

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, CMS updated its life safety and emergency preparedness regulations for health care facilities to improve protections for individuals enrolled in Medicare and Medicaid, including those residing in long-term care facilities (nursing homes). The updates expanded requirements related to sprinkler systems, smoke detector coverage, and emergency preparedness plans. In addition, facilities were required to develop an infection control program.

Our objective was to determine whether Oklahoma ensured that selected nursing homes in Oklahoma that participated in the Medicare or Medicaid programs complied with Federal requirements for life safety, emergency preparedness, and infection control.

How OIG Did This Audit

Of the 296 nursing homes in Oklahoma that participated in Medicare or Medicaid, we selected a non-statistical sample of 20 nursing homes for our audit based on certain risk factors, including the number of deficiencies Oklahoma reported to CMS.

We conducted unannounced site visits at the 20 nursing homes from October 2022 through January 2023. During the site visits, we checked for life safety, emergency preparedness, and infection control deficiencies.

Oklahoma Could Better Ensure That Nursing Homes Comply With Federal Requirements for Life Safety, Emergency Preparedness, and Infection Control

What OIG Found

Oklahoma could better ensure that nursing homes in Oklahoma that participate in the Medicare or Medicaid programs comply with Federal requirements for life safety, emergency preparedness, and infection control if additional resources were available. During our onsite inspections, we identified deficiencies related to life safety, emergency preparedness, or infection control at all 20 nursing homes we audited, totaling 146 deficiencies. Specifically, we found 98 deficiencies related to life safety, 16 deficiencies related to emergency preparedness, and 32 deficiencies related to infection control. As a result, the health and safety of residents, staff, and visitors at the 20 nursing homes were at an increased risk during a fire or other emergency or in the event of an infectious disease outbreak.

The identified deficiencies occurred because of frequent management and staff turnover, which contributed to a lack of awareness of, or failure to address, Federal requirements. In addition, Oklahoma had limited resources to conduct surveys of all nursing homes as required by CMS.

What OIG Recommends and Oklahoma Comments

We recommend that Oklahoma follow up with the 20 nursing homes in this audit that demonstrated life safety, emergency preparedness, and infection control deficiencies to ensure that they have taken corrective actions. We also make procedural recommendations for Oklahoma to work with CMS to develop an approach to identifying and conducting more frequent surveys at nursing homes.

Oklahoma neither concurred or non-concurred with our recommendations but described corrective actions that it planned to take to address one of the recommendations along with other corrective actions it planned to take or was already taking to address our findings. Oklahoma planned to conduct followup inspections for the 20 nursing homes by September 30, 2024, to ensure the deficiencies had been corrected. Oklahoma also created a survey schedule for conducting timely nursing home surveys, and it described various training plans for nursing homes and nursing home surveyors that will begin in 2024.