**F -838 Regulation Language Summary Facility Assessment:**

F-838

§483.70(e) Facility assessment. The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents competently during both day-to-day operations and emergencies. The facility must review and update that assessment, as necessary, and at least annually. The facility must also review and update this assessment whenever there is, or the facility plans for, any change that would require a substantial modification to any part of this assessment. The facility assessment must address or include:

1. The facility’s resident population, including, but not limited to,
2. Both the number of residents and the facility’s resident capacity;
3. The care required by the resident population considering the types of diseases, conditions, physical and cognitive disabilities, overall acuity, and other pertinent facts that are present within that population;
4. The staff competencies that are necessary to provide the level and types of care needed for the resident population;
5. The physical environment, equipment, services, and other physical plant considerations that are necessary to care for this population; and
6. Any ethnic, cultural, or religious factors that may potentially affect the care provided by the facility, including, but not limited to, activities and food and nutrition services.
7. The facility’s resources, including but not limited to,
8. All buildings and/or other physical structures and vehicles;
9. Equipment (medical and non- medical);
10. Services provided, such as physical therapy, pharmacy, and specific rehabilitation therapies;
11. All personnel, including managers, staff (both employees and those who provide services under contract), and volunteers, as well as their education and/or training and any competencies related to resident care;
12. Contracts, memorandums of understanding, or other agreements with third parties to provide services or equipment to the facility during both normal operations and emergencies; and
13. Health information technology resources, such as systems for electronically managing patient records and electronically sharing information with other organizations.
14. A facility-based and community-based risk assessment, utilizing an all-hazards approach.

**Note:** “Competency” is defined as a “measurable pattern of knowledge, skills, abilities, behaviors, and other characteristics in performing that an individual needs to perform work roles or occupational functions successfully”

**Interpretive Guidance:**

**Purpose of Facility Assessment**:

* Should enable each nursing home to thoroughly assess the needs of its resident population and the resources required to provide the care and services the resident population needs.
* Be a record for staff and management to understand the reasoning for staffing decisions and decisions about other resources.
* May include the operating budget necessary to carry out facility functions.

**Who Must be Involved with the Facility Assessment**: (at a minimum)

* The administrator;
* A representative of the governing body; (defined term)
* The medical director; and
* The director of nursing.
* The environmental operations manager, other department heads, or other individuals including direct care staff should be involved as needed.
* Facility staff is encouraged to seek input from:
	+ Resident/family council;
	+ Residents;
	+ Resident’s representatives; or
	+ Families

**What Must be Included in the Facility Assessment**:

* An assessment of the resident population
	+ Including: An evaluation of diseases, conditions, physical, functional, or cognitive status, acuity of the resident population and any other pertinent information about the residents which may affect and plan for the services the facility must provide.
	+ Identifying: The physical space, equipment, assisted technology, individual communication devices, or other material resources that are needed to provide the required care and services to residents.
* An evaluation of the overall number of qualified staff needed to ensure that a sufficient number of qualified staff are available to meet each resident’s needs
	+ Must include a **competency-based approach** to determine the knowledge and skills required among staff to ensure residents are able to maintain or attain their highest practicable physical, functional, mental, and psychosocial well-being and meet current professional standards of practice.
	+ Must also consider any ethic, cultural, or religious factors that may be needed to be considered to meet resident needs, such as activities, food preferences, and any other aspect of care identified.
		- Cross-reference to F-553 (§ 483.10) for more information and guidance on cultural competence.
	+ Should consider a review of individual staff assignments and systems for coordination and continuity of care for residents within and across these staff assignments
* An assessment of the facility’s resources
	+ Including (but not limited to): The operating budget, supplies, equipment, or other services necessary to provide for the needs of residents.
* An evaluation of the facility’s training program
	+ To ensure any training needs are met for all new and existing staff, individuals providing services under contractual agreement, and volunteers, consistent with their respective roles.
	+ Should include an evaluation of what policies and procedures may be required in the provision of care and that these meet current professional standards of practice
	+ Cross reference to § 483.95 for more information on training.
* An evaluation of any contracts and memorandums of understanding
	+ Including: Any third party agreements for the provision of goods, services or equipment during both normal operations and emergencies.
	+ Must address the facility’s process for overseeing these services and how these services will meet resident needs and regulatory, operational, maintenance and staff training requirements.
* A consideration of health information technology resources
	+ For example, managing resident records and electronically sharing information with other organizations
* An evaluation of the physical environment necessary to meet the needs of residents
	+ Including: An evaluation of how the facility needs to be equipped and maintained to protect and promote the health and safety of residents and an evaluation of building maintenance capital improvements, or structures, vehicles or medical and non-medical equipment and supplies.
* The facility-based and community-based risk assessment using an all-hazards approach
	+ Evaluating: The facility’s ability to maintain continuity of operations and its ability to secure required supplies and resources during an emergency or natural disaster.
	+ The facility’s emergency preparedness plans (required under § 483.73) should be integrated and compatible with this facility assessment.
		- Note: As each of these documents is updated, the other should be updated as well.
	+ “Risk Assessment” is a process facilities are to use to assess and document potential hazards within their areas and the vulnerabilities/challenges which may impact the facility.
		- Also referred to as: Hazard Vulnerability Assessments (HVAs) or all-hazards self-assessments
		- Potential loss scenarios should be identified first during the risk assessment. Once a risk assessment has been completed and the facility has identified the potential hazards and risks they may face, the organization can those use those identified hazards/risks to conduct a Business Impact Analysis.

**When Should the Facility be Updated?**

* Annually
* Whenever there is, or the facility plans for, any change that would require a modification to any part of the assessment.

**Key Elements of Noncompliance:**

To be cited as deficient, the surveyor’s investigation will generally show that the facility failed to:

* Annually and as necessary, conduct, document, review and update a facility-wide assessment, **or**
* Address or include in the facility assessment the minimum requirements as described in § 483.70(e)(1)(i-v), (2)(i-vi) and (3).