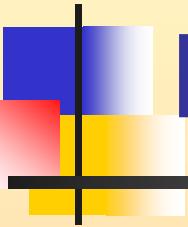




Improving and Reforming Long-Term Care

Part 3: Basic Elements For Quality Care



Keys to Quality Care

What are the essential elements
of high quality care?



Elements of High Quality Care

- According to the Institute of Medicine (IOM), high quality care is
 - Safe
 - Effective
 - Efficient
 - Available
 - Timely
 - Equitable



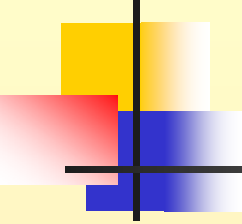
The Current Picture

To what extent do nursing homes provide high quality care?



Current Picture in LTC

- Nursing homes vary substantially in
 - Competence
 - Clinical performance
 - Overall quality of their care and services
- Some NHs provide competent care in all aspects
 - Others, in selected aspects
- Problematic facilities provide marginal or poor care in most or all care aspects ⁵



Drawing Conclusions About NH Competence

- Diverse opinions about judging quality
- Competence and performance may or may not correlate well with
 - Regulatory compliance track record
 - Results based on some widely used quality measures
- Aggregate outcomes may not permit accurate determination of quality of care given to individuals



NH Competence

- Problematic facilities, and facilities that have some problematic aspects of care, may fail to identify or correct their problems
- Even in facilities with a generally good overall record, some aspects of care may be handled inadequately
- Many common LTC practices are still inconsistent with evidence



Meaningful Improvement and Reform

What are the criteria for meaningful efforts to improve and reform nursing home care?

Trying to Improve Care and Results



- Ultimately, all efforts to improve nursing home care quality must be matched against the critical elements needed to provide high quality care
 - To date, no approach uniformly successful in facilitating good performance or correcting poor performance
- It cannot be assumed that improvement and reform efforts are on target
 - Only some initiatives improve on existing situation



Outcomes and Process

- To evaluate quality of care, we must know how a facility attains its outcomes
 - Not just those results
- Use of quality measures and indicators must be sensitive to interim complications or collateral damage that occur while trying to attain quality goals



Outcomes and Process

- It is possible to
 - Do the right thing correctly but not always obtain the best outcomes
 - Do the wrong thing, or the right thing in the wrong way, and obtain desired results eventually
 - Despite sometimes causing avoidable complications



Key Elements

What are the key components of a system to help attain high quality long-term and postacute care?



Five Key Elements

- The “right thing in the right way” refers to care that
 - 1) is based on sound clinical principles and reliable evidence
 - 2) is delivered via a proper care process that reflects effective clinical problem solving and decision making
 - 3) accommodates but does not focus primarily on regulations



Five Key Elements

- The “right thing in the right way” refers to care that
 - 4) is provided by properly qualified individuals who perform their functions effectively and know their roles and their limits; and
 - 5) is guided and supported by effective management



Five Key Elements

- Nursing homes can be improved by doing the basics correctly and consistently
- Desirable efforts to improve and reform long-term care must be consistent with these principles



Distinguishing Competent Care

What distinguishes the processes
and care systems of more capable
from those in less capable
facilities?

Capable Facilities and Practitioners



- Consistently apply evidence-based care that
 - Meets desired quality attributes
 - Is consistent with key philosophical, biological, and medical principles
 - Is based on proven clinical problem solving and decision making approaches
 - Respects relevant geriatrics principles and approaches



Capable Facilities and Practitioners

- Do not just care plan symptoms and problems in isolation
- Are more diligent at trying to identify cause-and-effect relationships
- Can provide valid evidence to support their conclusions and interventions
 - Including how they identified links between causes, consequences, and interventions
 - Regarding treatment benefits/risks



Capable Facilities and Practitioners

- Give medical treatment in context
 - Always consider purpose for the patient, not just pertinence to disease or organ system function
 - Consider each person's physical, functional, and psychosocial dimensions
 - Consistent with patient goals and preferences
 - Adapt care to changing goals and objectives for each person



Capable Facilities and Practitioners

- Adapt testing and treatment recommendations from protocols and guidelines, to individual circumstances
- Use consultations judiciously
 - Scrutinize clinical rationale for consultative recommendations
- Freely challenge pertinence of suggested tests and treatments that lack a plausible rationale

Problematic Facilities and Practitioners



- Do not consistently follow systematic care processes
- Lack clinically pertinent rationale for many decisions and actions
- Often rely heavily on authority and personal relationships to determine appropriate care
 - Someone or something told them it was the right thing

Problematic Facilities and Practitioners



- Typically fail to validate or challenge
 - Whether they were told the right things
 - Qualifications of those giving advice
 - Why a recommendation or choice is relevant to a specific patient or a situation
- Tend to divide up patients by organ systems and problems
 - Distribute problems to those of various disciplines to assess and manage



Person-Centered Care

What approaches are essential to help attain “person-centered care?”



Person-Centered Care

- True “person-centered” care requires attention to all three dimensions
 - Physical, functional, and psychosocial
 - Regardless of the setting or level of care
 - “Social model” is not necessarily more “humane” or “person-centered”
- True reform must correct bad practices
 - Not disdain good medicine because bad practices are common



Addressing the Challenges

What are the keys to an effective care delivery process, and how can nursing homes meet related implementation challenges?

Appropriate Care Delivery Process



- Care delivery process
 - Way to apply effective clinical problem solving and decision making methods for evidence-based care
- Adherence to full care delivery process
 - Essential for high quality care in any setting
 - Definable roles, functions, and tasks within those processes for all categories of staff and practitioners

Appropriate Care Delivery Process



- Can't shortchange care delivery process
 - Despite challenges
- All steps of the care delivery process are relevant
 - Not just those emphasized in regulations and related guidance and care tools
- Essential to know basis for decisions and treatment selection
 - Not just the treatments or results



Clinical Problem Solving

- Requires ability to
 - Evaluate an individual adequately
 - Describe and define issues correctly and completely
 - Distinguish clinically significant from incidental findings
 - Identify causes accurately
 - Determine appropriate interventions

Capable Facilities and Practitioners



- Promote and implement full care delivery process
 - Consistently and correctly
- Obtain detailed chronological history of symptoms and condition changes
- Perform adequately detailed physical assessment



Capable Facilities and Practitioners

- Use tests judiciously
 - Not as substitute for clinical problem solving including differential diagnostic efforts
- Do not just treat patients based on their primary diagnosis or reason for admission



Capable Facilities and Practitioners

- Consider complications of current treatments as potential causes of any changes of condition or symptoms
 - Especially, adverse consequences related to medications
- Have meaningful dialogue with practitioners about patient issues
 - Enough to permit appropriate clinical problem solving and decision making

Capable Facilities and Practitioners



- Balance interventions with rights of individuals to decline specific treatments
- Validate hypotheses with additional assessment, as needed
- Promote proper exercise of “clinical judgment”
- Do not confuse haphazard guesswork with valid clinical judgment

Problematic Facilities and Practitioners



- Commonly omit critical parts of the care delivery process
- Fail to follow effective clinical problem solving and decision making practices
- Tend to react to, and act upon symptoms and diagnostic test results
 - Without adequate context or review of full picture

Problematic Facilities and Practitioners



- Tend not to seek or recognize complications or correlate with causes
- Tend not to individualize care
 - Fail to effectively tailor general knowledge to specific situations
 - Often use the same rote interventions for everyone with a similar condition or symptom
 - Regardless of history or context



Problematic Facilities and Practitioners

- Fail to guide staff and practitioners adequately about expectations
 - Risk management and other consultants may advise against having detailed clinical policies and procedures
- Tend to use idea of “exercising clinical judgment” to rationalize inadequate clinical problem solving and decision making



Balanced Approach to Compliance

What does it mean for nursing homes to take a balanced approach to regulatory compliance?



Balanced Approach to Regulatory Compliance

- Laws, regulations, and related tools don't give adequately detailed guidance for effective clinical problem solving and decision making
- MDS is a basic tool to consistently document key information
 - Mostly about consequences—not causes
 - Only comprehensive in a few areas
 - Inadequate regarding physical signs/symptoms



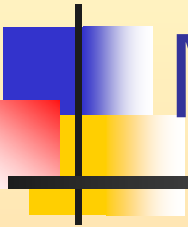
Regulatory Compliance: Problematic Facilities

- Use regulations and related content as primary or sole approach to care
- Overemphasize compliance-related assessment and care planning
 - Shortchange other key steps such as problem definition and cause identification



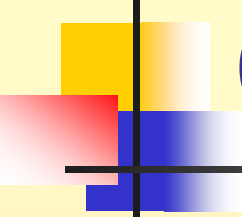
Regulatory Compliance: Problematic Facilities

- May ask individual surveyors or state agencies what to do to comply with regulations or avoid survey deficiencies
 - Surveyors cannot perform in-depth assessments or clinical problem solving and decision making processes
 - Surveyors are supposed to determine compliance with process expectations
 - Facility must show basis for its clinical problem solving and decision making



Meaningful Improvement

What is needed for meaningful performance improvement of existing staff and practitioners?



Care Provided by Properly Qualified Individuals

- Individuals must perform key functions of the care delivery process
 - Including observation, data collection, documentation, reporting, analyzing information, making treatment decisions, and delivering treatments
- One approach
 - Find more qualified practitioners
- Another route
 - Improve performance of existing staff and practitioners



Effective Management Oversight

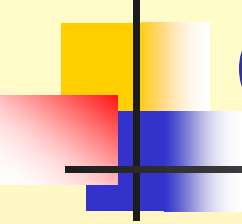
What is the vital management role in a nursing home's care delivery process and—by extension—in the quality of its care?



Oversight

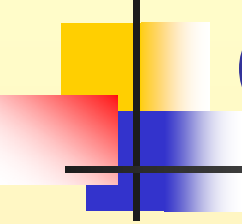
- Successful oversight and coordination of a facility's care processes and practices
 - Influences attainment of safe, effective, efficient, and person-centered care
- Management does not provide direct care
 - But, crucial oversight of care provision
 - Critical role in overseeing performance of all direct care staff and practitioners

Administrator and Facility's Culture



- Capable facilities have a culture that
 - Focuses on the care delivery process and evidence-based care
 - Promote respect for good detective work, problem solving, cause identification
 - Commit facility staff and practitioners to effective care processes and evidence-based care as primary route to multiple desirable outcomes
 - Resist tradition-, habit- and myth-based care

Administrator and the Facility's Culture



- Capable facilities
 - Ensure that all departments and disciplines know their roles and perform their functions effectively
 - Implement systems and processes to review and influence performance and practices
 - For example, quality assurance and performance improvement activities