

#### Moving to a Higher Level: How Collaboration and Cooperation Can Improve Nursing Home Quality

Charts to accompany written testimony

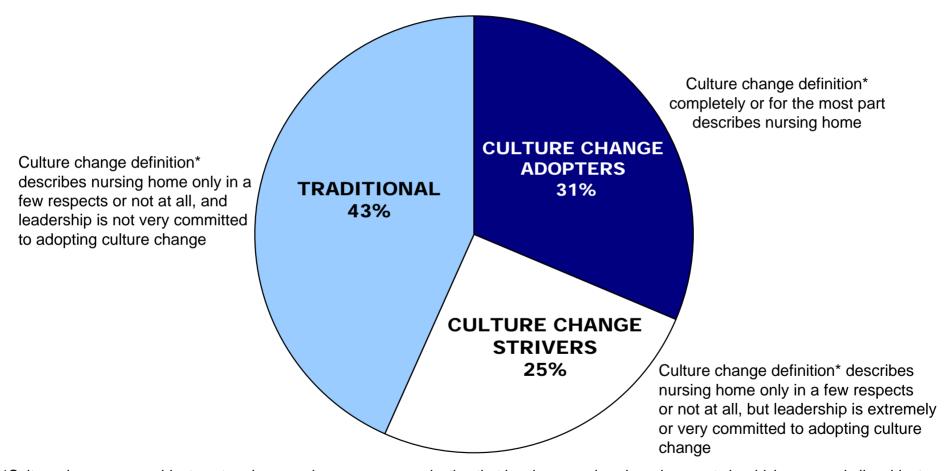
Mary Jane Koren, M.D., M.P.H.
Assistant Vice President, The Commonwealth Fund

U.S. House of Representatives
Committee on Energy and Commerce
Subcommittee on Oversight and Investigations

May 15, 2008

#### Figure 1. Nursing Home Adoption of Culture Change, 2007

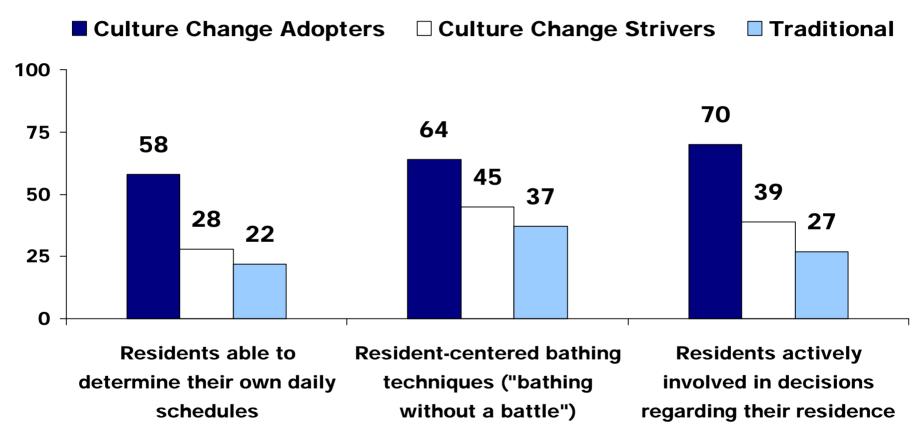
Distribution of Combined Measures of Facility Engagement in and Leadership Commitment to Culture Change or a Resident-Centered Approach\*



<sup>\*</sup>Culture change or a resident-centered approach means an organization that has home and work environments in which: care and all resident-related activities are decided by the resident; living environment is designed to be a home rather than institution; close relationships exist between residents, family members, staff, and community; work is organized to support and allow all staff to respond to residents' needs and desires; management allows collaborative and group decision making; and processes/measures are used for continuous quality improvement.

Figure 2. Residents' Ability to Determine Their Own Daily Schedules and Make Decisions Varies Widely Between Culture Change Adopters and Traditional Nursing Homes

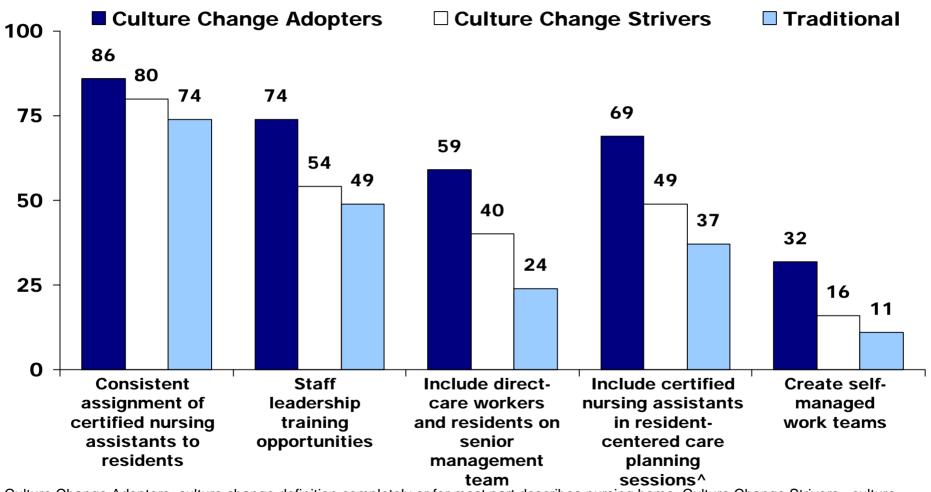
Percent of facilities indicating they are currently implementing the following initiatives



Culture Change Adopters=culture change definition completely or for most part describes nursing home. Culture Change Strivers=culture change definition describes nursing home only in a few respects or not at all but leadership is very/extremely committed to the adoption of culture change. Traditional=culture change definition describes nursing home only in a few respects or not at all AND leadership is less than very/extremely committed to the adoption of culture change.

Figure 3. Traditional Nursing Homes Lag Behind Culture Change Adopters in Staff Leadership, Empowerment, and Autonomy

Percent of facilities indicating they are currently implementing the following initiatives

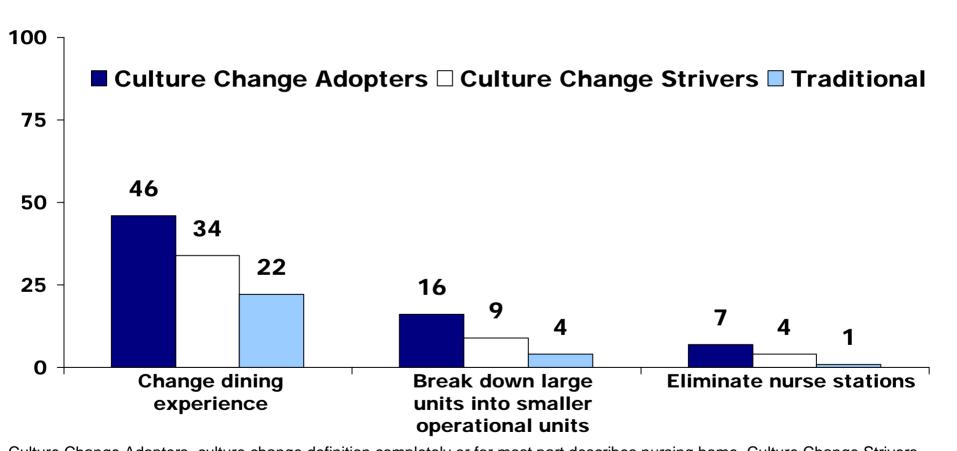


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<sup>^</sup> For instance, utilizing the "I Care" or "First Person" approach.

## Figure 4. Few Nursing Homes Have Changed Their Physical Environments, but Nearly Half of Culture Change Adopters Have Altered the Dining Experience

Percent of facilities indicating they are implementing the following initiatives

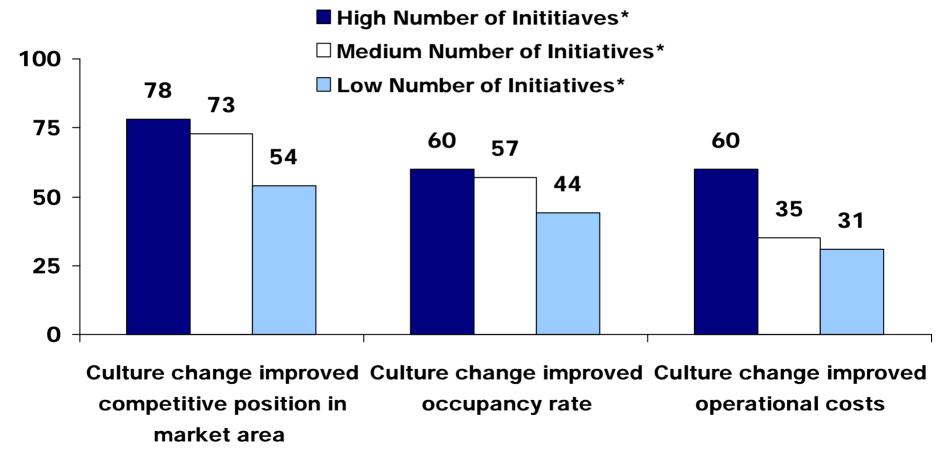


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#### Figure 5. Improvements in Business and Operations are Greatest in Homes That Have More Culture Change Initiatives Under Way\*

Base: Definition of culture change describes this nursing home completely, for the most part, or in a few respects

Percent of nursing homes indicating that culture change has had the following impacts

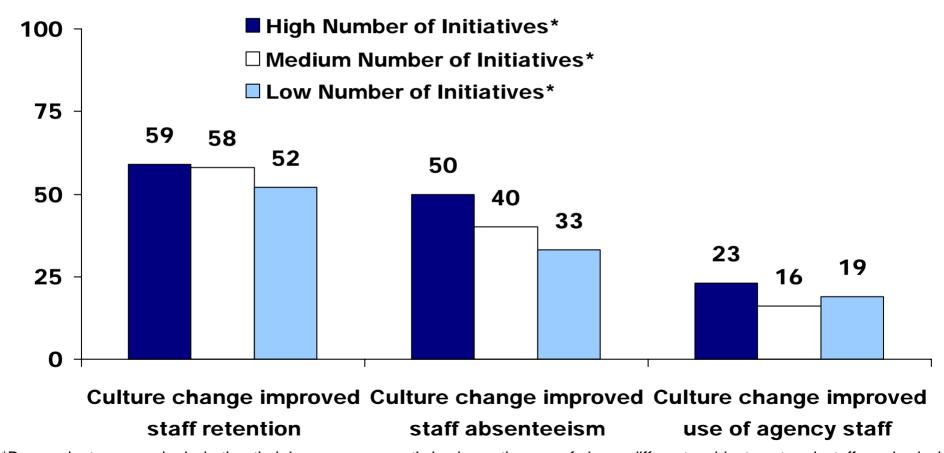


<sup>\*</sup>Respondents were asked whether their home was currently implementing any of eleven different resident-centered, staff, or physical environment initiatives associated with culture change. High=7 or more initiatives; Medium=4 to 6 initiatives; Low=3 or less initiatives.

#### Figure 6. Staffing Improvements Are Greatest in Homes That Have More Culture Change Initiatives Under Way\*

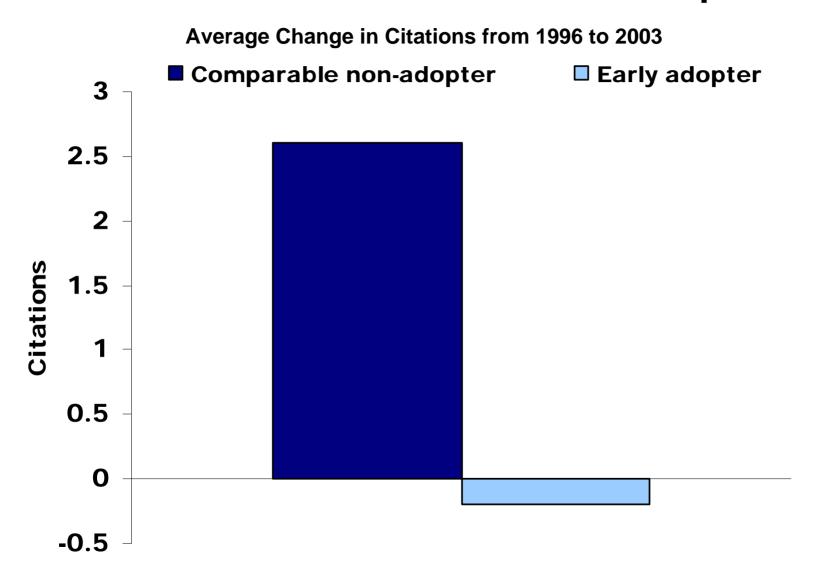
Base: Definition of culture change describes this nursing home completely, for the most part, or in a few respects

Percent of facilities indicating that culture change has had the following impacts



<sup>\*</sup>Respondents were asked whether their home was currently implementing any of eleven different resident-centered, staff, or physical environment initiatives associated with culture change. High=7 or more initiatives; Medium=4 to 6 initiatives; Low=3 or less initiatives.

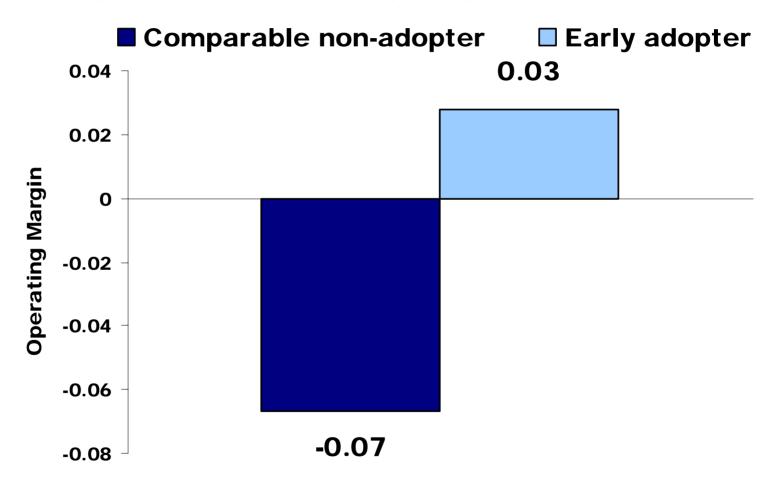
Figure 7. Culture Change Adopters Receive Fewer Citations for Violations Than Non-Adopters\*



Source: \*Elliot, A. (2007). *Preliminary Research Supports Nursing Home Culture Change Movement* (available from Pioneer Network, <a href="http://www.pioneernetwork.net/news-and-events/PreliminaryResearchSupportsNursingHome.php">http://www.pioneernetwork.net/news-and-events/PreliminaryResearchSupportsNursingHome.php</a>)

## Figure 8. Culture Change Adopters Have More Positive Operating Margins

**Average Change in Operating Margin from 1996 to 2003** 



#### Figure 9. Residents and Staff of the First Green House\* Have Positive Outcomes

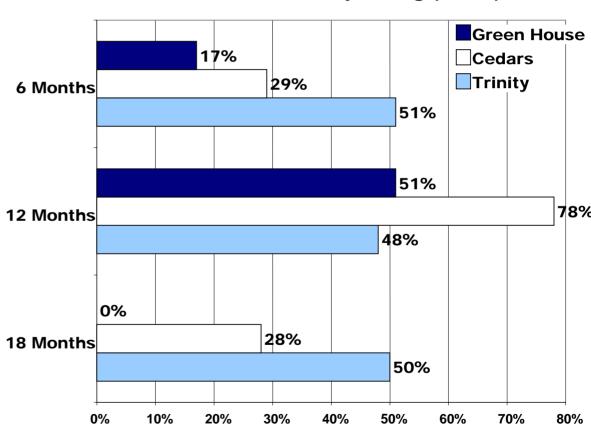
#### **Green House residents had:**

- A better quality of life
- Greater satisfaction
- Better or equal outcomes

#### **Green House staff felt:**

- More empowered to assist residents
- Knew residents better
- Greater intrinsic and extrinsic job satisfaction
- Wanted to remain in the job

#### Percent Residents with Decline in Late Loss Activities of Daily Living (ADLs)

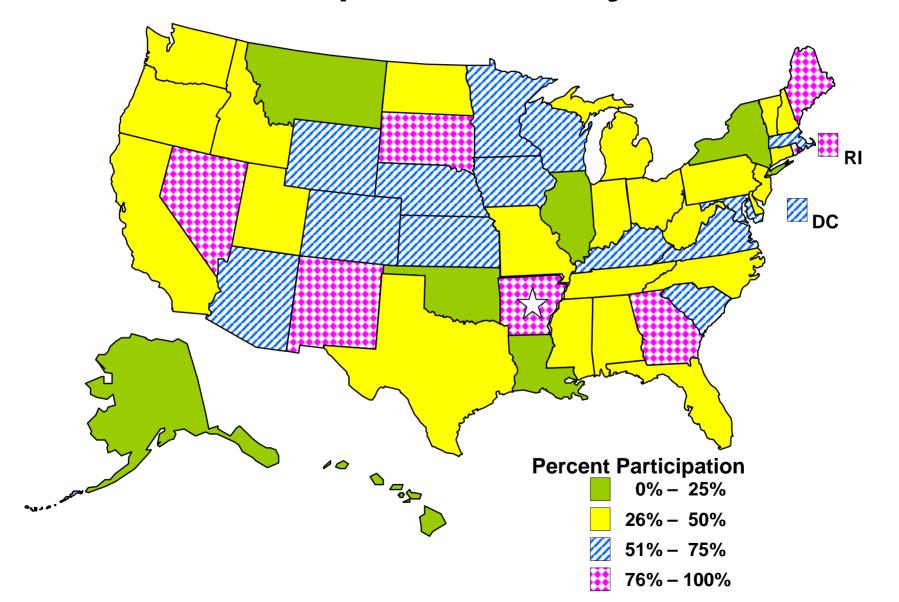


<sup>\*</sup> A Green House is a small group nursing home for 10 residents.

Source: R. A. Kane, T. Y. Lum, L. J. Cutler et al., Resident Outcomes in Small-House Nursing Homes: A Longitudinal Evaluation of the Initial Green House Program, *Journal of the American Geriatrics Society*, June 2007 55(6):832–39

The first one was in Tupelo, MS.

Figure 10a. Nursing Home Participation in the Nursing Home Quality Campaign: State Participation as of May 8, 2008



# Figure 10b. Nursing Home Participation in the Nursing Home Quality Campaign: State Participation as of May 8, 2008

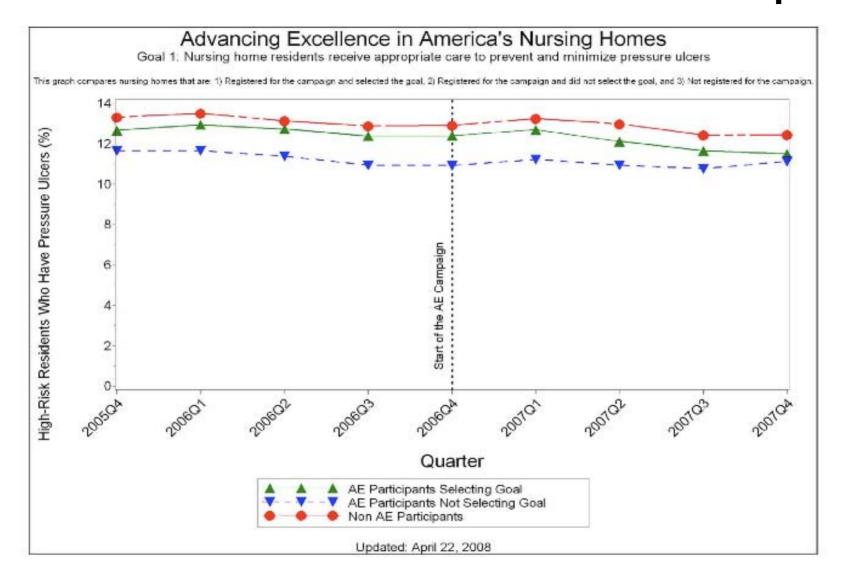
AK	6.70%
AL	47.80%
AR	100.00%
AZ	62.20%
CA	25.50%
CO	69.00%
CT	38.10%
DC	60.00%
DE	47.70%
FL	32.70%
GA	96.40%
HI	17.00%
IA	50.60%
ID	35.10%
IL	20.80%
IN	32.10%
KS	64.20%

KY	52.70%
LA	23.30%
MA	67.50%
MD	53.80%
ME	82.30%
MI	27.50%
MN	51.40%
MO	44.10%
MS	29.40%
MT	17.40%
NC	37.10%
ND	36.10%
NE	59.70%
NH	45.70%
NJ	30.70%
NM	91.70%
NV	81.30%

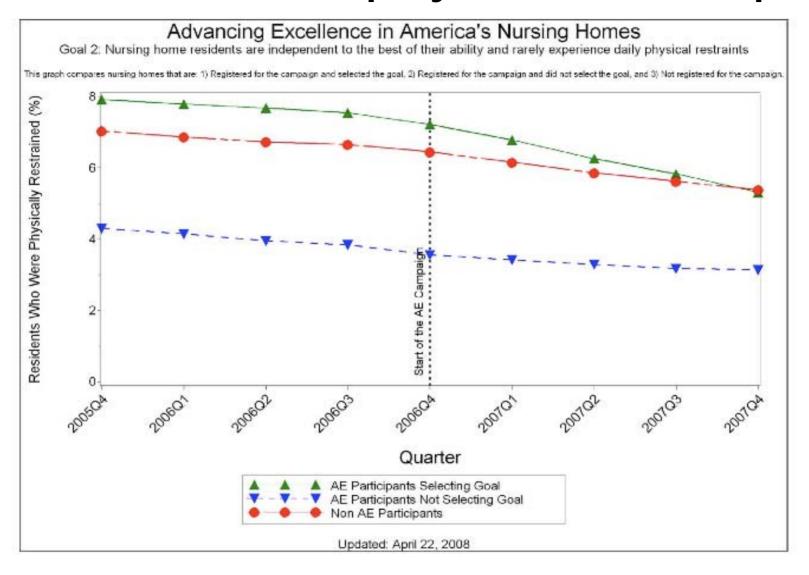
NY	18.00%
ОН	44.60%
OK	22.60%
OR	35.50%
PA	49.20%
RI	87.20%
SC	51.40%
SD	88.20%
TN	38.40%
TX	34.30%
UT	44.10%
VA	65.30%
VT	37.50%
WA	48.30%
WI	56.50%
WV	45.00%
WY	51.30%

Source: Advancing Excellence in American's Nursing Homes website (www.nhqualitycampaign.org)

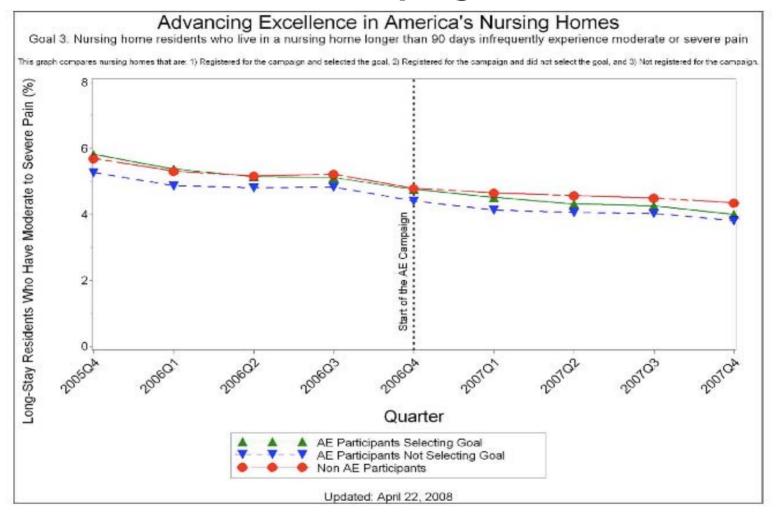
### Figure 11. Campaign Participants are Lowering Pressure-Ulcer Rates Faster Than Non-Participants



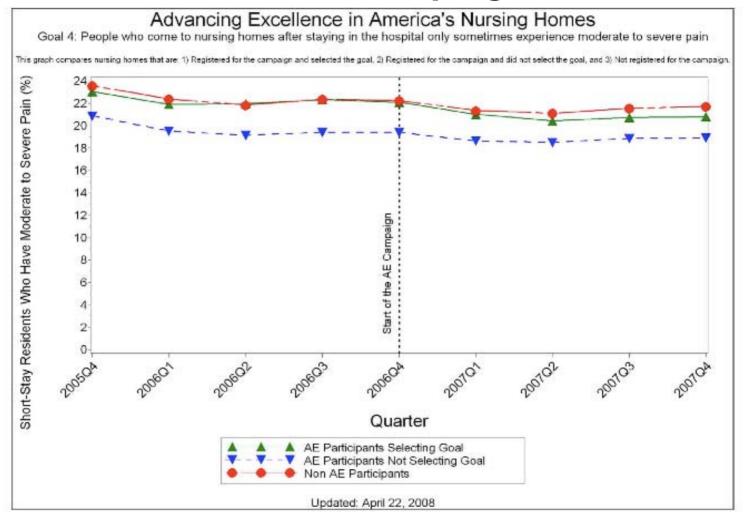
## Figure 12. Campaign Participants Are Eliminating Restraint Use More Rapidly Than Non-Participants



# Figure 13. Campaign Homes Are Improving Pain Management for Long-Stay Residents Faster Than Are Non-Campaign Homes

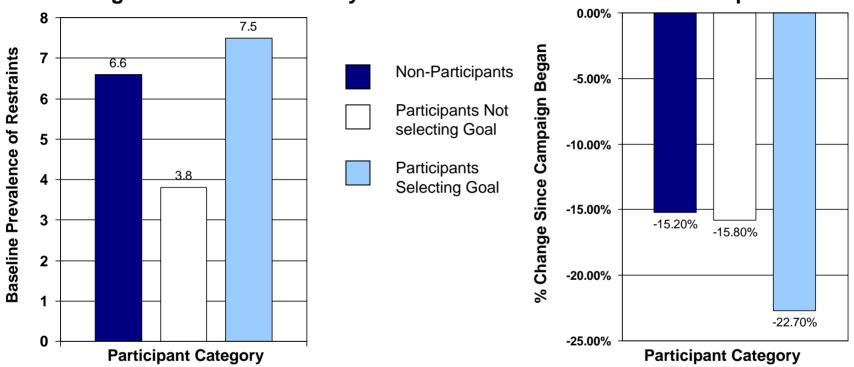


# Figure 14. Campaign Homes Are Improving Pain Management for Post-Acute Care Residents Faster Than Are Non-Campaign Homes



#### Figure 15. The Nursing Home Quality Campaign Is Showing Results

#### **Nursing Homes that Select Physical Restraint Goal Show Greater Improvement**

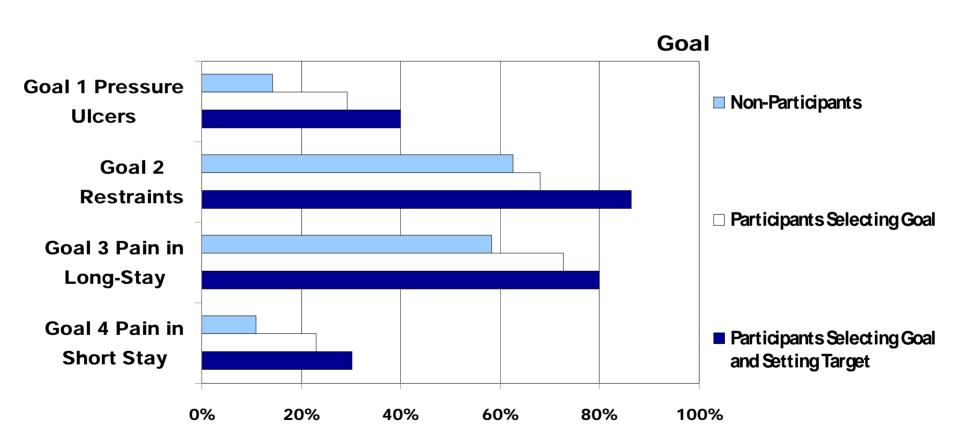


- 6808 nursing homes (43%) have joined the Campaign\*
- Significant representation of for-profit facilities is seen
- Improvements are being seen in other goal areas too
- Given positive trends the Campaign will continue past its original 2 year timeframe

Source: This material was prepared by Quality Partners of Rhode Island, the Medicare Quality Improvement Organization for Rhode Island, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the US Department of Health & Human Services. The contents presented do not necessarily reflect CMS policy. Data through one year (four quarters).

## Figure 16. Advancing Excellence in America's Nursing Homes: Progress Toward Goals

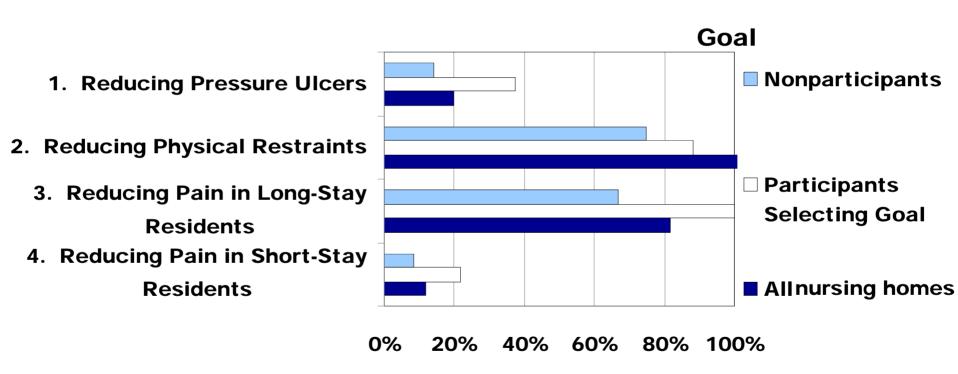
Progress Toward National Goal, By Participation and Target-Setting (Campaign results after year 1)



Source: This material was prepared by Quality Partners of Rhode Island, the Medicare Quality Improvement Organization for Rhode Island, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the US Department of Health & Human Services. The contents presented do not necessarily reflect CMS policy. Data through one year (four quarters).

## Figure 17. Advancing Excellence in America's Nursing Homes: Progress Toward Goals, Part 2

Progress Toward National Goal By Campaign Participation: Results 2006 Q3 to 2007 Q4



Source: This material was prepared by Quality Partners of Rhode Island, the Medicare Quality Improvement Organization for Rhode Island, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the US Department of Health & Human Services. The contents presented do not necessarily reflect CMS policy. Data through five quarters.

## Advancing Excellence in America's Nursing Homes: Summary of Results

- Ongoing improvement toward five Campaign goals
- Goal selection associated with faster improvement
- Target selection associated with faster improvement
- Goal 2—reducing physical restraints—achieved national target for:
  - Objective A, restraint use at or below 5% (at 4.9%)
  - Objective B, 50% of homes with restraint use below 3%
- Goal 3, reducing pain for long-stay residents: near national target for:
  - Objective A, national average at or below 4% (at 4.2%)
  - Objective B, 30% below 2% (~35% have met threshold)

Source: This material was prepared by Quality Partners of Rhode Island, the Medicare Quality Improvement Organization for Rhode Island, under contract with the Centers for Medicare and Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.

## Advancing Excellence in America's Nursing Homes: Summary of Results, Part 2

- The number of frail nursing home residents is on the rise
  - More short-stay residents
  - More residents at high risk for pressure ulcers
  - → Challenge for achieving absolute reduction in numbers (Objectives C and D for all goals)
- Majority of facilities have not set targets