



Facility Assessment

Infection Control - Administrative

Policy Statement

A facility assessment is conducted annually to determine and update our capacity to meet the needs of and competently care for our residents during day-to-day operations. Determining our capacity to meet the needs of and care for our residents during emergencies is included in this assessment.

Policy Interpretation and Implementation

1. Once a year, and as needed, a designated team conducts a facility-wide assessment to ensure that the resources are available to meet the specific needs of our residents.
2. The team responsible for conducting, reviewing and updating the facility assessment includes the following:
 - a. The Administrator;
 - b. A representative of the governing body;
 - c. The medical director;
 - d. The director of nursing services;
 - e. The infection preventionist; and
 - f. The director (or designee) from the following departments:
 1. Environmental services;
 2. Physical operations;
 3. Dietary services;
 4. Social services;
 5. Activity services; and
 6. Rehabilitative services.
3. The facility assessment includes a detailed review of the resident population. This part of the assessment includes:
 - g. Resident census data from the previous 12 months;
 - h. Resident capacity of the facility and its occupancy rate for the past 12 months;
 - i. Factors that affect the overall acuity of the residents, such as the number and percentage of residents with:
 1. Need for assistance with ADLs;
 2. Mobility impairments;
 3. Incontinence (bowel or bladder);
 4. Cognitive or behavioral impairments; and
 5. Conditions or diseases that require specialized care (e.g., dialysis, ventilators, wound care).
 - j. Religious, ethnic or cultural factors that affect the delivery of care and services, such as:
 1. Food and nutrition requirements;
 2. Decision making and end of life care;
 3. Activities; and
 4. Language translation requirements.

4. The facility assessment also includes a detailed review of the resources available to meet the needs of the resident population. This part of the assessment includes:
 - k. The physical characteristics of the facility including:
 1. Buildings and their intended or potential purpose;
 2. Number of beds/resident capacity; and
 3. Vehicles.
 - l. Equipment and supplies (medical and non-medical);
 - m. The contracts or agreements with third parties to provide services, equipment and supplies to the facility during normal operations and in the event of an emergency;
 - n. Services currently provided, including:
 1. Skilled or specialized care (e.g., memory care);
 2. Physical or occupational therapies;
 3. Rehabilitative or restorative; and
 4. Pharmacy.
 - o. All personnel, including:
 1. Directors;
 2. Managers;
 3. Regular employees (full and part time);
 4. Contracted staff (full and part time); and
 5. Volunteers.
 - p. A breakdown of the training, licensure, education, skill level and measures of competency for all personnel;
 - q. The current status of health information technology, including:
 1. Electronic health records;
 2. Electronic exchange of information with other organizations; and
 3. Personnel access to devices and equipment, internet and other tools.
5. Once the reviews of the resident needs and the facility resources are conducted, the facility assessment consists of systematically evaluating how well aligned these are. Each department provides input on current or potential gaps in care or services due to possible misalignment or lack of appropriate resources.
6. The facility assessment is intended to help our facility plan for and respond to changes in the needs of our resident population and helps to determine budget, staffing, training, equipment and supplies needed. It is separate from the Quality Assurance and Performance Improvement evaluation.
7. Our facility's ability to meet the requirements of our residents during emergency situations is a component of the facility assessment. This assessment is based on the information acquired during the assessment of operations under normal conditions, and the facility's Hazards Vulnerability Assessment conducted as part of our emergency preparedness plan.
8. Our facility's ability to address the needs of residents during the emergence of infectious disease events or outbreaks is a component of the facility assessment. This assessment is based on information acquired during a facility-based infection control risk assessment, as well as a community-based risk assessment.
9. The facility assessment is reviewed and updated annually, and as needed. Facility or resident changes or modifications that may prompt a reassessment sooner include:

- r. A decision to provide specialized care or services that had not been previously available to residents;
 - s. A change to the physical environment that would affect the care and services provided to our residents;
 - t. A significant change in the resident census and/or overall acuity of our residents; or
 - u. A change in cultural, ethnic or religious factors that may affect the provision of care or service.
10. The QAPI Committee is responsible for reviewing facility and resident information quarterly to determine if a facility reassessment is warranted.
11. Residents, representatives and family members may be asked to participate in the review of the care and services provided to meet the needs of our residents.

References	
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Related Documents	Infection Prevention and Control Assessment Tool for Long-term Care Facilities
Generations Revisions	January 2020
Version	1.1 (H5MAPL1448)