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Article for use by all campaign partners, campaign Web site**

TAKING QUALITY NURSING HOME CARE TO THE NEXT LEVEL

Quality health care isn't an abstract concept. Quality is about the kind of care that does not cause avoidable suffering or unnecessary complications; treatment that gets the right care to every patient every time.

Long-term care has been one of the health care sectors on the leading edge of this quality movement. And, when the Centers for Medicare & Medicaid Services (CMS) launched the National Nursing Home Quality Initiative (NHQI) in 2001, we did this as coalition partners with the long-term care community.

Together we developed a starter set of eight measures to reflect quality care in nursing homes. They dealt with short term and long-term issues familiar to anyone who provides care for frail elderly or disabled people in a nursing home. The starter set included measures for how well a caregiver managed residents' pain; whether or not residents were physically restrained; if residents deteriorated in functional ability, and the percentage of residents with pressure sores.

We set the bar high. All of the measures were based on the best research available; all were endorsed by the National Quality Forum, the gold standard in measuring quality. They had to meet four criteria:

- Important to consumers;
- Accurate (reliable, valid and risk adjusted);
- Able to compare differences between facilities, and
- Subject to improvement with the delivery of high quality care.

One other important precondition: The quality measures had to be dynamic and refined on a continuous basis as part of CMS's ongoing commitment to quality.

Given the rigor of the initiative's design and the fact that Medicare's Quality Improvement Organizations (QIOs) took on the task of working directly with nursing homes, it shouldn't come as any surprise that just five years later, rates of restraints, pressure ulcers, and other serious outcomes have declined, and the rate of influenza immunizations has improved.

Now with a total of 19 quality measures listed on the Nursing Home Compare Web site at www.Medicare.gov, we've arrived at the next level and a new campaign.

Advancing Excellence in America's Nursing Homes launched in September 2006 and will run for two years. The campaign builds on NHQI; it also builds on the industry's *Quality First* initiative which was launched in 2002, and stresses the essential connection between quality, adequate payment for services and financial stability.

A broad coalition committed to quality nursing home care leads this volunteer effort to elevate quality and accountability, including nursing home providers, health care practitioners and professionals, unions, advocates and consumer groups, nursing home residents, researchers, and foundations.

We commend the thousands of facilities that have already signed up for the campaign by going to www.nhqualitycampaign.org. We hope many more will join this new effort as well.

Campaign founders were the Alliance for Quality Nursing Home Care; the American Association of Homes and Services for the Aging (AAHSA); the American Association of Nurse Assessment Coordinators (AANAC); the American College of Health Care Administrators (ACHCA); the American Health Care Association (AHCA); the American Medical Directors Association (AMDA); the National Association of Health Care Assistants (NAHCA); the National Citizens' Coalition for Nursing Home Reform (NCCNHR); the National Commission for Quality Long-Term Care; the Commonwealth Fund; the Evangelical Lutheran Good Samaritan Society; the QIOs, and CMS.

Since then, an array of organizations have joined the effort, and have demonstrated their commitment by serving on the Steering Committee with the founders. They include Agency for Healthcare Research and Quality (AHRQ); the Association of Health Facility Survey Agencies (AHFSA); the Foundation of the National Association of Boards of Examiners of Long Term Care Administrators; the National Association of Directors of Nursing Administration in Long Term Care (NADONA/LTC); the National Conference of Gerontological Nurse Practitioners (NCGNP); the National Gerontological Nursing Association (NGNA); the Service Employees International Union (SEIU); and The John Hartford Foundation's Institute for Geriatric Nursing.

It's a very wide variety of organizations and people who care very deeply about quality of life in the nation's nursing homes. We need your participation, too.

Advancing Excellence makes a seamless transition between the work that has already been accomplished with NHQI and *Quality First*. *Advancing Excellence* not only maintains the national commitment to improving nursing home quality of care – it takes it to an even higher level of commitment by incorporating the notion of benchmarking.

The campaign coalition has agreed to focus on eight measurable goals to improve quality at the national level, all of which are important to consumers and will help advance the delivery of high-quality care. They are:

1. Reducing high risk pressure ulcers;
2. Reducing the use of daily physical restraints;
3. Improving pain management for longer term nursing home residents;
4. Improving pain management for short stay, post-acute nursing home residents;
5. Establishing individual targets for improving quality;
6. Assessing resident and family satisfaction with the quality of care;
7. Increasing staff retention; and
8. Improving consistent assignment of nursing home staff, so that residents regularly receive care from the same caregivers.

Four of the goals involve NQF-endorsed measures currently reported as part of Nursing Home Compare. They include reducing pressure ulcers and the use of daily physical restraints, and long-term and post-acute pain management.

The fifth goal of setting targets for quality improvement requires providers to take ownership of quality improvement in key clinical measures. It's a key part of creating an expectation and a culture of excellence. Participating providers can on the link to the *Setting Targets-Achieving Results* Web site – “STAR” for short at <http://www.nhqi-star.org/>. The site walks through the process of setting targets for various quality measures.

Campaign participants can use the STAR site to view quality measures, select appropriate targets and track progress over time. Facilities can also compare performance against the top ten percent of nursing homes nationwide, on the Achievable Benchmarks of Care (ABC) measures. Facilities can select targets based on quality measure scores or on the scores of high performing peers. For example, targets can reflect state averages, national averages, or percentile rankings.

The sixth goal, resident and family satisfaction, reflects the centrality of the resident in nursing homes' quality improvement. Achieving a high level of

resident and family experience of care should be and will be a key goal of quality improvement.

The last two goals focus on staff – reducing staff turnover, and increasing the consistent assignment of nursing home staff to residents. These are proven ways to improve quality, reduce complications and avoid preventable long-term care costs. Again, it's part of creating an environment of care that promotes excellence and patient-centered care.

In every one of the eight goals, *Advancing Excellence* stresses meaningful, measurable action. It requires a firm commitment on the part of stakeholders to achieve improvement in all of these dimensions. It also demands a commitment to collect and assess progress using regularly measured data.

The most significant change between *Advancing Excellence* and prior efforts is its emphasis on measurable goals, setting numerical targets, and agreeing to achieve absolute benchmarks. No one has ever had the courage to do this before.

That is why it is so critical for nursing home providers to join this effort. Measures must reflect the reality of providers' experience, especially as we move to a performance-based payment system. We don't want to make pay for performance *only* about payment – it's about doing the right thing. It's about proving value and quality to consumers.

We want to support providers who deliver better care. That way, we are not wasting money on ineffective, duplicative services, medical errors, and preventable complications – we are getting better care at lower cost.

Furthermore, *everyone* can participate in the effort and track campaign progress. Consumers – particularly the families of nursing home residents – can go to the web site, again, www.nhqualitycampaign.org, and sign up to be a participant in the campaign. Engaging residents and their families in improving nursing home quality is probably the most powerful force for driving further improvement. Greater resident and family engagement on quality is one of the new campaign's most important goals.

It's important to remember that the normal regulatory process will continue; this is a voluntary initiative to help improve quality.

We have not abandoned our commitment to improving the survey and certification process. In fact, we're making the maximum effort permitted by the resources provided by Congress. Last September we released the 2007 edition of CMS' *Action Plan for Further Improvement of Nursing Home Quality*. The

Action Plan spells out in detail many of our initiatives and describes our efforts to coordinate the work of many parts of CMS in a comprehensive strategy. Find the *Action Plan* on our Web site at:

http://www.cms.hhs.gov/SurveyCertificationGenInfo/02_Hot%20Topics.asp#TopOfPage.

All nursing homes should meet standards for safety and patient well-being, and there is more we can do to use our survey and certification oversight in conjunction with these new quality improvement initiatives. Quality measurement and quality improvement, buttressed by effective survey and certification, are key elements of our overall strategy to assure safe and effective nursing home care.

We encourage nursing homes and consumers alike to join *Advancing Excellence in America's Nursing Homes*. Nothing like this has ever been done before in nursing home care, on this scale and with this breadth of commitment. Many quality improvement materials are available on the Web at www.MedQIC.org as well as the campaign Web site. The state QIOs also can provide support. All QIOs names, addresses, and contact information are listed on the MedQIC Web site. CMS will not have access to campaign data or individual provider information except what is already available on Nursing Home Compare and the aggregate data results that will be posted to the campaign on a quarterly basis.

This campaign is a win for everyone. Anyone who provides – or receives – care in a nursing home benefits from improvements in the campaign goals. So, especially with a Nursing Home Value-Based Purchasing demonstration on the horizon, CMS needs your input. The demonstration will assess the performance of participating nursing homes based on selected quality measures, then make additional payments to homes with superior performance. CMS will choose approximately 50 nursing homes from up to five states to participate in the demonstration; an additional 50 in each state will be in a control group.

Finally, this is simply the right thing to do. In all of our programs, CMS is moving towards a system of person-centered care, with all of our programs geared toward promoting high-quality care for each patient every time – not just paying more for more services without a thought to quality or impact on patient health.

Quality measurement has worked in nursing homes. The fact that it has is a tribute to your leadership and to the collaboration built over the years among *Quality First* participants, the QIOs, state survey activities, and others. The commitment to raising quality and the innovative partnerships we've created

together through NHQI, Quality First, and *Advancing Excellence in America's Nursing Homes* will continue long after this campaign is over.

Collaborating to measure quality of long-term care, report it, support it, and improve it – that's the best path to a high-quality, patient-centered, provider-friendly system that everyone can afford. At CMS, we look forward to working with you to achieve it.

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