

SELF SURVEY MODULE
483.13 (c) STAFF TREATMENT OF RESIDENTS

TAG F226

REGULATION: F226(c) Staff Treatment of Residents

The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect and abuse of residents and misappropriation of resident property. F226 is used for deficiencies concerning the facility's development and implementation of policies and procedures.

INTENT: The facility must develop and operationalize policies and procedures for screening and training employees, protection of residents and for the prevention, identification, investigation and reporting of abuse, neglect, mistreatment, and misappropriation of property. The purpose is to assure that the facility is doing all that is within its control to prevent occurrences.

OBSERVATIONS: General

Resident and staff behaviors and interactions are observed throughout the entire survey.

Indications that staff are neglecting or abusing residents

Are staff showing indications of stress

Observe how staff respond to safeguard residents and report concerns.

Observe:

1. Are an adequate number of staff available to meet residents' needs. If staff have called in what measures are put into place so that care is provided?
2. Is there adequate supervision of staff to identify stress reactions and possible neglect and abuse situations.
3. Staff (direct care and managers) response to handling resident to resident conflict (assistance to room, redirection)
4. Staff response to resident's resistance to care (rough in handling, verbally threatening)
5. Staff supervision of residents with elopement potential or intrusive wandering.
6. Unusual injuries or bruising of residents.
7. Staff response to resident's requests and needs are these met in a timely and appropriate manner.
8. Staff behavior (loud, angry voice, roughness or abruptness in care delivery, verbal or physical threats)
9. Staff (direct care, managers, and administrative) response to observed or reported inappropriate staff behavior.
10. Staff (direct care, managers, and administrative) response to observed or reported inappropriate visitor behavior.
11. Physical Environment: Clean, uncluttered equipment in proper working repair.
12. If training is being provided on abuse and neglect observe the training.
13. Observe the current physical and psychological health of the victim as well as current staff interaction with this individual and other receiving services.

RECORD REVIEW:

- Review facility's policies/procedures and record documentation. Do they include the following components and are these components operationalized? : (All of the following are not required, but are examples of what makes up a good program/policy and procedures).
- **Screen** potential applicants for a history of abuse, neglect or mistreating residents?
 - Does the provider have a comprehensive interview process for potential hires?
 - Does the provider check and documents references beyond the minimum information that is legally required?
 - Does the provider check the prospective employee's work history?
 - Does the provider check criminal background for direct care staff?
 - Check Personnel files for references, work history, criminal background check, qualifications and training records
 - Review staff schedules to confirm adequacy of staffing based on need and observations of individuals receiving services. Do staff volume and qualifications match individual needs?
 - Review provider's methods for detecting and preventing abuse and neglect and/or data pertinent to recruitment and /or hiring practices.
- **Train** employees through orientation and ongoing sessions on issues related to abuse prohibition practices?
 - Training for employees should include the following:
 - Basic communication skills
 - Conflict resolution and anger management
 - Clinical presentation of dementia, mental illness, developmental disabilities, cognitive impairment and strategies for communication
 - Effect of cognitive impairment on communication and function
 - Successful ways of coping with maladaptive behaviors.
 - Knowledge of and respect for individual rights
 - Staff behaviors that can elicit negative responses by individuals receiving services.
 - Effect of disease specific and age related changes.
 - Approaches and care necessary to detect and prevent feelings such as loss of control and resulting depression
 - Restorative care that utilizes commonly accepted approaches to help the individual function at his or her optimal level.
 - Promotion of individual rights.
 - Check training records for evidence that staff have received upon orientation and on a regular basis thorough and accurate training regarding abuse and neglect:
 - Education on individual rights
 - Conflict resolution training
 - Coping with maladaptive behaviors.
 - Education on cognitive challenges, mental illness, dementia, developmental disabilities, including communication techniques.
 - Meeting the specific needs of the population.
- **Response:** The facility should provide residents, families and staff information on how and to whom they may report concerns, incidents and grievances and provide feedback regarding the concerns that have been expressed?

- Are all allegations responded to and treated with the same degree of consideration and seriousness regardless of their nature?
 - Was the response prompt?
 - What care and attention are given to the individuals involved in the incident following the reporting of the incident?
 - Was immediate action taken to protect the victim and to address the behavior of the perpetrator?
 - Review the corrective action plan that should be put into place.
 - What did the facility do in response? Train/retrain staff? Rewrite policies and procedures? Revise the system to better respond?
- **Identification:** Did the facility identify events, occurrences, patterns and trends that may constitute abuse and determine the direction of the investigation? Do the policies and procedures address this?
- Typical abusers are direct caregivers are often the lowest paid workers in the most understaffed areas of facilities
 - Some times facilities do not take allegations of abuse seriously or the reporter is afraid of retaliation.
 - Does the facility have a method of recognizing factors that lead to abuse and neglect such as job burnout, inability to manage conflict, stress and insufficient training?
 - Many times perpetrators are male, new hires and second-shift workers
 - Low wages and poor benefits, compounded by the emotional and physical strain of the work contribute to quality control problems in long term care.
 - Review the administrative structures such as the policy and procedures to see if they are contributing to abuse and neglect problems.
 - External factors such as employment levels and pay rates can affect staffing.
 - Tradition: long-standing practice in some settings can discourage attachment between individuals receiving services and those providing services.
 - Isolation: some individuals who live in institutions are isolated and have little contact within the community.
 - Institutional environment such as the size and physical design of the building can affect the care provided.
 - The facility should identify staff characteristics that can contribute to neglect and abuse, such as experience level, educational level, challenging personal life style choices, and ethnic and cultural backgrounds.
 - The facility should identify the characteristics of individual receiving services such as dependent, frail, chronically ill, impaired functions, and mentally incapacitated as well as residents being physically or verbally aggressive.
 - Review incident reports.
- **Investigate:** Review different types of incidents and identify the staff member responsible for the initial reporting, investigation of alleged violations and reporting of results to proper authorities.
- Do the policy and procedures address how to investigate the incident?
- **Protection:** How does the facility protect residents from harm during an investigation? Do the policy and procedures address this?
- How does the facility protect the rights of individuals receiving services?
 - Are residents separated? Roommate change or staffing changes?

- Staff changed, suspended, reassigned to other tasks during the investigation?
 - Is there a policy and procedure to determine if there is a mechanism in place to protect reporters, victims and suspected perpetrators?
 - Does the documentation of the incident reflect efforts to protect the individual from the potential abuser?
- **Report:** Does the facility have a policy and procedure on reporting all alleged violations and all substantiated incidents to the State Agency and all other agencies as required? Does the facility then take all necessary corrective actions depending on the results of the investigation?
- Has the state agency (health care personnel registry been notified within 24 hours)?
 - Has an investigative report been completed as required?
 - Does the investigation have the following:
 - Individual and caregiver interviews, as indicated?
 - Clinical examination?
 - Staff interviews?
 - Collaboration with state agencies?
 - Methods to support the individual and detect and prevent further victimization.
 - Was the resident examined in a thorough and timely manner?

The Abuse Investigative Protocol requires that the survey team:

1. Review 2-3 alleged violations since the previous time this was reviewed by the state.
Review the written evidence to determine how the facility has handled alleged violations. Did the facility implement adequate procedures for:
 - Reporting and investigating?
 - Protection of the resident during the investigation?
 - Provision of corrective action?
2. From a list of employees hired within the previous four months, select 5 new hires and review written evidence from the facility that the facility conducted pre-screening checks based on regulatory requirements at 42 CFR 483.13(c).
3. The survey team should interview five direct care staff representing all three shifts, including activity staff and nursing assistants to determine if staff are trained in and are knowledgeable about how to appropriately intervene in situations involving residents that have aggressive or catastrophic reactions.
 - Are staff knowledgeable regarding what, when and to whom to report according to facility policies?
4. Interview at least three front line supervisors of staff who interact with residents (nursing, dietary, housekeeping, activities, and social services). Determine how they monitor the provision of care/services, the staff/resident interactions, deployment of staff to meet the residents' needs and the potential for staff burnout, which could lead, to resident abuse.
5. Interview several residents and families regarding their awareness of to whom and how to report allegations, incidents and/or complaints.

6. Interview the individual(s) identified by the facility as responsible for coordinating the policies and procedures to evaluate how each component of the policies and procedures is operationalized

STAFF INTERVIEWS:

Interviews with Staff:

Administrator:

- Describe the entity's admission criteria.
- What practices do you have in place for identifying abuse and neglect?
- How do you manage risk factors for abuse and neglect?
- Do you have an abuse and neglect detection and prevention training program for staff and for individuals receiving care and their families?
- How are the abuse and neglect detection and prevention training materials operationalized in daily practice?
- What are your policies and procedures for the protection of individuals receiving services?
- What happens to individuals who are involved in an incident?
- How is their safety assured?
- Describe your approach for investigating allegations of abuse and neglect?
- Was this process followed?
- Has the response process been evaluated?
- Have there been revisions in this process or in related operations?

Staff:

- Describe the interview process for your position?
- How were you trained?
- Are you aware of a protocol to use when you feel you need assistance in conducting a care task.
- Who is your supervisor and is he/she available when you need him/her?
- Have you observed any abuse or neglect?
- If so, was a report made? How was the situation handled?
- Has staff been involved in identifying abuse or neglect? If so what was the response of management?
- Have you been trained in the detection and prevention of abuse and neglect?
- Do you know the policies and procedures for reporting abuse and neglect?
- Describe any training you have received addressing abuse and neglect?
- Are you protected from intimidation and harassment as the result of reporting an incident?
- Have things changed as a result of incidents you may have reported?
- For better or worse?
- To whom would you report an incident of alleged abuse or neglect?
- What would you do if you discovered an incident of abuse or neglect involving an individual with who you work?
- Who would you tell about what you heard or observed?
- Refer to a specific situation and describe what happened.
- How was the incident investigated?
- What were the findings?

What was the planned course of action?
How promptly do you receive a response to your report if at all?
How are individuals protected, how are they treated, what actions is taken?
Do you feel that you are protected from intimidation and harassment as a result of reporting an incident?

Individual/Family:

Does staff respond to your needs in a timely manner?
Does staff appear to be rushed? (This may suggest inadequate volume to meet individual needs).
Do staff appear to be competent and well trained?
Have you been provided training about abuse and neglect?
To whom would you report incidents of alleged abuse or neglect?
What would you do if you felt you had been abused or neglected?
What would you do if you discovered an incident of abuse or neglect involving an individual with whom you live?
Do you believe that your complaint was responded to in a timely manner?
Tell me about the investigation?
Did you feel safe while the investigation was happening?
Do you feel safe now?
Do you know what to do if you suspect abuse and neglect?
How does the provider respond to reports of abuse and neglect?
Have you ever been abused or neglected?
If so, have you made a report?
To whom? How were you treated?
Did you feel safe?
Have things changed as a result of incidents that you have reported?
For better or worse?
How promptly do you receive a response to your report if at all?
Do you feel that your are protected from intimidation and harassment as a result of reporting the incident?
Have there been any changes in the quality of your care as a result of the incidents that you have reported?

I. Screening

How do you screen potential employees for a history of abuse, neglect, or mistreating residents?
Are you doing criminal background checks?
Are these checks different for potential employees based on their length of residence in North Carolina?
Are you checking with the nurse aide registry to find out if the applicant has had a finding entered?
Are you verifying licenses and registries?
Are you attempting to obtain references from previous employers?

II. Training

How do you train staff on abuse prohibition practices?
Who attends these sessions?
How often are they offered?

What does the material cover?

Does the material cover: interventions to deal with aggressive / catastrophic reactions of residents? how staff report their knowledge of allegations without fear of reprisal?; how to recognize signs of burnout, frustration and stress that may lead to abuse?; what constitutes abuse, neglect and misappropriation of resident property?

Ask **staff**: Can you describe the mission of this organization?

III. Prevention

How do you inform residents, staff and family members on how to report concerns, incidents and grievances without fear of retribution?

How do identify, correct and intervene in situations in which abuse, neglect and/or misappropriation are more likely to occur?

How do you assure sufficient numbers of staff to meet the residents' needs?

How do you supervise the delivery of care? How do you monitor residents who have behavioral problems or histories of aggression?

IV. Identification

How do you identify events, patterns and trends that may constitute abuse?

How do you determine the direction of the investigation? Ask **Administrator** what methods or approaches for detecting and preventing abuse and neglect have you initiated since the last survey?

What were the outcomes?

V. Investigation

Do you have procedures to investigate different types of incidents?

VI. Protection

How do you protect residents from harm during an investigation?

VII. Reporting/Response

To whom are you reporting alleged violations and substantiated incidents?

When are you reporting to the Nurse Aide Registry or licensing authority?

How do you analyze occurrences to determine what changes, if any are needed to the current policies and procedures?

Interview at least five direct care staff, representing all three shifts, including activity staff and nursing assistants, to determine if staff are trained in and are knowledgeable about how to appropriately intervene in situations involving residents who have aggressive or catastrophic reactions. Do staff know what, when and to whom to report according to facility policies?

Interview at least three front line supervisors who interact with residents.

Determine how they monitor the provision of care/services, the staff/ resident interactions, deployment of staff to meet the residents' needs, and the potential for staff burnout, which could lead, to resident abuse.

Interview residents and their families.

Do you know if the facility has policies and procedures for detecting and preventing abuse and neglect? If yes, please describe policies and how you were made aware of them.