

WELCOME

GINA GAMBARO

Director of Marketing



Asking a question is easy!

- About the topic being presented
 - Click on the Q&A icon at the bottom of your screen
 - Type your question & hit Enter
 - Questions will be answered at the program's end, or offline if time runs out
- About technical issues or CE credit
 - Click on the Chat icon at the bottom of your screen
 - Type your question & hit Enter
 - Our team will reply to your question right away



Housekeeping notes

- This webinar is being recorded for on-demand access later, after the series' conclusion
- To earn CE, you must attend the entire session
- For those <u>sharing</u> a computer
 - Complete a manual sign-in sheet before the program ends
 - Go to Chat to access the link for the sign-in sheet
 - Each participant must complete an evaluation to obtain CE credit
 - Instructions will also be emailed to the program registrant



2024 WEBINAR SERIES

ILLINOIS REGULATORY UPDATE

Sheila Baker, RN, MBA, JD Illinois Department of Public Health, Office of Healthcare Regulations



Agenda

- ▶ Welcome and Introductions
- ▶ OHCR Overview
- ► Long Term Care
- ► Enforcement Cycle
- ► Complaints, Allegations, and Deficiencies
- ▶ Department and Regulatory Updates
- Questions







Vision

Illinoisans empowered and supported to achieve their optimal health with dignity and acceptance in diverse and thriving communities.



Mission

The Illinois Department of Public Health is an advocate for and partner with the people of Illinois to re-envision health policy and promote health equity, prevent and protect against disease and injury, and prepare for health emergencies.

IDPH VISION AND MISSION



The Office of Health Care (OHCR)

Overview



OHCR Leadership Team



Sheila Baker Deputy Director



Barbara Gold Assistant Deputy Director



Camille Hicks Bureau Chief Long Term Care



Gary Goins
Division Chief Compliance Assurance



Heather Jordan
Division Chief License & Certification



Jonathan Harwood
Division Chief Field Operations



Erin Rife Assistant Bureau Chief



Becky Jorn Division Chief SIU



Karen Senger Division Chief Health Care Facilities & Programs



Dennis Schmitt
Division Chief Life Safety
& Construction



George Logan
Division Chief Administrative
Rules and Regulations



Administrative Rules and Regulations

Health Care Facilities & Programs

OHCR

Life Safety & Construction

Bureau of Long Term Care



The Divisions

OHCR consists of four divisions: Bureau of Long-Term Care, Life Safety and Construction, Health Care Facilities and Programs, and Administrative Rules and Regulations

OHCR licenses and inspects 1,629 long-term care facilities providing skilled nursing, intermediate nursing care, sheltered care, community living, assisted living, specialized mental health rehabilitative services, and care for individuals with intellectually complex/developmentally disabled needs and 140,000+ beds.

OHCR also licenses and inspects a 3,172 non-long-term care facilities (hospitals, surgical centers, renal facilities) and in-home agencies (hospice, home health) providing medical care or home services in our Health Care Facilities and Programs division.

Life Safety and Construction reviews and approves plans for new hospital and long-term facility new construction and renovations. This section also works in conjunction with all health care and long-term facilities performing annual federal and state licensing certification surveys.

OHCR's Administrative Rules Division is responsive to changes in the statutory and regulatory framework necessary to authorize the activities of the OHCR. This division also conducts criminal background checks on unlicensed health care workers, approves training for basic and advanced nursing assistant programs. And maintains the Health Care Worker Registry.

The office also conducts and/or participates in many regulatory mandated boards and committees which provide recommendations or requirements for the implementation and enforcement of Acts and Rules including, Health Care Facilities Review Board, Long Term Care Advisory Board, Developmental Disabilities Advisory Board, Hospice and Palliative Care Advisory Boards and more.



Statutorily Mandated Boards/Task Forces/Committees

State Board of Health Rules Committee

Long Term Care Advisory Board

Intellectual Disabilities/Developmental Disabilities

Home Health Agency, Home Nursing and Home Services

Hospital Advisory Board

Sexual Assault Survivors Emergency Treatment Act Task Force

Ambulatory Surgical Treatment Center Board Meeting

Hospice and Palliative Care Advisory Board

Abuse Prevention Review Team

Abuse, Neglect & Theft Committee



Bureau of Long-Term Care

Licensure and Certification

Special Investigations Unit

Division of Field Operations

Compliance Assurance

Assisted Living



Bureau of Long-Term Care Overview

The Bureau of Long-Term Care has the following divisions: License and Regulation, Special Investigations Unit, Long Term Care Field Operations, Compliance Assurance, Assisted Living

The Bureau of Long-Term Care (Bureau) is responsible for ensuring long-term care facilities comply with the provisions of applicable federal regulations and state statutes.

Office of Health Care Regulation is a duly recognized State Agency for the Centers for Medicare and Medicaid and surveys all federal facilities in accordance with the applicable CFR, Federal State Operations Manual, NHCA, and Illinois Administrative Rules.

We work with CMS daily, performing annual federal recertification surveys, complaint surveys, reviewing 2567s, scope and severity of citations, immediate jeopardy situations, evaluating plans of correction, state licensure surveys, re-visits as required, and many other facility actions.

OHCR licenses long term care facilities (SNFs, NFs, Developmental Disabilities, Shelter Care, SMHRF, Assisted Living), including over 135,000 beds throughout the state. Our surveys have increased in number for the past 5 years. In 2023 we conducted 13,154 surveys.

The Bureau also operates a 24/7 central complaint registry to serve the needs of individuals seeking to express concerns about the quality of care provided in long-term care and medical facilities.

In the past 5 years, complaints, allegations, and citations have trended upward numerically requiring increased numbers of surveys by staff.



Facility Types Regulated

Skilled and Intermediate

Specialized Mental Health Rehabilitation

Developmental Disability

Assisted Living

Shelter Care

Supportive Living

Community Living

Illinois Veterans Homes

State Operated Developmental Centers

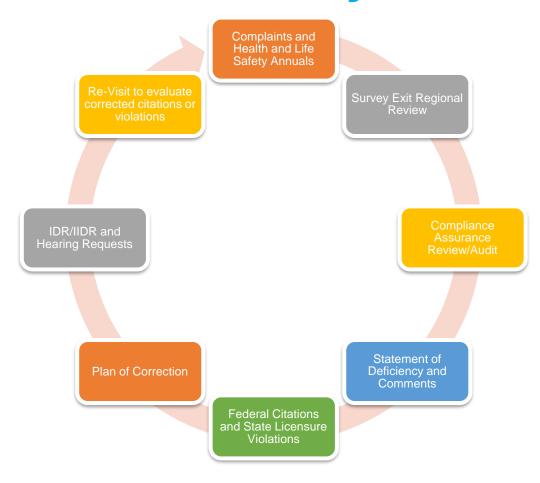


IDPH Survey Enforcement

Process Timeline



Facility Enforcement Cycle Overview





Enforcement Process

"D" or above begins survey (enforcement) cycle

DDPNA in 3 months or Discretionary Denial of Payment for New Admissions (DDOPNA) in less time

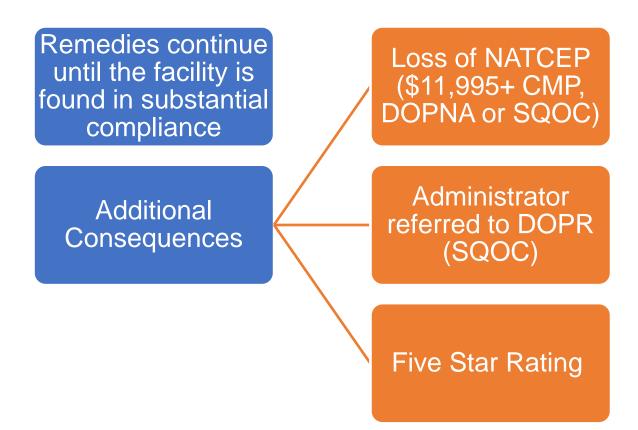
Termination in 180 days

Other remedies may be imposed, recommended or imposed

With "A," "B," or "C" must still submit POC but are considered in substantial compliance.



Enforcement Process (cont'd)





Long Term Care Survey Process for Federal and Tate Licensed Facilities

- 1. Annual or Complaint Survey Initiated withing the Bureau of Long-Term Care
- 2. Survey Team Entrance for Annual Review and/or Complaint Investigation Process (unannounced entry for annual 12-15 month cycle 1-30 day entry for complaints based on level of urgency)
- 3. Survey Exit Date starts an Enforcement Cycle (CMS termination 180 days/DD 90 days)
- 4. Surveyor, team and supervisor completes investigation, review supportive documents and generates a Statement of Deficiency (2567) (1-10 days)
- 5. Upon documentation completion with findings, survey documentation is forwarded to Compliance Assurance Division for review of federal and state violation citations and audit (2-5 days)
- 6. Statement of Deficiency sent to facility for comments (10 -15 days)
- 7. Comments reviewed by Compliance Assurance and Region, if applicable (2-5 days)



Survey Process Continued

- 8. Final 2567 sent to CMS for federal violations and Notice of Violations (NOV) for state violations review which is then forwarded to the facility (5-10 days)
- 9. Facility provides a Plan of Correction to IDPH (10 days), if not accepted it will be returned to the facility to rewrite with a new due date.
- 10. Federal D Level Citation and above require re-visit for clear all citations, all State Licensure Violations with substantial probability for harm require re-visit. (15-30 days) Facility may be required to pay a fine or penalty as well as DOPNA or DDPNA for failing to come into compliance
- 11. At this point, information may be shared with the public, CMS and IDPH will share survey information it's website.
- 12. Cycle of enforcement continues until all citations are corrected including additional complaints received within the enforcement cycle (max 180 days)
- 13. Facilities are also able to request and IDR, IIDR, or a Hearing during this enforcement cycle process



Average Survey Timeline (40 – 60 days)

Annual or Complaint Survey (5 days)

Survey Exit and document completion (5 days)

Compliance Assurance Completes 2567 (2 days)

Statement of Deficiency sent to facility, receive comments (10 days)

Compliance Assurance review comments and integrates if required (2 days)

CMS Citations, fines and penalties, State Notice of Violations (7 days)

Facility Plan of Correction and Acceptance (10 days)

Information shared on website (10 days)

Re-Visit or Desk Audit on Outstanding Violations (15 days)

All citations cleared enforcement cycle ends/ not cleared cycle continues

Opportunity for Internal, Independent and Hearing

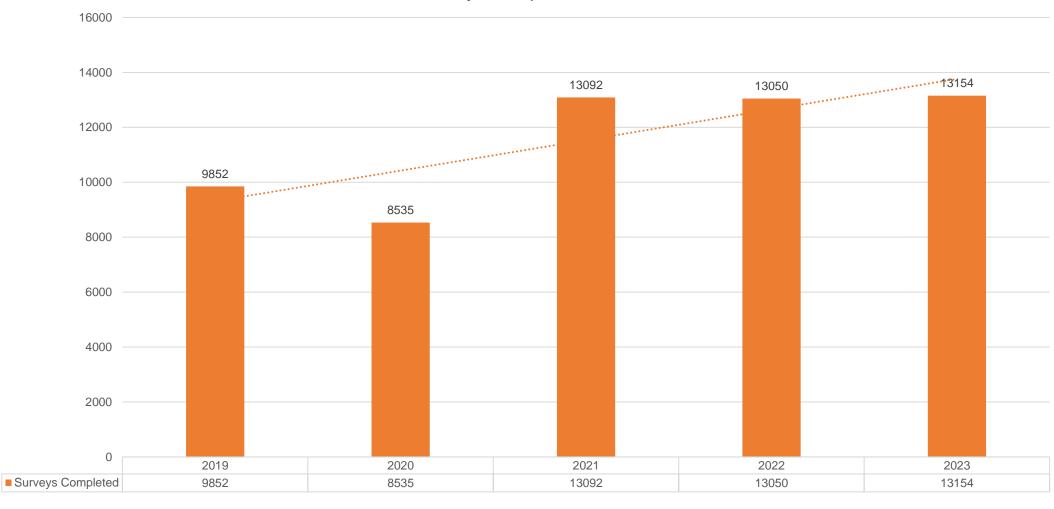
Average total days of survey process from survey exit (40-60 days)



Complaints, Allegations, and Deficiencies

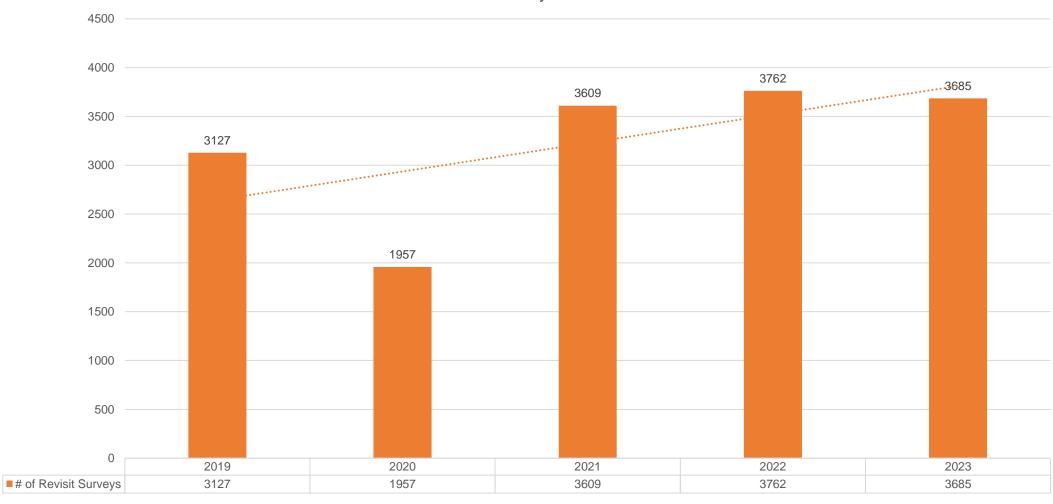


OHCR Surveys Completed 2019 - 2023





of Revisit Surveys 2019-2023





OHCR 2024 Plans

Reorganization,
Modernization, Collaboration
and Education





Transforming Data and Improving Function and Efficiency

- Data Modernization Plan includes moving current systems to new platform and creating new platforms where none existed prior
- Minimize paper reporting improving only storage and decreasing storage requirements
- Scheduling platform for all staffing activities for increased accountability
- Integration with external platforms mandated by CMS
- Improved reporting and data analysis
- July 2024, training and roll out for facilities
- Roll out for phase 2, 3, and 4 dates are in planning process





Training and Education



- Initiate office hours for facilities to call and address general survey questions with OHCR
- Facility training webinar sessions addressing the survey process, long cycles, plans of correction, and addressing high level scope and severity in citations
- OHCR Educational Summit providing additional training and education addressing quality improvement for long term care facilities
- Facility Training for Long Term Care licensure and other regulatory activities to improve licensure and renewal process, online payment abilities, and communication with department



Focus on Communication



- Providers Meetings
- Senior Advocacy Meetings
- IndustryPresentations
- Advisory Board Meetings



OHCR Regulatory Update





CMP Grants

The Department has established a yearly grant cycle for CMP grants, with solicitation and grant making occurring from January through June of each year and grant execution commencing on or around July 1 of each year. In 2024, the solicitation process will follow the Grant Accountability and Transparency Act (GATA), 30 ILCS 708, and corresponding rules found in Title 44, Part 7000 of the Illinois Administrative Code. The Notice of Funding Opportunity (NOFO) will specify who is eligible, how to apply for the CMP grant funds, and the types of projects that can be funded.

Beginning in April 2024, the State of Illinois will solicit applications for nine Grant Programs that benefit nursing home residents and are designed to protect and/or improve their quality of care or quality of life. The nine Grant Programs are:



Direct Care Staffing Requirements

Part 300 Direct Care Staffing (section 300.1230)

Regulation provides specific minimum staffing ratios for nursing and personal care staff

- According to the section the acuity and needs of the residents including review Payroll based journal (PBJ) data and submission of facility census information.
- We are currently in the implementation period through December 2024. During this period facilities are required to submit all information as required by the administrative rules.
- Facilities are notified by the Department of compliance or noncompliance. The determined fine amount will be attached for review purposes only. Fines will not be assessed until the implementation period is completed.
- Noncompliant facilities will be required to submit a Plan of correction and post a notice in their facility until the POC is accepted or the violation corrected.



Assisted Living and Shared Housing Act



Adopted amendments to the Assisted Living and Shared Housing Establishment Code to clarify requirements related to complaint procedures and other IDPH procedures. This rulemaking also includes updates to life safety requirements and statutory requirements pursuant to Public Act 102-1007.







Presented by:

Sheila A. Baker JD, MBA, RN Deputy Director Office of Health Care Regulation Illinois Department of Public Health



Q&A



About CE credit

Administrator credit

This program has been approved for one total participant hour of continuing education credit by the National Continuing Education Review Services (NCERS) of the National Association of Long-Term Care Administrator Boards (NAB).

Approval #20250717-1-A104539-DL

Nursing credit

This program has been approved for one total participant hour of continuing education credit by The Illinois Board of Nursing, an approved sponsor of continuing education by the Illinois Department of Professional Regulation.



Obtaining CE credit

- Complete the evaluation at the conclusion of this program:
 - In your web browser
 - Also emailed immediately following this program
- For those sharing a computer to view the webinar:
 - Submit your sign-in sheet to the email address listed on the form
 - Each participant will then be emailed a link to the evaluation
 - Each person must complete an evaluation to receive CE credit
- CE certificates should be emailed in the next 30 days



Want more CE after this? Stay tuned for our upcoming webinars:

ForumPharmacy.com

September 19, 2024

Antibiotic Stewardship

November 21, 2024

To Be Announced Soon



THANK YOU!