

Report submitted to the:
 Oklahoma Health Care Quality Improvement Advisory Committee
 and
 The Subcommittee/Work Group on Long Term Care
 September 16, 2008
 by
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A. Background information

1. Creation of the "Best Practices Medical Directors Subcommittee" of the Long Term Care Facility Advisory Board, OSDH. (Minutes of meetings of February 20, and June 11, 2008 distributed).
2. Commonwealth Fund State Scorecard, 2007 (OK 50th)
 Performance indicators related to nursing facility care:
 - ACCESS (none)
 - QUALITY *
 - # 17. high risk nursing home residents with pressure ulcers 16.4% (2004) (48th)
 - # 18. nursing home residents who were physically restrained 12.7% (2004) (48th)
 - POTENTIALLY AVOIDABLE USE OF HOSPITAL and COSTS OF CARE*
 - # 23. long-stay nursing home residents with a hospital admission 21.5% (2000) (45th)
 - # 24. NH residents with readmission within 3 months 15.4% (2000) (43rd)
 - HEALTHY LIVES (none)
3. Other concerns related to nursing facilities:
 - over use of psychotropic medications.
4. Quality measures/Quality Indicators for nursing facilities in Oklahoma

Performance indicator	2004 CWF	2003, Q3	2007, Q 4
(# 17) % high risk residents with Pressure ulcers	16.4	15.9	15.0 (12.0)
(# 18) % physical restraint use	12.7	11.6	8.5 (4.9)

(Percent in parentheses is US national average)

5. Potentially "Achievable Benchmarks of Care" (aka ABC).
 - Quality Partners of Rhode Island. (QIO)

B. Ongoing initiatives in Oklahoma

1. Oklahoma Foundation for Medical Quality (OFMQ) CMS contract for 9th Scope of Work (SOW):
focused interventions in:
 - Nursing facilities with HR residents with PUs (20% or higher) no = 91
 - Nursing facilities with physical restraints use (11% or higher) no = 130
 - 3 “special focused facilities” (SFF).
2. Oklahoma Pressure Ulcer Coalition (sponsored through the OHA).
 - hospital acquired pressure ulcer as a “never event” (effective Oct 1, 2008).
3. OSDH LTC services division provider training programs (ALFs, NF, other).

C. Regulatory oversight (State Operation Manual/SOM). - F tags, Licensure tags.

F tag 329: inappropriate drug use: requirement for “gradual dose reductions” (GDR).

F tag 501: medical directors roles and responsibilities (2)

- oversight of implementation of resident policies and procedures
- co-ordination of medical services

D. Recent developments

1. change in Minimum Data Set (MDS) coding for pressure ulcers
2. new terminology for staging pressure ulcers: “suspected deep tissue injury”, stages 1 through 4, and “unstageable”.
3. hospital acquired pressure ulcer as a never event.

E. Summary Comments

1. Need to look at most recent (obtainable) performance indicators for Oklahoma.
2. Remember that one needs to carefully determine what an achievable benchmark is for a QM/QI.
3. Be cognizant that as all states improve (hopefully), there will always be states that are ranked in the lower quartile.
4. Need to implement/support (ongoing) initiatives through provider, professional and quality improvement organizations, the OSDH nursing facility survey/provider training programs, and payor (OHCA, CMS).
5. Respond to legislators concerns (ie, Representative Randy McDaniel’s call for a better rating system for care facilities).
6. “What do we do next?” Dr. Gordon Deckert, OSMA Council on Public and Mental Health (9/10/2008).

F. Action Items