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State: Indiana	Task: Nursing Home
Owner:	Policy No:

## SAMPLE POLICY: SCHEDULE NUTRITION AT RISK / SUPPLEMENTAL WORK AND TRANSITION (NAR/SWAT) MEETINGS

## **Federal Regulations for NAR/SWAT Meetings**

**483.35(a)(3)** states that the facility must ensure that licensed nurses have the specific competencies and skill sets necessary to care for residents' needs, as identified through resident assessments and described in the plan of care.

**483.35(a)(4)** states that licensed nurses will provide care that includes but is not limited to assessing, evaluating, planning, and implementing resident care plans and responding to residents' needs.

Surveyor Guidance states that citations will occur only if there are deficiencies related to the competency of nursing staff. Note: The failure to address pressure injuries is found under Nursing Services which may find that nutrition to help heal the pressure injury/wound was not addressed by Nursing. It can result in a Level 3 actual harm that is not immediate jeopardy.

**483.30€(2)** Physician Services at F715 states that a resident's attending physician may delegate the task of writing dietary orders, consistent with 483.60 to a qualified dietitian or other clinically qualified nutrition professional who (1) is acting within the scope of practice as defined by State law and; (2) is under the supervision of the physician.

**483.60(a)** Staffing F801 states that the facility must employ sufficient staff with the appropriate competency and skill sets to conduct the functions of food and nutrition service, taking into consideration resident assessments, individual plans of care, and the number, acuity, and diagnoses of the facility's resident population in accordance with the facility assessment required at 483.70(e).

- □ Surveyors may cite F801 for concerns regarding the qualifications of the dietitian, other clinical nutrition professionals, or the food services director.
- Potential tags for additional investigation at 483.60(a)(1)(2). During the investigation of F801, the surveyor may have identified concerns with additional requirements related to outcome, process, and/or structure requirements. The surveyor is advised **to investigate** these related requirements before determining whether non-compliance may be present for these other tags. Some examples of the related requirements where non-compliance has been identified include, but are not limited to, the following:
  - A. 483.25(B)(1), F686, Pressure Injury. Determine if the facility identified, evaluated, and responded to a change in a resident's skin integrity.
  - B. 483.25(g)(1-3), F692, Nutrition/Hydration status. Determine if facility identified, evaluated, and responded to a change in nutritional parameters, anorexia, or unplanned weight loss, dysphagia, and/or swallowing disorders in relation to the resident's ability to eat.
  - C. 483.25(g)(4-5), F693, Tube Feeding Management. Determine if the facility identified, evaluated, and responded to the use of a nasogastric or gastrostomy tube.

**Reference:** CMS PP Appendix



