



## Committee #5 | Quality Assurance

### Draft Priorities December 1st, 2022

The following is broken down into two parts: an executive summary and the original, detailed committee submission. Since original committee submissions often contain technical references, we've provided the executive summary for broader understanding of the priority recommendation.

### Executive Summary

We must evaluate nursing homes through a learning collaborative with quality experts that emphasizes quality improvement and correcting root causes of problems. In collaboration with The Centers for Medicare and Medicaid Services (CMS) and other agencies, we will test and evaluate strategies that make nursing home quality assurance efforts more effective, efficient, and responsive and that are not only consistent with but that can facilitate person-centered care in nursing homes through a statewide demonstration project.

#### **Short-Term Priority**

Conduct a pilot demonstration project in one state to explore ways in which the survey process could help facilitate and achieve person-centered care. The demonstration project will use a study design that can isolate the impact of the intervention.

#### **Long-Term Priority**

In development. This recommendation and action plan may focus on issues related to the survey process, nursing home and oversight agency accountability.



## NASEM Report Recommendation(s)

*5B: The Centers for Medicare & Medicaid Services (CMS) should develop and evaluate strategies (including the evaluation of potential unintended consequences) that make nursing home quality assurance efforts more effective, efficient, and responsive, including potential longer-term reforms.*

## Detailed Committee #5 Submission

### Introduction

Based on NASEM recommendation 5B, detailed below, our committee puts forward the following:

*The Centers for Medicare and Medicaid Services (CMS) shall test and evaluate strategies that make nursing home quality assurance efforts more effective, efficient, and responsive and that are not only consistent with but that can facilitate person-centered care in nursing homes through a statewide demonstration project.*

### Background

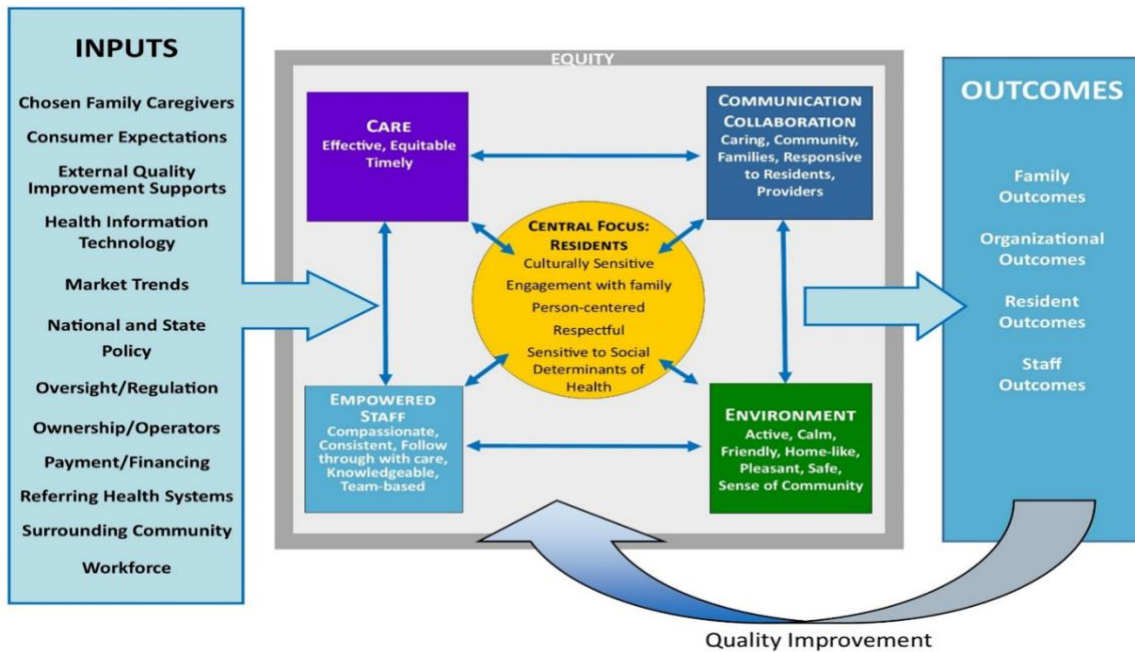
Many possible strategies could be developed, implemented, and tested to make nursing home quality assurance efforts more effective, efficient, and responsive. Strategies outlined in the NASEM report include using enhanced data monitoring to target oversight resources more effectively to higher and lower performing nursing homes and using/evaluating a broader array of enforcement remedies and corrective actions to address facility non-compliance. An additional theme that stakeholders have raised is the gap that exists between quality assurance and quality improvement processes.

Underlying the Committee's decision to focus on NASEM recommendation 5B was a strong sense that innovation and change are needed to bolster the ability of quality oversight efforts to address quality challenges in the nursing home sector more effectively. For too long, despite the existence of detailed standards of care, gaps and limitations in nursing home oversight have allowed

quality problems to persist and have been ineffective in raising the bar across providers.

Another strong belief among the committee was that innovations in quality oversight should keep the resident – *and person-centered care* – at their core.

The following graph from the NASEM report provides their conceptual model of nursing home quality. As noted on the right side and the arrow below, outcomes and continuous quality improvement are crucial components of quality nursing homes that focus on the center of the yellow circle - **Person-Centeredness**.



In thinking about the scope and design of a demonstration project to achieve these objectives, the Committee was motivated by a desire to engage multiple stakeholders both to address quality deficiencies and to lay the groundwork for fundamental change. In addition to CMS and state survey and licensure agencies, these efforts could include LTC Ombudsman, quality improvement professionals, clinicians, and residents and families. For instance, some on the Committee feel it is vitally important to test and try new ways to evaluate nursing homes through a learning collaborative that emphasizes quality improvement



and addresses root causes of problems. These dimensions would not necessarily be the domain of surveyors (who focus more narrowly on assessing and enforcing compliance with standards); however, the group felt greater harmony or communication between the tasks of quality assurance and quality improvement could occur.

## Our Approach

### Demonstration Pilot

Conduct a pilot demonstration project in one state to explore ways in which the survey process could help facilitate and achieve person-centered care. The Committee discussed several strategies that could be implemented and tested, including redesigned enforcement remedies to focus on the root causes of quality problems, bolstered attention to QAPI (Quality Assurance and Performance Improvement) standards, and an increased focus on resident-centered quality measures in ongoing performance monitoring. However, the Committee also recognized that the design and implementation of a demonstration project would depend on shared priorities and capacity to implement such a program at the state level, in addition to being constrained by existing statute. That is, any demonstration project would have to be feasible with available resources and agency capacity.

The Committee envisioned that nursing homes, survey agencies, LTC Ombudsman, and other relevant stakeholders in the state would participate for 24 months. The demonstration project should use a study design that can isolate the impact of the intervention on identified outcomes and assess potential unintended consequences. For instance, facilities could be randomized to treatment and control groups or have the timing of enrollment randomized across the study period. These potential design parameters will be elaborated in more detail when developing the action plans. Participating nursing homes must ensure that there is diversity of staff involved from every department to ensure that all voices are heard. Participating nursing homes will inform their resident and family councils of the project and provide them with regular updates.



### Is the Recommendation Feasible?

Yes, this project is feasible for one state. With dedicated demonstration funding and a designated implementation team, it would take approximately 4-6 months to develop and be ready to launch. Resources for data collection and an evaluation would also need to be included.

### Will this Recommendation Generate Collaboration?

This project would ideally be based on a collaborative model that engages survey and certification agencies, LTC ombudsman, quality improvement experts, and nursing home staff, residents, and families.

### Will this Recommendation Make Sustainable Impact?

The evaluation component of this project will consider both the outcomes and the process. Evaluation results will inform how best to improve the overall process as it is expanded to other states and nursing homes.

### Will this Recommendation Advance Equity?

Since this project will involve every nursing home in the state initially or over time, it will advance equity both from the perspective of the range of nursing homes in the state that are involved and also because of the unique diversity of each setting.

## A Potential Second Initiative

The Committee plans to explore development of a second initiative focused on components of NASEM recommendations 5A and 5B in combination. This recommendation and action plan could focus on issues and potential solutions related to the survey process and nursing home and oversight agency accountability. This priority is still in development.