



Monthly Compliance Moments

This handbook contains Monthly Compliance Moments to share with your staff, to keep compliance top of mind. The purpose of the Moments is to create a culture of compliance, where compliance is seen as a positive force that helps employees perform the jobs.

MPA recommends sharing the Monthly Compliance Moment in a way (or multiple ways!) most effective in your organization. Examples:

- ✓ Email
- ✓ Bulletin board
- ✓ Bathroom or drinking fountain flyer
- ✓ Workstation screensaver
- ✓ Incorporate into in-services
- ✓ Paycheck stuffer
- ✓ Acrylic frame on break room table
- ✓ Employee newsletter
- ✓ Text alert
- ✓ Digital photo frame

* Ask department heads/managers to share with employees (* this is a great way for your employees to receive the compliance message from multiple sources, not just the Compliance Officer)

Meet the Compliance Officer:

[Compliance Officer's Name]

[Insert photograph of the Compliance Officer]

About me:

Why I care about compliance:

My inspiration:

“ [Insert quotation]

What I want you to know about compliance:

My door is always open. [Insert phone #]

Hotline #:

We care about your compliance hotline calls and will keep them confidential to the maximum extent possible. You can be anonymous. [Provider] will not tolerate any retaliation against someone who makes a good faith complaint.

Get to Know Your Compliance Committee

The Compliance Committee advises and helps the Compliance Officer keep the Compliance Program on track. The Compliance Committee members are here for you as compliance resources:

[Optional: Insert photo]

Name:
Title: Compliance Officer,
Chair
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

[Optional: Insert photo]

Name:
Title:
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

[Optional: Insert photo]

Name:
Title:
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

[Optional: Insert photo]

Name:
Title:
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

[Optional: Insert photo]

Name:
Title:
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

[Optional: Insert photo]

Name:
Title:
Ask me about: [Example:
For a CC member who
works in Social Services,
“Ask me about vendor
gifts and referrals”]

When should I call the compliance hotline?

[INSERT HOTLINE #]

Call the compliance hotline if you learn about:

Bribes Kickbacks Improper gifts	Conflicts of interest	Fraudulent billing	Medicare and Medicaid fraud and abuse
HIPAA Violations	Improper record destruction or alteration	Criminal activity	Unethical conduct
	[Resident Rights/EMTALA]	Other violations of the law or our policies	

- ✓ Always report concerns, even if you are not sure if they are a problem. We will investigate to find out if there is a problem.
- ✓ You may report anonymously. (But if you want [Provider] to follow up with you, please leave your name and #).
- ✓ [Provider] will keep reports confidential to the maximum extent possible.
- ✓ Employees are encouraged to report potential concerns, and will not get in trouble for reporting concerns in good faith. [Provider] has a strict “no retaliation” policy to protect anyone who reports a potential compliance concern in good faith.
- ✓ Other ways to report:
 - Contacting your supervisor
 - Contacting the Compliance Officer: [insert name and contact information]
 - [Insert any other methods]

To report [patient/resident] abuse or neglect, or any other immediate threat to a person, please don't call the hotline. These should be **immediately** reported to _____.

Thank you for reporting!

NO RETALIATION

You have probably heard by now that [PROVIDER] has a “No Retaliation” policy. What does that really mean?

If you report a compliance concern, either to the Compliance Officer, your supervisor, the Administrator, or to the [hotline, drop box, etc.], [Provider] will not tolerate anyone treating you negatively in response to your report.

If you report non-compliance to [Provider], any retaliation from your co-workers, supervisors, managers, or anyone else affiliated with us is not tolerated. Here are some examples of retaliation:

- Termination, probation, reprimand, or suspension
- Transfer to a less desirable job or role
- Passing you over for a raise or promotion
- Abusive comments or rude behavior
- Harassment
- Making it hard to do your job
- Rumors
- Leaving you out of decisions or work

If you experience any form of retaliation, please notify the Compliance Officer or Administrator, or another trusted party.

Just a reminder, examples of compliance issues that should be reported include:

fraudulent billing	vendor gifts, bribes, kickbacks	resident abuse	HIPAA violations
record alteration or forgery	criminal activity	unethical conduct	conflicts of interest

[Provider] appreciates your report. We will do everything we can to support you.

When in doubt, as the Compliance Officer... my door is always open!

Remember our Compliance Hotline # _____

Can you see PHI?

Protected Health Information (PHI) is everywhere! We work together as a team to comply with HIPAA, and that means looking out for each other and keeping an eye out for PHI.

When you walk around the building, do you see PHI...

- Lying face up on a desk or at the nurses' station unattended?
- On a computer monitor?
- Left on a printer or fax machine?

Or maybe you overhear PHI? If you come across PHI, conceal it and remind your co-worker to keep it hidden.

HIPAA questions? Ask the Privacy Officer:

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

HIPAA TIPS

There are lots of ways to share PHI: in person, by phone, email, fax, or mail. Each of these has different risks. Here are some tips to help you protect PHI, no matter how you share it.

Phone and In-Person

[Insert tips that apply to your organization here. Some examples are:

- *Verify the caller's identity*
- *Only disclose the minimum necessary*
- *Speak WHERE people can't overhear you*
- *Speak quietly SO people can't overhear you*

Fax

[Insert tips that apply to your organization here. Some examples are:

- *All faxing is done through [secure EMR system]*
- *Confirm fax numbers are correct*
- *Pre-program frequently used fax numbers to avoid misdirected faxes*
- *Notify recipients they have been sent a fax*
- *Include [COMPANY's] cover sheet*
- *Confirm fax delivery*
- *Only send the minimum necessary*
- *Document and track down potential faxes*
- *Never send sensitive PHI (e.g. HIV/AIDS, mental health, substance abuse information) by fax*
- *Keep the fax machine in a secure location, where passersby cannot view it*
- *Check fax regularly and remove faxes*
- *Store received faxes in a secure location*
- *Notify senders when we receive a misdirected fax*

Email

[Insert tips that apply to your organization here. Some examples are:

- *PHI will only be emailed using our encrypted service: _____*
- *PHI will never be emailed because we do not currently have encryption*
- *All email will be sent via our secure EMR system*
- *Double check the email address and attachments are correct*
- *Use the subject line to warn that the message contains PHI (do not include actual PHI in the subject)*
- *Only use the minimum necessary*
- *Include a disclaimer prepared by your legal counsel*

- *Never send sensitive PHI (e.g. HIV/AIDS, mental health, substance abuse information) by email*

Text Message

[Insert tips that apply to your organization here. Some examples are:

- *PHI should only be sent by text using our encrypted program: _____*
- *PHI should never be sent by text. It is not secure. If you receive an unencrypted text, contact the Compliance Officer immediately.*

When in doubt, as the Compliance Officer... my door is always open!

Remember our Compliance Hotline # _____

Monthly Compliance Moment

Should You Reply To That Email?

There is a new scheme targeting health care providers: Email impostors.

People who want to steal protected employee or patient information set up fake email accounts pretending to be a nursing home employee, such as the Administrator. The email often appears to come from a senior person in the organization, and includes their name and email signature.

The impostor then sends an email to a nursing home employee asking the employee to reply to the email with protected information – such as employee W2s, or resident information.

If you ever receive an email asking you to send this type of information – even if it seems real, and even if it seems urgent:

1. Stop.
2. Pick up the phone.
3. Call the person who appears to be sending the email, and ask if it is really them. It's OK – they will appreciate the call.
4. If you verify that the request is valid, decide how to forward requested information. Only email information encrypted. Better yet, walk it down the hall.

It is better to be safe than sorry!

Concerned about a resident? Report abuse immediately to _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

HIPAA

HIPAA and Patient Rights

Did you know that HIPAA gives our [patients/residents] certain rights? [Patients/Residents] have a right to...

- ✓ receive our Notice of Privacy Practices
- ✓ access their PHI
- ✓ request to amend their PHI
- ✓ request restrictions to how their PHI is used

- ✓ request confidential communication (e.g. cell phone or office number only)
- ✓ request an accounting of disclosures of their PHI
- ✓ give permission to discuss PHI with family and friends
- ✓ have their PHI protected when they are deceased

If one of our [patients/residents] expresses interest in exercising any of these rights, we can help. Let the Compliance Officer or HIPAA Privacy Officer know, so we can honor our [patients'/residents'] HIPAA rights.

What you do makes a difference. Thank you!

Privacy Officer:

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.
[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

HIPAA: Who *really* needs to know patient information?

Did you know that HIPAA puts all [Provider] employees on a “need to know” basis with [patient/resident] information? Sometimes people think that an employee of a health care organization has the right to look at any medical record for any [patient/resident] of the provider. That is actually not true. HIPAA says employees should only access [patient/resident] information if:

- it is needed to treat the patient, or
- it is needed to process payment for that patient

(or, sometimes, for certain other limited tasks). In any case, our access to PHI must always be limited to the “minimum necessary.”

Ask yourself: Do you really need this PHI to do your job? Could you do your job without using PHI? Is it better for the [patient/resident] if you don’t share this PHI? If you aren’t sure, ask the Compliance Officer.

For example: CNA Colleen learns that her third grade teacher, Mrs. Wolf, is a new [patient/resident] here. Colleen REALLY wants to know if Mrs. Wolf is doing OK. However, because Colleen is not treating Mrs. Wolf, she cannot look up Mrs. Wolf’s chart to see why she is a [patient/resident]—or ask another CNA for the scoop. Mrs. Wolf’s information is confidential. Colleen shows respect to Mrs. Wolf by respecting her privacy.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

HIPAA & Social Media: Pause Before you Post!

For most of us, social media is part of our daily lives. It helps us connect with others. Because we work in healthcare, we have to be careful not to mix social media with our work life. Here are some reminders:

When using Social Media, employees will not:

- Post [patient/resident] photos for any reason. This includes photos with [patients/residents] in the background.
- “Friend” [patients/residents] on Facebook or other sites.
- Talk about [patients/residents]—even without mentioning the [patient’s/resident’s] name.
- Include PHI in any posts.
- Violate [patient/resident] confidentiality or privacy or degrade or embarrass the [patient/resident].
- Identify [patients/residents] by name, or post or publish information that may lead to identification of a [patient/resident]. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Take photos or videos of [patients/residents] on personal devices, including mobile devices.
- Share treatment information in any format that is not authorized by [**provider**] (e.g. shared online calendars, online blogs or professional groups)

Any potential violation of patient confidentiality or privacy should be immediately reported to _____ . If you aren’t sure if something should be posted, ask _____ . [s/he] is here to help.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

HIPAA Privacy Reminder

Computer or iPad screens, clipboards, assignment sheets and logs often contain residents' protected health information. It is important to carefully shield this information so that it cannot be viewed by those who should not have access to it. Computer screens should be positioned so they cannot be viewed by passers-by. Before leaving the screen, be sure to minimize or close out of a screen containing PHI. If you carry a clipboard or an iPad into the room of a resident, consider using a blank top-sheet that will cover sheets containing information on residents other than the one you are seeing. Logs of therapy and other resident information should be kept in binders rather than being clipped or taped to the wall or door where it can be viewed by visitors.

HIPAA is an ongoing effort. When you walk the halls, thing to yourself?

- ✓ Can I see PHI?
- ✓ Can I overhear PHI?
- ✓ Did I leave any PHI within view today?
- ✓ Could anyone overhear me sharing PHI today?

Your observations help [Provider] protect patient confidentiality.

HIPAA breaches can happen anywhere

Many people think most HIPAA breaches involve a hacker breaking into a database or an electronic medical record. This is definitely a risk—but did you know that hacking only accounts for 8% of all HIPAA breaches? Theft accounts for 52% of all HIPAA breaches, and another 13% of breaches involve PHI that is lost. Twenty percent involve unauthorized access/disclosure (e.g., an employee accidentally shares PHI with someone who isn't authorized to hear/see it). Improper disposal accounts for 5% (for example, someone puts PHI in the trash, or throws out a flash drive that contains PHI).

HIPAA breaches can happen anywhere, and the health care industry is a big identity theft target. Patient records are often subject to theft, because they contain financial information (which can be used for identity theft), but also prescription information (which can be used to obtain controlled substances), and insurance information (which can be used to illegally obtain health care services).

The HIPAA Privacy Rule applies to PHI in all forms—paper (charts, but also notes you might carry with you), computers, email, phones, laptops, etc. It also applies to the conversations we have where we discuss PHI. Here are a few reminders to help you protect PHI:

- Change passwords often—and don't share them
- Log off when you leave your workstation
- Avoid discussing [patients/residents] where you can be overheard
- Check your pockets at the end of the day—do you have any [patient/resident] information that needs to stay at work?
- Keep paper PHI out of view of people who walk by. Position monitors so PHI isn't visible
- Always verify the identity of people asking about a resident. Remember—unless the [patient/resident] has given authorization, their roommate should not be told about their condition
- Never leave PHI unattended or in your car
- Photos are PHI
- The fact that someone is receiving treatment from us is PHI—even if we don't say why. This needs to be kept private.

When in doubt, ask the Privacy Officer: _____

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Social Media Snafus: Is it PHI?

1. People in background

“Happy birthday Aunt Laura!”

You post a picture of your favorite resident, who is also your aunt, sitting down to her birthday dinner. Your aunt signed an authorization allowing you to use her picture. But the woman in the background didn't. Someone could look at this picture and identify that the woman in the background is our patient.

2. Descriptions of residents

“I'm so honored to treat [INSERT COUNTY] County's oldest [PICK ONE: veteran, kindergarten teacher, etc.]!”

It is possible that someone could figure out, from this description, who the oldest [Veteran, etc.] is – and that they are living in our nursing home.

3. “Disappearing” photos

It is a common misconception that it is OK to post photos to social media apps like SnapChat, where the photos “disappear.” When it comes to pictures of patients, this is not OK – and could violate their resident rights as well. Taking and sending the picture is inappropriate – and “disappearing” photos could still be out there somewhere.

When in doubt, ask the Privacy Officer: _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

What makes a claim false?

[Provider] only bills for services that are:

- ✓ actually ordered and provide
- ✓ performed by licensed or certified professionals
- ✓ medically necessary – and documented as medically necessary
- ✓ quality care and services

Claims that do not meet these standards are false claims.

Here are some examples of false claims:

- ✓ Nursing care provided by a nurse whose license is suspended
- ✓ Services of such poor quality that they are not valued by Medicare or Medicaid
- ✓ Claims that do not meet coverage requirements (for example, the service requires a physician to be present, and there is no documentation that a physician was present)
- ✓ Overpayments that are not returned to Medicare or Medicaid within 60 days
- ✓ Claims without supporting documentation

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Together, we honor our residents

Every day brings new opportunities to show our residents that we honor them. Here are a few ideas for ways you can show respect for residents:

- Get to know your residents. If the resident is willing to share, ask questions about their life (career, family, where they've lived, hobbies).
- Consider each resident's unique skills and background when helping them find activities. If the resident needs help communicating, ask their personal representative.
- Do they want to be called by their full name, or a nick name? Ask.
- Let the resident know we value their privacy by knocking.
- Remember that everyone wants "quiet time" at times—and respect a resident's wish to be alone.
- Review the plan of care regularly. Are we doing everything we can to improve the resident's life? What can we do better?
- Give choices—of clothing, hairstyle, topic of conversation, etc.
- Be compassionate about our resident's fragilities – they were once active, energetic and productive individuals. Remember, most of us will be in our residents' shoes some day!

Concerned about a resident? Report abuse immediately to _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

When texting amounts to abuse

As nursing home employees, we strive every day to honor our residents with our actions (we work in their home, after all!)

We are careful to honor residents' privacy. This means we cannot talk about residents or post their pictures on social media. This also means we cannot text information or photos about residents. To do so would violate their right to privacy – and can violate HIPAA, which can lead to serious consequences.

HIPAA is only the tip of the iceberg. Did you know that photos of residents sent by text, or posted to social media, can also be mental abuse? CMS recently issued guidance that said **if the photo is humiliating or demeaning, it is likely that mental abuse has occurred**. If you see or receive any social media posts or texts that include resident pictures, immediately report it to **[insert abuse reporting procedure]**. Together we can make sure our residents' privacy is respected in their home.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Empathy: Honoring our residents



Residents do not live in our workplace, we work in their home.

Caring for the elderly is important – and sometimes hard – work. There are so many daily tasks to make sure residents have what they need. By practicing empathy, we can help our residents feel kindness while we care for them.

Empathy means:

- ✓ **Putting yourself in each resident's shoes.** What is it like to be this person? They are doing the best they can – and that's always enough.
- ✓ **Listening.** What makes this person unique? What would this person like to talk about today? Or do they need quiet?
- ✓ **Thinking creatively.** What can I do before I leave the room to make this person more comfortable?
- ✓ **Taking care of yourself, too.** Sometimes taking a deep breath and counting to 10 can replenish our patience and help us be at our best.

Concerned about a resident? Report abuse immediately to _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

SELFIE BREAK



Who doesn't love a good selfie? From age 2 to 102, everyone loves to take that perfect selfie and share something about their day.

But... when you work in a nursing home, you have to be careful:

- If a resident is in the background – even if you didn't see the resident – that selfie can be a **HIPAA breach**. Residents can often be identified when just a part of them is in the background of a picture.
- If other PHI is in the background – such as a whiteboard with resident stats – that, too, can be a HIPAA breach.
- Photos of residents that are humiliating or demeaning constitute mental **abuse**. This is true whether the photo is texted, or put on Facebook, Instagram, Snapchat, Twitter, any other social media site or app – or never leaves your phone.

Everyone loves a good selfie, but selfies and patient areas simply do not mix. Save the selfies for home, and help us show our residents the focus they deserve.

When in doubt, as the Compliance Officer... my door is always open!

Remember our Compliance Hotline # _____

Did you know that elder abuse includes resident injury that occurs due to poor care practices?

So often we think of physical abuse as a hit, slap or some type of obvious attack, but there are more subtle examples. CNAs and nurses are taught how to provide care in a way that recognizes the frailty of the residents we serve. When turning, transferring, or applying a treatment, we know how to prevent skin tears and bruises. We know how to minimize pain related to care. Physical abuse occurs when we provide care inconsistent with the plan of care and cause a resident harm. Common examples include transferring a resident without a mechanical lift even though the resident's care plan indicates a lift if the safest method. Also, unnecessarily turning a resident onto a surgical wound when applying a treatment causing pain.

Take care to follow the standards of practice and each resident's plan of care. It is all too common for caregivers to get hurried, tired, or frustrated and take shortcuts that can hurt a resident. Not only is it your duty to protect the residents from harm, it's the law. Familiarize yourself with the plan of care for each resident in your charge. Talk to your co-workers about coverage during breaks, getting a second person to assist when needed, and talk through any issues you are having during your shift. We all want to spoil the residents, but sometimes we work in difficult circumstances. Take your time and above all remember that we serve the most important people in the world – our elders. Thank you for all that you do.

Report abuse immediately to _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Resident Rights: The Golden Rule

The term “Resident Rights” is often heard in the halls of our nursing home, but what does it really mean for your day to day job?

“Resident Rights” means that we follow The Golden Rule:

- ✓ Treat others the way you want to be treated.
- ✓ Treat others with respect and dignity.

Our job is kindness in an unkind world.

Ask yourself: If you were placed in a nursing home is this how you would want to be treated?

And, ALWAYS REPORT ABUSE IMMEDIATELY... even if you aren’t sure what you saw was abuse. Better safe than sorry! It is our job to protect our residents. Abuse hotline: _____

Note to Compliance Officer: Here are other ideas to help employees understand the importance of resident rights. Try incorporating some of these exercises into orientation or training:

- *Ask staff to navigate the classroom and eat/drink wearing glasses coated with Vaseline and restrictive clothing on. Wear large gloves and make them keep their posture that of an elderly, hunched and head down. Put them in a wheelchair with restrictions and tell them to transfer themselves to the toilet.*

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Resident Rights Reminder

It is our policy to ensure residents have the right to a dignified existence, self-determination, reasonable accommodation of individual needs, and communication with and access to people and services inside and outside the facility. For a complete list of resident rights, please see our Residents' Rights Statement and Residents' Rights Policy.

Here are some practical reminders for ways you can respect resident rights on a daily basis:

- Knock before you enter a resident's room
- Use the resident's name (not a nick name or pet name) – unless the resident requests
- Make sure residents get their mail every day
- Make sure residents have access to the phone
- Remember to notify residents before giving them a roommate
- Residents get to pick out their own clothes and choose how to style their own hair, makeup, etc.
- Do everything you can to know the residents you serve. This will help you take better care of them. For example, review the care plan, and talk with co-workers with knowledge of the resident to get to know the resident better.

If you ever suspect that a resident's rights are not being respected, it is important to immediately intervene, and if necessary, notify the charge nurse or supervisor. Remember, you can also come to the Compliance Officer with questions, or concerns to report, regarding resident rights.

Abuse hotline: _____

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Abuse

As caregivers for the elderly, it is our responsibility to identify and report abuse or neglect—immediately.

Abuse or neglect can take many forms:

- Physical abuse
- Sexual abuse
- Emotional maltreatment
- Confinement
- Neglect (failure to provide necessities such as food, shelter, clothing, medical care)
- Theft of resident funds or property
- Mental abuse (this includes demeaning or humiliating photos or recordings)

Abuse or neglect can be inflicted by different people:

- A family member or other visitor
- Another resident
- An employee

...and sometimes we don't know the source of abuse or neglect.

If you suspect that a resident may have been the victim of abuse or neglect—even if you aren't sure—report it to the Administrator immediately. It is required by law, our duty as nursing home employees, and it is the right thing to do.

Report abuse immediately to _____.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Billing and Documentation Integrity

Integrity is defined as the quality of being honest and having strong moral principles. Integrity drives what we do and how we care for our [patients/residents] and treat others. We want integrity reflected in everything we do. Integrity applies to business practices such as billing and record keeping as well. At [Provider], we take steps to make sure our billing and records are accurate, timely and ethical. Here is what you can do:

- Keep complete, thorough, and accurate medical and billing records. We will not conceal, leave out, or alter any records.
- Documents should never be altered—if information must be updated or corrected, document it as a late entry.
- Write legibly.
- Remember that we only bill for medically necessary services that were actually provided. If you ever have a concern that a service is not medically necessary or was not provided, notify the Compliance Officer.
- If you discover a billing or documentation error, talk to your supervisor or the Compliance Officer as soon as possible. They will help find the best way to fix it.

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible. [Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Why is nursing documentation so important?

1. Without sufficient documentation to back it up, a claim submitted to Medicare or Medicare is a false claim—and that can be very costly! This is true even if the claim involved wonderful care. “If it’s not documented in the medical record, it didn’t happen.”
2. It helps us provide better care. Documentation provides data that we can use to better treat our [patients/residents].
3. Documentation creates a “story” about the [patient/resident] and their care. The more detailed the “story,” the easier it is for other practitioners to treat the [patient/resident].
4. Documentation is an expectation of the nursing license.

Director of Nursing [**or other clinician familiar with nursing documentation requirements**]
_____ provided some examples of documentation:

Example of inadequate documentation:

Example of good documentation:

OR: DON provides a list of documentation Do’s and Don’ts:

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.
[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Documentation

“If it’s not in the medical record, it never happened.”

Documentation is one of the most important parts of our day. It can be hard to keep up with all of the paperwork! But detailed, accurate documentation helps us tell our residents’ story. Taking the time to get the little things right adds up to a big difference:

- Make objective notes
- Be clear and concise
- Include observations
- Document medical complexity of resident and skilled nursing services provided
- Communicate resident’s needs and care received
- Demonstrate clinical decision making
- Demonstrate need for skilled level of care
- Support appropriately billed services
- Consider the resident’s story
- Paint a picture

Compliance Hotline # _____

Compliance reports can be anonymous, and will be kept confidential to the maximum extent possible.

[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Gifts

Note to Compliance Officer: please modify to incorporate your organization's Gifts policies. If you are uncertain of your gifts policies, consult your Kickbacks, Inducements and Self-Referrals policy, and/or your attorney about appropriate gifts policies under the Anti-Kickback and Stark laws.

The holiday season is around the corner.

While gifts typically involve good intentions, the government worries that gifts can be used to influence business decisions or [patients/residents'] choice of a provider.

Here are some reminders of our gifts policies:

- Gifts to residents. **[Insert your gifts policy here, consulting your Kickbacks, Inducements, and Self-Referrals policy. Examples: gifts of less than \$___ value are OK; resident gifts are not permitted; greeting cards are OK]**
- Gifts to/from vendors or other referral sources, including physicians and hospital discharge planners: **[Insert your gifts policy here, consulting your Kickbacks, Inducements, and Self-Referrals policy. Examples: no gifts allowed; nominal gifts allowed; etc.]**
- Reporting gifts. All gifts must be reported to the Compliance Officer **[put any exceptions here, e.g. for gifts of nominal value such as cookies, etc.]**

Compliance Hotline # _____

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Compliance Officer: [name and contact info]

My door is always open.

***YOU* make our care high quality!**

Quality is our mission, and why you do what you do. Preventing falls, pressure sores, incontinence, pain, and other quality issues is part of your daily job. Through **you** we give our guests the best care possible. You are the eyes, ears and voice of the [patient/resident]. It is everyone's job to keep an eye out for quality issues, and notify the supervisor if you think something could be better.

Example: Infection Control

Did you know that one person can stop an infection – and prevent others from getting sick?

Here's what you can do:

- Identify infections. [Insert protocol for symptoms to identify; who to tell]
- Wash your hands! [Add tips re: when, how]
- Wear gloves. [Add tips for when to wear/change]

Thank you for helping [Provider] improve the quality of care for our [patients/residents].

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Compliance Officer: [name and contact info]

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Quality Concern: Answering Call Lights

Our goal is to answer call lights immediately when they are first pressed.

But, if clinical staff are having a hard time responding to a call light immediately, everyone can help respond. This applies to non-clinical staff, too: you can respond to an unanswered call light and acknowledge the [patient/resident] and let them know help is coming. Then, go find someone who can help.

We provide better [patient/resident] care when we answer call lights promptly. We also provide better [patient/resident] care when we don't wait for the call light. By regularly checking in on our [patients/residents] and making sure they have everything they need, we can prevent the need to press the call light in the first place.

***You* make our care better, one day at a time – thank you!**

Compliance Hotline # _____

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[Provider] has a strict non-retaliation policy when it comes to compliance reports.

Compliance Officer: [name and contact info]

My door is always open.

Falls prevention

“Act as if what you do makes a difference. It does.”

- William James

What did you do to prevent a fall today?

Please consult with your DON or QA manager about specific items to include. Two examples are included to get you started.

- ✓ Make sure your resident's things are within reach
- ✓ Remind residents to lock their wheelchair brakes
- ✓ Conduct transfers according to the care plan
- ✓ Don't take shortcuts when it comes to using lifts

What you do makes a difference. Thank you!

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