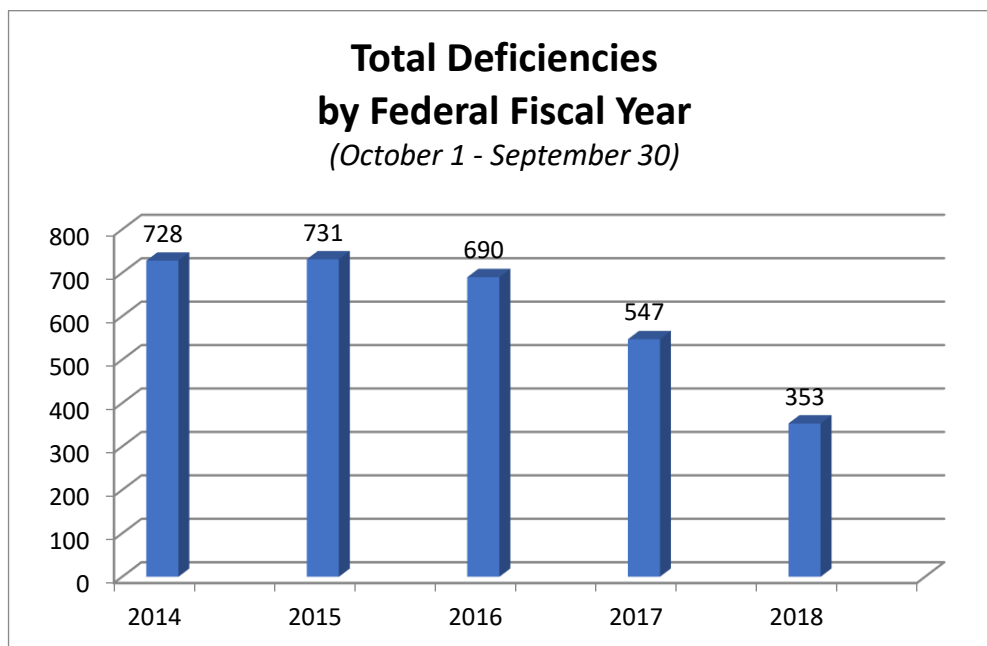


BIANNUAL NURSING FACILITY REGULATION REPORT

January 2019

The purpose of this report is to provide statistics and information regarding the regulation of nursing facilities in South Dakota. The deficiency data includes all Long-Term Care health surveys. The report will be updated on a biannual basis, and will be distributed directly to long term care providers and posted on the DOH website.



Number of Surveys Conducted

Federal Fiscal Year

2014		2015		2016		2017		2018	
Standard	109	Standard	103	Standard	118	Standard	97	Standard	94
Complaint	33	Complaint	61	Complaint	78	Complaint	69	Complaint	55
Total Surveys	142	Total Surveys	164	Total Surveys	196	Total Surveys	166	Total Surveys	149

Long Term Care Health Survey Scope & Severity of Deficiencies

Federal Fiscal Year (October 1 - September 30)

Scope & Severity	2014		2015		2016		2017		2018	
	Number	%	Number	%	Number	%	Number	%	Number	%
A	0	0%	0	0%	0	0%	0	0%	0	0%
B	12	2%	8	1%	7	1%	3	1%	0	0%
C	21	3%	12	2%	10	1%	4	1%	0	0%
D	322	44%	312	43%	347	50%	214	39%	178	50%
E	266	37%	248	34%	238	34%	205	37%	136	39%
F	43	6%	50	7%	29	4%	35	6%	10	3%
G	52	7%	55	8%	41	6%	39	7%	18	5%
H	1	0%	18	2%	8	1%	18	3%	4	1%
I	6	1%	2	0%	2	0%	0	0%	0	0%
J	2	0%	10	1%	7	1%	0	0%	7	2%
K	3	0%	4	1%	1	0%	14	3%	0	0%
L	0	0%	12	2%	0	0%	15	3%	0	0%
Total	728		731		690		547		353	

Note: A, B, & C Tags = No harm. Minimal negative impact.
D, E, & F Tags = No harm. Potential for more than minimal harm.
G, H, & I Tags = Actual harm. Not immediate jeopardy.
J, K, & L Tags = Immediate jeopardy to resident health or safety.

Informal Dispute Resolution (IDR) Summary

Federal Fiscal Year	IDRs Requested	Deficiencies Appealed	Deficiencies		
			Removed	S/S Lowered	Upheld
2018	10	20	5	4	13
2017	7	18	6	1	11
2016	10	21	3	3	15
2015	9	15	5	1	9
2014	20	53	19	5	29
Average	11	25	8	3	15

Civil Money Penalties Summary

Civil Money Penalties to a facility				
<i>by Calendar Year</i>				
Year	Number Imposed	Number Removed	Total	Total Medicaid
2015	4	1	\$107,282.50	\$89,543.68
2016	14	1	\$406,608.95	\$328,134.36
2017	24	1	\$924,519.45	\$742,429.46
2018	6	0	\$220,615.30	\$190,218.97
Total	48	3	\$1,659,026.20	\$1,350,326.47

*Note: *Please note the updated figures were recalculated from the July 2018 version.*

The first civil money penalty (CMP) was imposed on an SD nursing facility by CMS in 2015. Since then, approximately 24% of nursing facilities (26 facilities total) in the state have received a CMP. Ten facilities accounted for 64% of the 45 CMPs imposed. 81% of the total CMP funds collected have been transferred back to the State. CMS imposes stringent restrictions on how States can use CMP funds. All proposed expenditure of CMP funds must be pre-approved by the CMS Regional Office. To date, five proposals have received CMP funds:

1. **\$8,586 to the South Dakota Health Care Association (SDHCA).** The purpose of the training sessions ensured Long Term Care Centers understand the person-centered care regulations in the new Requirements of Participation (ROPs).
2. **\$4,800 to the South Dakota Association for Healthcare Organizations (SDAHO).** This 6-hour seminar addressed the overarching view of person-centered care and choices by providing focused guidance on resident rights, resident councils, services and programming for residents with dementia, abuse and neglect, interventions to reduce antipsychotics, care planning and discharge planning, and behavioral services.
3. **\$402,500 to the Quality Improvement Network, South Dakota Foundation for Medical Care.** A project to improve Dementia Care in SD nursing homes through the use of Music and Memory. The project was written and supported by SDHCA, SDAHO, Quality Improvement Organization (QIO), DOH, and DHS.
4. **\$19,345 to the South Dakota Health Care Association (SDHCA).** The training increased the understanding of Long Term Care providers about quality measures and the impact on survey performance and quality measure programs in the center.
5. **\$20,630 to the South Dakota Association for Healthcare Organizations (SDAHO).** Implementation of a Pressure Injury Training Program. The proposed is to provide evidence-based training to long-term care professionals, which will lead to an overall improvement in the quality of care nursing home residents will experience. The project was written and supported by SDAHO, SDHCA, Quality Improvement Organization (QIO), DOH, and DHS.

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