Sufficient and Competent Nurse Staffing Review

Evaluate whether the facility has sufficient and competent nursing staff to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and

Surveyors conduct observations, interviews, and record reviews throughout the survey, on different shifts and units to determine the staff's availability and competency to meet the needs of the residents.

During team meetings, discuss whether there are any issues indicating concerns related to sufficient or competent staff.

CMS expects the survey team to cite noncompliance when a minimum of one day is identified through investigation as not meeting the staffing requirements for a Registered Nurse (RN), Licensed Nurses (LN) and/or other nursing staff, OR the facility is unable to provide evidence of RN and/or LN coverage for dates identified in the PBJ Staffing Data Report.

PART I – COMPLETED BY TEAM COORDINATOR (during offsite prep and on day one of survey)

Mandatory Submission of Staffing Information:

☐ *During offsite preparation, the TC reviews the information in the CMS survey system Payroll-Based Journal (PBJ) Staffing Data Report to determine if the facility submitted the required staffing information.*

1. ***Did the facility submit the required staffing information based on payroll data?*** ☐ *Yes* ☐ ***No F851, cite scope and severity at "F"***

RN Serving as Full-time Director of Nursing (DON)

☐ *If the facility does not provide information on the RN designated to serve as the full-time DON during the entrance conference cite F727.*

2. ***Does the facility have an RN to serve as the DON on a full-time basis?***
   ☐ *Yes* ☐ ***No F727, cite scope and severity at a minimum of "F"*** ☐ *N/A, the facility has a waiver for the DON requirements.*

RN and LN Coverage:

☐ *If RN hours and/or LN coverage is triggered on the PBJ Staffing Data Report, review the information provided by the facility, as requested during the entrance conference, to verify the accuracy of the RN and LN absences on the PBJ Staffing Data Report. Acceptable evidence is timecards, timesheets, or payroll information that clearly shows RN and/or LN coverage on the dates in question. A schedule of who was supposed to work is NOT acceptable. If the facility is unable to provide evidence of RN and/or LN coverage for the dates identified, non-compliance must be cited at F725 for LN and/or F727 for RN.*

Advance Copy

Sufficient and Competent Nurse Staffing Review

3. *Does the facility ensure licensed nurse coverage 24-hours a day?*

☐ *Yes* ☐ ***No F725, cite scope at a minimum of "F"*** ☐ *N/A, the facility has a waiver for LN coverage 24-hours per day.*

4. *Does the facility have an RN at least 8 consecutive hours a day for 7 days a week?*

☐ *Yes* ☐ ***No F727, cite scope at a minimum of "F"*** ☐ *N/A, the facility has a waiver for the daily RN hours requirement.*

PART II – COMPLETED BY ALL SURVEYORS *(record negative responses at each appropriate CE below)*

OBSERVATIONS:.

☐ *Are there offensive odors? If so, what is the source?*

☐ *Are residents still in bed and not dressed mid-morning or remain unkempt or unclean for extended periods of time?*

☐ *Do staff rush when providing resident care (e.g., neglecting to explain what they are doing when assisting residents)?*

☐ *Do residents receive timely assistance with care needs, such as toileting and eating?*

☐ *Are residents care activities consistent with the time of day/night and their individual personal preferences rather than at a time that is convenient for staff (e.g., bathing residents during normal hours of sleep)?*

☐ *Are call devices and alarms responded to timely? If concerns about staff responsiveness exist, monitor when the resident's call device is activated and record the response time of the staff.*

☐ *Are residents yelling out, crying, sitting around the nurse's station or in hallways without staff intervention, or wandering unsupervised and at risk or creating issues?*

☐ *Are residents subdued or sedated making it easier (i.e., convenient) for staff to care for or monitor residents, indicating the potential use of unnecessary psychotropic medications/chemical restraints?*

☐ *Are devices or practices in use that restrict freedom of movement (e.g., position change alarms or reclining chairs) making it easier for staff to care for or monitor residents, indicating the potential use of physical restraints?*

☐ *Are there delays in residents receiving their medications timely?*

☐ *When observing care or services provided by nursing staff, do they demonstrate competency according to professional standards?*

Advance Copy

Sufficient and Competent Nurse Staffing Review

INTERVIEWS

Residents/Resident Representatives or Family Members:

Staff Sufficiency *(probes addressed during the initial pool process and/or investigations)**:***

- ☐ *Do you feel that there is enough staff to meet your needs without having to wait a long time? If no, can you provide an example of your concern? Is there a specific time of day or weekends that are more problematic?*
- ☐ *Has anything occurred because you had to wait for staff to respond and assist you? How often does this occur? For example, not being assisted per toileting plan and incontinence occurs, or staff taking too long to respond to call light resulting in a fall.*
- ☐ *Do you routinely eat in your room? If so, is this your choice? If it is not your choice, why are you routinely eating in your room?*
- ☐ *If needed, is assistance provided to help you get to and from areas in the NH, such as the dining room or activities?*
- ☐ *Are you able to wake, dress, eat, or engage in other activities at times you prefer? If not, why not?*
- ☐ *Do you get your medications on time?*
- ☐ *Has the facility informed you that care could not be provided because there wasn't a LN available?*

If the surveyor is aware of the absence of an RN for at least 8 consecutive hours a day on one or more days also ask:

- ☐ *Has the facility informed you that care could not be provided because there wasn't an RN available (e.g., IV medication)?*

Staff Competency:

- ☐ *Do you think the nursing staff are experienced and knowledgeable when providing your care? If not, what concerns have you experienced? For example, was there a time when you didn't feel well, if so, did staff assist you? Did you require hospitalization?*

Front-Line Nursing Staff (nurses and nurse aides) Interviews:

During interactions with staff ask if they feel they have enough staff to meet resident needs and the training/skills needed to provide the care required. If no, interview staff further using the probes below to further evaluate staff sufficiency and competency.

Staff Sufficiency:

- ☐ *If staff indicated they do not feel they have enough staff to meet the resident's needs, ask them to share why they feel this way.*
- ☐ *How many residents are you responsible for on a regular basis during your shift? Are you able to meet all their needs? If no, please explain.*

Advance Copy

Sufficient and Competent Nurse Staffing Review

- ☐ *Do you have enough time to complete your required assignments each day, including weekends?*
  - *If not, why, and what assignments are you not able to complete?*
  - *Are you able to participate in care planning, attend team meetings and trainings, take meal breaks and provide the care residents need?*
- ☐ *How often are you asked to stay late, come in early, or work overtime? Tip: this assists in determining the frequency of open shifts, which provides insight into the extent of any staffing issues in the facility.*
- ☐ *Are you aware of who is the designated charge nurse on each shift?*

***If the surveyor is aware of the absences of an RN for at least 8 consecutive hours a day on one or more days**, also ask:*

- ☐ *Are you aware of a resident who needed care or services that only an RN can provide (i.e., intravenous medications, assessment) and did not receive it? If so, please explain. Tip: this could assist identifying incidents that occurred directly related to non-compliance with RN staffing requirements.*

***If the surveyor is aware of the absence of licensed nursing staff in a 24-hour period on one or more days**, also ask:*

- ☐ *Are you aware of any residents who needed LN services (i.e., medications or treatments) and did not receive it due to no available licensed nurse? If so, please explain. Tip: this could assist identifying incidents that occurred directly related to non-compliance with LN staffing requirements.*
- ☐ *Who do you notify in the event of an emergency when there is no licensed nurse available? Tip: this provides insight into severity, specifically IJ, if the staff are not aware of what to do or fail to act due to no licensed nurse being available.*
  - *If the staff member is not aware of who to notify, ask if they've ever experienced this situation and what actions did they take? Was any resident harmed?*
  - *If the staff member is aware of who to notify, what direction were they given? Was any resident harmed?*

Staff Competency:

- ☐ *If staff indicated they do not feel they have the training/skills to meet resident needs, ask them to share why they feel this way.*
- ☐ *Do you receive training before taking care of a resident who requires care that you are not familiar with or haven't performed in a while?*
- ☐ *Have you been asked to do something that you didn't feel you were adequately trained to do? If so, please explain.*
- ☐ *How do you know when a resident has had a change in condition? What kinds of things do you look for? What do you do when you identify a change in a resident's condition? Tip: prompt identification of changes in condition and actions to address a change may prevent and/or decrease adverse outcomes in residents.*

Advance Copy

Sufficient and Competent Nurse Staffing Review

- ☐ *Have you been trained on proper use of resident care equipment?*
- ☐ *Do you receive periodic evaluations of your skills and knowledge?*
- ☐ *Does your facility use agency staff? If so, do you have any concerns about resident care when agency staff are used? If yes, please explain.*
  Tip: facilities are responsible for ensuring all nursing staff, including temporary staff, are competent to care for residents.

Dietary/Kitchen/Dining Staff Interviews:

Interview staff if concerns related to resident food, weight loss, or nutrition are identified and are potentially related to nurse staffing.

- ☐ *Do you hear residents complain about their food getting cold while they wait to be assisted by nursing staff?*
- ☐ *Do you see food trays come back untouched that might indicate short nursing staff?*
- ☐ *Are you aware of any residents that might be absent because nursing staff was not available to assist them to the dining room?*

Additional Front-Line Staff Interviews: *(e.g., dietary, housekeeping, activities, and/or maintenance)*

If Triggered for One Star Staffing Rating, *interview at least 2 additional front-line staff with focused questions such as:*

- ☐ *Have you noticed the facility not having enough staff, especially during the last six months?*
- ☐ *Have you observed the facility not having enough staff to meet residents' needs, such as residents waiting a long time for someone to help them? How often does this happen?*
- ☐ *Do you ever smell bad odors when you are walking through the facility for example, a resident did not receive toileting or incontinence assistance in a timely manner?*
- ☐ *Do you ever hear residents, or their friends and family complain about not enough staff to provide the care needed?*

If Triggered for Excessively Low Weekend Staffing *interview at least 2 additional front-line staff with focused questions such as:*

- ☐ *Are there ever times when there are not enough staff to take care of the residents on the weekends? For example, are any residents calling for assistance for extended periods of time? If so, can you describe what happened to any residents affected?*
  - *If there have not been enough staff during those times, do you know who you can alert to ensure that the residents needs are met?*
  - *If you have ever notified that person, what was their response?*
- ☐ *Have weekend activities ever been canceled due to low staffing to get residents up and dressed to attend (e.g., church services or day trips)?*
- ☐ *Are beds left unmade and rooms messy on the weekend?*

Advance Copy

Sufficient and Competent Nurse Staffing Review

DON or Staff Development Coordinator Interviews: *conducted by* ***the surveyor assigned to complete Part III*** *if concerns with staff competency are identified.*

☐ *How is staff evaluated to assess their competencies, skills, and knowledge to meet the needs of the residents? Tip: if the DON/SDC cannot explain how they assess staff competencies, skills and knowledge, this may indicate a breakdown in competency evaluation.*

☐ *Do you use temporary/contract staff? If so, how do you ensure these staff are competent and have the knowledge and skills to care for residents?*

5. Does the facility have sufficient nursing staff on a 24-hour basis to care for each resident's needs in accordance with their care plans?
☐ *Yes* ☐ ***No F725***

6. Does the facility's nursing staff have the knowledge, competencies and skills required to provide care and respond to each resident's needs?
☐ *Yes* ☐ ***No F726***

7. Does the facility have an RN at least 8 consecutive hours a day for 7 days a week?
☐ *Yes* ☐ ***No F727, cite scope at a minimum of "F"*** ☐ *N/A, the facility has a waiver for the daily RN hours requirement.*

PART III - ONLY COMPLETED BY THE TEAM COORDINATOR OR ASSIGNED SURVEYOR

Observations

☐ *Is nurse staffing information prominently posted at the beginning of each shift, in a clear and readable format, that is accessible to residents and visitors, and includes the facility name, date, census, the total number and actual hours worked for RNs, LPNs, and CNAs who are responsible for resident care?*

8. Is nurse staffing posted daily and includes facility name, date, census, and the total number and actual hours worked per shift for licensed and unlicensed staff responsible for resident care? ☐ *Yes* ☐ ***No F732***

Record Review

☐ *If triggered for Excessively Low Weekend Staffing, review the Facility Assessment to evaluate if the facility assessed resident needs and acuity to determine the number of qualified staff needed to meet each resident's needs.*

9. Did the facility evaluate residents needs and acuity in their Facility Assessment to determine the number of qualified staff needed to meet each resident's needs? ☐ *Yes* ☐ ***No F838*** ☐ *N/A, the facility did not trigger for excessively low weekend staffing.*

Advance Copy

Sufficient and Competent Nurse Staffing Review

Director of Nursing and/or Administrator Interviews:

☐ *Does the DON serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents?*

If concerns with sufficient staff are identified ask:

☐ *Have you ever been concerned that there weren't enough staff to meet each resident's needs? If so, how often and please explain.*

☐ *How do you handle callouts or unanticipated staffing shortages? How often are you not able to replace a call out? Tip: frequent inability to fill open slots assists in determining the extent of staffing issues in the facility.*

☐ *Do you use temporary/contract staff? If so, how often and why?*

If the surveyor is aware of the absence of an RN for at least 8 consecutive hours a day on one or more days *also ask:*

☐ *How often are there days with no RN available to provide care for residents?*

☐ *What types of services or care are not provided when an RN is not onsite for 8 consecutive hours per day?*

If the surveyor is aware of the absence of licensed nursing staff in a 24-hour period on one or more days *also ask:*

☐ *How often are there days with no licensed nurse onsite available to provide care for residents?*

☐ *What types of services or care are not provided when there is no LN(s) staff in a 24-hour period?*

10. Does the facility ensure licensed nurse coverage 24-hours a day?

☐ *Yes* ☐ ***No F725*** ☐ *N/A, the facility has a waiver for LN coverage 24-Hrs per day.*

11. Does the facility ensure the DON serves as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents?

☐ *Yes* ☐ ***No F727, cite scope at a minimum of "F"***

NURSE AIDE (NA) TRAINING AND COMPETENCY EVALUATION (Required when NA competency concerns are identified)

☐ *Review a minimum of five personnel files, including any specific NAs with whom concerns were identified, to determine if the facility:*

- *ensured NAs were certified within 4 months of start date, if they were not certified when hired;*
- *obtained registry verification that the individual has met competency evaluation requirements before their start date. Exceptions: 1) when the individual is a FT employee in a state-approved training and/or competency evaluation program, or 2) can prove they recently successfully completed a state-approved program and has not yet been included in the registry;*

Advance Copy

Sufficient and Competent Nurse Staffing Review

- *verified information from every State registry they believe will include information about the employee before their start date;*
- *verified the most recent completion of a training and/or competency evaluation program; if there has been a continuous period of 24 consecutive months during none of which the individual provided nursing or nursing-related services for monetary compensation;*
- *completed a performance review at least once every 12 months;*
- *provided regular in-service education based on the outcome of the performance review;*
- *provided at least 12 hours of in-service training in a year that is sufficient to ensure continuing competence; and*
- *provided training that addresses dementia management, abuse prevention, areas of weakness identified in performance reviews and the facility assessment, special needs of residents as determined by staff, and care of the cognitively impaired for staff who provide services to cognitively impaired residents. Note: these are the minimum training topics required in F947.*

12. Does the facility ensure full-time nurse aides complete a state-approved training and/or competency evaluation program within 4 months of starting work in the facility? ☐ *Yes* ☐ ***No F728*** ☐ *N/A, no concerns were identified with NA competency.*

13. If a NA has not performed nursing or nursing-related services for monetary purposes in a continuous period of 24 months, did they complete a new training and/or competency evaluation program? ☐ *Yes* ☐ ***No F729*** ☐ *N/A, no concerns were identified with NA competency.*

14. Does the facility complete a performance review of nurse aides at least once every 12 months, and provide regular in-service education based on the outcome of the review? ☐ *Yes* ☐ ***No F730*** ☐ *N/A, no concerns were identified with NA competency.*

15. Does the facility provide nurse aide in-services, at least 12 hours in a year, sufficient to ensure continuing competence, including dementia management, abuse prevention, areas of weakness as determined in the NAs performance reviews, facility assessment, special needs of residents determined by facility staff, and care of the cognitively impaired resident for those nursing aides providing care for individuals with cognitive impairments? ☐ *Yes* ☐ ***No F947*** ☐ *N/A, no concerns were identified with NA competency.*

Other Care Areas to consider: *Pressure Ulcer/Injury, Bowel or Bladder, Dental, Positioning/Mobility/ROM, Accidents, Nutrition, Catheter/UTI, Tube Feeding , Respiratory, ADLs, Environment, Abuse, Neglect, Physical Restraints, Quality of life, Quality of Care, Unnecessary Medications, and Behavioral-Emotional Status.*

Advance Copy