

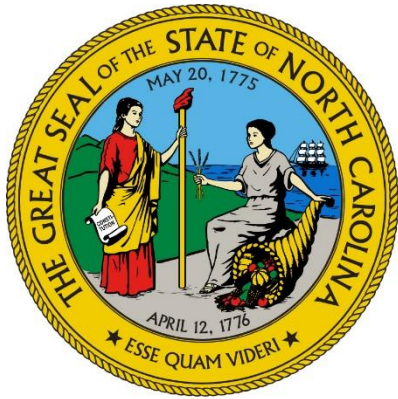


NC Department of Health and Human Services

Presentation to the North Carolina Institute of Medicine Task Force on Health Services for Individuals who are Deaf and Hard of Hearing

Division of Health Service Regulation

August 23, 2019



Hospitals

Azzie Conley, RN

Chief, Acute and Home Care Section

August 23, 2019

Federal Authority

Sections 1864(a) and 1902 of the Social Security Act require that State health agencies or other appropriate State agencies be used to determine whether health care entities meet the requirements to participate in the Medicare (Title XVIII) and Medicaid (Title XIX) programs. Agreements between CMS and the various State Agencies (SA) stipulate that CMS will provide funds to the SA for the reasonable and necessary costs of performing the functions authorized/required by the agreements.

CMS sets forth the requirements and interpretations of those requirements that a SA must follow.

Federal and State Authority

- **Mandatory State Licensure**
- **Voluntary Participation**
- **Medicare & Medicaid**
- **Accredited**

Regulations

Section 504 of the Rehabilitation Act

Americans With Disabilities Act Title III

CMS Federal Regulations

- ▶ **§482.11 Compliance with Federal, State, and Local Laws**

- ▶ **A0020, A0021**

- ▶ **§482.13 Patient's Rights**

- ▶ **A0130, A0131**

- ▶ **§482.23 Nursing Services**

- ▶ **A0385, A0392, A0395, A0396,**

Regulations

► **American With Disabilities Act- Title III -
Subpart C - Governing Body
§ 36.303 Auxiliary aids and services**

► **NCGS § 168A-4.
Reasonable accommodation duties**

10A NCAC 13B .5503 INFORMED CHOICE

Regulations

► **Patient Assessments**

► **Patient Care Plans**

► **Patient Care Delivery**

► **Patient Discharge Planning**



Adult Care Homes

Libby Kinsey, RN

Assistant Chief, Adult Care Licensure Section

August 23, 2019

Adult Care Homes

- **What is an Adult Care Home?**
- **Who is Served in an Adult Care Home?**
- **How is the Regulatory Oversight Carried Out?**

What is an Adult Care Home

Licensed Assisted Living facility providing scheduled and unscheduled personal care to residents

- Assistance with Activities of Daily Living**
- Medication Administration**
- Supervision**
- Referral for medical needs, therapy and skilled treatment**

Two types of facilities

- Family Care Homes (627)**
- Adult Care Homes (595)**

Who lives in a Adult Care Home?

Adults aged 18 and above

- Over 28,000 residents
- 63% Seventy-five and older
- 30% Fifty-five to Seventy-four

Primary diagnosis

- 41% Alzheimer's or Related Dementia
- 14% Diagnosis of Mental Illness

Some facilities Serve Specific Populations defined by Licensure

- 55 and Older (414)
- Special Care Units for Residents with Alzheimer's and Related Disorders (250)

How is Regulatory Oversight Carried Out?

Annual and Biennial Inspections by the Adult Care Licensure Section

Routine Monitoring and Complaint Investigations by Local County Departments of Social Services

Determine Compliance with Rules and Statutes

- Residents Rights**
- Assessment and Care Planning**
- Provision of Personal Care and Supervision**
- Referral to qualified health professionals**
- Implementation of care, treatment, medication orders**



Nursing Homes

Cindy H. Deporter, MSSW
State Agency Director

August 23, 2019

NH Licensure and Certification

- License and Certify 438 nursing homes in NC.**
 - 9 of these facilities are licensed only facilities**
 - The remainder are certified for Medicare or Medicaid or dually certified for both Medicare and Medicaid Funding**

- Recertification Survey Annual Survey and Complaint Surveys**

- Federal oversight is usually more stringent and has more enforcement options. State Rules require assessment of the resident's function, cognitive and psychosocial status**

NH Licensure and Certification

- Survey teams are composed of nurses, dietary staff, pharmacist and social workers.**
- Surveys take four days to complete and we look at over 500 regulatory requirements**
- During Surveys a comprehensive assessment is completed on every resident within the first 14 days of admission.**
- The survey is done on a tablet which has compiled all the assessment information on every resident that has been in the facility for six months.**
- The software targets residents who are outliers or have identified areas for our staff to review.**
- Surveyors interview, observe and look at records of residents**
- Hearing is reviewed on each annual recertification survey.**

NH Licensure and Regulation

- The facility is required to assess and then care plan what is determined by the comprehensive assessments.**
- The facility must ensure that the resident is using his or her normal hearing appliance, determine how the resident hears in different situations within the facility, and how to best be communicated with in the nursing home**
- They have to determine if the hearing loss can be reversed or if this is a permanent condition and how the resident copes with this.**
- The care plan addresses how the resident communicates and how the staff communicate with the resident.**
- The care plan should address how the hearing devices be care planned and instructions on how they are to be maintained, when the resident should**

QUESTIONS ???????