

Advancing Excellence Phase 2 Goals

Goal 1 – Staff Turnover: Nursing homes will take steps to minimize staff turnover in order to maintain a stable workforce to care for residents.

Objectives: By 4Q 2011

A1: The average annual RN turnover rate reported by nursing homes participating in this goal will be at or below 65%.

A2: The average annual LPN turnover rate reported by nursing homes participating in this goal will be at or below 35%.

A3: The average annual CNA turnover rate reported by nursing homes participating in this goal will be at or below 65%.

B1, 2, 3: 25% of nursing homes participating in this goal will achieve an annual RN/LPN/CNA turnover rate at or below 25/15/40%.

C1, 2, 3: The number of nursing homes reporting an annual RN/LPN/CNA turnover rate at or above 75/65/75% will be reduced by 33%.

D. No individual resident level measurement

E. Each state will attain an average facility level improvement of 10 percentile.

F. Nursing Home will set a specific target to improve their ranking in staff turnover by 10 percentile over the next 24 month period.

Goal 2 – Consistent Assignment: Being regularly cared for by the same caregiver is essential to quality of care and quality of life. To maximize quality, as well as resident and staff relationships, the majority of Nursing Homes will employ “consistent assignment” of CNAs.

Objectives: By 4Q2011

A: 50% of Nursing Homes selecting this goal will have adopted “consistent assignment” among CNAs defined as (85%) of long stay residents in a Nursing Home have a maximum of 8 CNA caregivers over a one month period of time”. And (85%) of short stay residents in a Nursing Home will have a maximum of 8 CNA caregivers over a 2 week period.

B: Not measured in year 1

C. Not measured in year 1

D. No individual level measure

E. Each state will attain an average facility level improvement of 10 percentile.

F. Nursing Home will set a specific target to improve the prevalence ranking of consistent assignment by 10 percentile over the next 24 month period.

NEW GOAL 3 – Restraints: Nursing home residents are independent to the best of their ability and rarely experience daily physical restraints.

The following objectives have been developed to provide national targets that will encompass all nursing homes, inclusive of those that are very high performers on a specific goal and those that may need significant improvement on a specific goal.

It is the intent of the Advancing Excellence campaign to encourage every individual nursing home to reach the highest performance levels possible.

For Goal #2, it is our vision that ALL nursing homes will strive toward a completely restraint free environment.

Objectives – By December 31, 2011:

A: The national average of daily use of physical restraints will be $\leq 2\%$.

B: 50% of NHs will report restraint rates less than 1%.

C: The average of the scores of the nursing homes exceeding the 2009Q1 90th percentile (n=1321) will be reduced from 16% to 8%.

D: By December 2011 there will be 1,600 fewer nursing home residents experiencing daily physical restraints per 100,000 residents. Applying this to the current physical restraints denominator of approximately 1.2 million results in 19,200 fewer residents with physical restraints.

E. Each State LANE will attain an average facility level improvement of 10 percentile.

F. NH will set a specific target to improve restraint reduction ranking by 10 percentile over the next 24 month period.

NEW GOAL 4 – Pressure Ulcers: Nursing home residents receive appropriate care to prevent and appropriately treat pressure ulcers when they develop.

The following objectives have been developed to provide national targets that will encompass all nursing homes, inclusive of those that are very high performers on a specific goal and those that may need significant improvement on a specific goal.

It is the intent of the Advancing Excellence campaign to encourage every individual nursing home to reach the highest performance levels possible.

For Goal #4, it is our vision that ALL nursing homes will strive to prevent the onset of any new pressure ulcer and to heal existing pressure ulcers in the shortest amount of time.

Objectives – By December 31, 2011:

A: The national average for high risk pressure ulcers will be at or below 9%.

B: 30% of nursing homes will report rates of high risk pressure ulcers at or below 6%.

C: The average of the scores of the nursing homes exceeding the 2009Q1 90th percentile (n=1147) will be reduced from 25% to 18%.

D: Compared to June 2006, there will be 3,000 fewer residents with pressure ulcers per 100,000 nursing home residents. Applying this to the current pressure ulcer denominator of approximately 750,000 results in 22,500 fewer residents with pressure ulcers.

E. Each state will attain an average facility level improvement of 10 percentile.

F. NH will set a specific target to improve the prevalence rating of pressure ulcers by 10 percentile over the next 24 month period

NEW GOAL 5 – Pain: Nursing home residents will receive appropriate care to prevent and minimize episodes of moderate or severe pain. Objectives for long stay and short stay are slightly different.

The following objectives have been developed to provide national targets that will encompass all nursing homes, inclusive of those that are very high performers on a specific goal and those that may need significant improvement on a specific goal.

It is the intent of the Advancing Excellence campaign to encourage every individual nursing home to reach the highest performance levels possible.

For Goal #5, it is our vision that ALL nursing homes will strive toward an environment in which every resident's pain is recognized and appropriately treated at the earliest possible moment and that all side effects are recognized and managed.

Goal 5A: Long Stay (longer than 90 days) nursing home residents will receive appropriate care to prevent and minimize episodes of moderate or severe pain.

Objectives – By December 31, 2011:

A: The national average of moderate or severe pain experienced by long-stay residents will be at or below 2%.

B: 30% of nursing homes will regularly report rates of moderate to severe pain for long stay residents at or below 1%

C: The average of the scores of the nursing homes exceeding the 2009Q1 90th percentile (n=1416) will be reduced from 12% to 7%.

D: By December 2011 there will be 1,200 fewer long-stay nursing home residents experiencing moderate to severe pain per 100,000 residents. Applying this to the current chronic care pain denominator of approximately 1.1 million, results in 13,200 fewer long-stay residents with moderate to severe pain.

E. Each state LANE will attain an average facility level improvement of 10 percentile.

F. Nursing Home will set a specific target to improve the prevalence ranking of long stay pain by 10 percentile over the next 24 month period.

GOAL 5B: Short Stay (shorter than 90 days) People who come from a hospital to a nursing homes for a short stay will receive appropriate care to prevent and minimize episodes of moderate or severe pain.

Objectives – By December 31, 2011:

A: The national average of moderate or severe pain experienced by post-acute residents will be at or below 16%.

B: 30% of nursing homes will regularly report rates of moderate or severe pain for post acute residents at or below 7%.

C: The average of the scores of the nursing homes exceeding the 2009Q1 90th percentile (n=1182) will be reduced from 48% to 34%.

D: By December 2011 there will be 5,000 fewer short-stay nursing home residents experiencing moderate to severe pain per 100,000 residents. Applying this to the current post acute care pain denominator of approximately 800,000 results in 40,000 fewer short-stay residents with moderate to severe pain.

E. Each state LANE will attain an average facility level improvement of 10 percentile.

F. Nursing Home will set a specific target to improve the prevalence ranking of Post Acute Care pain by 10 percentile over the next 24 month period.

Goal 6 – Advance Care Planning: Following admission and prior to completing or updating the plan of care, all NH residents will have the opportunity to discuss their goals for care including their preferences for advance care planning with an appropriate member of the healthcare team. Those preferences should be recorded in their medical record and used in the development of their plan of care.

Objectives: By 4Q 2011

A-1: Among all nursing homes participating in this goal, the average of the reported percent of **newly admitted or re-admitted residents** having discussions regarding their goals for care including their preferences for advance care planning recorded in their medical record and their plan of care will be at or above 75%.

A-2: Among all nursing homes participating in this goal, the average of the reported percent of residents having discussions during their **quarterly care planning conference** regarding their goals for care including their preferences for advance care planning recorded in their medical record and their plan of care will be at or above 75%.

Goal 7 – Resident/Family Satisfaction: Almost all Nursing Homes will assess resident and family experience of care and incorporate this information into their quality improvement activities.

Objectives: By 4Q 2011

A1: The national average of Nursing Homes that regularly assess resident experience of care and incorporate the results into their quality improvement activities will exceed (85%).

A2: The national average of Nursing Homes that regularly assess family experience of care and incorporate the results into their quality improvement activities will exceed (85%).

B1, C1, D1: No measurement

Year 2 measures for B, C2, and D2 will be based on Year 1 data collected

E. Each state will attain an average facility level improvement of ten percentile.

F. NH will set a specific target to improve resident and family satisfaction by 10 percentile over the next 24 month period.

Goal 8 – Staff Satisfaction: Almost all nursing homes will assess staff satisfaction with their work environment at least annually and upon separation and incorporate this information into their quality improvement activities.

Objectives: By 4Q 2011

Objective A1 By 4Q 2010: The national average of Nursing Homes that regularly assess staff satisfaction and incorporate the results into their quality improvement activities will exceed (75%).

Objective A2 By 4Q 2011: The national average of Nursing Homes that regularly assess staff satisfaction and incorporate the results into their quality improvement activities will exceed (85%).

B1, C1, D1: No measurement

Phase 2 measures for B, C2, and D2 will be based on Year 1 data collected

E. Each state will attain an average facility level improvement of 10 percentile.

F. Nursing Homes will set a specific target to improve staff satisfaction by 10 percentile over the next 24 month period.