

## Report in Brief

Date: September 2022  
Report No. A-01-20-00004

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



### Why OIG Did This Audit

At the start of the pandemic, the Centers for Disease Control and Prevention indicated that individuals who are aged 65 and older or nursing home residents are at a higher risk for severe illness from COVID-19. In addition, 8 out of 10 COVID-19 deaths reported in the United States in 2020 were adults aged 65 and older. COVID-19 is especially dangerous for the more than 1.3 million residents who live in the 15,450 Medicare and Medicaid certified nursing homes nationwide.

Our objective was to determine whether selected Life Care Centers of America (Life Care) nursing homes complied with Federal requirements for infection prevention and control and emergency preparedness.

### How OIG Did This Audit

We analyzed State survey agency (SSA) data on Medicare.gov for the most recent standard surveys and the previous 12 months of complaint surveys. We identified that 6,622 nursing homes had been cited for infection prevention and control program deficiencies as of February 26, 2020, and Medicare.gov indicated that 24 nursing homes were part of the Life Care nursing home chain. We contacted Life Care's corporate office regarding the 24 nursing homes and requested that they provide us with documentation related to infection prevention and control and emergency preparedness program policies and procedures that were in effect from January 2019 through May 2020.

## Certain Life Care Nursing Homes May Not Have Complied With Federal Requirements for Infection Prevention and Control and Emergency Preparedness

### What OIG Found

Selected Life Care nursing homes may not have complied with Federal requirements for infection prevention and control and emergency preparedness. Specifically, 23 of the 24 nursing homes selected had possible deficiencies. Actual deficiencies can only be determined following a thorough investigation by trained surveyors. At 22 nursing homes, we found 35 instances of possible noncompliance with infection prevention and control requirements related to annual reviews of the Infection Prevention and Control Program, training, designation of a qualified infection preventionist, and Quality Assessment and Assurance Committee meetings. We also found at 16 nursing homes 20 instances of possible noncompliance with emergency preparedness requirements related to the annual review of emergency preparedness plans and annual emergency preparedness risk assessments. Life Care officials attributed the possible noncompliance to: (1) leadership turnover, (2) staff turnover, (3) documentation issues (i.e., information was not documented or documentation was either lost or misplaced), (4) staff members who were unfamiliar with requirements (i.e., requirements stipulating that there is no grace period for infection preventionists to complete specialized training and that emergency preparedness plans needed to be reviewed annually), (5) qualified personnel shortage, and (6) challenges related to the COVID-19 public health emergency. We also believe that many of the conditions noted in our report occurred because CMS did not provide nursing homes with communication and training related to complying with the new, phase 3 infection control requirements, or clarification about the essential components to be integrated in the nursing homes' emergency plans.

### What OIG Recommends and CMS Comments

We recommend that CMS instruct SSAs to follow up with the 23 nursing homes that we have identified with possible infection prevention and control and emergency preparedness deficiencies to verify that they have taken corrective actions.

CMS concurred with our recommendation and stated that it has contacted the appropriate SSAs to ensure that the 23 nursing homes with possible infection prevention and control and emergency preparedness deficiencies have taken corrective actions in accordance with Federal requirements.