CCLD inspections will be

- Consistent
- Thorough
- Continuously Improving
- Efficient
Implementation

Phase 1
- Develop and pilot Comprehensive Tools (ASC/CRP) or Interim Standard and Domain Focused Tools (CCP)
- Develop and implement staff training

Phase 2
- Collect and analyze data
- Develop Standard Tool (ASC/CRP) or Comprehensive (CCP)

Phase 3
- Collect and analyze data
- Revise tools and train staff
- Implement tools
- Transition to ongoing CQI process

Phase 4
- Collect and analyze data
- Update and refine tools

Stakeholder and Legislative Engagement Process
Inspection Tools Structure

The combination of all Domain Focused Tools and the Standard Tool is equivalent to the Comprehensive Tool.

Each slice of the pie represents a domain.

Each Domain within the Comprehensive Tool is a Standard Tool.
Tool Development

A Balanced Approach to Tool Development:

- Risk Assessment and Review by Subject Matter Experts
- Considerations for Process and Implementation/Practicality
- Considerations for Statistical Validity
Data Sources for Tool Development

- Post Inspection Surveys
- Research from Other States (Primarily Child Care)
- Historical Inspection Data – Frequency of Citations
- LPA Focus Groups
- Pilot Inspections Results
Timelines are fluid and will continue to change based upon what we learn and other CCL priorities.
Senior care pilot overview
# RCFE Pilot Data

<table>
<thead>
<tr>
<th>Survey and focus group</th>
<th>Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help validate tools contain the right content</td>
<td>Help validate critical and important content</td>
</tr>
<tr>
<td>Suggest improvements for ease of use in practice</td>
<td>Help validation by suggesting how tools should be structured</td>
</tr>
<tr>
<td>Inform training to increase standardization, consistency, quality of inspection results</td>
<td>Inform training to increase standardization, consistency, quality of inspection results</td>
</tr>
</tbody>
</table>
Highlights of CSUS Pilot Findings

• A majority (80%) of LPAs and licensees agreed that the new inspection process was:

  • More thorough and promoted consistency
  • More consultative and helpful in understanding regulatory requirements
  • Too long
• Compared to three-year average, a comparable number of citations were issued. However the type changed.

• Average number of Type A citations were down by 0.2 per inspection and Type B were up by 0.9 per inspection.
Licensee Survey Results

Licensees thought the new process was helpful.

- Increased their understanding of statutes and regulations.
- Information in the pre-inspection checklist, entrance conference, and tool.
- Supportive, professional relationships with LPAs and helpful information provided by LPAs.
- Thoroughness of the inspection.
- Increased focus on clients and the purpose of operating facilities.

75%
Thought the new process was too long.

Said they received the same number of citations as in the past.
LPA Post-Inspection Survey Results

About 80% of LPAs reported the new process was more thorough and promotes consistency.
• Easy access to regulations, comprehensiveness.
• Tablet, stylus, check boxes, auto-population made it easier to conduct
• Opportunities to engage with facilities

About 90% thought the process was too long.
• They provided detailed ideas to improve content, process and user experience.
Digging Deeper: LPA Focus Group Findings

• Sessions gathered more detail on inspection process, organization, content, redundancies

• Most LPAs said practice is changing
  • More thorough – review more regulations each visit
  • More consultative – increased dialog on regulations
  • More deliberative – pause to consider what is most appropriate: Type A or B deficiency, TV or TA
Pilot Methods

179 facilities included in pilot inspection data analysis

- 18 pre-licensing inspections (excluded from analyses)

19 inspections with shadow manager (for inter-rater reliability)

- 4 inspections excluded due to missing data

Total 201 Inspections
Inter-rater Agreement

Inter-rater agreement in main regulations = 76%

• Most common disagreement: YES/BLANK combination, which accounts for 15.9%
• YES/NO disagreement occurred less than 1% of the time.

Inter-rater agreement in Domain Focused Tools = 61%

• Inter-rater agreement for the Domain Focused tools was calculated separately because not all Tools were triggered during each inspection.

Overall agreement = 74%

• This is not an average of both tools because there were fewer data available for the responses in the Domain Focused tool since it was only used when triggered.

• Issues arose due to many blanks in the ratings, which can be remedied with changes in programming and training which has already begun.
Average Inspection Length

![Graph showing the average inspection length for different bed sizes.](image-url)
Commonly Cited Regulations

• Physical Plant/Environmental Safety (Most A citations):
  • 87309(a): Cleaning solutions, poisons, etc. inaccessible
  • 87303(e)(2): Hot water temperature
  • 87309(b): Medicines stored safely and separately

• Personnel Records/Staff Training (Most B citations):
  • 1569.625(b)(1): Training requirements before working independently with residents and within the first four weeks of employment
  • 1569.625(b)(2): Additional annual 20 hours of training for staff
  • 87411(c)(1): Appropriate first aid training
More Study: Comparison of Citation Counts Across Years

• We compared count and average number of citations issued per facility in pilot to data for all facilities CY 2015 – CY 2017.

• Both Type A and Type B citations have shown a downward trend from 2015 to 2017.

<table>
<thead>
<tr>
<th>Calendar</th>
<th>Deficiencies Cited</th>
<th>Number of Facilities Inspected</th>
<th>Average Per Inspection</th>
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<tbody>
<tr>
<td></td>
<td>Type A</td>
<td>Type B</td>
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<td>2015</td>
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<td>2017</td>
<td>4,455</td>
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### Citations and Advisory Notes by Domain

<table>
<thead>
<tr>
<th>Domain</th>
<th>Citations Type A</th>
<th>Citations Type B</th>
<th>Advisory Notes TV</th>
<th>Advisory Notes TA</th>
<th>Total</th>
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<tr>
<td>1 Disaster Preparedness</td>
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<td>9</td>
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<td>2 Food Service</td>
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<tr>
<td>3 Incidental Medical and Dental</td>
<td>24</td>
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<td>5 Personal Records/Staff Training</td>
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<td>6 Physical Plant/Environmental Safety</td>
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<td>31</td>
<td>34</td>
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<td>7 Planned Activities</td>
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<td>8 Resident Records/Incident Reports</td>
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<td>9 Personal Rights/Information</td>
<td>0</td>
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<td>9</td>
<td>26</td>
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<tr>
<td>10 Residents with Special Health Needs</td>
<td>9</td>
<td>84</td>
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<td><strong>372</strong></td>
<td><strong>1,249</strong></td>
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- **Physical Plant/Environmental Safety**, which tended to take the most time, also had the most A violations.
Tool Development

• Internal Structure
  • Analyzing patterns to help determine which regulations to include in the standard tool

• Content
  • MUST include mandated requirements
  • SME decisions
    • Criticality/risks from violation of regulation
    • Representation of regulations v. redundancies in each domain

• Logistical considerations
  • Time required to complete inspections based on number of regulations
Long-Term Focus

Shift focus
Protect the health and safety of each individual through prevention, enforcement, and compliance.

Support consistent inspections
Develop standardized, thorough and valid tools that help set clear expectations for providers.

Develop actionable information
Analyze data on facility compliance and noncompliance to direct resources where needed.

Design CQI process
Continue data analysis to ensure we maintain a holistic and accurate picture of the health of a facility over time.

Identify promising practices
Understand what works as well as areas for training and improvement.
Next Steps

**Senior Care:**
Create Standard Tool and revise Comprehensive Tool based on pilot findings and Subject Matter Expert Workgroup feedback.

**Adult Care:**
Develop Comprehensive Tools. Prepare for Pilot.

**Child Care:**

**Children’s Residential:**
Develop Comprehensive Tools. Prepare for Pilot.
## Appendix

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