



WISCONSIN DEPARTMENT
of **HEALTH SERVICES**

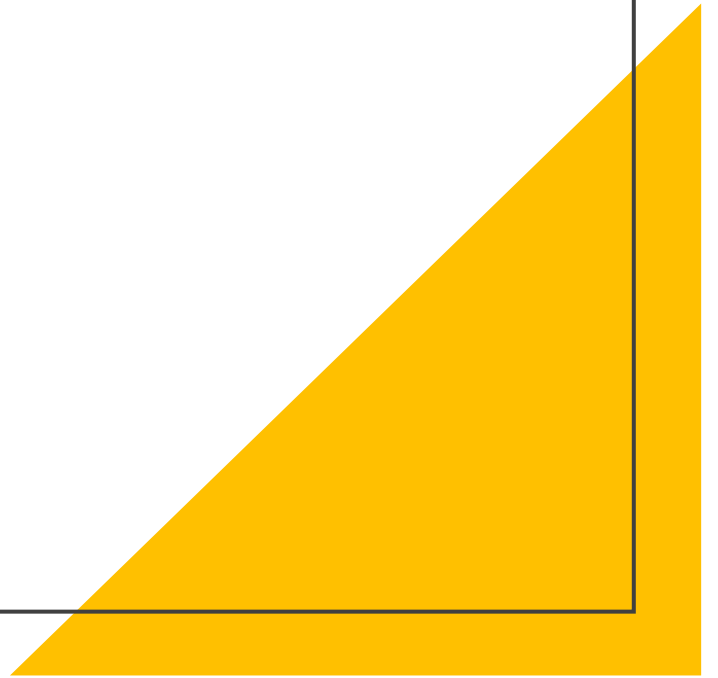
LTC Educational Series- Part One

Chapter 5 updates



Training Objective

Revisions to Chapter 5 of the State
Operations Manual (SOM)



Background



Revisions
to the State
Operations
Manual
(SOM)

Appendix PP

Chapter 5

Psychosocial Severity Guide 508

Exhibits 358 and 359 sample
template forms

Appendix PP- Tag F609

- Reasonable suspicion of a crime (Formerly at F608)
- Alleged violations of abuse/neglect/exploitation
 - Examples of what facilities are required to report
 - Facilities must provide sufficient information
 - Implemented 10/24/22

Chapter 5 Immediate Implementation

- Guidance for the post-investigation report, avoiding the terms “substantiated and unsubstantiated.”
- State Agency (SA) reporting of suspected crimes to law enforcement.
- Policy and procedures consistent with Federal requirements and the SOM.
- The SA will provide instructions to the facility to collect sufficient information.
- Definitions for reach prioritization level

Revisions to Nursing Home Prioritization Levels

Previous version of the SOM

Intakes are assigned this priority if the alleged noncompliance indicates there was a serious injury harm impairment or death of a patient or resident, or the likelihood for such, and there continues to be an immediate risk of serious injury, harm, impairment or death of a patient or resident unless immediate corrective action is taken.

Revised SOM

Immediate Jeopardy (IJ)

- Complaints - No revision
- Facility Reported Incidents (FRIs)- Immediate Jeopardy (IJ) may have occurred, regardless of whether an immediate risk may continue to exist.

Revisions to Nursing Home Prioritization Levels

Previous version of the SOM

Non-IJ High

The SA makes the determination that a higher level of actual harm may be present

Revised SOM

Non-IJ High

The SA makes the determination that the alleged noncompliance may have caused actual physical and or psychosocial harm to the resident



Revisions to Nursing Home Prioritization Levels

Previous version of the SOM

Non-IJ Medium

The alleged noncompliance with one or more requirements caused or may cause harm that is of limited consequences and does not significantly impair the individuals mental, physical, and or psychosocial status or function.

Revised SOM

Non-IJ Medium

The alleged noncompliance with one or more requirements caused no actual physical and or psychosocial harm but there is potential for more than minimal harm to the residents(s) (severity Level 2).

Revisions to Nursing Home Prioritization levels (cont)

Non IJ Medium

FRI's –the alleged noncompliance with one or more requirements caused no actual or physical harm but there is a potential for more than minimal harm to the resident(s) (severity Level 2) and the facility has not provided an adequate response to the allegation or it is not known whether the facility provided an adequate response.



Revisions to Nursing Home Prioritization Levels

Previous version of the SOM

Non-IJ Low

The alleged noncompliance with one or more requirements may have caused physical, mental, and/or psychosocial discomfort that does not constitute injury or damage.

Revised SOM

Non-IJ Low

Complaints-the alleged noncompliance with one or more requirements may have no actual harm with a potential for minimal harm (severity level 1).

Revisions to Nursing Home Prioritization Levels

FRI's-As described above for complaints. Also, this category includes cases where the alleged noncompliance with one or more requirements may have caused no actual physical and/or psychosocial harm but there is the potential for more than minimal harm to the residents (severity level 2) and the facility has provided a potentially adequate response to the allegation.

Examples-IJ prioritization

- All intakes of alleging abuse of a resident/patient/client and it is uncertain that they are adequately protected
- For Nursing Home all intakes alleging eviction of a resident to an unsafe location.





Timeframes –Implement No Later Than October 1, 2023

Bureau of Nursing Home Resident Care (BNHRC) has initiated the new timeframes. They will be discussed by Jean and Rebecca.

The clock starts when the initial report is received.

References and Contacts

State Operations Manual

BNHRC Contacts:

- Bureau Director: Ann Angell ann.angell@dhs.wisconsin.gov
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