## F0609 Reporting of Alleged Violations

This material was prepared by the IPRO QIN-QIO, a Quality Innovation Network-Quality Improvement Organization, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication # 12SOW-IPRO-QIN-TA-AA-23-1139



#### **Process**



Every survey summary of deficiencies follow the same pattern:

- State Operations Manual F-tag
- Facility policies and procedures regarding that Ftag topic – example: Reporting Abuse and Neglect
- MDS documentation specific to resident that impacts that topic

#### To mitigate each topic:

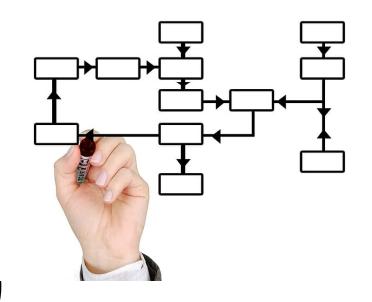
- What is your facility process to review State Operations Manual?
- What is your facility process to update and review your policies and procedures?
- What is your facility process to review and update this particular topic area?



# Think About

Do you have processes in place?

How often do you review your policies/ procedures, processes?







## F0609 Reporting of Alleged Violations (Part 1)

The facility must develop and **implement policies and procedures** that ensure reporting of crimes occurring in federally-funded long-term facilities. The policies and procedures must include but are not limited to the following **annually** notifying covered individuals of that individual's obligation to comply with the following reporting requirements:

- Each covered individual shall report to the State Agency and one or more law enforcement entities for the political subdivision in which the facility is located any reasonable suspicion of a crime against any individual who is a resident of, or is receiving care from, the facility.
- Each covered individual shall report immediately, but not later than 2 hours after forming the suspicion, if the events that cause the suspicion result in serious bodily injury, or not later than 24 hours if the events that cause the suspicion do not result in serious bodily injury.





## F0609 Reporting of Alleged Violations (Part 2)

In **response** to allegations of abuse, neglect, exploitation, or mistreatment, the facility must:

- Ensure that all alleged violations involving abuse, neglect, exploitation or mistreatment, including injuries of unknown source and misappropriation of resident property, are reported immediately but not later than 2 hours after the allegation is made. If the events that cause the allegation involve abuse or result in serious bodily injury, or not later than 24 hours if the events that cause the allegation do not involve abuse and do not result in serious bodily injury, to the administrator of the facility and to other officials (including to the State Survey Agency and adult protective services).
- Report the results of all investigations to the administrator or his or her designated representative and to other officials in accordance with state law, including to the State Survey Agency, within 5 working days of the incident. If the alleged violation is verified appropriate, corrective action must be taken.



#### Intent

#### The intent is for the facility to develop and implement policies and procedures that:

- Provide annual notification to each covered individual of their obligation to comply with the reporting requirements
- Ensure reporting reasonable suspicion of crimes against a resident or individual receiving care from the facility within prescribed timeframes to the appropriate entities
- Ensure that all covered individuals, i.e., the owner, operator, employee, manager, agent, or contractor, report reasonable suspicion of crimes. The facility should provide oversight and monitoring to ensure that they implement the required policies and procedures. In addition, the facility must report alleged violations related to mistreatment, exploitation, neglect, or abuse, including injuries of unknown source and misappropriation of resident property. They should report the results of all investigations to the proper authorities within prescribed timeframes.

## **Key Elements of Non-Compliance**



The surveyor's investigation will generally show that the facility **failed** to do any one or more of the following:

- Develop policies and procedures related to ensuring the reporting of suspected crimes, within mandated timeframes (i.e., immediately but not later than two hours if the suspected crime resulted in serious bodily injury, within 24 hours for all other cases) and notifying covered individuals annually of their reporting obligations.
- Identify a situation as an alleged violation involving abuse, neglect, exploitation or mistreatment, including injuries of unknown source and misappropriation of resident property.



## **Key Elements of Non-Compliance**



Healthcentric

- Report an alleged violation involving abuse or resulting in serious bodily injury immediately, but not later than two hours after the allegation is made, to the administrator of the facility and to other officials. This includes the state survey and certification agency and adult protective services in accordance with state law.
- Report an alleged violation involving neglect, misappropriation of resident property, exploitation, or mistreatment, and does not result in serious bodily injury not later than 24 hours to the administrator of the facility and to other officials. This includes the state survey and certification agency and adult protective services in accordance with state law.
- Report the results of all investigations within 5 working days to the administrator or his/her designated representative and to other officials in accordance with state law (including to the state survey and certification agency).

### **Triggers**

- 1. Not having or following policy and procedures
- 2. Lack of staff education of policies and procedure and reporting requirements
- 3. Failure to report
- 4. Not reporting in a timely manner
- 5. Failure to report to the proper authorities
- 6. Incomplete investigations
- 7. Failure to investigate injuries of unknown origin
- 8. Failure to protect resident after incident was discovered





### **Meeting Regulations**

Review policies and procedures to make sure they are aligned with the regulations. State requirements may vary!

Ensure that all staff have been educated as to:

- What needs to be reported
- When to report
- To whom to report

Ensure all incidents are reported as required and in a timely manner.

Ensure all incidents are properly investigated.

Above all else, ensure action is taken to protect the resident!



## Think About

#### **Thoughts for Improvement:**

- 1. How often do you review your policies and procedures?
- 1. When and how often do you educate your staff? And which staff?
- 3. Do you have a process and is everyone aware of what to report and the reporting timelines?

Questions? Comments? Discussion?

### **Surveyor Guidance**

• Critical Element Pathways to help surveyors. The pathways include observations, interviews and record review investigative probes.

Revised Long-Term Care Surveyor Guidance | CMS

#### **Thank You!**







@IPROQINQIO



@IPRO QIN-QIO



IPRO QIN-QIO

