



Highlighting ACE Updates, Best Practices, Resources, Tools, and Upcoming Events

ACE Updates

ACE Quarterly Data Reports

All ACE enrolled facilities should have received two copies of their most recent ACE Quarterly Data Report in the mail at the end of September. If you have not received your copy, please let us know at scace@thecarolinascenter.org. Remember, data drives quality improvement. Benchmarking your resident outcomes with state and national averages is the first step in identifying care processes in your facility that need improvement. Review the QAPI tools and resources provided with your data and let us know if we can help. Be sure to check out the ACE website at <http://atlanticquality.org/initiatives/nursing-home-quality/nursing-home-quality-sc/clinical-topics/> for tools and resources for best practices that will assist you in improving your quality measures.

ACE Initiative for *C. difficile* Infection (CDI) and Antibiotic Stewardship (ABS)

Thirty-seven ACE facilities have enrolled in the national pilot to report CDI in long-term care! Thank you to everyone who has been able to commit to this important work to establish a baseline for CDI in nursing homes. Identified staff have been trained and are in the process of applying for security clearance to enter data into the CDC website. Once they obtain their ID card (SAMS card) and set up facility information, they will enter laboratory identified CDI cases directly into NHSN (National Healthcare Safety Network) (<http://www.cdc.gov/nhsn/>).

Pilot homes will begin tracking cases October 1 and will enter their data at month's end. Data entered for ten consecutive months will be used to track and compare CDI cases across regions, the state, and the nation.

South Carolina nursing facilities will benefit from this project through better identification of CDI sources, causes, preventive measures, and surveillance strategies. All ACE facilities will be updated of progress throughout the pilot. There are two webinars on the ACE website (<http://atlanticquality.org/initiatives/nursing-home-quality/nursing-home-quality-sc/presentations-and-handouts/>) that provide information on CDI including etiology and treatment as well as infection control and prevention practices.

ACE Best Practices

ACE Best Practice Lunch & Learn Webinar Series

For the September 15th ACE Best Practice Lunch and Learn webinar, the team from Jolley Acres Healthcare presented their successful program to treat and prevent urinary tract infections (UTIs).

The team at Jolley Acres tracks data by organism and by resident, looking for repeating organisms and patterns. Staff are trained annually and on target infections when they occur. Performance check-offs ensure that all staff follow infection control guidelines. Key components of their program include:

Day One:

- Direct care workers notify the Infection Control Preventionist (ICP) immediately of changes in resident status that may be signs and symptoms of infection.
- ICP begins investigation of resident signs and symptoms; sends specimen to lab; and begins Infection Report Tool (http://www.med-pass.com/media/pdf/CP1817-04-2016_sp.pdf). (Any tool you use should be based on national clinical guidelines and provide the criteria for determining if a UTI is present. The Society for Healthcare Epidemiology of America Definitions of Infections for Surveillance in LTC is a primary source for such guidelines.)

Day Two:

- ICP monitors signs and symptoms and reports results of investigation and lab results to physician.

Day Three:

- ICP obtains final C & S report and completes Infection Report Form.

CMS Updates

A new CMS article, *Overview of the Skilled Nursing Facility Value-Based Purchasing Program*, provides a summary of recent changes. You may read the article here: <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1621.pdf>

SNF QRP Provider Training Questions and Feedback on MDS 3.0

The Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Measures and Technical Information webpage (https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Measures-and-Technical-Information.html#_blank) is updated with Provider Training Questions and Feedback on Minimum Data Set (MDS) 3.0 (<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/SNF-QRP-Questions-from-Training-August-2016.pdf>). This document provides responses to questions from recent training events. Topics include the following:

- MDS 3.0 assessments relevant to the SNF QRP
- Part A Prospective Payment System discharge combinations
- Section GG
- Pressure ulcer quality measure

Upcoming Events

ACE Best Practice Lunch & Learn Webinar Series

3rd Thursday of the month from 11:30 a.m. - Noon

October 20, 2016

INTERACT® and Reducing Avoidable Hospital Readmissions

The October webinar will be presented by the team from Mullins Nursing Center. Their approach using INTERACT® to reduce avoidable hospital readmissions has been very successful. Listen in and ask questions of those who have had positive outcomes.

To register for the October 20th webinar, go to <https://qualitynet.webex.com>. Find the appropriate title and date. Click register.

Previous ACE webinars have been excellent with teams sharing best practices and easy-to-use methods to improve resident outcomes. The recordings and slides for these 30-minute presentations are posted on the ACE website here:

<http://atlanticquality.org/initiatives/nursing-home-quality/nursing-home-quality-sc/presentations-and-handouts/> . Gather your team around a computer at a time that is

convenient to hear insightful tips, lessons learned, and best practices from your peers.

IMPACT Act: Data Elements and Measure Development Call – October 13

Thursday, October 13, 2016 from 1:30 PM - 3:00 PM ET

To register or for more information, visit MLN Connects Event Registration at <https://blh.ier.intercall.com/details/b745cb4472bb40018189a1da9077eeee>

During this call, CMS experts discuss how data elements are used in measure development. Find out how information from assessment instruments is used to calculate quality measures. The Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act - <https://www.gpo.gov/fdsys/pkg/PLAW-113publ185/pdf/PLAW-113publ185.pdf>) requires the reporting of standardized patient assessment data on quality measures, resource use, and other measures by Post-Acute Care (PAC) providers, including skilled nursing facilities, home health agencies, inpatient rehabilitation facilities, and long-term care hospitals.

To ensure delivery of data and ACE updates, please add scace@thecarolinascenter.org to your email address book. Make sure that the person responsible for your computer security adds this address to a "white list" of allowed senders.

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