

## Revisit Procedure

### **Onsite Required**

Certified Facilities - Deficiencies of scope/severity of G or higher and for scope/severity of F if the deficiency at F is substandard quality of care. (see chart below)

State Licensed Only Facilities - All Class I deficiencies and Class II deficiencies resulting in actual harm to a resident(s). (see chart below)

NOTE: For those tags that require an onsite revisit, onsite revisits must occur until those tags are **corrected** (not lowered). If those tags are corrected, but other tags remain, follow chart below for remaining revisits.

### **Onsite Not Required**

Certified Facilities - Deficiencies at scope/severity of B, C, D, E and for scope/severity of F if the deficiency at F is **not** substandard quality of care. (see chart below)

State Licensed Only Facilities - All Class III deficiencies and Class II deficiencies resulting in no actual harm to a resident(s). (see chart below)

Scope/Severity or Class	Type of Revisit	Date of Compliance
Scope/Severity of D, E or F (non-substandard quality of care)	Desk review – Acceptable plan of correction and acceptable evidence*	Last date on acceptable POC/acceptable evidence
Class III or Class II (no actual harm)	Onsite revisit optional at SLCR's discretion	
Scope/Severity of F (substandard quality of care), or G - L	Onsite revisit to all deficiencies cited	1 <sup>st</sup> revisit – last date on acceptable POC/acceptable evidence
Class I or Class II (actual harm)		2 <sup>nd</sup> revisit – revisit date or last date of acceptable evidence
		3 <sup>rd</sup> revisit – date of revisit

Below are examples of acceptable evidence SLCR staff may review in determining whether to conduct a desk review revisit.

\*Examples of acceptable evidence include (not limited to):

- An invoice or receipt verifying purchases, repairs, inspections, etc.
- Sign-in sheets verifying attendance of staff at in-services training and copies of any handouts given at the inservices
- Interviews with more than 1 training participant about training

- Contact with resident council, e.g., when dignity issues are involved
- Contact with alert/oriented residents
- Copies of new/revised policies and procedures
- Photographs of work completed (Life Safety Code and environmental deficiencies)
- Contact with family members

### **Considerations for conducting non-mandatory onsite revisits\*\***

SLCR will review these considerations between the last date on the acceptable POC and the 50<sup>th</sup> day from the date of the exit. SLCR will decide whether an onsite revisit will be conducted or if a desk review will be conducted using the considerations listed below.

1. Compliance History - Facility has had uncorrected or immediate jeopardy deficiencies within the previous two standard survey cycles (including complaints).
2. Compliance History – Facility had same deficiency cited since and including the last standard survey.
3. Complaints – Complaint requiring an onsite visit is received prior to sending the POC Acceptance in Lieu of Revisit letter.
4. POC Acceptance –Regional office is having difficulty obtaining an acceptable POC or survey team does not received acceptable evidence when they request it.
5. Acceptable evidence gathered does not mesh with information in POC or evidence gathered does not support that the facility is in substantial compliance, i.e., interview with family member indicates situation is worse than before.
6. Number of Deficiencies Cited – Facility received a large number of deficiencies.
7. Number of Revisits Already Conducted - The revisit being considered will be the facility's second revisit, i.e. ongoing noncompliance.

\*\*These criteria are not all inclusive. SLCR may conduct an onsite revisit at any time for any level of noncompliance.

When the decision is made to consider a desk review revisit, i.e., after the latest date on the acceptable POC, the facility will be contacted and asked to send in evidence of correction. ***This is the point in time the facility is informed that a desk review revisit is being considered.*** If, after the evidence is gathered and reviewed, SLCR staff determine the evidence is sufficient, the facility will receive a letter informing them their POC/acceptable evidence has been accepted and no on-site revisit will be conducted. If the evidence gathered is not sufficient to determine compliance, SLCR will conduct an unannounced onsite revisit.