Omnibus Budget Reconciliation Act (OBRA)

- 1987 – OBRA
  - Standardize regulations
  - Step-up enforcement
  - Intended to improve the Quality of Life
    “Provide care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.”
OBRA Twenty Years Later

Good news:

- Physical restraint use declined
- Psychotropic medications declined
- RN hours, total staffing hours increased
- Certification of nursing assistants
- Decline in immediate jeopardy and actual harm

Wiener, J. et al. 2007
OBRA Twenty Years Later

“...improvements appear to have reached a plateau.”

- 93% of all facilities receive deficiencies
- 20% are cited for actual harm or immediate jeopardy
- 230,000 complaints to Ombudsman in 2005
  - Significant increase in complaints about staffing
- Many facilities are chronically understaffed

Wiener, J. et al. 2007
Measurement Components

- Structural measures – the *capacity* to provide quality care
- Process measures – *performance* necessary to achieve quality of care
- Outcome measures – the *result*
Institute of Medicine

- Quality of care depends on the performance of the workforce
- Staffing levels are necessary
- Other key factors:
  - Education
  - Supervision
  - Job satisfaction
  - Turnover
  - Leadership
  - Organizational culture

Wunderlich G. S., “Improving the Quality of Long Term Care,” IOM, 2000
Structural Measure of Quality

- Staffing level
  - Total nursing hours per patient day (PPD)
  - RN hours PPD
- Evidence-based
- Availability – OSCAR database, cost reports
- Recommendation – quarterly updates
Staffing Measures

- Staff turnover
  - Collected annually by OSHPD
  - Total departures/average number of staff
- Staff retention
  - Staff with one year of service/avg. number of staff
- Evidence-based
- Availability – OSHPD, cost reports
High Turnover = Low Quality

- Physical restraints
- Catheter use
- Contractures
- Pressure ulcers
- Psychoactive drug use
- Quality-of-Care deficiencies

Castle et al., 2005
Castle, 2007
Structural Measure of Quality

- **Staff Satisfaction**
  - Overall satisfaction
  - Recommendation to others
- **Evidence-based**
- **Availability – limited**
- **Recommendation – quarterly updates**
Power of Staff Satisfaction

Influences

- Staff turnover
- Quality of life
  - Relationships - co-workers, residents, families
- Quality of care
- Regulatory compliance

Castle et al., 2007
Higher Employee Satisfaction

- Fewer resident falls
- Fewer pressure ulcers
- Fewer catheters
- Less nurse turnover and absenteeism
- Less CNA absenteeism
- Higher occupancy rates
Staff Satisfaction = Family Satisfaction

- Satisfied employees report:
  - Better supervision
  - Better training
  - Better work environments

- Satisfied families report:
  - Quality of life
  - Quality of care
  - Quality of service

Drivers of Workforce Satisfaction

- Management cares about employees
- Management listens to employees
- Help with job stress
- Fair evaluations
- Staff respect for residents
- Workplace is safe
- Supervisor cares about you as a person

MyInnerView, Inc. 2008
Process Measure of Quality

- Consistent Assignment
- Evidence-based
- Availability – none
- Recommendation – quarterly updates
Staffing Models

Consistent Assignment =
Consistently assigning the same caregivers to the same nursing home residents every day

Rotating Assignment =
Rotating caregivers from one group of residents to the next after a period of time
Support for Consistent Assignment

Results from 13 research studies:

- Improve teamwork
- Enhance relationships
- Improve attendance
- Improve staff, resident, family satisfaction
- Lower turnover
- Improve screening and assessments
- Improve clinical outcomes
- Improve quality of life

Facilitates person-centered care
Outcome Measures of Quality

- Measures –
  - State survey compliance
  - Clinical outcomes of care
  - Quality of life - resident and family satisfaction scores

- Evidence-based

- Availability – all but satisfaction scores

- Recommendation – quarterly updates
State Survey Results

- **Measure** –
  - Escalating weighted scale based on F-tags and scope and severity for each deficiency cited provides a performance score
  - Currently utilized by CMS

- **Represent the minimum federal standards**
  - Annual inspections
  - Snap shot of quality at the time of survey

- **Availability - OSCAR database**
Quality Measures

- Measures -19 clinical outcome measures
  - Posted by CMS NH Compare
  - 14 long-stay measures, 5 short-stay
- Driven from MDS assessments of residents
- Some measure change, most measure prevalence
- MDS data is readily available
Restraints QM

NUMERATOR

- Residents who were physically restrained daily on the target assessment
  - Used on a daily basis in last 7 days
    - P4c = Trunk restraint
    - P4d = Limb restraint
    - P4e = Chair prevents rising

DENOMINATOR

- All residents with a valid target assessment

Exclusions - the target assessment is an admission assessment
Quality of Life Measures

- Family member and resident satisfaction
  - Overall satisfaction
  - Recommendation to others
- Meaningful information for consumers
  - Critical component of quality is quality of life
- Availability - limited
  - Not a widespread practice in CA
Drivers of Consumer Satisfaction

- Competency of staff
- Care (concern) of staff
- Nursing care
- Respectfulness of staff
- Nursing assistant care
- Safety of facility
- Meeting choices/preferences
Limitations of Satisfaction Surveys

- All providers need to use one tool
  - My InnerView being used by 7,000 in U.S.
    - 250 providers in CA

- Integrity of data
  - Administration
  - Response rates
High Performing Nursing Homes

Three Common Elements -

- Culture – person-directed care
- Workforce commitment
  - Clinical systems
  - Equipment
- Leadership practices

All three are interdependent

Grant, L. 2008
Results are Interrelated

- Implement principles of culture change
  - Enhanced leadership practices
- Employee Satisfaction
- Workforce performance
  - Low turnover, high retention, low absenteeism
- Consumer satisfaction
- Clinical outcomes
- Regulatory compliance

Grant, L. 2008
Better Policy/Better Performance

- Tying payment to workforce measures and family and residents satisfaction could be profound
- Foster sustained change and continuous improvement
  - Drive evidenced-based practices that enhance quality of care and quality of life
- Validate superior performance
Contact Information

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Summary

Element and Source
- Staffing level (OSCAR and cost reports)
- Staff turnover (OSHPD and cost reports)
- Staff satisfaction (limited availability)
- Consistent assignment (not available)
- State Survey results (OSCAR)

Change
- Quarterly update
- Quarterly update
- Select uniform tool; quarterly update
- Develop method; quarterly update
Summary

- **Element and Source**
  - Clinical Outcomes (Minimum Data Set)
  - Quality of life – patient and family satisfaction

- **Changes?**
  - MDS 3.0?