New CMS LTCF RoP
(Overview Checklist)

This checklist provides a high level overview of the changes CMS made to the LTCF Requirements of Participation (RoP) and denotes in which of the three phases of implementation these changes need to be completed. It is intended to give centers an overview of the major changes that are explicitly stated in the new requirements so centers can know where to focus their efforts on meeting the new RoP. It does not describe the implicit changes that may need to occur when implementing the explicit changes. In other words, this document does not provide every action or task a center must take to comply with the new regulations. For example, changes to Policies & Procedures may also require changes in other documentation and staff training in your facility but those are not explicitly stated in the RoP, just the need to have a policy and procedure. It also does not reflect all aspects of the regulatory requirements nor does it reflect changes CMS has made to the format or citations of the existing requirements. Lastly, this document does not outline all the documentation requirements that must be made in the medical record nor the staff competencies that CMS expects.

The RoP will be implemented in a 3-year phased-in approach.
- Phase 1: November 28, 2016
- Phase 2: November 28, 2017
- Phase 3: November 28, 2019

We recommend that you focus on Phase 1 requirements since they must be in place by the end of November 2016. We also recommend employing an organized process improvement approach to guide the effective implementation of the various steps as this will help to produce desired results. This is consistent with QAPI approaches which have been repeatedly shown to result in better resident outcomes and Survey compliance.

As CMS provides more guidance, Surveyor and Citation (S&C) memos, and updates the State Operating Manual (SOM) over the next 12 to 24 months, we expect some information in this document to change.

This document contains explicitly mentioned changes in the RoP related to the following areas:

• Policies & Procedures	• Forms & Documents	• Processes, Systems & Assessments
• Programs	• In-services & Staff Trainings	• Physical Environment
• Plans	• Notifications & Resident Rights	
• Staff Positions & Certification Requirements	• Resident Care Plan & Discharge Plan	

Policies & Procedures

CMS requires that all Medicare and Medicaid certified nursing centers have specific POLICIES & PROCEDURES in place with specific components in each policy. This section outlines all of the new policies that are required and lists policies & procedures that have always needed to be in place but to CMS has made changes to what is required. Existing policy requirements that did not have any changes are **NOT** listed.

Policies & Procedures	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you created all the **NEW** required policies & procedures?			
☐ Visitation rights of residents	§483.10(f)	Phase 1	
☐ Grievance policy	§483.10	Phase 1	
☐ Loss or damage of dentures	§483.55	Phase 2	
☐ Use & storage of foods brought to residents by family/others	§483.60	Phase 1	
☐ Infection Prevention and Control Program	§483.80	Phase 1	
☐ Compliance and Ethics	§483.85	Phase 3	
☐ Monthly drug regimen review	§483.45	Phase 1	● (c)(2) chart review - Phase 2. ● (e) Psychotropic drugs - Phase 2
☐ Notifying clinicians	§483.50	Phase 1	
☐ QAPI feedback, data collection, and monitoring	§483.75	Phase 3	
☐ QAPI systematic approach for quality improvement	§483.75	Phase 3	
☐ Smoking	§483.90	Phase 2	

Policies & Procedures	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Arrangements with other LTC facilities and other providers to receive residents during an event	§483.73(b)(7)	November 15th 2017	Emergency Preparedness Requirements
2. Have you updated and modified **existing** policies & procedures to which the new RoP require changes?			
☐ Advance directives	§483.10(b)(8)	Phase 1	
☐ Bed hold policy	§483.15	Phase 1	
☐ Room Changes	§483.10(b)(15)	Phase 1	
☐ Abuse, neglect and exploitation of residents & property	§483.12	Phase 1	
☐ Reporting of crime	§483.12	Phase 2	
☐ Permitting Resident to Return to Facility	§483.15	Phase 1	
☐ Admissions Policy	§483.15(a)	Phase 1	
☐ Staff Treatment of Residents	§483.12(b)[1]	Phase 1	
☐ Influenza and pneumococcal immunizations	§483.80	Phase 1	
☐ Disaster and Emergency Preparedness	§483.75(m)	Phase 3	
☐ Facility closure	§483.70	Phase 1	
☐ Administrator's duties & responsibilities	§483.70	Phase 1	

Programs

CMS requires that all Medicare and Medicaid certified nursing centers have specific PROGRAMS in place, each with specific components. This section outlines all of the programs that CMS explicitly states are being required.

Programs	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Do you have all the **NEW** "programs" as required?			
☐ Compliance & Ethics program	§483.85	Phase 3	
☐ Activities program	§483.24	Phase 1	
☐ QAPI program	§483.75	Phase 3	Some sections are in Phase 2 and two components are in Phase 1: ● Disclosure of information to Survey Agency 483.75(h); ● Sanctions 483.75(i)
☐ Infection Prevention and Control Program	§483.80	Phase 1	● Linking to facility assessment & antibiotic stewardship - Phase 2 ● Requirement for an Infection Preventionist - Phase 3.
☐ Antibiotic Stewardship program	§483.80	Phase 2	

Programs	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Staff training program (see training & in-service section)	§483.95	Phase 3	Note: the following need to be implemented in phase 1; 483.95(c), §483.95(g)(1), and §483.95(h).

Plans

CMS requires that all Medicare and Medicaid certified nursing centers have specific facility PLANS in place, each with specific components. This section outlines all of the facility plans that CMS explicitly states are being required.

Plans	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you created all the **NEW** required facility plans?			
☐ Infection Control plan	§483.80	Phase 1	
☐ QAPI plan	§483.75	Phase 2	
☐ Emergency Plan	§483.73(a)	November 15th 2017	Emergency Preparedness Requirements
☐ Communication Plan about Emergencies	§483.73(c)	November 15th 2017	Emergency Preparedness Requirements

Staff Positions & Certification Requirements

CMS requires new positions (which can be filled or shared by existing staff) that are required and has made changes to the qualifications for certain existing required positions. Required positions or qualifications (e.g. activities coordinator or feeding assistants) that did not have any changes are not listed here.

Staff Positions & Certification Requirements	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Do you have a person designated for the **NEW** required positions?			
☐ Compliance Contact (in each facility)	§483.85(c)(1)	Phase 3	
☐ Person to Oversee Compliance (must be high-level person within the Organization)	§483.85(c)(2)	Phase 3	
☐ Compliance Officer (for Organization when the Organization has >5 facilities)	§483.85(d)(2)	Phase 3	
☐ Compliance Liaison (in each facility when Organization has >5 facilities)	§483.85(d)(3)	Phase 3	
☐ Infection Preventionist	§483.80(b)	Phase 3	
☐ Grievance Officer	§483.10	Phase 1	
2. Does your **EXISTING** staff who are currently in a required position, meet new changes to those positions?			
☐ Dietician	§483.60(a)(1)(i)	Phase 1	Dietitians hired before 11-28-16 have 5 years to comply
☐ Food Service Director	§483.60(a)(1)(i)	Phase 1	Food Service Directors hired before 11-28-16 have 5 years to comply

Staff Positions & Certification Requirements	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Social Worker	§483.70(p)(1)	Phase 1	

Forms & Documents

CMS requires certain documents, assessments, or plans be used that have a standard set of information in or on them, which we are labeling as "forms." CMS allows the facility to design their own forms. (Note: This does **not** contain list of "forms" a facility may need to develop to help them implement some of the RoP. This section does **not** summarize all the required documentation in the medical record.)

New forms	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you updated or created all the **NEW** forms?			
☐ Discharge Summary	§483.15(c)2 §483.21(c)2	Phase 2 Phase 1	Discharge summary requirements are in two sections.
☐ Discharge plan for each resident	§483.20	Phase 1	
☐ Resident assessment	§483.15	Phase 1	
☐ Baseline Care Plan	§483.21	Phase 2	
☐ Drug regime review report	§483.45(c)3	Phase 1	
☐ Facility-wide assessment	§483.70(e)	Phase 2	

In-services & Staff Trainings

CMS requires new in-services for staff, some prior to orientation, some once and others annually. Some apply to all staff and others to specific staff on specific topics. This section lists the required in-services and staff who need to receive the training. It does not address trainings identified through facility assessment or QAPI program; nor does it address assessment of staff competencies, which are all required as well. It also does not include existing required staff trainings that were not modified by CMS or specified in S&C memos.

In-services & Staff Trainings (specifically required)	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Do you have in-services for all the **newly** required in-services?			
☐ Abuse, Neglect and Exploitation	§483.95(c)	Phase 1	
☐ Quality Assurance and Performance Improvement	§483.95(d)	Phase 3	
☐ Compliance and Ethics	§483.95(f)	Phase 3	
☐ Behavioral Health	§483.95(i)	Phase 3	
2. Have you updated **existing** in-services with the new information or new staff required to be included in these in-services?			

☐ Nurse aide training to include following components:
  ☐ dementia management ((g)2)
  ☐ resident abuse ((g)2)
  ☐ care of the cognitively impaired, if applicable ((g)4)
	§483.95(g)(2) and (g)(4)	Phase 1	

☐ Nurse aide training on areas of weakness determined by performance reviews and the facility assessment	§483.95(g)(3)	Phase 3	

In-services & Staff Trainings (specifically required)	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Communication	§483.95(a)	Phase 3	
☐ Resident Rights and Facility Responsibilities	§483.95(b)	Phase 3	
☐ Infection Control	§483.95(e)	Phase 3	
☐ Emergency Preparedness Training and Testing	§483.73(d)	November 15th 2017	Emergency Preparedness Requirements

Notifications & Resident Rights

CMS requires new information be included in various notifications to residents (and/or representative) at various times throughout the resident's stay. This list only includes notifications that are NEW or MODIFIED and does not include existing notifications that did not change.

Resident Notifications & Resident Rights	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you updated required notification information to be included at time of…..?			
☐ Admission	§483.15(a)	Phase 1	
☐ Before Transfer or Discharge	§483.15(c)3, 4, 5 & 6	Phase 1	
☐ Orientation about Discharge or Transfer	§483.15(c)7	Phase 1	
☐ Resident Rights (including how to file grievance or complaint)	§483.10(j)3	Phase 1	
☐ Participating and updating Care planning process	§483.21(b)1(iv) & 2(i)E	Phase 1	
☐ Participating and updating Discharge plan	§483.21(c)1(v)	Phase 1	
2. Have you updated required notification information about…..?			
☐ Baseline Care plan developed within 48 hours of admission	§483.21(a)3	Phase 2	
☐ Bed hold policy	§483.15(d)	Phase 1	

Resident Notifications & Resident Rights	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Facility charges	§483.10(f) -10, 11 & 17	Phase 1	
☐ Choosing their physician	§483.10(d)(4)	Phase 1	
☐ Signing of care plan	§483.10(c)(2)(v)	Phase 1	
☐ Significant change in mental health – notify State Mental Health authority	§483.20(k)4	Phase 1	
☐ Abnormal lab or radiology results to the clinician	§483.50(a)2(ii) §483.50(b)2(ii)	Phase 1	

Resident Care Plan & Discharge Plan

CMS requires changes to the resident care plan. This section highlights some of those changes. For details review section §483.21 of the RoP. We will be providing more information in checklists and templates in the future.

Resident Care Plan & Discharge Plan	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you created a **Baseline Care Plan** to be developed within 48 hours of admission?			
☐ Does it include the resident's goals?	§483.21(a)1(ii)	Phase 2	
☐ Does it include all of the required orders (physician, dietary, therapy, social services and PASARR recommendations)?	§483.21(a)1(ii)	Phase 2	
2. Have you updated the format of your **Resident Care Plan** to incorporate resident-centered information and discharge plan?			
☐ Have you update the resident assessment to incorporate person-centered?	§483.21(b)1	Phase 1	
☐ Have you incorporated resident-centered goals and wishes about their care, activities, and lifestyle into the resident's care plan?	§483.21(b)1(iv)	Phase 1	
☐ Have you included resident's preferences for future discharge?	§483.21(b)1(iv)	Phase 1	
☐ Have you added new staff to the interdisciplinary team signing off on care plan?	§483.21(b)2(ii)	Phase 1	
☐ Are the services in the care plan culturally competent?	§483.21(b)3(iii)	Phase 1	

Resident Care Plan & Discharge Plan	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Have you incorporated trauma-informed care into the care plan?	§483.21(b)3(iii)	Phase 3	
3. Have you added a **Discharge Plan** as part of the resident's care plan?			
☐ Does your Discharge Plan contain all the information required in a plan?	§483.21(c)	Phase 1	
☐ Have you incorporated resident discharge goals and wishes into the resident's care plan?	§483.21(c)1(vi)	Phase 1	
☐ Have you involved the interdisciplinary team in developing and signing off on discharge care plan?	§483.21(c)1(v)	Phase 1	
☐ Have you shared the discharge plan with the resident and their representative?	§483.21(c)1(v)	Phase 1	

Processes, Systems & Assessments

CMS specifies throughout the new RoP that centers should conduct assessments, monitor systems, and collect data. This section highlights some of those requirements but will be added to over time as more are defined by CMS in SOM, S&C memos, etc.

Processes, Systems & Assessments	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you created systems to collect data, track performance, and assess the facility?			
☐ Have you created a grievance process?	§483.10	Phase 1	
☐ Have you created a system for the accounting of each resident's personal funds?	§483.10	Phase 1	
☐ Have you created a discharge planning process?	§483.21	Phase 1	
☐ Have you developed a monthly drug regimen review process?	§483.45	Phase 1	
☐ Have you created a facility wide assessment?	§483.70	Phase 2	
☐ Have you created a system to track, report, identify and prevent adverse events?	§483.75	Phase 3	
☐ Have you created a system to obtain feedback from staff, residents and families?	§483.75	Phase 3	
☐ Have you created a system to collect data from all departments, including the establishment and monitoring of performance indicators?	§483.75	Phase 3	

Processes, Systems & Assessments	FR Section	Phase (Date Enforced)	Notes on Phase-In
☐ Have you developed a system to prevent, identify, report, investigate, and control infections and communicable diseases for residents, staff, etc.?	§483.80	Phase 2	
☐ Have you developed a system to monitor antibiotic use?	§483.80	Phase 2	
☐ Have you developed a system to detect ethical and compliance violations and allow staff to report incidents?	§483.85	Phase 3	
☐ Have you created a process to ensure the integrity of reported data?	§483.85	Phase 3	
☐ Have you developed a system that allows residents to call staff directly for assistance?	§483.90	Phase 3	
☐ Have you developed a system to track the location of on-duty staff and sheltered residents during and after an emergency?	§483.73(b)(2)	November 15th 2017	Emergency Preparedness Requirements
☐ Have you developed a process for cooperation and collaboration with local, tribal, regional, State or Federal emergency preparedness officials?	§483.73(a)(4)	November 15th 2017	Emergency Preparedness Requirements

Physical environment

CMS is requiring all Medicare and Medicaid certified nursing centers that are constructed, re-constructed, or newly certified after the effective date of November 28, 2016 to accommodate no more than two residents in a bedroom. CMS is also requiring centers that are constructed, or newly certified after the effective date of this regulation to have a bathroom equipped with at least a commode and sink in each room.

Physical Environment	FR Section	Phase (Date Enforced)	Notes on Phase-In
1. Have you addressed the changes to physical environment?			
☐ Have you conducted a regular inspection of all bed frames, mattresses, and bed rails as part of a regular maintenance program to identify areas of possible entrapment?	§483.90(c)	Phase 1	
☐ Have you checked construction and reconstruction plans to ensure that bedrooms accommodate no more than two residents?	§483.90(e)1(i)	Phase 1	Only applies to facilities that receive approval of construction or reconstruction or a newly certified after November 28, 2016.
☐ Have you checked that the resident has a separate bed of proper size and height for the safety and convenience of the resident?	§483.90(e)(2)(i	Phase 1	
☐ Have you checked that each resident room has its own bathroom equipped with at least a commode and sink?	§483.90(f)	Phase 1	Only applies to facilities that receive approval of

Physical Environment	FR Section	Phase (Date Enforced)	Notes on Phase-In
			construction or reconstruction or a newly certified after November 28, 2016.
☐ Is the center adequately equipped to allow residents to call for staff assistance through a communication system from each resident's bedside?	§483.90(g)(1)	Phase 3	
☐ Have you established smoking areas that takes into account nonsmoking residents and complies with applicable Federal, State, and local laws and regulations regarding smoking, smoking areas, and smoking safety?	§483.90(h)(5)	Phase 2	