



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

ACE Updates

As Jo Taylor retires this month, Linda Rooney, MS, SLP, CPHQ will be stepping up to lead the CCME nursing home team along with Marilee Mohr, RN, MSN and Heather Jones, MHA, PTA, CPHQ. Please welcome Linda who comes with many years of experience working in and with nursing homes. Remember that you can always reach anyone on the team at scace@thecarolinascenter.org.

ACE Quarterly Data Reports

The next ACE Quarterly Data Report with the Composite Score and trending graphs for 11 Quality Measures will be mailed to you this month. Please let us know if you have questions by contacting scace@thecarolinascenter.org.

ACE Initiative for CDI and ABS

Thirty-nine nursing homes have enrolled in the National Healthcare Safety Network (NHSN) Cohort group to register and enter monthly *C. difficile* infections into the Centers for Disease Control and Prevention NHSN website. Congratulations to these facilities that have taken the lead with several thousand other nursing homes across the country to establish a national baseline of CDI for long-term care. Stay tuned for more training and resources on general infection control practices, preventing and managing CDI, and antibiotic stewardship.

ACE Best Practices

ACE Best Practice Lunch & Learn Webinar Series

Keep on Track with Skin Intact!

In August, Loretta Wrigley, the director of nursing at Kershaw Health Karesh Long Term Care, presented their successful program to prevent and treat pressure ulcers. In this 92-bed facility, both the administrator and director of nursing are involved in day-to-day care

processes and rely heavily upon their certified nursing assistants to check for and report all reddened areas using the INTERACT® Stop and Watch communication tool.

Components of the Karesh program:

- Full-time staff nurse trained and certified in wound care (It is worth the investment!)
- Protocols developed by the wound nurse and kept in a notebook for immediate use by unit nurses
- Pressure-relieving mattresses and cushions; skin care products
- Turning and repositioning schedules
- Two head-to-toe skin assessments performed by a nurse on day and evening shifts

All staff are held accountable for adhering to wound protocols and scheduled assessments. Leadership helps staff identify barriers and perform root cause analysis whenever a reddened area or wound issue develops.

Currently, Karesh's high-risk pressure ulcer rate is less than 1%!

Access the recorded webinar on the ACE website at

<http://atlanticquality.org/initiatives/nursing-home-quality/nursing-home-quality-sc/presentations-and-handouts/> to learn how you can lower your pressure ulcer rate,

improve resident outcomes, reduce survey tags, lower your composite score, and empower staff!

September is Sepsis Awareness Month: Every Second Counts!

Sepsis is the body's overwhelming and life-threatening response to any infection and strikes more than a million Americans each year, resulting in 258,000 deaths annually. When detected early and treated promptly, thousands of lives can be saved. However, sepsis is among the most under-recognized and misunderstood conditions among healthcare providers and the general public. That's why sepsis awareness is so important. Those at higher risk for sepsis include people with weakened immune systems, infants and children, elderly people, people with chronic illnesses, and those who suffer severe burns or physical trauma.

To prevent sepsis, you can:

- Follow infection control protocols and ensure residents receive their recommended vaccines.
- Know the signs and symptoms of sepsis to identify and treat patients early.
- Educate and empower front line staff to identify changes in the resident's condition.
- Educate residents and their families on the warning signs and symptoms of sepsis.
- Treat sepsis like a medical emergency. If sepsis is suspected, order tests to determine if an infection is present. Start antibiotics or send the patient to the ED and tell them you think it is sepsis.

For videos, fact sheets, recorded webinars and other information on sepsis awareness and prevention check out the following websites or contact us at sbanyai@thecarolinascener.org for education and training materials.

Sepsis Alliance – <http://www.sepsis.org/>

Rory Staunton Foundation – <https://rorystauntonfoundationforsepsis.org/>

CDC Sepsis Webpage – <http://www.cdc.gov/sepsis/>

AQIN Sepsis Webpage – <http://atlanticquality.org/initiatives/sepsis-initiative/>

CMS Published New Five-Star Ratings on Nursing Home Compare

Ratings reflect new metrics and methodological changes that expand the Quality Measure (QM) component of the system. Read the updated "Design for Nursing Home Compare Five-Star Quality Rating System: Technical Users' Guide" dated August 1, 2016 here:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>

Post-Acute Care Quality Report Program

Updated Measure Specifications for the Percent of Patients or Residents with Pressure Ulcers that are New or Worsened (Short-Stay) (NQF #0678) Quality Measure are posted. The specifications provide detailed information on the measure, including updates to the numerator, target population, and calculation of the quality measure.

The measure specifications can be found on the Skilled Nursing Facility (SNF) Quality Reporting Program Measures and Technical Information webpage in the downloads section here: <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>

Upcoming Events

September 15th Best Practice Lunch & Learn Webinar

3rd Thursday of the month from 11:30 a.m. – noon

Don't miss the September 15th lunch and learn webinar! The team from Jolley Acres will present their successful program to prevent and treat urinary tract infections.

To register for the September 15th webinar, go to <https://qualitynet.webex.com>. Find the appropriate title and date. Click register.

SNF Quality Reporting Program Webcast — September 14

Wednesday, September 14 from 1:30 to 3:00 pm ET

To register or for more information, visit MLN Connects Event Registration at <https://blh.ier.intercall.com/details/e07b2adbc1f8452ea31a4b3c757259b7>

Learn about reporting requirements for the new Skilled Nursing Facility (SNF) Quality Reporting Program (QRP), effective October 1, 2016. The Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act - <https://www.gpo.gov/fdsys/pkg/BILLS-113hr4994enr/pdf/BILLS-113hr4994enr.pdf>) established the SNF QRP and requires the submission of standardized data. A question and answer session will follow the presentation.

SNF Value-Based Purchasing Program Call — September 28

Wednesday, September 28 from 1:30 to 3:00 pm ET

To register or for more information, visit MLN Connects Event Registration at <https://blh.ier.intercall.com/details/cc700444603d4db6916b16448e0aa083>

Learn how implementation of the Skilled Nursing Facility (SNF) Value-Based Purchasing (VBP) Program will affect your Medicare payment. CMS experts will discuss the legislative background, along with the SNF 30-Day Potentially Preventable Readmission measure, performance standards, and scoring methodology finalized in the FY 2017 SNF Prospective Payment System (<https://www.federalregister.gov/documents/2016/08/05/2016-18113/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities>) final rule. Also, find out about the confidential quarterly feedback reports you will receive beginning on October 1, 2016. A question and answer session will follow the presentation.

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>

CMS will host an MLN Connects National Provider Call for SNFs, IRFs, LTCHs, HHAs, and other interested stakeholders. Subject matter experts will discuss how data elements fit within measure development and provide an example of the process using the Pressure Ulcer measure. The Improving Medicare Post-Acute Care Transformation (IMPACT) of 2014 (<https://www.gpo.gov/fdsys/pkg/PLAW-113publ185/pdf/PLAW-113publ185.pdf>) requires the reporting of standardized patient assessment data by Post-Acute Care providers.

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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