**Caring for the Resident Environment**

**Competency**

Suggested Implementation Checklist

**Suggested Implementation Checklist: Caring for Resident Environment**

| **Regulation** | **Recommended Action** |
| --- | --- |
| **F584 Safe Environment.**  “The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.  The facility must provide—  “§483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible.   1. This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk.”   “A personalized, homelike environment recognizes the individuality and autonomy of the resident, provides an opportunity for self-expression, and encourages links with the past and family members. The intent of the word “homelike” in this regulation is that the nursing home should provide an environment as close to that of the environment of a private home as possible. This concept of creating a home setting includes the elimination of institutional odors, and practices to the extent possible.”  “Many facilities cannot immediately make these types of changes, but it should be a goal for all facilities that have not yet made these types of changes to work toward them. A nursing facility is not considered non-compliant if it still has some of these institutional features, but the facility is expected to do all it can within fiscal constraints to provide an environment that enhances quality of life for residents, in accordance with resident preferences.  A “homelike” environment is not achieved simply through enhancements to the physical environment. It concerns striving for person-centered care that emphasizes individualization, relationships and a psychosocial environment that welcomes each resident and makes her/him comfortable. It is the responsibility of all facility staff to create a “homelike” environment and promptly address any cleaning needs.  In a facility in which most residents come for a short-term stay, residents would not typically move his or her bedroom furniture into the room, but may desire to bring a television, chair or other personal belongings to have while staying in the facility.”[[1]](#footnote-1)  2. Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;  3. Clean bed and bath linens that are in good condition;  4. Private closet space in each resident room,  5. Adequate and comfortable lighting levels in all areas  6. Comfortable and safe temperature levels.  7. The Maintenance of comfortable sound levels.[[2]](#footnote-2) | * Review facility plan, policies and procedures for safe environment including:   + Homelike environment   + Personal Belongings   + Comprehensive Assessment   + Housekeeping and Maintenance   + Clean bed and bath linens   + Closet space   + Adequate lighting   + Safe temperatures   + Appropriate sound * Review past survey citations related to Safe Environment * Initiate/Review all licensed nurses’, CNAs’, All Staff, and Volunteer/Contracted staff education files for Safe Environment training and areas of weakness in this area as determined in performance reviews. * Develop a training plan for designated staff regarding Safe Environment. * Incorporate above training into orientation and annual in-service calendar. * Review policies, procedures, and practices related to the comprehensive care plan process. * Utilize QAPI for root cause analysis and performance improvement projects. * Develop a training plan for IDT members for the comprehensive care plan process. * Provide training and resources for management level nursing staff regarding supervision and monitoring for compliance related to Safe Environment policies and procedures; *e.g.,* CMS-20061 “Environmental Observations Critical Element Pathway.” * Assess the resident’s safety ability with all items within their environment * Educate staff on MSDS procedure, evaluation of physical plant hazards, life safety hazards, reporting, documenting, and communication * Conduct a facility evaluation of Environment, focuses: * Resident personal items for self-expression and links to family and past and preferences. (pictures, magazines, books) * Closets and personal space * Odors * Overhead paging * Piped in music * Meal observations use CMS-20053 Dining Observation Critical Element Pathway * Institutional signage in resident areas * Clutter * Medication/treatment carts * Chair/bed and door alarms * Curtains/Window treatments * Furniture * Facility Temperatures |
| **F838 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.”[[3]](#footnote-3) | * Review/Update Facility-Wide Resource Assessment regarding census, religion, culture, and diagnoses of the facility’s resident population. * Review/Update Facility-Wide Resource Assessment regarding sufficient staffing for monitoring of risks and environment, use CMS-20062 Sufficient and Competent Staff Critical Element Pathway * Review/Update Facility-Wide Resource Assessment regarding specialty treatments, conditions, and equipment of environment and associated staffing. * Review/Update Facility-Wide Resource Assessment regarding physical plant, buildings, health information technology, * Review/Update Facility-Wide Resource Assessment regarding licensed nurses’ competencies and skill sets and CNAs’ competencies and skill sets. * Review/Update Facility-Wide Resource Assessment regarding volunteer and contracted staff education and competencies. |
| **F636 Resident Assessment**  “A facility must make a comprehensive assessment of a resident’s needs, strengths, goals, life history and preferences, using the resident assessment instrument (RAI) specified by CMS. The assessment must include at least the following:  (i) Identification and demographic information  (ii) Customary routine.  (iii) Cognitive patterns.  (iv) Communication.  (v) Vision.  (vi) Mood and behavior patterns.  (vii) Psychological well-being.  (viii) Physical functioning and structural problems.  (ix) Continence.  (x) Disease diagnosis and health conditions.”[[4]](#footnote-4) | * Review policies/procedures for comprehensive assessment process * Education the interdisciplinary team on how to complete the resident specific assessments and RAI process |
| **F558 Reasonable Accommodations of Needs/Preferences**  “The right to reside and receive services in the facility with reasonable accommodation of resident needs and preferences except when to do so would endanger the health or safety of the resident or other residents.”[[5]](#footnote-5) | * Review facility policy and procedure on process to identify resident’s preferences and provision of efforts to use this information to individualize the resident’s physical environment * Provide education to the IDT on the facility policy and procedure |
| **F557 Respect, Dignity/Right to have Personal Property**  “The right to retain and use personal possessions, including furnishings, and clothing, as space permits, unless to do so would infringe upon the rights or health and safety of other residents.”[[6]](#footnote-6) | * Review facility policy and procedure on process for resident to retain and use personal possessions as space permits and rights/safety of other residents in the facility * Provide education to the IDT on the facility policy and procedure |
| **F908: Essential Equipment, Safe Operating Condition**  “Maintain all mechanical, electrical, and patient care equipment in safe operating condition.”[[7]](#footnote-7) | * Review facility policy and procedure for preventative maintenance program for all mechanical, electrical and patient care equipment * Educate maintenance department in preventative maintenance program * Identify documentation to substantiate program compliance * Educate all staff on process to report equipment failure or concerns |
| **Physical Plant Hazards**  F838 Facility Assessment:   * Supervision and/or Containment of hazards * Chemicals and Toxins * Drugs and Therapeutic Agents * Plants and other “natural” Materials * Water Temperatures * Electrical Safety | * Review policies, procedures, and practices related to Chemical and toxins, Electrical safety, and Water temperature * Education all staff in physical plant hazards * Provide audit system to monitor for physical plant hazards |
| **F689**  **Accidents.**  “The facility must ensure that –  §483.25(d)(1) The resident environment remains as free of accident hazards as is possible; and  §483.25(d)(2) Each resident receives adequate supervision and assistance devices to prevent accidents.  The intent of this requirement is to ensure the facility provides an environment that is free from accident hazards over which the facility has control and provides supervision and assistive devices to each resident to prevent avoidable accidents. This includes:  • Identifying hazard(s) and risk(s);  • Evaluating and analyzing hazard(s) and risk(s);  • Implementing interventions to reduce hazard(s) and risk(s); and  • Monitoring for effectiveness and modifying interventions when necessary.”[[8]](#footnote-8) | * Review policies, procedures, and practices related to identification, documentation, and reporting of accident hazards * Observe, Audit, and Report for physical plant hazards that could potentially be an accident hazard. * Review policies/procedures for assessment process for person-centered care plan process to evaluate risk, develop a plan of care and monitor for quality outcomes * Educate all staff on accident prevention, risk identification, care plan development, care plan implementation and facility wide monitoring for risks of accident * Incorporate above training into orientation |
| **F656: Comprehensive Care Plans**  “The facility must develop and implement a comprehensive person centered care plan for each resident, consistent with the resident rights | * Review policies and procedures related to individualized care plan to meet the resident’s preferences and needs for a safe environment * Provide education to the IDT on care plan development based upon the comprehensive assessment and resident preferences and implementation of interventions |
| **Life Safety Code** | * Evaluate life safety code requirements for resident environment |

**References and Resources**

Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>

LTC Survey Pathways (Download) CMS 20061 (11/2017) Environmental Observations Critical Element Pathway

<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes.html>

Centers for Medicare & Medicaid Services Long-Term Care Facility Resident Assessment Instrument 3.0 User’s Manual, Version 1.16. October 2018: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html>

Life Safety Code and Health Care Facilities Code

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/LSC.html>

Agency for Healthcare Research and Quality

<https://www.ahrq.gov/tools/index.html?search_api_views_fulltext=&field_toolkit_topics=14170&sort_by=title&sort_order=ASC>

1. 1,2 Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)
3. Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-3)
4. [↑](#footnote-ref-4)
5. [↑](#footnote-ref-5)
6. 4,5,6 Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-6)
7. Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-7)
8. Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 173, 11-22-17): <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf> [↑](#footnote-ref-8)