Nursing Home Quality Initiatives
Questions and Answers
August 29, 2017

The purpose of this document is to clarify how several national 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

Your comments or suggestions on this document are welcome.
Please email QINNCC@hcqis.org.

Quality Assurance and Performance Improvement

1. **What is QAPI?**
   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 residents, families, and all nursing home caregivers in practical and creative problem-solving.

   - QA is the specification of standards for quality of care, service and outcomes, and systems throughout the facility 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 or QI) is the continuous study and improvement of processes with the intent to improve services or outcomes and prevent or decrease the likelihood of problems, by identifying opportunities for improvement and testing new approaches to fix underlying causes of persistent/systemic problems or barriers to improvement. PI in nursing homes aims to improve facility processes involved in care delivery and enhanced resident quality of life. PI can make good quality even better.

   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. **Where can the regulation that describes QAPI requirements be found?**
   The QAPI regulation was incorporated into the "Medicare and Medicaid Programs; Reform of the Requirements for Long-Term Care Facilities" rule, which was finalized and published on October 4, 2016 in the Federal Register: https://www.gpo.gov/fdsys/pkg/FR-2016-10-04/pdf/2016-23503.pdf.

3. **When will QAPI regulations go into effect?**
   QAPI will be implemented in three phases:
   - 11/28/16 – Phase 1
     - Tag F520 – All Requirements for QAA Committee (Composition, Frequency, Identify/ Correct Quality Deficiencies)
     - Disclosure
     - Good Faith Attempt
   - 11/28/17 – Phase 2, includes Phase 1 plus:
     - New F-Tags and expanded guidance for:
       - Tag F865 – QAPI Plan
       - Tag F867 – QAA Activities
       - Tag F868 – QAA Committee
     - New nursing home Survey Process implementation
   - 11/28/19 – Phase 3, includes Phases 1 & 2 plus:
     - New F-Tag and guidance for tag F867 – Feedback, Data Systems, and Monitoring

o   New Guidance on all QAPI-related requirements

4. With regard to QAPI, what will be expected of nursing homes?
Nursing homes will be required to have their QAPI plan in place and have begun implementing QAPI by November 28, 2017. 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.

5. 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 are not mandatory nor are required for compliance to the 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, and trade organizations. 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 may lead to effective QAPI.
CMS thinks a good place to start is to review the QAPI materials available on the CMS QAPI website at http://go.cms.gov/Nhqapi. The QAPI materials on the CMS QAPI website are intended to help all nursing homes 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)

6. 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 11th 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, improving mobility, promoting principles and practices of antibiotic stewardship, and preventing healthcare-acquired infections, including *C. difficile*).

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.

7. **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.

8. **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 home 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. The change package will be updated in 2017 to include key interventions for QAPI and for *C. difficile* management and prevention. The change package is available at http://qioprogram.org/nursing-home-quality-care-collaboration-change-package.

9. **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 and regulations at 42 C.F.R. Part 480. Any data released publicly by a QIN-QIO must have identifying information removed and/or be aggregated, unless each provider/facility has provided explicit approval for release of their data or a specific exception for releasing information is met. What does that mean? It means that neither the names of participants nor areas they are individually working on are usually released in a manner to tie a provider directly with their data. The exceptions for releasing identifying data generally permit disclosure to CMS, HHS, OIG or other law enforcement officials, and to other QIOs for performance of their work. 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.

10. **How can I learn more about the NNHQCC?**
Contact your state Quality Innovation Network-Quality Improvement Organization (QIN-QIO) by visiting https://www.qualitynet.org (click on Quality Improvement, then QIO Directories, and then Quality Innovation Network (QIN) QIOs).

National Partnership to Improve Dementia Care in Nursing Homes

11. **What is the National Partnership?**
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. The National Partnership focuses on the delivery of healthcare 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 National Partnership's tool and resource repository is hosted on the NNHQI Campaign website (https://www.nhqualitycampaign.org). The repository includes a variety of resources to assist nursing homes and other stakeholders in achieving the goals of this Partnership. Users will find resources grouped for professionals, family and caregivers, and persons living with dementia. The repository is 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 American Health Care Association 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.

12. **Can you describe the measures used to track the progress of the National Partnership?**
The description of the measure used to track the progress of the National Partnership can be found at http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/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. Additionally, the Partnership provides a quarterly report that contains national data, CMS regional data, state data, as well as nursing home specific information. These reports are included in the tool and resource repository.

13. **How does the mission of the National Partnership align with non-pharmacological, person-centered care approaches?**
The National Partnership 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, meaningful activities. Utilizing a consistent process to support residents with dementia that focuses on the resident's individual needs, preferences, and choices will help to improve care and reduce the use of antipsychotic medications.

National Nursing Home Quality Improvement Campaign

14. **What is the National Nursing Home Quality Improvement Campaign?**
The National Nursing Home Quality Improvement Campaign (formerly known as the Advancing Excellence in America's Nursing Homes Campaign) exists to provide long-term care providers, consumers and their advocates, and quality improvement professionals with free, easy access to evidence-based and model-practice resources to support continuous quality improvement. The Campaign promotes focus on individuals' preferences; staff empowerment; and involving all staff, consumers, and leadership in creating a culture of continuous quality improvement. The Campaign website (www.nhQualityCampaign.org) provides resources designed to support data-driven quality improvement including:
- Quality Measure (QMs) trend graphs to support both individual nursing homes and

states in identifying priority areas for improvement.

- Tracking tools that allow both individual and aggregate views of data, including both process and outcomes measures.
- Participating providers access interactive data displays that produce on-demand, downloadable reports to monitor their project(s).
- A HelpDesk is available to address questions about Campaign participation, getting started with tools and resources, technical assistance with data collection, and performance improvement projects.

The Campaign website also facilitates data sharing between providers and third parties with whom they are participating in a quality improvement project. Examples of third parties include state incentive programs, state QIN-QIOs, researchers, provider groups, and consultants. In data share arrangements, the website is used as a data-exchange portal, directly facilitating the relationship between providers and their partners. Contact Help@nhQualityCampaign.org if you are interested in learning more.

15. **What are the 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. In some states, LANEs have members from universities, state Medicaid offices, other advocacy groups, and/or individual providers and consumers.

When LANEs were first formed, they focused primarily on engaging nursing homes in the National Nursing Home Quality Improvement Campaign (formerly known as the Advancing Excellence in America's Nursing Homes Campaign). As these local groups of stakeholders have evolved, they now function under a variety of names, but with the continuing goals of:

- Using data to establish nursing home quality improvement priorities in their state;
- Coordinating statewide nursing home quality improvement activities;
- Supporting and providing assistance to nursing homes either through educational offerings or more targeted support; and
- Undertaking state level initiatives on which they collaborate to achieve a shared goal, such as reducing the use of antipsychotic medications.

LANE Conveners meet regularly with Campaign staff to review and provide input on website resources and functionality and share experience from their group's activities. The Campaign helps LANEs with educational and training efforts and provides technical assistance to nursing homes.

Alignment of Quality Initiatives

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

The CMS 2016/2017 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, 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. **Where can we find information on other national nursing home quality initiatives, not discussed in this document?**
    A number of websites that describe national nursing home quality initiatives are listed below.

    - CMS quality measures: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-instruments/NursingHomeQualityInits/NHQIQualityMeasures.html
    - Impact Act of 2014: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/IMPACT-Act-of-2014/IMPACT-Act-of-2014-Data-Standardization-and-Cross-Setting-MeasuresMeasures.html
    - CMS Post-Acute Care Quality Initiatives: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/PAC-Quality-Initiatives.html
    - Skilled Nursing Facility Value-Based Purchasing Program (SNFVBP): https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/SNF-VBP.html
    - Initiative to Reduce Avoidable Hospitalizations Among Nursing Facility Residents: https://innovation.cms.gov/initiatives/rahnfr-phase-two/index.html

18. **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, and 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

19. What is the advantage of participating in the NNHQI Campaign, the NNHQCC, and the National Partnership?

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.

20. How does QAPI overlap or align with topic specific initiatives such the NNHQCC, the National Partnership, and the NNHQI Campaign?

QAPI represents a focus on a systematic, comprehensive, data-driven, proactive approach towards quality management and sustained improvement. This approach is exemplified in various quality initiatives, such as the NNHQCC, the National Partnership, and the NNHQI Campaign.

21. If we participate in the NNHQCC or the NNHQI Campaign or the National Partnership, are we implementing QAPI?

Participating in the NNHQI Campaign or the National Partnership 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 the NNHQI Campaign, the NNHQCC, and the National Partnership 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.

22. **How have states aligned their State Dementia Care Coalition, through the National Partnership, with NNHQI Campaign LANE and the NNHQCC? How does QAPI fit?**
Some examples of ways that the initiatives align include the following:
- Many QIN-QIOs serve as NNHQI Campaign 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 National Partnership by also choosing this topic as an area of focus. Many QIN-QIOs serve as State Coalition leads or co-leads for the National Partnership.
- QIN-QIOs and State Coalitions in the National Partnership encourage membership in the Campaign and support use of Campaign tools and resources.
- The NNHQCC, QAPI, the National Partnership, and NNHQI Campaign promote using data to drive improvement and allowing nursing homes to work on topics of importance to become quality-centric.

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:
- The NNHQI Campaign and the National Partnership have compiled evidence-based resources and tools on a variety of topics.
- OASIS is an evidence-based approach for improving communication in dementia care.
- INTERACT 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.