

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>4-29-08</i>
--------------------	------------------------

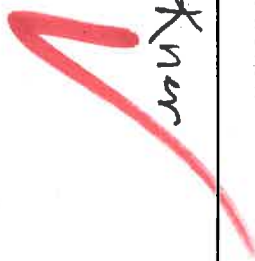
DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000553</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cc: Ms. Forkner</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>4-29-08</i>
--------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000553</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cc. Ms. Forkner</i> 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

BOARD:
Elizabeth M. Hagood
Chairman
Mark B. Kent
Vice Chairman
Howard L. Brilliant, MD
Secretary



C. Bad Hunter, Commissioner

Promoting and protecting the health of the public and the environment.

BOARD:
Carl L. Brazell
Louisiana W. Wright
L. Michael Blackmon
Coleman F. Buckhouse, MD

Emma Forkner, Director
S.C. Department of Health & Human Services
Office of the Director
1801 Main Street – 11th Floor
Columbia, S.C. 29202

RECEIVED

APR 29 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

April 9, 2008

Dear Mrs. Forkner:

We have been asked by CMS to communicate with our State Medicaid Director regarding improvements to the National Special Focus Facility (SFF) Program for Nursing Homes.

The SFF program was initiated because a number of nursing homes consistently provided poor quality of care, but periodically instituted enough improvement in the presenting problems that would pass one survey only to fail the next, often for many of the same problems that were originally identified. It was felt that such facilities failed to address the underlying systemic problems that were giving rise to repeated cycles of deficient practice. Nursing homes on the SFF list are surveyed with twice the frequency of health surveys than other nursing facilities.

CMS believes that refinements in the SFF procedures will increase the probability that significant improvements in quality of care will be made in the identified nursing homes. State Survey Agencies (SAs) will apply the procedures to both newly – identified SFF nursing homes and those nursing homes that are currently in the SFF program but have failed to improve significantly.

The revisions to the SFF program emphasize:

1. IMPROVED NOTIFICATION

Initial Notice -- All accountable parties will be notified of the facility's history of inadequate care, the reasons for selection, and the serious consequences that will occur in the event of a failure to improve. CMS believes it is important to notify the governing bodies, owners and operators, in addition to the nursing home administrators at the beginning of the SFF selection. The State Ombudsman Office and the State Medicaid Director will also receive notification.

Removal from SFF Designation – Once a SFF has successfully met criteria for removal, the SA will notify the SFF and all accountable parties that the facility is no longer designated as a SFF.

2. PUBLIC NOTICE

CMS will make public a list of nursing homes that have been designated as a SFF and, after one survey, fail to significantly improve care. SFFs that on a subsequent survey make a significant progress will have their name removed from the list when the list is updated. This information will be made available on the CMS website with a link from Nursing Home Compare.

3. FOCUS on QUALITY of CARE and QUALITY of LIFE DEFICIENCIES

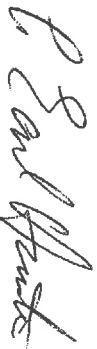
CMS has removed Life Safety Code (LSC) deficiencies from the formula used to calculate the SFF candidate list. However LSC surveys will be conducted with the same frequency as health surveys, and any LSC findings of actual harm on the most recent survey will preclude graduation from the SFF initiative.

The two SFF's for South Carolina are **Magnolia Manor of Moncks Corner** and **Ridgeview Manor Nursing Facility**. We are hopeful that upon completion of the next standard survey that these facilities will have sustained improvements and will be able to graduate from the SFF program. When that occurs, two replacement facilities from the CMS list will be selected.

The Bureau of Certification, within DHEC, has had a positive long-standing working relationship with the Division of Facility and Community Services within SCDHHS. These two groups meet monthly to discuss survey issues relative to nursing homes in SC as well as other health care providers that cross within their divisional responsibilities. Management from the Division of Facility and Community Services are knowledgeable of the SFF program and those nursing homes on the SC list. DHEC, through the Bureau of Certification, will continue these face-to-face meetings as well as provide formal communication to your office relative to the SFF program and those SC nursing homes who enter and leave this program. CMS believes survey findings represent an important source of information for Medicare and Medicaid management and purchasing decisions.

Should you have questions, please contact Karen Price, Director Bureau of Certification at 803-545-4283.

Sincerely,



C. Earl Hunter, Commissioner
SC Department of Health & Environmental Control.