

| | | | |
|--|--|---|--|
| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505412 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 09/16/2024 |
| NAME OF PROVIDER OR SUPPLIER Colville Tribal Convalescent C | | STREET ADDRESS, CITY, STATE, ZIP CODE 1 Convalescent Center Blvd Nespelem, WA 99155 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

| | |
|--|---|
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0851</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Electronically submit to CMS complete and accurate direct care staffing information, based on payroll and other verifiable and auditable data.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47328</p> <p>Based on observation, interview, and record review failed to ensure submission of the Payroll Based Journal (PBJ) per the Centers of Medicare and Medicaid (CMS) requirement for 1 of 1 Fiscal Year (FY) Quarter (Q4 2023 [July 1 through September 30, 2023]), reviewed for PBJ submission. This failure constituted Past Non-Compliance (the facility was not in compliance at the time the situation occurred; however, there was sufficient evidence that the facility corrected the non-compliance after it was identified). The facility implemented and completed a plan of correction which was verified by surveyors. The plan of correction included installation of a computer program that provided secure authenticated access for remote and mobile users, request and granted access to the CMS reporting system, staff education regarding CMS PBJ data submissions, and review of PBJ submission quarterly reports to ensure solutions were sustained.</p> <p>Findings included .</p> <p>Review of the CMS Electronic Staffing Data Submission Payroll-Based Journal Long-Term Care Facility Policy Manual, Version 2.6, June 2022, showed on page 6, 1.4 Methods of Submission, as entering data manually electronically in the CMS system, or by uploading the data directly from an automated payroll or time attendance system.</p> <p>Review of the CMS PBJ Staffing Data Report for FY Q4 2023 showed no data was submitted for the referenced quarter.</p> <p>Review of a document provided to the State Survey Agency on 08/14/2024 showed the facility name, state vendor number, and the quarter and year reporting (Q4 2023). In small print below the described facility-specific information, showed, Quarters are defined as: 1st Quarter (Jan[uary] - Mar[ch]), 2nd Quarter (Apr[il] - Jun[e]), 3rd Quarter (Jul[y] - Sep[tember]), 4th Quarter (Oct[[NAME]] - Dec[ember]), which was the defining of state quarters instead of federal or FY quarters required for use with PBJ data collection and submission. The document showed a grid which included job category (staff providing direct care hours), month, total reported hours per each month, total hours in quarter, total patient census for each month, total census in quarter, and hours of direct care per resident day (HPRD) calculations per month with a quarter total. There was no documented auditable and verifiable data included with the summarized hours.</p> <p>(continued on next page)</p> |

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

| | | |
|---|-------|-----------|
| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
|---|-------|-----------|

| | | | |
|--|--|---|--|
| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505412 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 09/16/2024 |
| NAME OF PROVIDER OR SUPPLIER Colville Tribal Convalescent C | | STREET ADDRESS, CITY, STATE, ZIP CODE 1 Convalescent Center Blvd Nespelem, WA 99155 | |
| For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency. | | | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) | | |
| <p>F 0851</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>In an interview on 08/14/2024 at 11:05 AM, Staff A, Administrator, stated the facility had been unable to successfully submit PBJ data via the CMS software due to the facility network/systems blocking the usage of the software due to increased firewall (part of a computer system that is designed to block unauthorized access while permitting outward communication) protection. Staff A acknowledged the facility was submitting hours to the Department Office of Rates and not directly to CMS, as required. Staff A further stated a computer program was installed May 2024 to address the increased firewall protection issue.</p> <p>On 08/21/2024 a spreadsheet with columns for staff names, employee PBJ system identification number, position worked, role worked, date worked, and hours not previously submitted to CMS, was received via e-mail for July 2023. The spread sheet included 431 rows of facility data entries, and the e-mail included 69 pages of July 2023 payroll data and staffing invoices. A similar spreadsheet was received for August 2023 that included 423 rows of facility data entries, and 64 pages of August 2023 payroll data and staffing invoices.</p> <p>On 08/22/2024 another similar spreadsheet was received via e-mail for September 2023 that included 415 rows of facility data entries, and 62 pages of September 2023 payroll data and staffing invoices.</p> <p>During observation and interview on 09/16/2024 at 9:40 AM, Staff C, Business Office Manager (BOM), acknowledged the facility had been submitting data to the Department Office of Rates and not directly to CMS, as required. Staff C further stated the facility had been unable to successfully submit PBJ data via the CMS software due to the facility firewall protection, but the issue was fixed at the end of May 2024. Staff C verified access to the CMS reporting system was requested and accepted on 05/14/2024, demonstrated the secure authenticated access computer program was installed onto the BOM's computer with access to CMS, reviewed education received regarding CMS PBJ data submissions, and provided a CMS report showing the facility had begun submitting data.</p> <p>In an interview on 09/16/2024 at 10:03 AM, Staff B, Director of Nursing, acknowledged the facility had not been submitting PBJ data directly to CMS, as required, because of the firewall protection. Staff B stated a secure authenticated access computer program was added to the BOM's computer to allow access to CMS databases (collection of structured information, or data, that is organized and stored electronically in a computer system) in May 2024 and the facility had begun submitting data to CMS, as required.</p> <p>This was Past Non-Compliance and is no longer outstanding.</p> <p>Reference WAC: 388-97-1090(1)(2)(3)</p> | | |