



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

### ACE Best Practices

---

#### **Best Practice Lunch & Learn Webinar Series**

At the July webinar, Erica Rawls, the director of nursing at Laurel Baye Health Care of Blackville, presented their leadership's method to "scrub in" each unit and prepare a whiteboard for use at morning meetings. This method of collecting data ahead of time and using it to update a whiteboard keeps the morning meeting focused on team brainstorming and finding solutions since all the information is already updated and available to the staff.

View 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 using a whiteboard improves team problem solving, reduces errors, prevents survey tags, and shortens meeting times.

#### ***Scrubbing In***

Each unit is "scrubbed in" by the administrator, DON, and managers who review 24 hour reports, new orders, falls, acute charting, MD notifications, etc. each morning. Information is then updated and added to the whiteboard. The whiteboard tracks residents on Coumadin (values and next lab draw), incidents and accidents, pacemakers (check dates), labs, antibiotics, acute charting, behaviors, new admissions, readmissions, monthly injections, and Foley catheters.

#### ***Results***

Laurel Baye reports that falls, infections, wounds, and readmissions have all decreased since implementing the whiteboard. Staff have more time on the floor since morning meetings have shortened and they experience leadership's commitment and support on a daily basis.

***Transform your team's communication today!***

**August 18<sup>th</sup> Best Practice Lunch & Learn Webinar**

**August 3<sup>rd</sup> Thursday of the month | 11:30 a.m. – noon**

Don't miss the August 18th lunch and learn webinar! The team from KershawHealth Karesh will present their successful pressure ulcer program. Their high-risk resident pressure ulcer quality measure stays at half the state and national average.

To register for the August 18th webinar, go to <https://qualitynet.webex.com>. Find the appropriate title and date. Click register.

## ACE Updates

---

### ACE Quarterly Data Reports

The June ACE Quarterly Data Reports with trending graphs for 11 Quality Measures and the Composite Score were emailed to administrators and directors of nursing of all ACE enrolled facilities. If for any reason you did not get yours or have questions, please contact [scace@thecarolinascenter.org](mailto:scace@thecarolinascenter.org). Your next report will be mailed to you in September.

**To ensure delivery of data and ACE updates, please add [scace@thecarolinascenter.org](mailto: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.**

Geriatric Pain (<http://www.geriatricpain.org/Pages/home.aspx>) is an excellent website providing free evidence-based tools and best practices for clinicians working with older adults.

## Updates to Nursing Home Compare and the Five Star Quality Rating System

---

In 1998, CMS began Nursing Home (NH) Compare which was originally based on health inspection surveys. In 2008, CMS added the Five Star Nursing Home Quality Rating System. This year marks a significant milestone in both NH Compare and the Five Star Rating System with the addition of new quality measures (QM) and several methodological changes. Six new QMs have been added to NH Compare, five of which will be used in the calculation of star rating. Specific details on the Five Star Rating System can be found in the Technical User's Guide at <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>.

Using data analytics to model various QM scores based on actual or desired facility outcomes to see the overall effect on QM rating can be a valuable way to target areas that will improve your star rating. Knowing what total score it will take to get to the next desired star rating is important. Use data analytic tools from your corporate office, software vendors, or through trade association member benefits to make decisions to improve your competitive edge.

In conjunction with data analytics, accurate MDS coding is a crucial step to ensure each quality measure is a true reflection of resident status. Watch these free webinars at <http://qio.ipro.org/nursing-homes-hac/overview/focus-on-building-blocks-for-quality/clinical-quality-measures-qm> and access free resources on 13 long-stay QMs to review accurate MDS coding.

**Remember that the ACE website (<http://atlanticquality.org/initiatives/nursing-home-quality/nursing-home-quality-sc/>) contains excellent resources and tools on clinical topics and quality improvement issues and the ACE Quarterly Data Report is a valuable way to benchmark your quality measures against state and national averages.**

## CMS Updates

---

### **SNF Quality Reporting Program Provider Training**

CMS is hosting a 1-day training event on the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP). This event will be held in Chicago, Illinois on Wednesday, August 24, 2016. The objective is to provide SNFs with assessment-based data collection instructions and updates associated with the changes in the October 1, 2016 release of the Minimum Data Set (MDS) 3.0 and other reporting requirements of the SNF QRP. Visit the SNF QRP Training webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Training.html> for more information and to register.

### **SNF Quality Reporting Program Call: Audio Recording and Transcript**

An audio recording (<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Training.html>) and transcript (<https://www.cms.gov/Outreach-and-Education/Outreach/NPC/Downloads/2016-07-12-SNF-QRP-Transcript.pdf>) are available for the July 12 call on the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) at <https://www.cms.gov/Outreach-and-Education/Outreach/NPC/National-Provider-Calls-and-Events-Items/2016-07-12-SNF-QRP.html>. Learn about the reporting requirements for the new SNF QRP, effective October 1, 2016.

### **SNF QRP: Requirements for the FY 2018 Reporting Year**

A fact sheet is available at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/SNF-QRP-Requirements-for-FY18-Reporting-Year-Fact-Sheet.pdf> with information on requirements for the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) FY 2018 reporting year (data collection period October 1 through December 31, 2016). Visit the SNF Quality Reporting Program (IMPACT Act of 2014) webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-IMPACT-Act-2014.html> for more information.

## **SNF Readmission Measure: Top 10 Things You Should Know**

A new fact sheet is available at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/Top-10-things-to-know-about-SNFRM.pdf> for the Skilled Nursing Facilities (SNFs) Readmission Measure (SNFRM). Visit the SNF VBP webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/SNF-VBP.html> for more information on the program.

## **SNF Quarterly Reports Available through Nursing Home Compare**

CMS released July quarterly reports for Skilled Nursing Facilities (SNFs) through the Nursing Home Compare (<https://www.medicare.gov/NursingHomeCompare/search.html>) reporting system, including information on the SNF Value-Based Purchasing (VBP) Program. Beginning on October 1, 2016, SNFs will also receive quarterly confidential feedback reports on the SNF VBP Program through the Certification and Survey Provider Enhanced Reporting (CASPER) system. For more information, visit the SNF VBP Program webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/SNF-VBP.html>, or contact them at [SNFVBPinquiries@cms.hhs.gov](mailto:SNFVBPinquiries@cms.hhs.gov).

## **IMPACT Act: Data Elements and Measure Development Call**

Wednesday, August 31 from 1:30 to 3:00 p.m. To register or for more information, visit MLN Connects Event Registration at <https://blh.ier.intercall.com/details/b745cb4472bb40018189a1da9077eeee>.

CMS experts will 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.

## **SNF Billing Reference Fact Sheet — Reminder**

The Skilled Nursing Facility (SNF) Billing Reference Fact Sheet is available at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1244978.html>. Learn about:

- Coverage
- Payment
- Billing Requirements

This material was prepared by the Atlantic Quality Innovation Network (AQIN), the Medicare Quality Improvement Organization for New York State, South Carolina, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 11SOW-AQINSC-TskC.2-16-16