

# Medicare's Quality Innovation Network-Quality Improvement Organization Support of Nursing Homes

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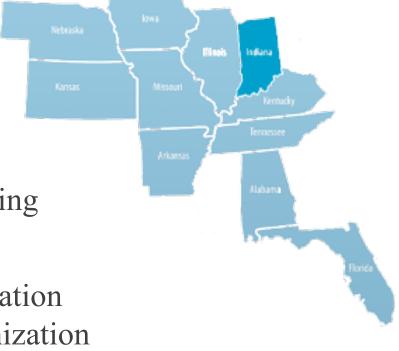


#### Who We Are

Qsource has more than 45 years of quality improvement experience working with healthcare providers under Medicare, Medicaid, and private contracts.

Currently operate in 11 states overseeing ESRD, EQRO and QIO activities.

Serves as the Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Indiana.







# **Evolution of the QIO Program**

- 1972 Professional Standards Review Organization
- 1982 Peer Review Organization
- 2002 Quality Improvement Organization this began the focus on true quality improvement efforts at the provider level and the "boots on the ground" assistance to health care providers



# Quality Improvement in Nursing Homes

- Began with statewide focus regional meetings, collaborative events, with some individual technical assistance
  - Initially targeted projects on topics such as person-centered care, pressure ulcers, use of restraints, etc.
  - Worked with various stakeholders including Leading Age, Indiana Health Care Association, Hoosiers Owners and Providers for the Elderly (HOPE), Pioneer Network, and the Indiana Department of Health
- In 2014, QIN-QIO contracts were extended to 5-year contracts (previously 3-year contracts). Five years allows time to initiate, implement, evaluate, and sustain change.



# **Impact**

Between 2014 to 2019, Qsource coordinated a partnership known as atom Alliance (the QIN-QIO for Alabama, Indiana, Kentucky, Mississippi and Tennessee) and saw the following improvements in nursing home quality:

- 622 nursing homes improved their composite scores (quality measures) to 6.0 or lower (lower is better)
- 26 percent improvement in reducing the use of antipsychotic medications translates to 5,751 fewer nursing home residents on unnecessary antipsychotic medications



## Impact (cont.)

- 3,000 fewer residents had urinary tract infections
- 1,504 fewer residents reported moderate to severe pain
- 1,059 fewer residents had a catheter, reducing the chance for infections



## **Current QIO Focus**

- Current contract focuses on small (less than 50 beds), rural, and low-performing nursing homes (one- and two-star facilities)
- Working with additional facilities as well due to COVID-19 outbreaks
- Qsource is currently working with 483 nursing homes in Indiana, with 100 nursing homes receiving intensive technical assistance with infection prevention programs
  - Review of infection prevention/control programs
  - Compliance audits/observations of staff
  - Assistance in putting together infection control binders and antibiotic stewardship programs



## Current QIO Focus (cont.)

- Nursing home team has made on-site visits to 102 nursing homes since September 2020, assisting with COVID-19 outbreak control and prevention, response to State Survey detailed plans of correction, etc.
- Partnering very closely with the Indiana Department of Health and nursing home trade associations



## **Best Practices**

Providing assistance in implementing resources – not just a source of information. Examples include

- Developing infection control/prevention programs
  - Real example March 2020 on-site visit to a NH to put an infection control system in place (three days later COVID hit).

System allowed the NH to easily track and document infections.

This facility received no infection control tags during the pandemic and was complimented by the State Surveyor on their program.



## Best Practices (cont.)

- Sharing tracking tools and training on appropriate audits and use of tools
- Providing assistance in developing antibiotic stewardship program
- Hands-on support developing trust relationships
- Comfort plan menu options for comfort care beyond pain medications have seen decreased opioid use in facilities



# Ongoing QIO Work in Nursing Homes

- Expecting a contract modification shortly heavy focus on infection control and prevention, immunizations (flu, pneumonia, COVID), reducing adverse drug events, decreasing hospital readmissions for facility-acquired infections, decreasing preventable ED visits and avoidable readmissions to hospital
- Emergency Preparedness Plan review and assistance with implementation
- Support through provision of data monthly CASPER data reports provided through a secure web portal with trending of data over time, comparison to rates in community, state, and nationally



# Future of QI Work in Nursing Homes

- Need to focus on sustainability through simplified processes. Nursing homes are getting the information – they simply are missing pieces on how to easily sustain their efforts.
- Staffing has always been a concern in nursing homes, but with COVID, the impact is critical. Nursing homes are losing staff at significant rates, and not just to another nursing home down the road. Many are leaving healthcare altogether.
- QIO assistance continues development of relationships and trust factor is crucial assistance geared toward multiple levels of NH staff to help alleviate the impact of staff leaving and loss of knowledge base.
- Nursing homes need the "non-punitive" assistance of the QIOs



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