Implementation of Dementia Care Process Improvement in the SNF

CALTCM PRE-CONFERENCE

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Disclosures

- Dr. Bakerjian has no relevant financial relationships with commercial interests to disclosures.

Objectives

- Describe the Advancing Excellence Circle of Success framework for QAPI

- Apply the process specifically to Behaviors and Antipsychotic use in residents with dementia

Knowledge Needed for QI

- Content knowledge about the problem i.e. Dementia care and antipsychotics
- Knowledge about the QAPI process

Who Is Involved

- The University of Minnesota and Stratis Health in demonstration project
  - 17 nursing homes in California, Florida, Massachusetts, and Minnesota
  - To develop and test prototypes of a national Quality Assurance Performance Improvement (QAPI) program for nursing homes.

Comparing QA and PI*

	Quality Assurance	Performance Improvement
Motivation	Measuring compliance with standards	Continuously improving processes to meet standards
Means	Inspection	Prevention
Attitude	Required, defensive	Chosen, proactive
Focus	Outliers: *"bad apples"* Individuals	Processes Systems
Scope	Healthcare provider	Patient care
Responsibility	Few	All

CMS QAPI Framework

1. Design and Scope
2. Governance and Leadership
3. Feedback, Data Systems, and Monitoring
4. Performance Improvement Projects
5. Systematic Analysis and Systemic Action

Design and Scope

- Comprehensive, ongoing program that includes all departments of the NH
- Focuses on safety, quality of care, QOL, resident choice and care transitions
- Based on best available evidence
- QAPI plan

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Governance and Leadership

- Boards, owners, executive leadership will be accountable
- Cultural environment, organizational climate to provide capacity for PI
- Required to provide sufficient resources
- Must address sustainability

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Feedback, Data Systems & Monitoring

- Data will come from multiple sources to include residents, family & staff

- Feedback system should include complaints and adverse events

- NHs will need to set targets and will have national benchmarks
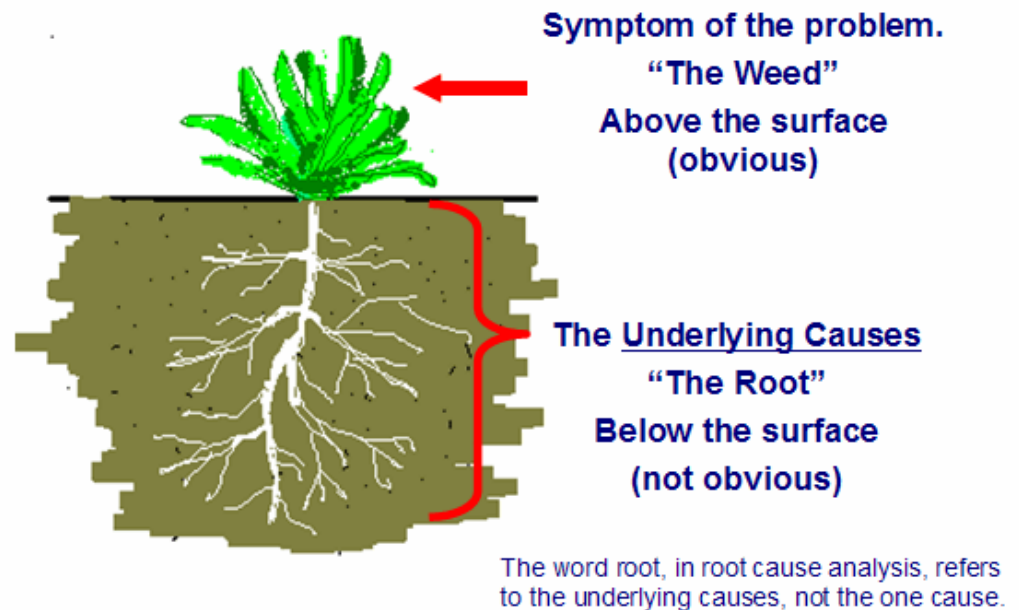
Performance Improvement Projects

- NHs may have a number of PIPs
  - Dependent on issues that are identified
  - NHs will need to prioritize
- PDSA process will be emphasized
- PI is a team activity

Systematic Analysis & Action

Examining the systems & designing solutions that address Systems NOT People will be essential

Root Cause Analysis Basics

Symptom of the problem.
"The Weed"
Above the surface
(obvious)

The Underlying Causes
"The Root"
Below the surface
(not obvious)

The word root, in root cause analysis, refers to the underlying causes, not the one cause.

Improving Dementia Care

- Focus on Behavior Management
- Increase use of non-pharmacological response
- Reduce inappropriate use of antipsychotics
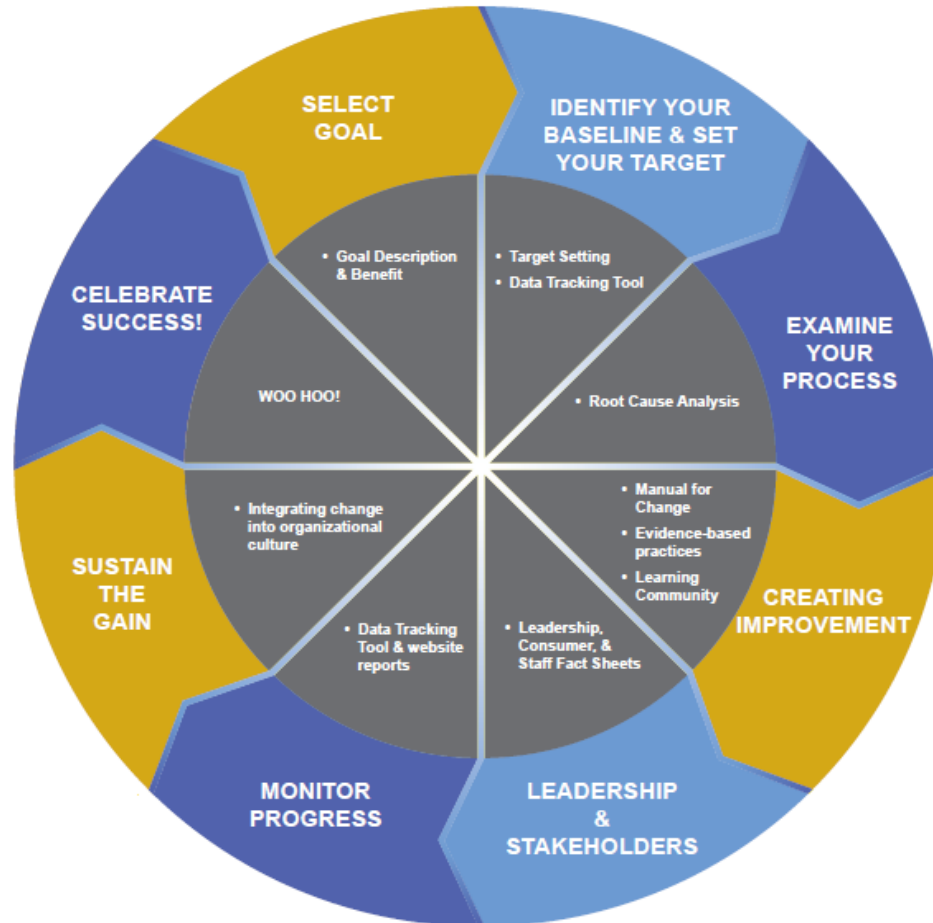 - Gradual Dose Reduction (GSR)

Factors Relevant to Disruptive Behaviors

- What was the patient doing when the behavior occurred?

- What was happening just before the behavior occurred?

- What made the patient's behavior better or worse?

- Was there a change in the environment just before the behavior occurred?

- Who was with or near the individual at the time of the incident?

- What was the impact of the behavior on other people?

- Did a specific circumstance cause recurrence of the behavior?

- Has the patient experienced any recent physical illness/changes?

- Is there a past history of this type of behavior?

Focus on the Process

- Use the Circle of Success Framework
  - Select a goal
  - Identify baseline and set a target
  - Examine your process (Root Cause Analysis)
  - Create an improvement & conduct PDSA cycle
  - Ensure leadership & stakeholders are involved
  - Monitor progress
  - Sustain the gain
  - Celebrate success

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THE CAMPAIGN
Circle of Success

SELECT GOAL
- Goal Description & Benefit

IDENTIFY YOUR BASELINE & SET YOUR TARGET
- Target Setting
- Data Tracking Tool

CELEBRATE SUCCESS!
WOO HOO!

EXAMINE YOUR PROCESS
- Root Cause Analysis

CREATING IMPROVEMENT
- Manual for Change
- Evidence-based practices
- Learning Community

SUSTAIN THE GAIN
- Integrating change into organizational culture

MONITOR PROGRESS
- Data Tracking Tool & website reports

LEADERSHIP & STAKEHOLDERS
- Leadership, Consumer, & Staff Fact Sheets

SMART OBJECTIVES

- Specific – Who, what, why, when, how?
- Measureable - Add a quantitative component to your objective
- Achievable – in line with available resources
- Realistic – based on other domains
- Time specific – setting deadlines

Audits

- Audits are a way to obtain data
- Data must be collected regularly
- Data should be tracked (weekly, monthly, etc.)
- Trend line should indicate improvement
- If no improvement, need to re-examine causes

Questions