

Report in Brief

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL



Why OIG Did This Audit

In 2016, the Centers for Medicare & Medicaid Services (CMS) updated its life safety and emergency preparedness regulations to improve protections for all Medicare and Medicaid beneficiaries, including those residing in nursing homes. These updates expanded requirements related to sprinkler systems and smoke detector coverage. Emergency preparedness planning requirements were also expanded.

As part of our oversight activities, OIG is reviewing this area because many residents of nursing homes have limited or no mobility and are particularly vulnerable in the event of a fire or other emergency. Beginning in 2018, we conducted a series of audits in eight States to assess compliance with CMS's new life safety and emergency preparedness requirements.

Our objective was to summarize the results of our previous audits of eight States' compliance with CMS's life safety and emergency preparedness requirements for nursing homes and to identify opportunities for CMS to improve resident, visitor, and staff safety.

How OIG Did This Audit

We summarized the findings from the previous audits and identified opportunities and developed recommendations to help CMS address deficiencies identified during the audits and improve resident, visitor, and staff safety.

Audits of Nursing Home Life Safety and Emergency Preparedness in Eight States Identified Noncompliance With Federal Requirements and Opportunities for the Centers for Medicare & Medicaid Services to Improve Resident, Visitor, and Staff Safety

What OIG Found

We identified a total of 2,233 areas of noncompliance with life safety and emergency preparedness requirements at 150 of the 154 nursing homes we visited. Specifically, we identified 1,094 areas of noncompliance with life safety requirements and 1,139 areas of noncompliance with emergency preparedness requirements. These deficiencies occurred because of several factors, including inadequate oversight by management, staff turnover, inadequate oversight by State survey agencies, and a lack of any requirement for mandatory participation in standardized life safety training programs. As a result, residents, visitors, and staff at the nursing homes were at increased risk of injury or death during a fire or other emergency. CMS subsequently followed up with State survey agencies to determine if they had addressed the recommendations included in our prior audits and, according to CMS, the States had already taken acceptable actions to address our recommendations.

We identified several opportunities for CMS to expand on its life safety requirements for nursing homes to improve the safety of residents, visitors, and staff. Among other findings, CMS could propose regulations requiring nursing homes to install carbon monoxide detectors according to national standards. We also noted areas in which CMS could improve its support for State survey operations and nursing home training. CMS could work with State survey agencies to address issues preventing more frequent surveys of high-risk facilities and require mandatory participation in standardized nursing home staff training.

What OIG Recommends and CMS Comments

We made a series of recommendations to CMS to address our findings, including that it propose regulations requiring nursing homes to install carbon monoxide detectors and work with States to encourage mandatory participation in standardized training for nursing home staff. CMS generally agreed with our recommendations and described steps it has taken or plans to take to address them, including working with a limited number of nursing homes with serious repeat deficiencies that pose the highest risk to residents' health and safety.