

Revision: HCFA-PM-92-3 (HSQB)
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REVISED
Attachment 4.40-A
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OMB No.:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Kentucky

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Survey and Certification Education Program

The State has in effect the following survey and certification periodic educational program for the staff and residents (and their representatives) of nursing facilities in order to present current regulations, procedures, and policies.

State staff participate in regular and periodic provider training events. This participation includes serving as presenters and panel members as well as conducting sessions on regulations changes and implementation. Provider representatives include both administration and direct case staff. State staff also participate in resident council meetings and will be providing other training for facility residents and/or responsible parties as time and staff permit.

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TN No. None

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ELIGIBILITY CONDITIONS AND REQUIREMENTS

Process for the Investigation of Allegations of Resident Neglect
and Abuse and Misappropriation of Resident Property

The State has in effect the following process for the receipt and timely review and investigation of allegations of neglect and abuse and misappropriation of resident property by a nurse aide or a resident in a nursing facility or by another individual used by the facility in providing services to such a resident.

All allegations of abuse, neglect and misappropriation of resident property are immediately investigated by Division of Licensing and Regulation and Department for Social Services in a joint effort. During this investigation the accused individual is advised of the alleged incident. Prior to a final determination of substantiation the accused individual is afforded the opportunity to appeal. All substantiated investigations are subject to the appropriate appeal process. Substantiated cases of Nurse Aide abuse, neglect and/or misappropriation are entered on a centralized registry maintained by the State Survey Agency. The accused individual and all appropriate authorities are notified of the final determination and action taken.

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Procedures for Scheduling and Conduct of Standard Surveys

The State has in effect the following procedures for the scheduling and conduct of standard surveys to assure that it has taken all reasonable steps to avoid giving notice.

In addition to federal procedures, the Division of Licensing and Regulation is prohibited by state law from giving any advance notice of long-term care facility surveys. Surveys to be conducted in a given month are sent to our regional offices. Schedulers in regional offices do not release schedules to staff until approximately one week prior to survey. Master schedules in regional offices are closely guarded.

Kentucky uses a flexible survey schedule where some facilities are surveyed in ranges of 9 to 15 months. Survey schedules are also based on performance in previous surveys and the number of complaints made against a facility.

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Programs to Measure and Reduce Inconsistency

The State has in effect the following procedures to measure and reduce inconsistency in the application of survey results among surveyors.

Annual training sponsored by Licensing and Regulation plus quarterly in-service training in Regional Offices on specific problem areas that need addressing for statewide consistency in the application of the survey process. Basic training and other specialized courses are provided by HCFA. Also, all survey packets received in Central Office are reviewed by compliance analysts.

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ELIGIBILITY CONDITIONS AND REQUIREMENTS

Process for Investigations of Complaints and Monitoring

The State has in effect the following process for investigating complaints of violations of requirements by nursing facilities and monitors onsite on a regular, as needed basis, a nursing facility's compliance with the requirements of subsection (b), (c), and (d) for the following reasons:

- (i) the facility has been found not to be in compliance with such requirements and is in the process of correcting deficiencies to achieve such compliance;
- (ii) the facility was previously found not to be in compliance with such requirements and has corrected deficiencies to achieve such compliance, and verification of continued compliance is indicated; or
- (iii) the State has reason to question the compliance of the facility with such requirements.

Refer to Attachment 4.40-C

All allegations of facility violations are investigated by the Division of Licensing and Regulation. All deficiencies resulting in Level A noncompliance are followed up for correction.