

## Nursing Home Quality Initiatives

### Questions and Answers

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**Background:** The Centers for Medicare & Medicaid Services (CMS) and Advancing Excellence in America's Nursing Homes national campaign coordination group developed a set of common questions and answers below, for nursing homes, in order to clarify how some of the many initiatives relate to and are aligned with each other. The purpose is to help nursing homes better understand how to participate in and benefit from various initiatives.

### Contents

<b>Quality Assurance and Performance Improvement (QAPI) .....</b>	<b>3</b>
1. What is QAPI? .....	3
2. When is the QAPI regulation coming? .....	3
3. With regard to QAPI, what will be expected of nursing homes?.....	3
4. Must nursing homes use CMS QAPI tools and resources to be considered in compliance with the QAPI regulation? .....	4
<b>National Nursing Home Quality Care Collaborative (NNHQCC) .....</b>	<b>4</b>
5. What is the National Nursing Home Quality Care Collaborative (NNHQCC)? .....	4
6. What is a Learning and Action Network (LAN)? .....	5
7. What is the Change Package that is part of the NNHQCC? .....	5
8. My nursing home is participating in the NNHQCC. We are concerned about sharing our selected areas for improvement and our data. Why should we share this information? .....	6
9. How can I learn more about the NNHQCC?.....	6
<b>National Partnership to Improve Dementia Care in Nursing Homes .....</b>	<b>6</b>
10. What is the National Partnership to Improve Dementia Care in Nursing Homes? .....	6
11. Can you describe the measures used to track the progress of the National Partnership to Improve Dementia Care in Nursing Homes? .....	7
12. How does the mission of the National Partnership to Improve Dementia Care in Nursing Homes align with non-pharmacological, person-centered care approaches? .....	7
<b>Advancing Excellence in America's Nursing Homes Campaign.....</b>	<b>7</b>
13. What is the Advancing Excellence in America's Nursing Homes Campaign? .....	7
14. What are the Advancing Excellence LANEs (Local Area Network for Excellence)? .....	8
15. What does a nursing home have to do to become part of Advancing Excellence? .....	8
<b>Alignment of Quality Initiatives .....</b>	<b>8</b>
16. Why are there a number of national nursing home quality initiatives?.....	8

17. We receive many requests or directives to join national, state, or regional quality initiatives. How do we make sense of all these initiatives and know what to focus on? ..... 9
18. What is the advantage of participating in Advancing Excellence, the NNHQCC, and the National Partnership to Improve Dementia Care in Nursing Homes? ..... 9
19. How does QAPI overlap or align with topic specific initiatives such the NNHQCC, the National Partnership to Improve Dementia Care in Nursing Homes, and Advancing Excellence in America’s Nursing Homes? ..... 10
20. If we participate in the NNHQCC or Advancing Excellence or the National Partnership to Improve Dementia Care in Nursing Homes, are we implementing QAPI?..... 10
21. How are LANs and LANEs similar? ..... 10
22. How have states aligned their state coalition on dementia care with the Advancing Excellence LANE and the QIN-QIO-led NNHQCC? How does QAPI fit? ..... 10
23. What are evidence-based tools and why is it important to use these tools? ..... 11

Your comments or suggestions on this document are welcome;  
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## Quality Assurance and Performance Improvement

### 1. What is QAPI?

Section 6102(c) of the Affordable Care Act requires CMS to establish regulations in Quality Assurance and Performance Improvement (QAPI) and provide technical assistance to nursing homes to help them develop best practices to comply with the forthcoming regulations. CMS has developed a program of technical assistance that includes tools, resources, and training materials to help nursing homes implement QAPI and establish best practices to continuously improve the care and services delivered in each nursing home.

QAPI is the coordinated application of two mutually-reinforcing aspects of a quality management system: Quality Assurance (QA) and Performance Improvement (PI). QAPI takes a systematic, comprehensive, and data-driven approach to maintaining and improving safety and quality in nursing homes while involving all nursing home caregivers in practical and creative problem solving.

- QA is the specification of standards for quality of service and outcomes, and a process throughout the organization for assuring that care is maintained at acceptable levels in relation to those standards. QA is on-going, both anticipatory and retrospective in its efforts to identify how the organization is performing, including where and why facility performance is at risk or has failed to meet standards.
- PI (also called Quality Improvement - QI) is the continuous study and improvement of processes with the intent to better services or outcomes, and prevent or decrease the likelihood of problems, by identifying areas of opportunity and testing new approaches to fix underlying causes of persistent/systemic problems or barriers to improvement. PI in nursing homes aims to improve processes involved in health care delivery and resident quality of life. PI can make good quality even better.

As a result, QAPI amounts to much more than a provision in Federal statute or regulation; it represents an ongoing, organized method of doing business to achieve optimum results, involving all levels of an organization.

### 2. When is the QAPI regulation coming?

CMS does not have a timeline for publication of the final QAPI regulation. It will be published as a proposed rule before it is finalized, and all interested parties, including nursing home providers, consumers, and trade organizations, will have the opportunity to comment on it. Interested parties can track the progress of this regulation by periodically checking the Unified Agenda, which sets forth a timeline for regulatory priorities that are under development. The Agenda is usually released in the Spring and the Fall. The website is: <http://www.reginfo.gov/public/do/eAgendaMain>

### 3. With regard to QAPI, what will be expected of nursing homes?

According to the Affordable Care Act, nursing homes will be required to have their QAPI plan in place and have begun implementing QAPI one year after a final regulation is issued. Effective QAPI planning and implementation means creating a self-sustaining, systems approach to

improving safety and quality while involving staff from all departments affected in practical and creative problem solving. Nursing homes are encouraged to take advantage of the many resources for training and technical assistance materials available to them. Nursing homes can start by reviewing the CMS QAPI tools and resources that are being made available to them through the CMS QAPI website at: <http://go.cms.gov/Nhqapi>. You can also email questions to: [Nhqapi@cms.hhs.gov](mailto:Nhqapi@cms.hhs.gov).

#### 4. **Must nursing homes use CMS QAPI tools and resources to be considered in compliance with the QAPI regulation?**

Absolutely not! It is important for nursing home providers to know that the materials CMS rolled out and any future QAPI materials that will be made available are not mandatory, or required for compliance to the forthcoming regulation. They are offered to assist nursing homes make the shift toward a more proactive, data-driven, systems-oriented and sustained QAPI program.

There are many tools available in the public domain, through corporations, from vendors, trade organizations, and others such as Advancing Excellence. Nursing homes may use any tools and resources they choose to assist them in implementing QAPI. Nursing homes may find a tool or resource as part of another quality initiative that really works for them. Many paths lead to effective QAPI.

CMS thinks a good place to start is to review the QAPI materials available on the CMS QAPI webpage at <http://go.cms.gov/Nhqapi>. CMS would be delighted if every nursing home in the country reviewed the QAPI introductory materials on the QAPI webpage to help them understand what QAPI is and the principles that can help to transform nursing homes into a better place to live and work.

### **National Nursing Home Quality Care Collaborative (NNHQCC)**

#### 5. **What is the National Nursing Home Quality Care Collaborative (NNHQCC)?**

The NNHQCC is modeled after the Institute for Healthcare Improvement breakthrough series approach, and is being led by CMS and Quality Innovation Network-Quality Improvement Organization (QIN-QIOs) as part of the QIN-QIO 11<sup>th</sup> Statement of Work. The Collaborative seeks to rapidly spread the practices of high performing nursing homes to every nursing home in the country with the aim of ensuring that every nursing home resident receives the highest quality of care. Specifically, the NNHQCC will strive to instill quality and performance improvement practices, eliminate healthcare acquired conditions, and dramatically improve resident satisfaction by focusing on the systems that impact quality such as: staffing, operations, communication, leadership, compliance, clinical models, quality of life indicators and specific, clinical outcomes (targeted focus on inappropriate antipsychotics in residents with dementia, mobility, and healthcare acquired infections). The NNHQCC:

- Utilizes the Learning and Action Network (LAN) model within each QIN-QIO area or state
- Supports development of strategies for overall quality using QAPI as the framework or structured approach
- Utilizes a data-driven and pro-active approach to quality improvement; a measurable

aim will drive the work

- Allows flexibility of the nursing home to choose priority focus areas
- Addresses gaps in systems through planned interventions in order to improve the overall quality of the care

QIN-QIOs will share a “change package” with participating nursing homes and help them to select focus areas and implement tests of change. QIN-QIOs will also provide QAPI education and resources.

## 6. What is a Learning and Action Network (LAN)?

A LAN is an improvement initiative that brings together healthcare professionals, patients/residents and other stakeholders around an evidence-based agenda to achieve rapid, wide-scale improvement. The LAN model includes collaborative projects, online interactions, and peer-to-peer education to facilitate shared commitment, energy, and knowledge that allows participants to learn from each other as well as from other experts. Healthcare quality improvement works best when everyone teaches and everyone learns. LANs create an opportunity for communities to harness the knowledge, skills and abilities of their peers and vested partners.

Through QIN-QIO led LANs, a nursing home can:

- Connect with organizations and individuals that have similar Quality Improvement (QI) goals and challenges and have the opportunity for in-depth learning and problem solving
- Learn from others in an "all teach, all learn" environment
- Participate in peer coaching to support improvement
- Engage residents and families in continuous quality improvement efforts
- Benefit from others' best practices as quickly as they are identified
- Receive and share free information and tools that support improvement
- Be recognized for meeting or exceeding improvement targets

A Collaborative is a type of learning and action network.

QIN-QIOs as well as other organizations use LANs to achieve rapid, wide-scale improvement.

## 7. What is the Change Package that is part of the NNHQCC?

A change package is a menu of strategies, change concepts, and specific actionable items that any nursing home can choose from to begin testing for purposes of improving quality of care. The change package is focused on the successful practices of high performing nursing homes and includes specific replicable actions being taken by high performing nursing homes; for example, how to: lead with a sense of purpose, recruit and retain quality staff, connect with residents in a celebration of their life, nourish teamwork and communication, be a continuous learning organization, provide exceptional compassionate clinical care that treats the whole person, and construct solid business practices that support the nursing home's purpose. This change package was developed from a series of ten site visits to nursing homes across the country in 2012, and the themes that emerged regarding how they approached quality and carried out their work. The practices in the change package reflect how the nursing homes leaders and direct care staff at these sites shared and described their efforts. The change

package was updated in 2015 to reflect practices shared by nursing homes participating in the 2013-2014 NNHQCC. The change package is intended to be complementary to such resources as literature reviews and evidence-based tools and resources.

#### 8. **My nursing home is participating in the NNHQCC. We are concerned about sharing our selected areas for improvement and our data. Why should we share this information?**

Your participation in the NNHQCC is an important step in improving the quality of your nursing home. Congratulations on taking this step. The confidentiality of participants in a QIN-QIO-sponsored activity is protected by statute. Any data released publicly by a QIN-QIO must be de-identified and aggregated, unless each provider/facility has provided explicit approval for release of their data. What does that mean? It means that neither the names of participants nor areas they are individually working on is released in a manner to tie a provider directly with their data. However, we encourage providers to discuss and share their quality improvement data with their peers. Quality improvement literature supports sharing data as a method to spread improvement.

#### 9. **How can I learn more about the NNHQCC?**

Contact your state Quality Innovation Network (QIN)-Quality Improvement Organization (QIO): <https://www.qualitynet.org/>, and click on Quality Improvement, then QIO Directory, and then Quality Innovation Network (QIN) QIOs.

### **National Partnership to Improve Dementia Care in Nursing Homes**

#### 10. **What is the National Partnership to Improve Dementia Care in Nursing Homes?**

On March 29, 2012, CMS launched a national partnership with the mission to improve quality of care provided to individuals with dementia living in nursing homes. This partnership focuses on the delivery of health care that is person-centered, comprehensive and interdisciplinary, in addition to protecting residents from being prescribed antipsychotic medications unless there is a valid, clinical indication and a systematic process to evaluate each individual. The partnership promotes *rethinking* approaches that are utilized in dementia care, *reconnecting* with people using person-centered care approaches and *restoring* good health and quality of life in nursing homes. CMS is partnering with federal and state agencies, nursing homes, other providers, advocacy groups, and caregivers to improve dementia care. The partnership promotes a multidimensional approach that includes public reporting, national partnerships and state-based coalitions, research, training for providers and surveyors and revised surveyor guidance.

The Advancing Excellence in America's Nursing Homes Campaign has offered, via their website at <https://www.nhqualitycampaign.org/>, to make available a variety of resources and clinical tools to assist nursing homes achieve the goals of this partnership. Nursing homes are encouraged to review the resources and tools and select those that will be most useful. This site will be updated regularly as new tools become available.

Voluntary stakeholder coalitions organize Partnership activities in each state. Coalition membership varies by state, but often includes the QIN-QIO, state survey agency, Leading Age and AHCA affiliates, culture change coalitions, nursing home professional associations, resident

advocacy groups, the state Office or Division on Aging, academic institutions, nursing homes, hospitals, and consumers.

### **11. Can you describe the measures used to track the progress of the National Partnership to Improve Dementia Care in Nursing Homes?**

The description of the measure used to track the progress of the CMS National Partnership to Improve Dementia Care in Nursing Homes can be found at the following link:

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

CMS currently posts the measure of each nursing home's antipsychotic medication use on the CMS Nursing Home Compare website. Beginning in February of 2015, the antipsychotic measure was added to the calculations that CMS makes for each nursing home's rating on the agency's Five Star Quality Rating System.

### **12. How does the mission of the National Partnership to Improve Dementia Care in Nursing Homes align with non-pharmacological, person-centered care approaches?**

The National Partnership to Improve Dementia Care in Nursing Homes emphasizes non-pharmacological, person-centered, evidence-based practice approaches for residents, such as stronger family involvement, consistent staff assignments, increased exercise or time outdoors, monitoring and managing acute and chronic pain, and planning individualized activities. Utilizing a consistent process to address the behaviors associated with dementia that focuses on the resident's individual needs, will help to reduce the percentage of antipsychotic medications that are prescribed.

## **Advancing Excellence in America's Nursing Homes Campaign**

### **13. What is the Advancing Excellence in America's Nursing Homes Campaign?**

Advancing Excellence is an ongoing, voluntary campaign to help nursing homes become person-centered, high-performance organizations. It aims to make nursing homes good places to live, work, and visit by achieving measurable improvement and systemic change in the quality of care and quality of life for residents and staff.

Its website <https://www.nhqualitycampaign.org/> provides free, practical toolkits that enable homes to use a systematic method to understand problems, their root causes and a structured approach to improvement. Its evidence-based and field tested resources provide a way to measure performance and track change using progress reports and graphs to support improvement on nine of the most critical quality challenges facing nursing homes today.

Its goal topics include (1) staff stability; (2) consistent assignment; (3) patient-centered care; (4) reducing unneeded hospitalizations; (5) appropriate antipsychotic medication use; (6) enhancing mobility; (7) reducing pain; (8) reducing pressure ulcers; and (9) reducing facility-acquired infections.

#### 14. What are the Advancing Excellence LANEs (Local Area Network for Excellence)?

LANEs are statewide coalitions of stakeholders. The core group usually consists of the QIN-QIO, state trade association affiliates, culture change coalitions, the Ombudsman program and the State Survey Agency but in some states they have members from universities, state Medicaid offices, other advocacy groups, and/or individual providers and consumers. The LANEs:

- recruit nursing homes to the campaign,
- coordinate statewide activities,
- support and provide assistance to nursing homes either through educational offerings or more targeted support, and
- often undertake state level improvement projects on which they collaborate to achieve a shared goal, such as reducing the over-all rate of pressure ulcers in a state.

LANEs are the central organization within a state to support participating nursing homes in achieving their clinical and organizational goals and help the Campaign succeed.

#### 15. What does a nursing home have to do to become part of Advancing Excellence?

It's not hard to join:

- Go to the website and explore the goals
- Decide which ones you want to work on
- Have your facility's Medicare/Medicaid provider number
- Fill out the necessary information
- Select at least two goals – one organizational and one clinical – can be more or you can add others later
- Once you have done the above you are considered enrolled in Advancing Excellence or what we call **“a registrant”**

To become **“a participant”** you need to up-load your outcomes onto the website for six consecutive months. You will then be able to compare your performance to homes using the same goals on a state and national basis.

### Alignment of Quality Initiatives

#### 16. Why are there a number of national nursing home quality initiatives?

The CMS 2012 [Nursing Home Action Plan](#) outlines the comprehensive, actionable strategy for improving the quality of care and quality of life received by our nation's nursing home residents. The action plan calls for various partners to work together weaving a net of quality initiatives to continue progress in improving nursing home safety and quality. The Action Plan outlines five interrelated and coordinated approaches: 1) enhance consumer engagement, 2) strengthen survey processes, standards, and enforcement, 3) promote quality improvement, 4) create strategic approaches through partnerships, and 5) advancing quality through innovation and demonstration.

The “Create Strategic Approaches through Partnerships” strategy notes that as “no single approach or individual can fully assure better health care. . .” CMS must combine, coordinate, and mobilize many people, techniques and levers through a partnership approach. By partnering with State Survey Agencies (SSAs), QIN-QIOs, Advancing Excellence Local Area Networks for

Excellence (LANEs), Ombudsman, trade associations and others, quality improvement may be addressed at the local as well as national level, ultimately leading to system-wide improvement in the health of nursing home populations. This, in turn, will achieve better care, better health and higher quality, while reducing costs.

### **17. We receive many requests or directives to join national, state, or regional quality initiatives. How do we make sense of all these initiatives and know what to focus on?**

It is important for the leaders of every organization to have systems in place to monitor their care and services. Leaders utilize data from multiple sources, such as feedback from staff, residents, families, as well as performance indicators to monitor a wide range of care processes and outcomes. They review the findings against benchmarks and/or targets the facility has established for performance to create a resource rich source of information that will support good decision making.

Once an organization knows where they stand, they will know where their areas of opportunity or need are. They can then compare those needs to the opportunities that are being presented to them. Each organization needs to decide if the tools, resources, educational and partnering opportunities offered to or requested of them, will benefit their organization, staff, residents, and other stakeholders, and to select those that will be most useful.

To decide which areas to focus on, nursing homes should systematically review and prioritize their areas of need or opportunity. When considering whether to focus on a certain topic, nursing homes might consider the following:

- Prevalence: The frequency at which this issue arises in their organization
- Risk: The level to which this issue poses a risk to the well-being of their residents
- Cost: The cost incurred by their organization each time this issue occurs
- Relevance: The extent to which addressing this issue would affect or improve resident quality of life and/or quality of care
- Responsiveness: The likelihood an initiative on this issue would address a need expressed by residents, family, and/or staff
- Feasibility: The ability of their organization to implement a Performance Improvement Plan (PIP) on this issue, given current resources
- Continuity: The level to which an initiative on this issue would support their organizational goals and priorities

### **18. What is the advantage of participating in Advancing Excellence, the NNHQCC, and the National Partnership to Improve Dementia Care in Nursing Homes?**

Nursing homes participating in multiple initiatives can take advantage of multiple sources of information, tools, resources, connections, and partnerships with others interested in improving in similar areas.

Resources identified in one initiative are often useful for activities in another initiative.

Knowledge and skills gained through one focused initiative may help build staff capacity and allow the nursing home to more effectively participate in other initiatives.

**19. How does QAPI overlap or align with topic specific initiatives such the NNHQCC, the National Partnership to Improve Dementia Care in Nursing Homes, and Advancing Excellence in America’s Nursing Homes?**

QAPI represents a shift to a systematic, comprehensive, data-driven, proactive approach to quality management and sustained improvement. This approach is exemplified in various quality initiatives, such as the National Nursing Home Quality Care Collaborative, the National Partnership to Improve Dementia Care, and Advancing Excellence in America’s Nursing Homes.

**20. If we participate in the NNHQCC or Advancing Excellence or the National Partnership to Improve Dementia Care in Nursing Homes, are we implementing QAPI?**

Participating in Advancing Excellence or the National Partnership to Improve Dementia Care in Nursing Homes does not automatically mean that you are implementing QAPI. QAPI provides the framework or structured approach as well as tools to successfully shift from reacting to problems and issues, or applying a “band-aid,” to making systems improvements proactively in all the areas of care and services each nursing home provides.

The topic specific initiatives of Advancing Excellence, the NNHQCC, and the National Partnership to Improve Dementia Care in Nursing Homes provide excellent evidence-based tools and resources to help you improve systems in certain areas. They can support you in implementing performance improvement projects, in using data and feedback specific to that focus area, and conducting systematic analysis and developing systemic actions related to that focus area.

QAPI is broader than topic-specific focused improvement areas. QAPI is ongoing and comprehensive, dealing with the full range of services offered by the facility. When fully implemented, QAPI should address all systems of care and management practices.

**21. How are LANs and LANEs similar?**

There are a number of similarities. LANEs are the Advancing Excellence in America’s Nursing Homes Campaign’s statewide coalitions of stakeholders within a state to support participating nursing homes in achieving their clinical and organizational goals.

LANEs might use the LAN model. A Learning and Action Network (LAN) is an improvement initiative that brings together healthcare professionals, patients/residents and other stakeholders around an evidence-based agenda to achieve rapid, wide-scale improvement. The LAN model includes collaborative projects, online interactions, and peer-to-peer education to facilitate shared commitment, energy, and knowledge that allows participants to learn from each other as well as from other experts.

QIN-QIOs as well as other organizations use LANs to achieve rapid, wide-scale improvement.

**22. How have states aligned their state coalition on dementia care with the Advancing Excellence LANE and the NNHQCC? How does QAPI fit?**

Some examples of ways that the initiatives align include the following:

- Many QIN-QIOs serve as Advancing Excellence LANE conveners and are actively working to align initiatives within their respective states.

- The NNHQCC uses QAPI as a framework or structured approach for improvement and is intended to help nursing homes, partners, and stakeholders prepare for the QAPI regulation and national rollout, which will require that all nursing homes utilize performance improvement as a foundation for improved care.
- The NNHQCC supports the CMS National Partnership to Improve Dementia Care in Nursing Homes by also choosing this topic as an area of focus. Many QIN-QIOs serve as State Coalition leads or co-leads in the National Partnership to Improve Dementia Care in Nursing Homes.
- QIN-QIOs and State Coalitions in the National Partnership to Improve Dementia Care in Nursing Homes encourage membership in the Advancing Excellence Campaign and support use of the Advancing Excellence tools and resources.
- The NNHQCC and QAPI promote using data to drive improvement and allowing nursing homes to work on topics of importance to them to become quality-centric. As a result, all of the Advancing Excellence topics are supported by QIN-QIOs.

### 23. What are evidence-based tools and why is it important to use these tools?

Evidence-based tools help guide approaches or interventions in nursing homes that are reflective of the best available evidence. An evidence-based intervention is one that has been tested, generally through research, and thus is known to have been effective in creating desired change(s).

Whenever possible, interventions related to clinical care, quality of life, or service organization should be chosen based on evidence. A number of organizations have studied the evidence related to nursing home interventions and have created tools to support nursing home staff in carrying out those actions.

Here are just a few examples of evidence-based interventions with supporting tools:

- Advancing Excellence in America's Nursing Homes has compiled evidence-based resources on a variety of topics
- OASIS is an evidence-based approach for improving communication in dementia care
- INTERACT II is an evidence-based set of interventions to reduce hospitalization from nursing homes and identify changes of condition
- Agency for Healthcare Research and Quality (AHRQ) has developed an evidence-based protocol for pressure ulcers in nursing homes
- AHRQ has developed TeamSTEPPS, an evidence-based framework to optimize team performance across the healthcare delivery system.

Don't invent an intervention to solve a problem if tested interventions are available that would work in your nursing home.