

Improved nursing home care for veterans

Patients who reside in long-term care facilities represent a frail and vulnerable population. All nursing facilities certified to receive Medicare and Medicaid funding must be surveyed by state agencies every 9-15 months. Surveyors examine processes and outcomes of care to establish whether minimum standards of care are met for quality requirements in 23 categories. However there has been no standardized survey process reportable to the VA which contracts for care with local community nursing facilities. Quality improvement processes improve medical care. It has been recognized that the survey process could be enhanced by evaluation of replicable process efficiencies and reduction of variation.

We implemented a strategy for standardization of a structured long term care inspection process. The goal of the process was to strengthen VA contract nursing home program oversight and monitoring by reinforcing the accuracy and consistency of surveys, and promoting a professional and collegial relationship with facilities by utilizing a compliance as opposed to a deterrence approach.

We engaged leadership and individual inspection teams affiliated with 6 VA hospitals within the same administrative region. This combined local identity and expertise with regional efficiency and support. Over a 2 year period participants met monthly by video-telecommunication to maximize interaction and communication and utilized a modified Delphi process to come to consensus on the inspection protocol with planned implementation over a 1 year period to permit alignment of resources.

The protocol included a four-discipline team composed of a social worker, nurse, dietitian, and a safety specialist. It also required on-site reviews, and a pre and post review process. The inspection teams also regularly report as a service line to a Geriatrics and Extended Care Council, which provides guidance and support for ongoing process improvement activities.

Outcomes of the regulatory alignment process included termination of contracts with 10 underperforming facilities and improvement in the CMS Star Rating of remaining contract facilities in the region. Estimated cost of developing each Inspection Team was \$250,000, surveying an average of 15-20 facilities per year, or \$12,400 per facility. This contrasts with an estimated \$10,000-\$15,000 per patient cost of hospitalization due to poor nursing home care.

Key Points - Standardization of a Long Term Care Inspection Process

- Process improvement and transformational change takes time

- Intervention requires organizational investment

- Participants included leadership and field personnel who reached consensus on the inspection protocol

- Inspection protocol included key professionals, on-site reviews, a pre and post review

process and reporting mechanism

Process is sustained by a service line council which provides guidance and support for ongoing process improvement activities

Process improvement and transformational change takes time and requires organizational investment. Organizational structure and standardization of the survey process appears to improve healthcare outcome for long term care patients. While this quality improvement process was implemented in a Veterans Healthcare network, it was intimately involved with community nursing home care processes spanning multiple states. As Health Systems and Accountable Care Organizations develop skilled nursing facility networks for improved population health management, they may also consider including quality measures specific to their populations.

Publication

[A Model of Regulatory Alignment to Enhance the Long-Term Care Survey Process in a Veterans Health Care Network.](#)

Powers JS, Preshong M, Smith P

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