

Summary of Work Completed for Period Ending March 31, 2021

Proactive Medical Review (PMR) continued work on the Nursing Facility Competency Certification Project during the period January-March 2021. The focus of work for this reporting period has been on the following:

- 1. Nursing facility participation**
Progress Update: 6 participants from the 55 eligible participants withdrew from the program due to time constraints surrounding the COVID-19 pandemic or due to resignation from employment. Of the 49 remaining participants, 25 participants have completed all required components to be eligible for participating in the final workshop and examination. The deadline to complete all required components was extended to April 15, 2021 due to the challenges facilities are facing as a result of the COVID-19 pandemic.
- 2. Participating Facility Project Implementation Consultation Calls**
Progress Update: Between 01/01/2021 and 03/31/2021, 6 additional participants participated in consultation calls with Proactive consultants to review competency-based training project implementation plans and to assist with program development and implementation. Each of the 25 remaining participants who have not participated in a consultation call and have not yet scheduled a call with Proactive were contacted via phone and on-going emails were sent throughout the quarter as reminders of the need to schedule the required consultation call. As of 03/31/2021, 26 participants had participated in consultation calls with the Proactive consultant. The group Q&A Session conference call is scheduled for 4/23/2021.
- 3. Self-Study Webinar Modules**
25 participants have completed at least 3 self-study webinar modules. Contact was made to remaining participants throughout the quarter to remind them of the requirement to complete at least 3 self-study webinar modules as a requirement for program completion.
- 4. Final Workshop planning**
Progress Update: In January, a decision was made to reschedule training dates for the final live workshop to June, 2021 and extend the 90-day implementation period through April 15, 2021 due to the continuation of the COVID-19 Public Health Emergency and the impact the PHE has had on participants ability to complete all requirements in the 90-day implementation period. The public health emergency continues to be closely monitored in Ohio and in April a decision will be made regarding the format of the final live workshop and the event may be moved to a virtual event if large gatherings are not deemed safe, or should nursing home staffing issues limit the ability for participants to attend a live event.

Quarter 3 Metrics Collected/ Status of Program Goals

Goal	Progress
A 25% reduction in F726 <i>Competent Nursing Staff</i> citations for each participating facility and in the statewide aggregate for all participating facilities.	As a baseline, F726 <i>Competent Nursing Staff</i> **citations cited in the state of Ohio during the time period of 2019-2021 were reviewed. No F726 citations were issued in the participating facilities during this time period.
80% of Participants will identify at least one solution to overcome an identified barrier to competency program success per the facility performance self-assessment.	As of 4/14/2021, 23 of the 49 (50%) remaining participants identified at least one solution to overcome an identified barrier to competency program success per the facility performance self-assessment.
At least 85% of all participants will rate their satisfaction via workshop evaluation given after each live training event, rating the program as good or excellent in the following areas: a) Learning objectives were met b) Appropriateness of content to nursing facilities c) Usefulness of the knowledge/skills acquired d) Value of the tool, resources and materials in implementing an improved competency assessment/training program	Below indicates the percentage of participants who rated the program as good or excellent (agree/strongly agree) in the workshop evaluation given after each of the initial 2-day live virtual training events for each area. a) Learning objectives were met = 93% b) Appropriateness of content to nursing facilities = 100% c) Usefulness of the knowledge/skills acquired = 100% d) Value of the tool, resources and materials in implementing an improved competency assessment/training program = 100%
A minimum of 40 participants will complete all portions of the program and achieve Train-the-Trainer Certification as determined by completing the Competency Program Certification checklist and a passing score of at least 80% on the Final Certification Test.	As of 4/14/2021, 25 participants have completed all requirements required during the 90-day implementation period. The established deadline for participants to complete the program requirements to be eligible for participation in the final live workshop and competency testing is 04/15/2021.
At least 40 participants will successfully complete a minimum of 3 of 6 online competency webinar modules via GoTo Webinar on-demand training links as demonstrated by attendance verification reports available through the webinar platform and a score of 80% or higher on each module post-test	To date, 25 participants have successfully completed a minimum of 3 of 6 online competency webinar modules.

** F726 is the F-Tag issued for deficient practices in the long-term care survey process when there are deficiencies related to §483.35 *Nursing Services, which states, "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)(3) *The facility must ensure that licensed nurses have the specific competencies and skill sets necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.*

§483.35(a)(4) *Providing care includes but is not limited to assessing, evaluating, planning and implementing resident care plans and responding to resident's needs.*

§483.35(c) *Proficiency of nurse aides.*

The facility must ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care." ([State Operations Manual, Appendix PP](#))

Please contact Amie Martin if there are questions or additional information needed for this reporting period.

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