# **PUBLICATION**

# Fundamentals of CMS Updates to Appendix PP of the State Operations Manual: Training Requirements

October 24, 2022

#### F940: Training Requirements – General

Noncompliance at new deficiency tag F940, made effective in November 2019, will be cited if a facility fails to develop, implement, and maintain an effective training program for all staff.

# SOM Revisions to F940 Provide Guidance on Facility Development of Training Programs

The SOM revisions require a facility to develop, implement, and maintain an effective training program for all staff. Facilities must use their facility assessments to determine training needs and identify training topics. CMS does not propose a specific training mechanism that would satisfy the regulations requiring staff training, and the regulation does not specify that a member of the facility must conduct the training activities. Instead, each facility is given flexibility under the regulation to determine its training needs based on its facility assessment. Training requirements should be met before staff and volunteers independently provide services, annually, and as necessary based on the facility assessment. Facilities are expected to maintain records regarding the trainings.

# **Key Takeaways**

A facility that fails to develop and implement appropriate staff and volunteer trainings will be cited for a deficiency under F940. Each facility should maintain documentation of both the content and the conduct of the trainings so that it may demonstrate substantial compliance.

#### F941: Training Requirements – Communication

Noncompliance at new deficiency tag F941, made effective in November 2019, will be cited if a facility fails to develop and implement trainings regarding methods and techniques for effective communication for direct care staff.

#### **SOM Revisions to F941 Provide Guidance on Communication Training**

The new SOM does not require specific durations, topics, or training methods to meet this requirement, but the topics for training should correspond with the needs identified in the facility assessment. Facilities must inform residents in a language they can understand of their total health status and provide notice of rights and services both orally and in writing in language that residents understand. The content of the "communications" trainings may include the use of services such as TTY and TDD; the use of devices such as cellphones; and reasonable access and provision for electronic communication.

#### **Key Takeaways**

The new guidance at F941 emphasizes the importance of ensuring that information is both effectively conveyed by direct care staff and properly received by residents, using methods and languages that will facilitate the resident's understanding. If proper trainings are not implemented at the facility, surveyors have been instructed to interview staff and review training records to determine substantial compliance.

#### F942: Training Requirements – Residents' Rights and Facility Responsibilities

Noncompliance at new deficiency tag F942, made effective in November 2019, will be cited if a facility fails to develop and implement an ongoing education program regarding all residents' rights and facility responsibilities for caring of residents.

#### SOM Revisions to F942 Require Ongoing Residents' Rights Training for All Staff

The new SOM requires a facility to develop and implement an ongoing education program explaining residents' rights and the facility's responsibilities in caring for residents for all staff and volunteers. The ongoing education program must be supported by the current scope and standards of practices. Facilities must use staff assessments to evaluate whether the trainees have integrated the knowledge and skills presented in the training and have a process to validate that the training was completed.

# **Key Takeaways**

The regulation's requirement for an *ongoing* education program regarding residents' rights and the facility responsibilities for resident care reflects the import of ensuring that each resident is aware of their rights and how to exercise them. Each facility should maintain documentation of both the content and the conduct of the trainings so that it may demonstrate substantial compliance.

#### F945: Training Requirements – Infection Control

F945 is a new tag that went into effect in November 2019 and requires each facility to make mandatory training available for all staff and volunteers as part of its infection control and prevention program.

# Infection Control Training Must Be Widespread, Appropriate, and Often Updated

Under the new tag, facilities are required to develop, implement, and permanently maintain an effective infection prevention and control program training for all staff and volunteers. Training topics are to be appropriate for each staff member's or volunteer's role. The facility must also make ongoing revisions to its training program as needed to address changes in national standards and the facility's resident population, community infection risk, staff turnover, physical environment, assessment, and/or other relevant factors.

#### **Key Takeaways**

Facilities must not only ensure that their infection control and prevention programs are robust and professionally implemented, but that the requirements of the program are effectively communicated to all direct care, indirect care, and contracted staff and volunteers. In addition, each individual should know and understand how to effectively carry out the infection control and prevention program. The SOM revisions also emphasize the importance of facility documentation of the trainings in demonstrating substantial compliance.

#### F946: Training Requirements – Compliance and Ethics

F946 was made effective in November 2019 and requires that staff be trained on the facility's or operating organization's compliance and ethics program.

# Compliance Training Must Be Widespread and Structured in Current Scope and Standards of Practice

Under the new guidance, a facility must provide a training program or another practical way to communicate the compliance and ethics program's standards, policies, and procedures effectively to all direct care, indirect care, and contracted staff and volunteers. Operating organizations with five or more facilities must hold annual program training for their staff and volunteers. All training should be based in a curriculum that follows the

current scope and standards of practice through detailed learning objectives, performance standards, and evaluation criteria. In addition, facilities must track staff participation in the required trainings.

# **Key Takeaways**

Facilities must ensure that all staff and volunteers are aware of the standards, policies, and procedures that form the basis of each facility's compliance and ethics program through trainings that are structured in the current scope and standards of practice. Documentation of the content and attendance at these trainings will be required.

# F947: Training Requirements – In-Service Training for Nurse Aides

Noncompliance at deficiency tag F947 will be cited if a facility fails to develop, implement, and permanently maintain an in-service training program for nurse aides that is appropriate and effective, as determined by nurse aide performance reviews and the facility assessment.

#### SOM Revisions to F947 Require Each Facility to Have an Adequate In-Service Education Program

The new SOM clarifies that training topics must include, but are not limited to, those previously listed in the regulation including communication; residents' rights and facility responsibilities; abuse, neglect, and exploitation; quality assurance and performance improvement; infection control, and compliance and ethics. It further clarifies that private duty nurse aides who are not employed by or used by the facility on a contract are not covered under the nurse aide training provision and are not required to take the trainings. When able, each nurse aide should be evaluated based on individual performance, and the facility should develop training that can be utilized and beneficial to all nurse staff when applicable. While a variety of training methods can be used, the facility should not use webinars alone. Changes in a facility's resident population, the facility's physical environment, staff turnover, and the facility assessment may require that the facility make ongoing revisions to its nurse aide training program. In addition, there should be a process in place to track nurse aide participation in the mandated trainings.

# **Key Takeaways**

The new SOM places an emphasis of the development and implementation of required trainings across a number of topics, but specifically delineates the content and specificity of the nurse aide trainings. Facilities should ensure that, at a minimum, nurse aides are trained on the topics required by regulation, but should also be aware that the expectation is that additional topics will be covered as needed. The survey team does not need to find a negative outcome to cite a deficiency at this tag, so facilities should note that adequate trainings are required to be offered to nurse aides and the administration of the trainings documented even if the facility is found in substantial compliance for all other tags.

For specific guidance or more information about this alert, please contact Howard Sollins, Stefanie Doyle, or any other member of Baker Donelson's Long Term Care Team.