Quarterly PBJ Webinar

The latest answers on PBJ, staffing, and more before the February 14 deadline

Q1 2024 Edition

THU, JAN 18 | 11:30 AM CT

Simple PBJ. ** Netsmart



VALENTINE GIVEAWAY

Submit your PBJ early & enjoy Valentine's Day

The PBJ deadline is Wednesday, Feb 14



Submit your PBJ data through SimplePBJ by midnight on Feb 7 for a chance to win

1st prize: \$200 Visa gift card (use anywhere)

2nd **prize:** 40 oz. Stanley tumbler (*choose your color*)

Winners announced Feb 12



Your Speakers



Nate Hoard
Senior PBJ Specialist - Simple



Jolene Johnson Independent Consultant

Agenda

- Common PBJ Questions
- Upcoming Freeze HRD Measures
- SimplePBJ Support Update
- Harsher Staffing Penalties Coming Soon
- SimplePBJ Updates
- Live Q&A



Live (D) Poll

Heading into 2024, what is your biggest PBJ challenge?

Common PBJ Questions

If my salaried nurse works a weekend shift, can I report it?

Answer:

- For exempt staff that cover a floor RN shift in addition to their usual schedule, the best practice is to pay them a competitive rate for the extra shift (in addition to their salary).
- Another option is to subtract hours from another day and log their hours for the extra shift instead.





Common PBJ Questions

How can I avoid getting hit with nursing turnover for my contract nursing staff?

Answer:

Use data tools to track contract nursing hours throughout the quarter, and make scheduling adjustments as needed.





Common PBJ Questions

How does CMS calculate turnover percentages?

Answer:

- Denominator = number of staff who work 120+ hours over any 90-day period
- Numerator = number of eligible staff who then go 60 days or longer without any worked hours





Turnover - Current Calculation Timeline

Lookback Timeline: Total Nursing and RN Turnover (January 2024 – March 2024 Five-Star Reports)								
Q0	Q1	Q2	Q3	Q4	Q5			
Apr – Jun 2022	Jul – Sep 2022	Oct – Dec 2022	Jan – Mar 2023	Apr – Jun 2023	Jul – Sep 2023			
	Denominator							
		Nume	erator					

12-Month Reporting Period: Administrator Turnover

July 2022 – June 2023



CMS to Freeze HRD Measures

- To calculate the 3 Adjusted Hours per Resident Day (HRD) staffing measures, CMS has relied on clinical data from Section G of the MDS assessment.
- On Oct. 1 2023, Section G was replaced by Section GG
- Starting in July 2024, CMS will update their methodology to calculate the HRD measures to a model based on PDPM
- The 3 effected measures are:
 - Adjusted Total Nurse Staffing
 - Adjusted RN Staffing
 - Adjusted Weekend Total Nurse Staffing



CMS to Freeze HRD Measures

- CMS will use the existing methodology once more to calculate the HRD measures for the January 2023 Five-Star and Care Compare refresh.
- The January refresh will be comprised of staffing and Case-Mix data from July 2023 September 2023.
- In April 2024, the January measures will be held constant (frozen) until the new methodology is released in July 2024.

Note: PBJ data for October 2023 – December 2023 is still required and submitting it accurately and timely will be critical for future Five-Star calculations.

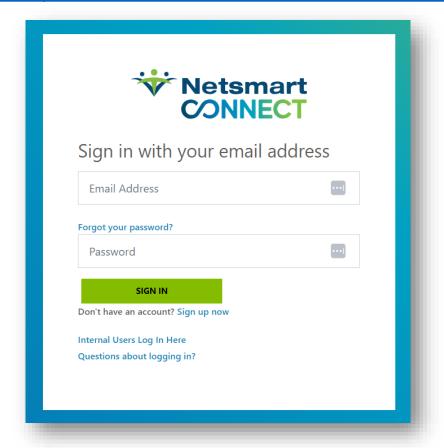


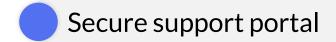
CMS to Freeze HRD Measures

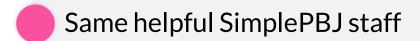
Five-Star Refresh	January 2024	April 2024	July 2024
PBJ and Case-Mix Data	Jul 2023 – Sep 2023	Jul 2023 – Sep 2023	Jan 2024 – Mar 2024



https://netsmartconnect.com







Create new support tickets

View and manage historical tickets

Replaces support@simplepbj.com



Important: register your account now!

- 1. Look for an email entitled "Create your account for contacting Simple Support"
 - 1. Sent from simple@ntst.com on 12/14/2023
- 2. Go to https://netsmartconnect.com and click "Sign up Now"

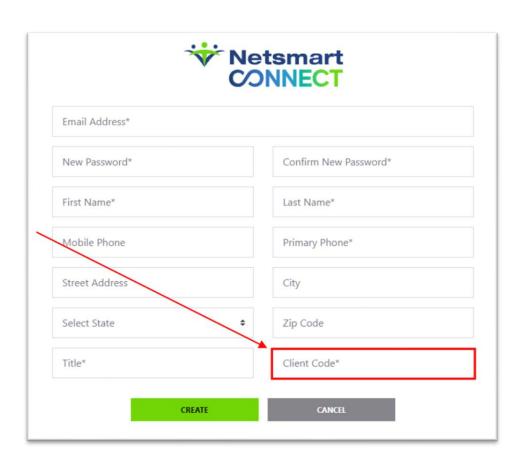
SIGN IN

Don't have an account? Sign up now



Important: register your account now!

- 3. Fill out your information to register your account
- 4. Find your personalized Client Code in your "Create your account" email
- 5. Click the Create button
- 6. Complete your profile setup



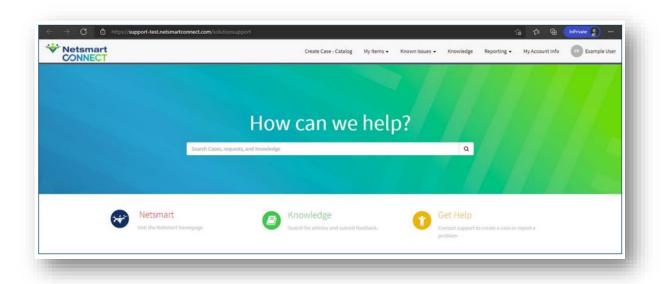


Important: register your account now!

Check out all the features in our full tutorial.

For help, reach out to us at:

(877)521-9834, Option 3





Coming on April Five-Star Reports:

Harsher Penalties for not Submitting (Accurate) PBJ Data

- Providers will soon receive the **lowest possible score** on their staffing turnover measures if they fail to submit accurate PBJ data on time
- Effective April 2024
- The lowest possible score for all three turnover measures combined is 20 points out of 130
- This penalty will stain Five-Star and Care Compare reports for a year and a half, remaining on the staffing score until the quarter(s) of inaccurate PBJ data submission drop off from the 6-quarter look-back period.

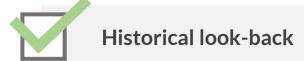
Coming on April Five-Star Reports:

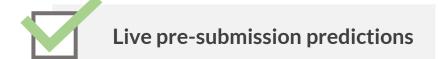
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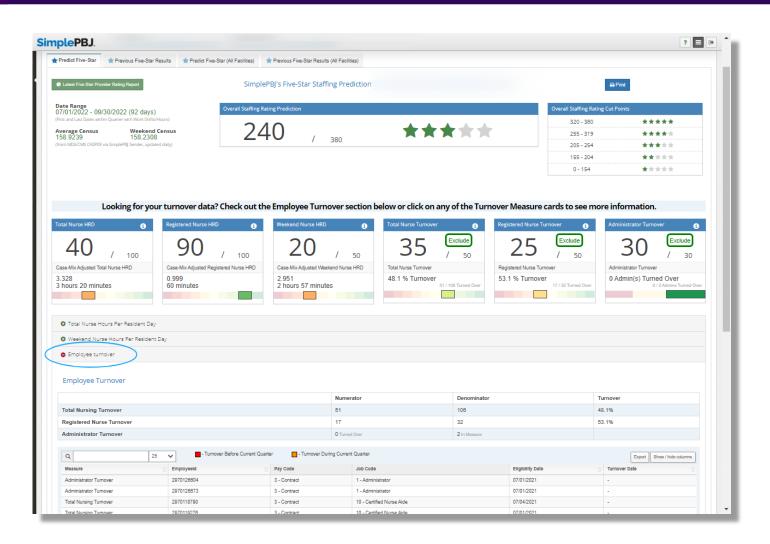
- Penalty will be retro-active
- CMS uses 6 quarters of submitted data to calculate turnover measures
- Since July 2022, CMS has been excluding turnover measures if one or more of the 6 look-back quarters of PBJ data were not submitted
- The effected measures are:
 - Total Nurse Turnover
 - RN Turnover
 - Administrator Turnover

Turnover Data in SimplePBJ



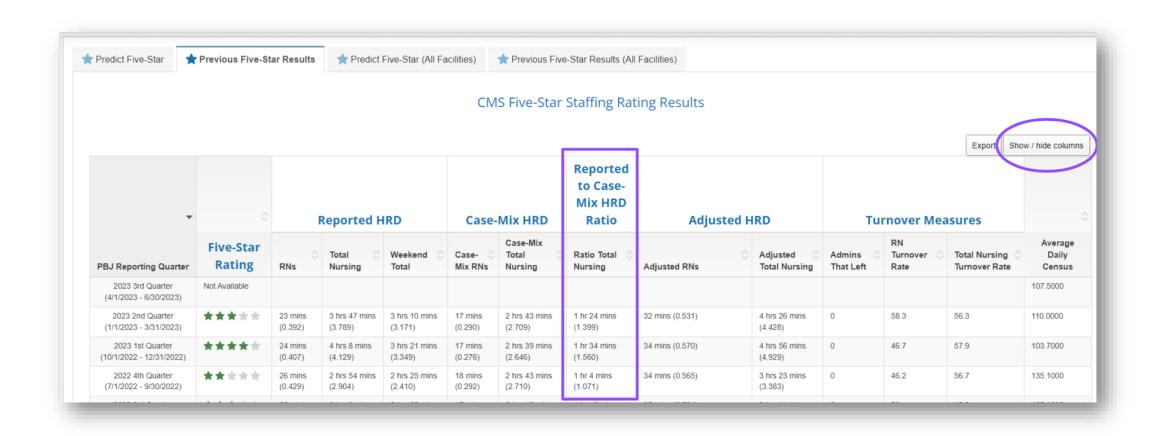






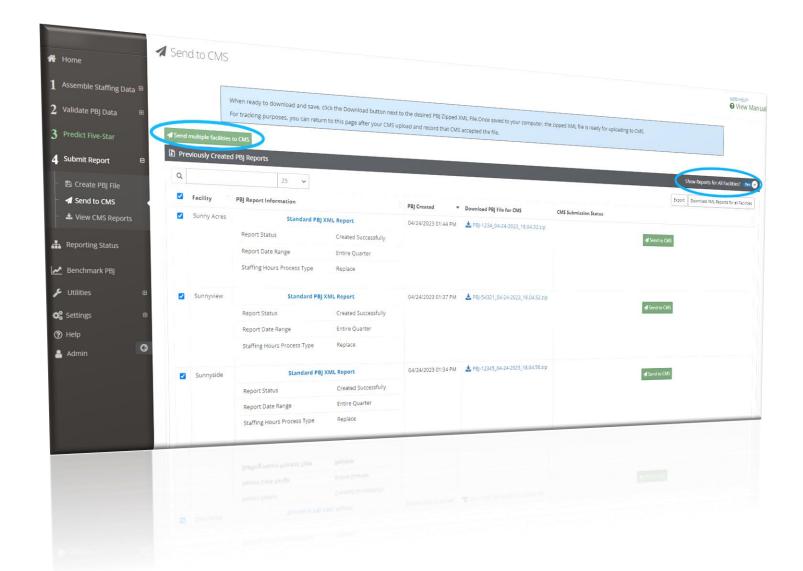


Viewing Additional Data





Latest SimplePBJ Updates



Send multiple files to CMS with one click.



PBJ Consulting

Analyze data for errors

Full service PBJ review and CMS data submission

PBJ compliance audits

Support Myers and Stauffer audits

Education on new PBJ focus areas for state surveys

Education/orientation for PBJ staff (facility or corporate)



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SimplePBJ

Your one-stop shop for PBJ success

Assemble, validate and submit your PBJ

Predict Staffing Five-Star ratings

Submit PBJ reports with one click

Benchmark results against other facilities

REQUEST DEMO

Questions



SimplePBJ..

Thank you for attending!

Webinar recording & slides available here: www.simpleltc.com/pbj-q1-2024



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— Audit and Survey Appendix –

F851

Revised Guidance at F851 includes that:

The surveyors can obtain PBJ data from the CASPER report to determine if the facility submitted the required staffing information based on payroll data in a uniform format.

The facility's failure to submit PBJ data as required will be reflected on their CASPER report and result in a deficiency citation.

F851 - Key Elements of Noncompliance

To cite deficient practice at F851, the surveyor's investigation will generally show that the facility failed to do any one of the following:

- Complete data for the entire reporting period, such as hours paid for all required staff, each day; or
- Provide accurate data; or
- Provide data by the required deadline.

F725 - Sufficient Staff

§483.35 Nursing Services

The facility must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e).

§483.35(a) Sufficient Staff.

§483.35(a)(1) The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:

- Except when waived under paragraph (e) of this section, licensed nurses; and
 - Other nursing personnel, including but not limited to nurse aides.

§483.35(a)(2) Except when waived under paragraph (e) of this section, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty.

F725 - Sufficient Staff

Some Investigative Probes in the interpretive guidance have been revised and include but are not limited to:

- Are the numbers of licensed staff sufficient such that those staff members have enough time to provide direct services to residents as well as to assist and monitor all of the aides they are responsible for supervising?
- Does the facility have adequate staff to monitor residents at risk for wandering?
- Does the facility have licensed nursing staff 24 hours a day?

F725 - Deficiency Categorization Example

Level 4

A resident had complained of chest pain and shortness of breath after eating their evening meal. The nursing assistant stated they would inform the licensed nurse. The nursing assistant was informed there would be no licensed nurse until the next morning.

At 10:00 p.m. the resident was found unresponsive with minimal respirations by a visiting family member. Because there was no licensed nurse on duty at that time, the nursing assistant called 911.

F725 - Deficiency Categorization Example

Level 3

A resident was admitted to the facility with a recently repaired hip fracture and required assistance with ambulation. The resident used the calling device to request assistance to the bathroom.

After several minutes, no help arrived so the resident attempted to ambulate with a walker to the bathroom without assistance. The resident subsequently fell and was found by nursing assistants. The resident was assisted back to bed by the nursing assistants and complained of pain in the area of the recently repaired hip fracture. There was no licensed nurse on duty to assess the resident for any injuries or provide medication for pain.

The next morning the resident complained of increased pain in the area of the repaired hip fracture. After assessment by the day shift licensed nurse, the resident was sent to the hospital. The resident was admitted and required surgery to repair the re- fractured hip.

F725 - Deficiency Categorization Example

Level 2

Residents complain that they are not allowed choices such as receiving showers consistently on the days or at times they prefer due to inadequate staffing. Review of staffing data submitted via the PBJ system revealed the facility had a one-star staffing quality rating.

Follow up interviews with the staffing coordinator revealed that only one CNA was available to provide showers, and therefore residents' preferences for timing of showering could not be met causing anxiety. Refer to the Psychosocial Outcome Guide for additional direction.

F727 Registered Nurse

The intent of this regulation is to ensure that the facility:

- Uses the services of a registered nurse for at least 8 consecutive hours a day, 7 days a week.
- Designates a registered nurse to serve as the director of nursing on a full-time basis.
- Permits the director of nursing to serve as a charge nurse only when the facility has an average daily occupancy of 60 or fewer residents

F727 - Deficiency Categorization Example

Level 4

The annual recertification survey of a facility indicates that it provides care for residents with high acuity needs including residents that receive medications and fluids via central intravenous lines (IV) and ventilator dependent residents. The investigation revealed an RN was not onsite for at least 8 consecutive hours during the day.

During the period when there was no RN, the LPN had to perform assessments and maintain central line (IV) infusions, which is out of the scope of practice for an LPN in the absence of supervision of the RN. The facility's failure to have an RN on duty for at least 8 consecutive hours a day as required by the regulation, created the likelihood for serious injury, harm, impairment or death. Specifically, the RN was not present to meet the critical needs of these high acuity residents.

F727 - Deficiency Categorization Example

Level 3

Investigation of falls occurring in the facility with a census greater than 60 residents revealed the monthly fall evaluation for one resident was not completed with the interdisciplinary team after the resident experienced 2 falls. Interview with the Director of Nursing (DON) revealed this was the DON's responsibility; however, because she had been serving as the charge nurse, there was no time to complete the evaluation for this resident who experienced another fall resulting in a sprained wrist.

Record review revealed that the resident experienced a fall after the DON failed to complete the fall evaluation in response to the two initial falls. Staff ultimately determined the resident was falling due to a change in the resident's condition (deteriorating eyesight) that was not timely identified because of the DON's failure to complete a monthly fall evaluation.

F727 - Deficiency Categorization Example

Level 2

Review of the PBJ Staffing Data Report revealed concerns related to the facility's requirement to have a Registered Nurse on duty for at least 8 consecutive hours a day. The surveyor verified an RN was routinely on duty for only 7 consecutive hours a day last quarter. No actual harm to residents was identified.

However, there was a potential for more than minimal harm due to the facility's failure to have an RN on duty for at least 8 consecutive hours a day, 7 days a week in order to ensure that all the residents' clinical needs were met either directly by the RN or indirectly by the LPNs or CNAs for whom the RN was responsible for overseeing resident care.