her slacks and crying on two occasions. When the staff changed her, the resident's skin was observed to be red on her right inner thigh.

Answer:

Date:

Surveyor Name:

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10. Eight residents came to the surveyor to complain that two months ago they had all been in the lounge watching the last game of the World Series. The game went into extra innings and was still going on at 11:00 PM. All eight residents were removed from the lounge against their will to be put to bed, since third shift insists all residents be in bed when they begin working. The residents were still furious about missing the end of the World Series. None of them had a personal TV.

Answer:

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Preceptor Answer Sheet

Directions: Debrief by providing the correct answers contained within the Preceptor Answer Sheet and discuss any differences. The answer sheet's intention is to provide a citation that may be considered in team discussion. The answers listed are not all-inclusive.

1. A resident listed on admission as "active and vocal." was restrained six months ago by the facility with no medical symptoms. According to the facility records and staff interviews, the resident is now "withdrawn and does not attend activities." Upon interview the resident stated she is "down in the dumps."

Answer: F221 G (See Psychosocial Guidance)

2. One of five residents reviewed for pressure ulcers developed an avoidable Stage III pressure sore and the soft tissue has become infected with MRSA.

Answer: F314 J (See Deficiency Categorization in the Investigative Protocol at F314)

3. For six residents, activities are not provided as directed by their care plans. They are repeatedly observed sitting around the nurses' station or in their rooms. Two residents who can communicate say they are bored and there is nothing to do here. The other four cannot communicate. They are often observed apparently asleep in their wheelchairs.

Answer: F248 E (See Psychosocial Guidance)

4. Two food service staff were observed taking trash to the dumpster. When they returned to the kitchen they joined the tray line, put on gloves and began dishing up food without washing their hands.

Answer: F371 F (See Deficiency Categorization in the Investigative Protocol at F371)

5. Two residents with dementia who have indwelling urinary catheters are repeatedly observed out in the hallway without covers on the catheter bags. They show no reaction to this and family members are not available for interview.

Answer: F241 D (See Psychosocial Guidance)

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6. Thirty of the facility's 103 residents are in restraints. For eight of them, the MD orders read, "Poor safety awareness."

Answer: F221 E (See Psychosocial Guidance)

7. Two staff members performing treatments were observed not to wash their hands between residents on Wing A. A review of facility records showed the facility failed to document and monitor the infections of residents on Wing A. One of the residents on Wing A came from the hospital with methicillin-resistant *Staphylococcus aureus* (MRSA) and now two more residents with wound infections on Wing A have facility acquired MRSA and had to be hospitalized.

Answer: F441 J (See Deficiency Categorization in the Investigative Protocol at F441)

8. The Statement of Deficiencies was not posted, nor was there any sign indicating where it was. The surveyor inquired and was told it was kept in the business office and residents could ask for it.

Answer: F167 C (See Appendix P Deficiency Categorization, Guidance on Severity and Scope)

9. A dependent resident with Alzheimer's disease was admitted on the first day of the survey. The surveyors observed this resident three times during the survey as being left in wet clothing for an hour or more after incidents of incontinence. The resident was observed pulling at the crotch of her slacks and crying on two occasions. When staff changed her, the resident's skin indicates some redness on her inner thigh.

Answer: F312 D (See Psychosocial Guidance and redness is not considered actual harm according to F323)

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10. Eight residents came to the surveyor to complain that two months ago they had all been in the lounge watching the last game of the World Series. It went into extra innings and was still going on at 11:00 PM. All eight residents were removed from the lounge against their will to be put to bed, since third shift insists all residents be in bed when they begin working. The residents were still furious about missing the end of the World Series. None of them had a personal TV.

Answer: F242 H (See Psychosocial Guidance)