

STATE OF HAWAII
DEPARTMENT OF HEALTH
HEALTH RESOURCES ADMINISTRATION
OFFICE OF HEALTH CARE ASSURANCE
FUNCTIONAL STATEMENT

- Manage the State licensing and Federal certification of medical and health care facilities, agencies, and services provided throughout the State in order to ensure acceptable standards of care provided and to ensure compliance with State and Federal requirements.
- Maintain effective liaison with other divisions and branches of the State Health Department, the Department of Human Services, Executive Office of Aging, local medical, nursing, hospital trade associations and/or societies and representatives of professional and para-professional disciplines. This liaison shall be to the extent necessary to ensure that there is a minimum of duplication and maximum cooperation and coordination of all efforts towards providing appropriate levels of medical care, as defined in the State licensing and Medicare Conditions of Participation of the various providers of services.
- Evaluate the health care system plan and implement measures to design or establish whatever types of facilities and services are deemed necessary to meet existing needs. Collaborate with other agencies and programs to address community and infrastructure needs.
- Represent the OHCA in administrative, legislative matters, promoting measures which will provide quality assurance in delivery of health care services, and implementing changes as deemed necessary.
- Promulgate and update State rules and regulations as authorized by legislature and interpret State regulations and Federal certification standards for health care facilities. Make recommendations to the Director regarding waivers and other matters affecting licensure and/or certification.
- Coordinate OHCA activities and functions within the Department in Civil Defense and other emergency situations. Provide necessary information to the Centers for Medicare & Medicaid Services (CMS) as required for Medicare/Medicaid Certified facilities.
- Initiate and coordinate the issuance of remedial actions as necessary in cooperation with the Attorney General and under purview of appropriate administrative rules.
- Maintain a registry of pertinent data regarding medical and health care facilities and health care

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licensure activities in the State.

- Assist in the provision and development of training programs for providers in all health care settings in coordination with health care organizations, providers, quality improvement organizations, private resources, University of Hawaii, and other departments as necessary.
- Establish a system to ensure ongoing quality improvement measures for OHCA in all areas of functioning.
- Provide administrative and clerical support services for the OHCA.
- Participate with public and private stakeholders on ongoing assessments of community needs and infrastructure development.
- Pursue grants or other collaborative opportunities to establish projects to improve internal and community workforce, obtain training materials and opportunities, improve the survey process, identify patient safety initiatives, and other objectives as deemed appropriate through needs assessments.
- Ensure the proper management of all grants received and ensure compliance to all requirements.
- Ensure a comprehensive quality assurance/improvement system to ensure compliance with OHCA and departmental mission, taking into consideration best practices and current standards of health care.
- Work with CMS, providers, organizations and community agencies in initiatives regarding patient safety. Additionally act as the representative of the department in the Patient Safety Task Force or any other such task force as is appropriate to safeguard the public while in the care of these health care organizations.

State Licensing Section

- Implement provisions of HRS Chapter 321 as relating to licensing of health care settings by promulgating licensing rules and developing standards as required to ensure quality of care for certain medical facilities which must be licensed by the State, but not certified for Medicare participation, which include Adult Residential Care Homes, Expanded Adult Residential Care Homes, Developmental Disabilities

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Domiciliary Homes, Special Treatment Facilities, Therapeutic Living Programs, and Assisted Living Facilities.

- Plan and coordinate inspection surveys for the purpose of annual licensure, follow-up on correction of deficiencies, and investigation of complaints by teams of specialists appropriate to the nature of the facility in order to determine compliance with State and County requirements, and to ensure that a basic quality of care is being provided.
- Coordinate enforcement activities, issuance of sanctions, and hearings with the Attorney General's office in accordance with pertinent statutes.
- Maintain a registry of facilities and vacancy listing as required by law, as well as maintaining data relative to evaluating the status of licensed facilities and the sectional activities. Facilities include Adult Residential Care Homes, Expanded Adult Residential Care Homes, Developmental Disabilities Domiciliary Homes, Special Treatment Facilities, Therapeutic Living Programs, and Assisted Living Facilities.
- Provide or arrange for specialized consultation by nursing, physical therapy, occupational therapy, nutrition, sanitation and other professional staff to facilities and their owners or operators to provide continuing education which will assure appropriate care.
- Stimulate and assist community action to provide quality resident care and integration of residents into appropriate community activities.
- Conduct or ensure that criminal history back ground checks are conducted as per HRS 321 and 846 on employees, licensees, and operators of health care settings that require licensure and/or certification of caregivers of all care facilities under the section's responsibility and authority.
- Set standards, assist in rule-making, inspect for compliance with rules, and license Adult Residential Care Homes, Expanded Adult Residential Care Homes, Developmental Disabilities Domiciliary Homes, Special Treatment Facilities, Therapeutic Living Programs, and Assisted Living Facilities.
- Conduct surveys to inspect for compliance with rules on all designated health facilities, coordinating such inspections with other regulatory agencies at the State and local level.

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- Prepare consolidated reports of inspections, forwarding to operators of facilities lists of deficiencies and providing follow-up surveys to verify correction of deficiencies as indicated by the circumstances.
- Investigate complaints involving designated health care facilities.
- Interpret regulations to operators, public, Legislature, State agencies and other agencies, as requested.
- Certify caregivers of developmental disabilities domiciliary homes along with the licensing of such homes.
- Conduct Occupational Therapy assessments of residents in all provider types upon referral of nurse consultants to determine resident ability for self preservation ability, activities of daily living, instrumental activities of daily living, ambulation, fine motor coordination/dexterity and other areas of need.
- In cooperation with the Community Colleges, develop training modules for operators and providers caring for residents with special needs, and foster appropriate continuing education programs for caregivers.
- Conduct assessment of all provider types to determine need for training and/or in-service education.
- Arrange and provide in-depth training for all State Licensing surveyors in survey procedures and interpretation of rules so that consistency in interpretation and in surveys is achieved.

Clerical Services

- Provide administrative and clerical services necessary to support the program, including preparation of correspondence and reports, maintaining records, manuals, rules and other publications essential to the program.
- Maintain and update data in computer files.
- Provide all clerical services to section.
- Set up and maintain facility files, including all reports, correspondence, and other related materials.

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Federal Medicare Certification Section

- Implement the agreement between the State of Hawaii and the Centers for Medicare & Medicaid Services (CMS) or as it exists or may be amended in the future pursuant to section 1864 of the Social Security Act, Medicare.
- Maintain a continuing surveillance of certified health care facilities to ensure that the quality of care is being delivered and that participants are maintaining standards in accordance with the Conditions of Participation in Medicare. This includes initial and annual surveys, follow-up surveys, and complaint investigations.
- Maintain effective liaison with the Department of Human Services, the Department of Commerce and Consumer Affairs, the Executive Office of Aging, and the State hospitals and long term care associations to ensure understanding and cooperation in coordinating efforts toward providing satisfactory standards of health care.
- Arrange and provide in-depth training for all Medicare surveyors in survey procedures and interpretation of rules so that consistency in interpretation is achieved.
- Plan and schedule unannounced surveys for licensure, certification and follow-up inspections, and arrange for prompt investigation of complaints regarding licensed/certified facilities by teams of appropriate professionals.
- Make maximum utilization of the professional and administrative personnel within the Department in implementing the State's responsibilities in the program. Arrange for consultative services in the professional level and para-professional areas not available within the Department.
- Write, update, and interpret State licensing regulations and interpret Federal certification regulations for hospitals; skilled nursing/intermediate care facilities; home health agencies; freestanding surgical outpatient facilities; small and large intermediate care facilities for the mentally retarded; renal dialysis; adult day health centers; clinical laboratories; and other certified facilities.
- Transmit survey certification data to CMS Regional or Central Offices of the Centers for Medicare & Medicaid Services offices through Federal system of data management, as required.

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- Conduct or ensure that criminal history back ground checks are conducted on providers as per HRS 321 and 846 for employees, licensees and report findings of criminal action taken against certified nurse aides to the Department of Commerce and Consumer Affairs who is responsible to maintain the State Registry for Certified Nurse Aides.
- Conduct assessment of all provider types to determine need for training and/or in-service education.
- Develop training programs for all provider types in coordination with provider organizations, CMS, community resources, individual providers and various professional organizations.

Clerical Services

- Provide all administrative and clerical services necessary to support the Federal Medicare Certification Section, including preparation of correspondence and reports, maintaining records, manuals, rules and other publications essential to the program.
- Maintain and update data in computer files.
- Set up and maintain facility files, including all reports, correspondence, and other related materials.