Office of Inspector General

2019 Update



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Background

In 2016, the Centers for Medicare and Medicaid Services (CMS) updated its health care facilities' Life Safety and Emergency Preparedness regulations to improve protections for all Medicare and Medicaid beneficiaries, including those residing in longterm care (LTC) facilities

The implementation date for the new regulations was November 15, 2017

Background

- Updates include requirements that facilities have:
 - expanded sprinkler systems and smoke detector coverage to protect residents from fire hazards, and
 - an emergency preparedness plan that is reviewed, trained on, tested, and updated annually
- In New York State, the Department of Health is responsible for conducting surveys at LTC facilities to ensure compliance

Objective

Our objective was to determine whether New York State ensured that selected nursing homes in New York that participate in the Medicare or Medicaid programs complied with CMS requirements for life safety and emergency preparedness.

Methodology

We worked with CMS to analyze the 620 LTC facilities in New York State

- CMS provided us with a subset of 83 facilities that had at least one level 3 or 4 violation (where actual harm has or could occur)
- From the subset, we selected 20 facilities that had either multiple violations or an emergency plan or sprinkler system violation in the last three years

We conducted unannounced site visits at the 20 facilities from January 2018 to April 2018

Findings - Life Safety Code Violations

Means of egress impeded

- **Gamma** Egress doors would not open
- Discharge from fire exits impeded
- □ Exit signs missing or not illuminated

Findings - Life Safety Code Violations

- □ Hazardous area enclosure inadequate
- Cooking areas (hoods not serviced and/or extinguishing system not checked)
- □ Fire alarm control functions inadequate
- □ Fire alarm testing/maintenance

Findings - Life Safety Code Violations

- Lack of adequate smoke and/or carbon monoxide (CO) detectors
- Sprinkler system impeded by cluttered areas around sprinkler heads
- □ Sprinkler system testing/maintenance
- □ High rise building not fully sprinklered

Findings - Emergency Preparedness

- Emergency plan not updated annually
- □ Risk assessments not done
- □ Resident population needs not addressed
- Continuity of operations plan and coordination with local

emergency management

Findings - Emergency Preparedness

- □ Inadequate food, water, medical supplies for at least 3 days
- Inadequate generator electrical coverage or enough fuel to last at least 3 days
- Unsafe generator location
- □ Inadequate generator testing/maintenance

Findings - Emergency Preparedness

- Inadequate plans for sheltering, evacuation, tracking residents, or transfer of residents
- Medical records in an emergency
- □ Inadequate communications plan
- Inadequate emergency plan training









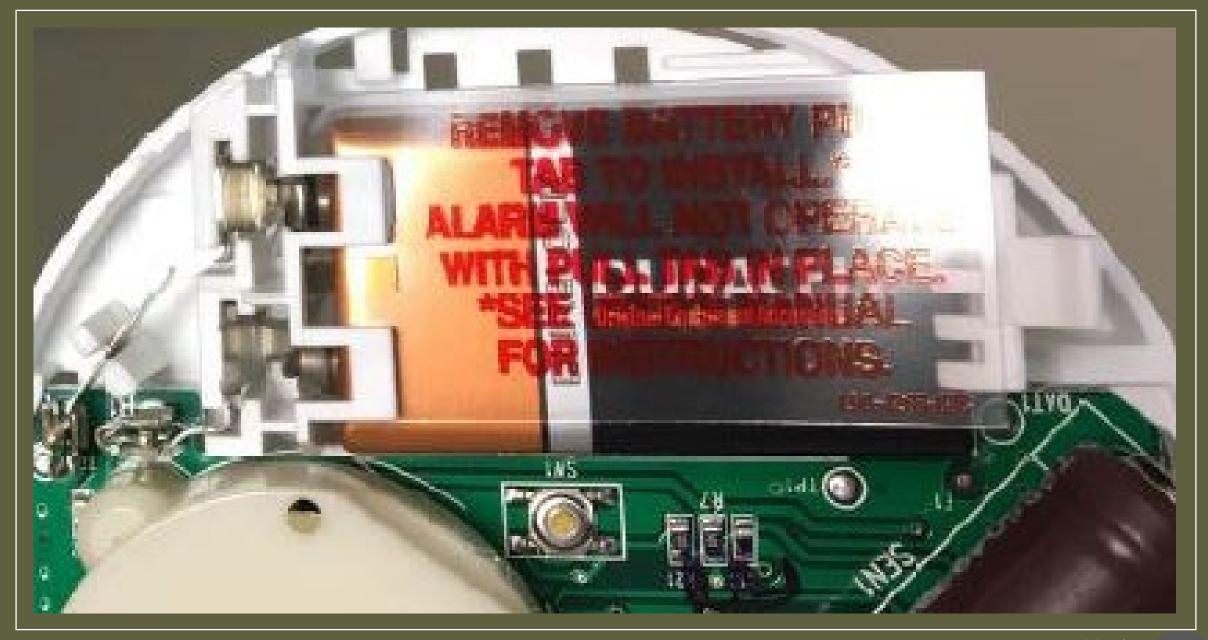






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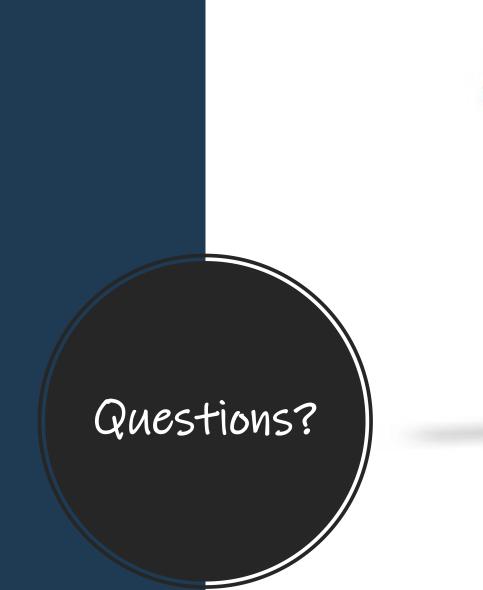


OIGRecommendations

□ follow up with the 20 nursing homes to ensure corrective actions have been taken regarding the life safety and emergency preparedness deficiencies identified in this report,

- work with CMS and other States' survey agencies to develop standardized life safety training for nursing home staff,
- conduct more frequent surveys at nursing homes with a history of multiple high-risk deficiencies, and
- Instruct all nursing homes to install carbon monoxide detectors as required by New York State law and modify its survey procedures to include a check for carbon monoxide detectors.







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