

# **REDUCING HEALTHCARE-ACQUIRED CONDITIONS IN NURSING HOMES**



## **National Nursing Home Quality Care Collaborative**

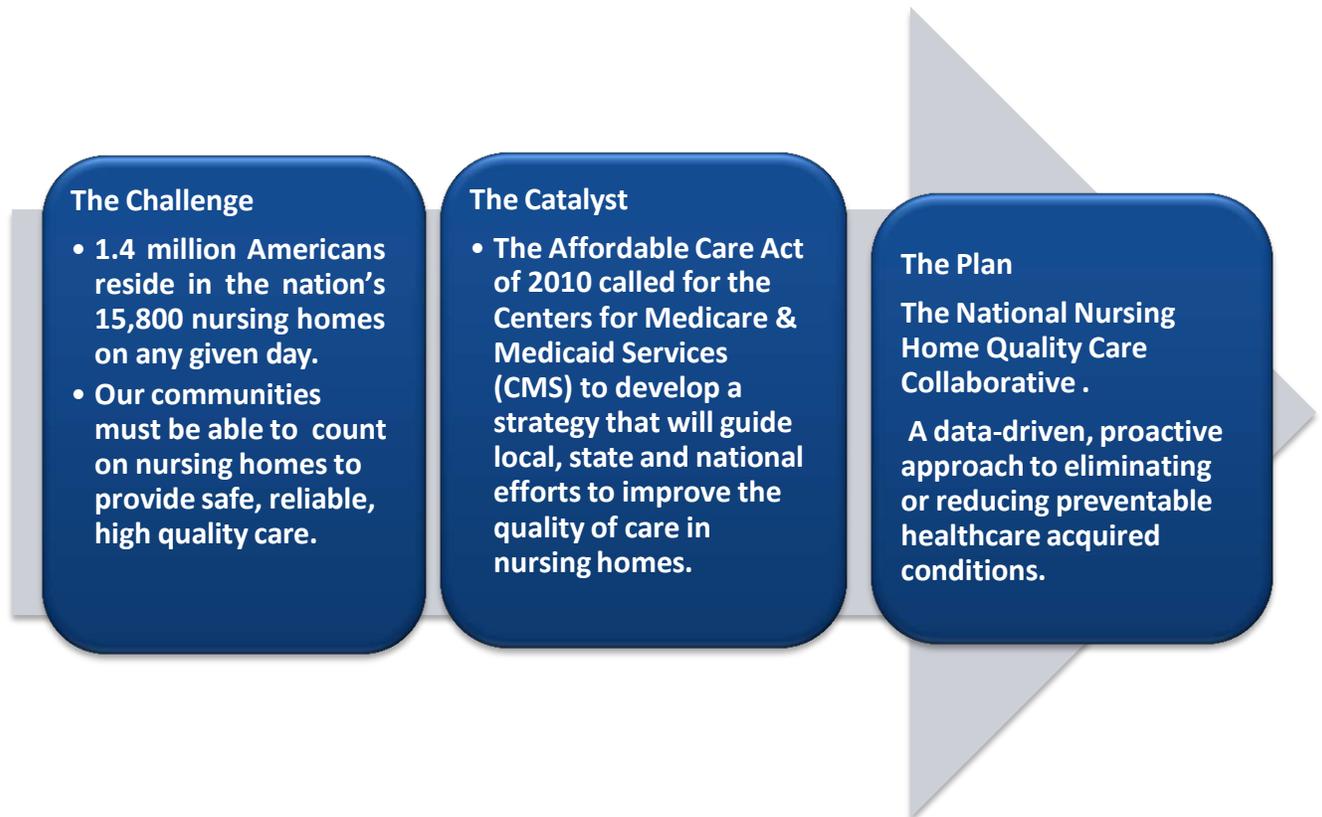
**Collaborative Two Team Handbook  
April 2017 – September 2018**

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## Project Overview

More than three million Americans rely on services provided by nursing homes at some point during the year. 1.4 million Americans reside in the nation's 15,800 nursing homes on any given day. Those individuals and an even larger number of their family members, friends, and relatives, must be able to count on nursing homes to provide safe, reliable, high quality care.

The Affordable Care Act of 2010 called for the Centers for Medicare & Medicaid Services (CMS) to develop a strategy that will guide local, state and national efforts to improve the quality of care in nursing homes. The most effective approach to ensure quality is one that mobilizes and integrates all available tools and resources – aligning them in a comprehensive, actionable strategy.



The National Nursing Home Quality Care Collaborative focuses on overall quality in nursing homes and uses a data-driven, proactive approach to eliminating or reducing preventable healthcare acquired conditions (HACs) including falls, pressure ulcers, *C. difficile* infections, urinary tract infections, and inappropriate antipsychotic use in persons with dementia. While each of these clinical topics in and of themselves

is important to quality, there is an ongoing need for foundational systems of care that are supportive of higher quality.

The National Nursing Home Quality Care Collaborative is designed to provide nursing homes the opportunity to engage in quality improvement work. Nursing home teams can participate no matter where they are on the quality continuum. The collaborative offers an opportunity to align nursing home quality initiatives and partnerships such as *National Nursing Home Quality Improvement Campaign (NNHQIC)*, *the Partnership to Improve Dementia Care*, and *Quality Assurance Performance Improvement (QAPI)*.

## Project Description

The ***National Nursing Home Quality Care Collaborative*** will strive to instill quality and performance improvement practices, eliminate healthcare acquired conditions, and dramatically improve resident satisfaction.

The Collaborative offers an exciting opportunity to learn from high performing nursing homes regarding their processes as they pertain to resident safety, clinical outcomes, prevention, culture, staffing, and finance.

The ***National Nursing Home Quality Care Collaborative*** will focus on overall quality in the nursing home and use a data-driven, proactive approach to eliminating or reducing preventable healthcare acquired conditions (HACs) including falls, pressure ulcers, *C.difficile* infections, urinary tract infections, physical restraints, and inappropriate antipsychotic use in persons with dementia.

The ***National Nursing Home Quality Care Collaborative*** will be fast paced and dynamic. The collaborative will support the development of strategies for overall quality and address gaps in systems through planned interventions. The content will focus on improving and further developing systems of care that lead to better quality. This comprehensive system continually examines opportunities for improvement in all care and services. By using data available to your organization, opportunities for improvement will be identified and you will then work to rapidly improve systems of care. Staff from participating nursing homes will work collaboratively with other nursing home staff to improve care practices around systems to support quality, and the identified topic areas.

### **What are the benefits for participants?**

- Educational learning sessions at no cost
- Networking, learning, and sharing with your peers
- Access to best practices and strategies of high performing nursing homes
- Quality Assurance Performance Improvement (QAPI) tools and resources
- Assistance with the development of ideas and interventions
- No costs or fees to participate in the collaborative
- Local and national recognition as an innovator and early adopter of ideas that improve resident quality of life

### **Collaborative Topics**

Collaborative topics include, but not limited to the following:

- Falls
- Pressure ulcers
- Urinary tract infections
- *Clostridium difficile*
- Inappropriate antipsychotic use in persons with dementia
- Physical Restraints
- Improving Mobility
- Staff Stability
- Consistent Assignment
- Unnecessary Re-hospitalizations

### **Desired Outcomes**

- Collaborative participants will attain a score of six or lower on the Nursing Home Quality Composite Measure Score by 2019.
- Improve the rate of mobility among long-stay nursing home residents nationally by 2019.
- Improve the targeted rate of reduction in the use of unnecessary antipsychotic medication in dementia residents by 2019.
- Incorporate resident/family representative to be involved in the collaborative activities with the team.

## Participant Expectations

- Commit to remain active in the project through July 31, 2019.
- Apply strategies and principles of overall nursing home quality.
- Collect and submit data to measure the impact of changes.
- Form an interdisciplinary team to work with Delmarva Foundation.
- Develop strategies for QAPI.
- Participate in educational collaborative sessions, teleconference calls, and webinars.
- Actively share best practices and lessons learned.

## Team Composition Examples

Each provider will form a team to test and implement system changes related to improvement of the pressure ulcer measure. Teams should include people from departments and work areas that will be affected by the changes. This will ensure that the team understands the system it is trying to redesign and promote ownership for the changes. Getting the right people on the team is critical to a successful improvement effort. The most important success factor for a team is commitment to working together toward a shared goal.

An effective team has members who work well together and who have a combination of skills, styles, and competencies. An effective team has members who:

- Are leaders
- Are team players
- Have specific skills and technical proficiencies relevant to the topic
- Possess excellent listening skills
- Communicate well verbally
- Are problem-solvers
- Are motivated to improve current systems and processes
- Are creative, innovative and enthusiastic.

Effective teams have representation from different areas of expertise within the organization:

- **Leadership:** someone who has the authority in the organization to institute a change when one is suggested, and to overcome barriers when they arise.
- **Process Champion:** an individual who understands the scientific and clinical foundations of the processes of care that are being improved.
- **Day-to-Day Project Leadership:** someone who understands the process being improved, the effects of any planned changes, and who will drive the project on a daily basis. This may be a nurse, quality improvement professional, or therapist in the nursing home or a physician, nurse, enteral stoma nurse, or QI professional.
- **Caregivers:** those staff that provide direct care, (such as nurses, nursing assistants, and medication techs and activities staff) are an essential component of improvement teams. These staff members are involved in everyday activities that are directly related to resident care. Their ideas, commitment, and support are crucial to the success of any improvement effort.
- **Other Team Members:** nurse educators, dietitians, therapists and financial reimbursement staff and a resident or family member.

## Developing a goal statement

This Collaborative framework is modeled after the Institute Healthcare Improvement (IHI) Breakthrough Series Collaboratives, which use the Model for Improvement, a “trial-and-learn” approach to quality improvement. The Model for Improvement has three fundamental questions:

1. What are we trying to accomplish?
2. How will we know that a change is an improvement?
3. What changes can we make that will result in an improvement?

The first question is answered in your goal statement.

A goal statement is a concise written statement describing what you expect to accomplish in the Collaborative; it provides guidance for the team’s specific improvement efforts.

The goal statement ensures that team activities align with the strategic goals of the team’s organization. Involving Executive leadership in developing a goal statement can help ensure you have management support for your work.

### **Let’s use pressure ulcer topic for our example of a goal statement:**

*To improve PU prevention interventions for all residents at ABC NH so that the number of days between a new nosocomial pressure ulcer (stage II-IV) will be increased by 50 %.( outcome measure), THIS IS WHAT YOU WANT TO ACCOMPLISH*

*Within one calendar day of admission, 100% of admissions will have a risk assessment performed using the Braden Scale. This is the process measure or THE CHANGE YOU WILL MAKE.*

*Time frame: Effective changes will be spread facility-wide within 3 months.  
(Time frame)*

## Steps to developing a strong goal statement:

**Involve Executive leaders.** Executive leaders must align the aim with strategic goals of the organization. They must also provide for support personnel and resources from information systems, finance and reimbursement, medical affairs, etc.

**QAPI recommends using the SMART goal method:**

**Specific**- answers 3 questions what do you want to accomplish, who is involved, and where will it take place.

**Measurable**- how will you know the goal is reached. What will you measure; what do you want to increase/decrease.

**Attainable**- defend the rationale for setting the goal measure. Is it based on a best practice/ state average/benchmark? Is goal too low? And not challenging. Is it too far a stretch to be unreasonable?

**Relevant**- describe how the goal will address the business problem or need at your facility.

**Time-bound**-what is the target date for achieving the goal.

There will be time to refine your work in the months leading up to the first learning session and time during the year to complete work on the goal statement.

### **Defining a population of focus**

For most of the participant teams, the population of focus will be all residents.

But as you test a change start small, one group of residents, one unit.

Testing is much easier to start small and gradually spread the changes as you make improvements to your changes.

### **Defining measures- this will be covered in upcoming trainings**

Measuring your performance during the Collaborative will enable you to evaluate the impact of changes. Measurement should be designed to accelerate improvement, not slow it down.

## Progress Reports

Each nursing home will be expected to prepare a brief progress summary tracking the team’s progress on the selected measures and document the system changes tested each month. Submit progress report at a minimum of quarterly reporting on activities for previous three months.

Report for Months	Apr.- June 2017	July - Sept. 2017	Oct. - Dec. 2017	Jan. - Mar. 2018	Apr.- June 2018
Report due date	7/10/2017	10/10/2017	1/10/2017	4/10/2018	7/10/2018

The progress summary is to be shared with your Executive leadership at the nursing home. Each nursing home also shares the report with Delmarva. Progress reports are to be submitted quarterly at a minimum. More information about the progress report (templates, tools, etc.) will be addressed in upcoming trainings prior to the first Learning Session.

## Measurement Tools

Delmarva Foundation will be providing tracking tools for select clinical topics. National Nursing Home Quality Improvement Campaign (NNHQIC) website has tracking tools for all the clinical topics as well as consistent assignment, re-hospitalizations and staff stability. Data is to be submitted to Delmarva Foundation monthly.

## 2017 – 2018 Committed to Excellence Award

**Purpose:** Delmarva Foundation (DF), part of the Atlantic Quality Innovation Network and the QIN-QIO for the District of Columbia has developed the requirements for the 2017 -2018 Committed to Excellence Award. The purpose of the award is to recognize individual nursing home accomplishments that have resulted in improving or sustaining quality of care for residents. Applicants will describe how their organization implemented system or process changes that have made significant and lasting contributions to improving quality in one of the following areas:

- Pressure ulcer reduction
- Falls prevention
- Urinary tract infections
- Reduction in inappropriate antipsychotic use
- Physical Restraints
- *C.difficile* management
- Antimicrobial Stewardship
- Consistent Assignment
- Staff stability
- Reducing Hospital Re-admission rate

### What This Award Means to You:

- Public recognition for your hard work and success
- Increased credibility in the community
- Peer recognition
- Increased visibility for your quality improvement initiatives

### Criteria (all applicants):

- Collaborative team attendance at Delmarva Foundation scheduled trainings, webinars and learning sessions.
- Submit monthly data using Delmarva Foundation provided Excel tracking tool and/or NNHQIC tracking tool that shows improvement or sustainment in the selected topic. Months included in 2017–2018 award are April 2017 – June 2018.
- Complete an initial or update Quality Assurance Performance Improvement (QAPI) Facility Assessment in 2017. (*If not completed this is an immediate disqualifier.*)
- Most recent annual certification survey with no G level or higher deficiencies (*if present this is an immediate disqualifier.*)
- Include a resident/family in at least two quality improvement activities in your organization.



- Submit brief quarterly progress reports, to summarize the changes implemented, PDSA's completed, challenges faced, interventions tried and lessons learned. Months to be included are April 2017-June 2018.
- ***Submit your completed intent to apply form (one page) to Delmarva Foundation by May 30, 2017.***

**Selection Process** (all applicants):

- The Committed to Excellence point system will be used in the review process (see below).
- Applicants that meet the criteria will be eligible for the award.
- The 2017–2018 Committed to Excellence Awards will be presented in the early fall of 2018.

**Benefits:**

- An engraved trophy.
- A press release template for the award winners' use.
- Special recognition at collaborative Outcomes Congress final event.

**Committed to Excellence Points System:**

Points will be tallied to objectively identify winners of the Committed to Excellence Award.

The points earned will be used to determine an applicant's award eligibility. Award applicants will earn points as follows:

Criteria	Point Value
Collaborative team attendance at Delmarva scheduled trainings, webinars and learning sessions.	30 points/event
Most recent annual certification survey with no G level or higher deficiencies. <b>If present this is an immediate disqualifier.</b>	10 points/1 time
Complete initial or update Quality Assurance Performance Improvement (QAPI) Facility Assessment in 2017. <b>If not completed this is an immediate disqualifier.</b>	10 points/1 time
Submit monthly data ( <i>April 2017- June 2018</i> ) for selected topic(s) of focus.	25 points/month
Monthly data ( <i>April 2017- June 2018</i> ) must demonstrate improvement or sustainment in selected topic. Using the Delmarva or NNHQIC data collection tools	40 points/month
Include a resident/family in a <i>minimum of 2 quality improvement activities</i> . (Extent of participation to be determined by facility)	30 points/activity
Submit a quarterly progress summary that describes the quality improvement activity. May be done by way of a brief written report or an email.	35 points/quarterly
Share with collaborative: a successful intervention implemented, innovative process/procedure; positive outcome from team's improvement work.	50 points/shared intervention

**Application Process:**

Eligible award winners are those that describe a specific system change or intervention that has resulted in the improvement of selected topic of focus. Participants are to describe system or processes that make the environment of care safer. Interventions may address changes in protocols and procedures, education, organization culture, or patient advocacy.

## I. Committed to Excellence Award Intent to Apply Page

### Submission Requirements:

1. Intent page must be completed and ***submitted no later than May 30, 2017***
2. Materials may be submitted by email or fax to:

Email: [bellj@delmarvafoundation.org](mailto:bellj@delmarvafoundation.org)

Fax: (516) 233-3355 • ATTN: Jackie Hairston • Phone: 1-800-876-3362 Ext. 14059

### Intent to Apply

#### Check selected topic(s)

I am applying for the Committed to Excellence Award 2017 – 2018 in the area of:

<input type="checkbox"/> Pressure Ulcer Reduction	<input type="checkbox"/> Fall Prevention	<input type="checkbox"/> Inappropriate Antipsychotic Use
<input type="checkbox"/> Reducing Urinary Tract Infection	<input type="checkbox"/> Increasing Mobility	<input type="checkbox"/> Physical Restraint reduction
<input type="checkbox"/> Reducing Hospital Re-Admissions	<input type="checkbox"/> Staff Stability	<input type="checkbox"/> Consistent Assignment
<input type="checkbox"/> C.difficile Management	<input type="checkbox"/> Antimicrobial Stewardship	

***Please Print... Submit no later than May 30, 2017***

<b>Contact Name</b>	<b>Title</b>
<b>Facility name</b>	
<b>Facility Street Address</b>	<b>Zip Code</b>
	<b>State:</b>
<b>Contact phone:</b>	
<b>Contact Email:</b>	
<b>Contact Fax:</b>	

## Resources

### Related Links

The following is a short list of links to organizations and resources that may be helpful in your QI efforts. Click on organization name for link to their website.

#### [National Nursing Home Quality Improvement Campaign \(NNHQIC\)](#)

The Mission of the NNHQIC is to help nursing homes achieve excellence in the quality of care and quality of life for the more than 1.5 million residents of America's nursing homes. The Campaign works closely with other national nursing home quality initiatives to streamline efforts and to prevent duplication of efforts. National quality initiatives such as Quality First, the Nursing Home Quality Initiative, the Culture Change movement, the Quality Improvement Organization (QIO) Scope of Work complement one another. Working with one initiative will usually strengthen results and outcomes of the other.

#### [Agency for Healthcare Research and Quality \(AHRQ\)](#)

AHRQ is the Nation's lead Federal agency for research on health care quality, costs, outcomes, and patient safety. They are the home to research centers that specialize in major areas of health care research. AHRQ's mission is to improve the quality, safety, efficiency, and effectiveness of health care for all Americans.

#### [American Health Quality Association \(AHQA\) Quality Improvement Organization \(QIO\) Locator](#)

The American Health Quality Association (AHQA) represents Quality Improvement Organizations (QIOs) and professionals working to improve the quality of health care in communities across America. QIOs share information about best practices with physicians, hospitals, and nursing homes. Working together with health care providers, QIOs identify opportunities and provide assistance for improvement.

#### [American College of Health Care Administrators \(ACHCA\)](#)

ACHCA is a non-profit membership organization, which provides superior educational programming, certification in a variety of positions, and career development for its members. Guided by the vision that dynamic leadership forges long term health care services that are desired, meaningful, successful, and efficient, ACHCA identifies, recognizes, and supports long term care leaders, advocating for their mission and promoting excellence in their profession.

### **[American Health Care Association \(AHCA\)](#)**

The American Health Care Association (AHCA) is a federation of state health organizations, together representing nearly 12,000 non-profit and for-profit assisted living, nursing facility, residential services for persons with mental retardation and developmental disabilities, and sub-acute care providers. AHCA represents the long-term care community to the nation at large - to government, business leaders, and the general public. It also serves as a force for change within the long-term care field, providing information, education, and administrative tools that enhance quality at every level.

### **[American Medical Directors Association \(AMDA\)](#)**

The American Medical Directors Association (AMDA) is the professional association of medical directors and attending physicians practicing in the long term care continuum, dedicated to excellence in patient care by providing education, advocacy, information, and professional development.

### **[American Nurses Association \(ANA\)](#)**

The American Nurses Association (ANA) is a professional organization representing 2.7 million registered nurses (RNs) through its 54 constituent member associations. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.

### **[Centers for Medicare & Medicaid Services \(CMS\)](#)**

The Centers for Medicare & Medicaid Services (CMS) administers the Medicare program and works in partnership with the States to administer Medicaid, the State Children's Health Insurance Program, and health insurance portability standards. In addition to these programs, CMS has other responsibilities, including the administrative simplifications standards from the Health Insurance Portability and Accountability Act of 1996, quality standards in health care facilities through its survey and certification activity, and clinical laboratory quality standards.

### **[CDC Website for Nursing Homes and Assisted Living](#)**

The Centers for Disease Control (CDC) launched a new website dedicated to infection prevention in long-term care facilities. The site has information for both clinicians and consumers and highlights NNHQIC infection prevention tools and resources throughout the site.



### **[Culture Change Now](#) and [Action Pact, Inc.](#)**

Action Pact, Inc. is a company of consultants and trainers who provide nursing homes with practical education, products, services, and training materials on Culture Change. The website and magazine for Action Pact, Inc. is titled 'Culture Change Now.'

### **[Eden Alternative](#)**

The Eden Alternative is a movement dedicated to changing nursing homes by focusing on an elder-centered community, and by altering the environment with plants, and increased human and animal companionship. The Eden Alternative believes through altering the nursing home environment, the issues of loneliness, helplessness, and boredom will be alleviated for the elders.

### **[IHI Improvement Map](#)**

The IHI Improvement Map is a free, interactive, web-based tool designed to bring together the best knowledge available on the key process improvements that lead to exceptional patient care. The Improvement Map aims to help you to; make care safer, make patient care transitions smoother, lead improvement efforts effectively, and reduce costs and increase quality.

### **[National Gerontological Nurses Association \(NGNA\)](#)**

The National Gerontological Nurses Association (NGNA) was founded in 1984 and is dedicated to the clinical care of older adults across diverse care settings. Members include clinicians, educators, and researchers with vastly different educational preparation, clinical roles, and interest in practice issues. Members of the National Gerontological Nursing Association (NGNA) work in the following roles: Staff Nurse, Clinical Nurse Specialist Manager, Administrator, Clinical Educator, Academic Educator, Nurse Practitioner, and Researcher.

### **[National Association Directors of Nursing Administration in Long Term Care \(NADONA\)](#)**

The National Association Directors of Nursing Administration in Long Term Care represents over 6,000 members. It is the largest educational organization committed exclusively to nursing and administration professional in the Long Term Care and Assisted Living professions.



### **[Nursing Home Compare](#)**

The primary purpose of this tool is to provide detailed information about the past performance of every Medicare and Medicaid certified nursing home in the country. Important Information on Nursing Home Compare and other resources, including the Guide to Choosing a Nursing Home, and Nursing Home Checklist are also available to help you with your nursing home choice. Use these tools, along with the information you gather during your visits to the nursing homes you are interested in to make your best choice.

### **[Pioneer Network](#)**

The Pioneer Network is a network of people dedicated to transforming nursing homes from institutions into communities through Culture Change. This grassroots movement is focused on supporting elders and those who care for them by collectively implementing Culture Change and altering the culture of aging in America.

### **[QAPI - Quality Assurance Performance Improvement](#)**

Effective QAPI programs are critical to improving the quality of life, and quality of care and services delivered in nursing homes. Please visit us often, as materials on this website will expand over time.