

Psychosocial Outcome Severity Guide



What is it?

The Psychosocial Severity Guide (Guide) is intended to help surveyors determine the **magnitude of negative psychosocial outcomes** (Scope & Severity) that can result from noncompliance with a specific FTag.

The Guide is not meant to replace the existing scope and severity grid. It should be used in addition to that grid to more accurately identify the seriousness of outcomes for each resident involved in a deficiency.

Why is it Important?

The Psychosocial Outcome Severity Guide is an important tool for surveyors to ensure that they are taking into account all relevant information when assessing a facility's compliance with FTags. By using this guide, surveyors can provide a more comprehensive evaluation of a facility's care provision and identify areas in need of improvement.

Overview

According to the Psychosocial Severity Guide, psychosocial outcomes may be the result of facility noncompliance with any regulation. This includes psychosocial outcomes resulting from facility failure to assess an individual resident's risk for a

specific psychosocial impact and to develop and implement an intervention to address that risk.

Psychosocial outcomes can result from a facility's noncompliance with any regulation. This includes psychosocial outcomes that result from a facility's failure to assess and care for residents' emotional and social needs. **The Psychosocial Severity Guide can help surveyors determine if a negative psychosocial outcome is the direct result of noncompliance.** The guide includes factors to consider, such as pre-existing psychosocial issues, illnesses, medication side effects, and other factors. By taking all of these factors into account, surveyors can get a better understanding of whether or not a negative psychosocial outcome is the direct result of noncompliance.

Survey Process

- The Psychosocial Severity Guide is designed to be used separately for each resident included in the deficiency. Each resident's psychosocial response to the noncompliance is the basis for determining psychosocial severity of a deficiency.
- To determine severity, the information gathered through the investigative process. Compare the resident's behavior (e.g., their routine, activity, and responses to staff or to everyday situations) and mood before and after the noncompliance.
- If the survey team determines that a facility's noncompliance has resulted in a negative psychosocial outcome to one or more residents, the team will use this Guide to evaluate the severity of the outcome for each resident identified in the deficiency.
- The survey team will determine severity based primarily on the resident's reaction to the noncompliance. A facility can be cited for a facility-wide Psychosocial Severity level of immediate jeopardy if any single resident experiences an immediate jeopardy level of severity due to the facility's noncompliance.



The Reasonable Person Concept

- ✓ The Psychosocial Severity Guide helps surveyors to apply the reasonable person concept when determining severity of a psychosocial deficiency.
- ✓ The “reasonable person” is applied when an individual approaches a situation with appropriate amount of caution and then sensibly takes action.
- ✓ It is a standard that has been created to provide an objective test that can be used in deciding whether a person’s actions constitute negligence.
- ✓ This does not mean that facility actions must be perfect. Mistakes are made, and when it is an error that is reasonable under the circumstances, a facility may not be liable.
- ✓ There are also unavoidable incidents in which injuries occur, or situations that are impossible to tell what a person did in the critical moments. When it is clear how a “reasonable person” would have behaved, and the facility fails to act according to that standard, they may be considered negligent.
- ✓ The reasonable person concept described in this Guide is merely a tool to assist the survey team’s assessment of the severity level of negative psychosocial outcomes.

- ✓ The guide defines three levels of severity, based on the degree of actual or potential harm that a reasonable person in the resident's position would suffer as a result of the noncompliance. Level 1 is the least severe, and Level 3 is the most severe.

Severity Levels

Severity Level 4 Considerations: Immediate Jeopardy to Resident Health or Safety Immediate Jeopardy is a situation in which the facility's noncompliance with one or more requirements of participation *has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident.*

Severity Level 3 Considerations: Actual Harm that is not Immediate Jeopardy

Severity Level 3 indicates noncompliance that results in actual harm, and can include but may not be limited to clinical compromise, decline, or the resident's inability to maintain and/or reach his/her highest practicable well-being.

Severity Level 2 Considerations: No Actual Harm with Potential for More Than Minimal Harm that is Not Immediate Jeopardy

Severity Level 2 indicates noncompliance that results in a resident outcome of no more than minimal discomfort and/or has the potential to compromise the resident's ability to maintain or reach his or her highest practicable level of well-being. The potential exists for greater harm to occur if interventions are not provided.

Severity Level 1 Considerations: No Actual Harm with Potential for Minimal Harm

Severity Level 1 is not an option because any facility practice that results in a reduction of psychosocial well-being diminishes the resident's quality of life. The deficiency is, therefore, at least a Severity Level 2 because it has the potential for more than minimal harm.



In Summary:

- The Psychosocial Severity Guide is just one tool that surveyors can use to help them determine the severity of a psychosocial deficiency.
- Psychosocial severity is determined by looking at the Psychosocial Severity Guide. This guide is used to rate the Psychosocial severity of a finding.
- There are three levels of Psychosocial severity: minimal, moderate, and severe.
- To apply the reasonable person concept, the survey team should determine the severity of the psychosocial outcome or potential outcome the deficiency may have had on a reasonable person in the resident's position.
- The Psychosocial Severity Guide can be found in Appendix PP of the State Operations Manual



How to prepare:

- ❑ Review all regulations (FTags) related to Resident Rights and Quality of Life.
- ❑ Review SS and IDT assessment and documentation for residents with identified mood and behavior issues.
- ❑ Review Reports of suspected abuse or neglect over the past year. There needs to be documentation regarding residents psychosocial reaction to the reported abuse or neglect and interventions provided by staff.
- ❑ Review Grievance Reports and Logs- check to make sure issues are addressed and appropriate interventions documented. All Grievance Reports must be addressed and resolved in a reasonable amount of time and include an administrator signature
- ❑ Review charts of residents with a recent decline in psychosocial functioning (depression, anxiety, etc). Identify the possible cause of the decline and provide appropriate interventions.
- ❑ Be pro-active. Ask residents on a regular basis if they have any concerns or complaints and demonstrate how these concerns are addressed.

References:

<https://www.triallaw1.com/what-is-considered-a-reasonable-person-when-it-comes-to-negligence>








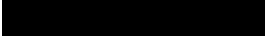
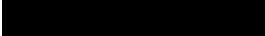
<https://www.cms.gov/files/document/psychosocial-outcome-severity-guide.pdf>


<https://qsep.cms.gov/data/352/PsychosocialOutcomeSeverityGuide.pdf>


<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R156SOMA.pdf>

<http://anha.org/uploads/ActSSPsychosocial.pdf>

Assessment Factors Used to Determine the Seriousness of Deficiencies Matrix

	Isolated	Pattern	Widespread
Immediate jeopardy to resident health or safety	J PoC Required 	K PoC Required 	L PoC Required 
Actual harm that is not immediate	G PoC Required	H PoC Required 	I PoC Required 
No actual harm with potential for more than minimal harm that is not immediate jeopardy	D PoC Required	E PoC Required	F PoC Required 
No actual harm with potential for minimal harm	A <u>No</u> PoC Required  No remedies Commitment to Correct Not on CMS-2567	B PoC Required 	C PoC Required 

 *Substandard quality of care* means one or more deficiencies related to participation requirements under §483.10 “Resident rights”, paragraphs (a)(1) through (a)(2), (b)(1) through (b)(2), (e) (except for (e)(2), (e)(7), and (e)(8)), (f)(1) through (f)(3), (f)(5) through (f)(8), and (i) of this chapter; §483.12 of this chapter “Freedom from abuse, neglect, and exploitation”; §483.24 of this chapter “Quality of life”; §483.25 of this chapter “Quality of care”; §483.40 “Behavioral health services”, paragraphs (b) and (d) of this chapter; §483.45 “Pharmacy services”, paragraphs (d), (e), and (f) of this chapter; §483.70 “Administration”, paragraph (p) of this chapter, and §483.80 “Infection control”, paragraph (d) of this chapter, which constitute either immediate jeopardy to resident health or safety; a pattern of or widespread actual harm that is not immediate jeopardy; or a widespread potential for more than minimal harm, but less than immediate jeopardy, with no actual harm.

 Substantial compliance