

Requirement

§483.70(e) Facility Assessment. The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents competently during both day-to-day operations and emergencies. The facility must review and update that assessment, as necessary, and at least annually. The facility must also review and update this assessment whenever there is, or the facility plans for, any change that would require a substantial modification to any part of this assessment.

Purpose

The purpose of the assessment is to determine what resources are necessary to care for residents competently during both day-to-day operations and emergencies. Use this assessment to make decisions about your direct care staff needs, as well as your capabilities to provide services to the residents in your facility. Using a competency-based approach focuses on ensuring that each resident is provided care that allows the resident to maintain or attain their highest practicable physical, mental, and psychosocial well-being.

The intent of the facility assessment is for the facility to evaluate its resident population and identify the resources needed to provide the necessary person-centered care and services the residents require.

Overview of the Assessment Tool

This is an optional template provided for nursing facilities, and if used, it may be modified. Each facility has flexibility to decide the best way to comply with this requirement.

The tool is organized in an excel format with the intent to be completed on a computer. However, you may find it helpful to print it out and then complete it in an electronic format.

1. **Facility Profile** including assessment date, campus/facility name, address, administrator, Medical Director, DON, Governing Body Representative, SSD, FSD, Maintenance Director, Therapy Director, Activity Director, the number of residents both current and historical and the number of licensed beds (this can be broken down however you choose-modify as needed)
2. **Resident Population** including numbers, diseases/conditions, physical and cognitive disabilities and ADL's. This form is based off of CMS Form 672.
3. **Care and Competencies Requirements** will identify the staff competencies required and care areas required based off of the resident population worksheet. This worksheet auto-fills based on the answers in the Resident Population worksheet.
4. **Resident Acuity** is based on each of your residents RUG levels. Every resident that has a completed MDS will be assigned a RUG score. Use the most recent RUG score FOR EVERY RESIDENT (pay source does not matter here). The purpose of this sheet is to give you an indication of the number of nursing minutes required to care for each

resident. **Please note:** The minutes are based on the 2009 strive study and the data is somewhat dated.

5. **Workforce Profile** indicates the number of FTE's here, their education, licenses, certifications etc. In the professional requirement column indicate what your state requires in regards to licensing, certifications, etc. If any additional training needs are indicated based on competency evaluation indicate that in the Training Needs column.
6. **Training Evaluation** should involve a thorough evaluation of your current training program and structure. The intent here is to determine the effectiveness of your training program. Modify the questions to meet the needs of your home/training program.
7. **Services** based on resident needs (includes types of care your resident population requires; the focus is not to include individual level care plans in the facility assessment). This list is not all inclusive and may need modified.
8. **Ethnic, Cultural, Religious Needs** will provide you with a resident population mix based on ethnic, cultural, and religion. Use this sheet to determine if adjustments need to be made in the services, foods, and activities you offer.
9. **Physical Plant** based on the current structure type and building elements. Use this sheet to indicate the condition of your building. Make notes in regards to repairs that may be needed such as paint chip repairs, tile replacement, etc. Consider attaching a copy of a building layout.
10. **Facility Resources** needed to provide competent care for residents. It will identify systems and equipment (both medical and non-medical) needed to provide competent care for your residents. It also includes a budget evaluation and data analysis.
11. **Contracts, MOU's, and Agreements** that should be in place to provide competent care for your residents. Modify this list to fit the needs of your home.
12. **Hazards Vulnerability (Natural, Technological, Human, and Hazardous Materials)** should be both facility and community based using an all hazards approach to risk assessment. You may already have this complete with your Emergency Preparedness Program as required in Appendix Z. *You may attach a copy of your assessments you have already done or complete the worksheet provided.* Remember: Both the facility assessment and your Emergency Preparedness Program must be reviewed annually and as one is updated the other should be also.
13. **Action Plan** can be used to track items identified during the assessment that need further evaluation and attention.

Some of the data sources to use for completion of this assessment may include but are not limited to MDS reports, Quality Measures, 672 (Resident Census and Conditions of Residents) and/or 802 (Roster/Sample Matrix Form) reports, the Payroll-Based Journal, and in-house designed reports such as an infection control, QAPI/QA minutes, and budgets.

Regulatory language on each worksheet is highlighted in a pale orange.

Guidelines for Conducting the Assessment

1. To ensure the required thoroughness, individuals involved in the facility assessment should, at a minimum, include the administrator, a representative of the governing body, the medical director, and the director of nursing. The environmental operations manager and other department heads (e.g., the dietary manager, director of rehabilitation services,

or other individuals including direct care staff) should be involved as needed. Facilities are encouraged to seek input from residents, their representative(s), or families, and consider that information when formulating their assessment.

2. While a facility may include input from its corporate organization, the *facility assessment must be conducted at the facility level*.
3. The facility must review and update this assessment annually or whenever there is/the facility plans for any change that would require a modification to any part of this assessment. For example, if the facility decides to admit residents with care needs who were previously not admitted, such as residents on ventilators or dialysis, the facility assessment must be reviewed and updated to address how the facility staff, resources, physical environment, etc., meet the needs of those residents and any areas requiring attention, such as any training or supplies required to provide care.
 - It is not the intent that the organizational assessment is updated for every new person that moves into the nursing home, but rather for significant changes such as when the facility begins admitting residents that require substantially different care. Likewise, hiring new staff or a director of nursing or even remodeling should not require an update of the facility assessment, unless these are actions that the facility assessment indicated the facility needed to do.
4. The facility assessment should serve as a record for staff and management to understand the reasoning for decisions made regarding staffing and other resources, and may include the operating budget necessary to carry out facility functions.
5. Appendix PP provides surveyor guidance through Interpretive Guidelines in the State Operations Manual. With regard to the facility assessment, Appendix PP states, “If systemic care concerns are identified that are related to the facility’s planning, review the facility assessment to determine if these concerns were considered as part of the facility’s assessment process. For example, if a facility recently started accepting bariatric residents, and concerns are identified related to providing bariatric services, did facility staff update its assessment before accepting residents with these needs to identify the necessary equipment, staffing, etc., needed to provide care that is effective and safe for the residents and staff?”