



Understanding Nursing Home Quality Data

It is important to understand and use the quality data that is being reported about your facility. Not only is this information valuable to consumers who are looking to make informed choices, but nursing home managers can use it to spur safety and quality improvement efforts and know where they rank compared to other facilities. This Fast Fact helps leaders understand the importance of nursing home quality data and how it can benefit their facilities.

Sources of California Nursing Home Data Available to the Public

Although there are many Web sites that allow consumers to compare nursing homes, it is important to understand the sources of information and how they are analyzed. The Centers for Medicare & Medicaid Services' (CMS) Nursing Home Compare and the California Healthcare Foundation's California Nursing Home Search (CalNHS) are both reliable places to gather information on your facility. They report data that is updated quarterly and use measures and techniques that have been validated by scientific studies.

- Nursing Home Compare: In 2002, CMS launched the Nursing Home Compare Web site to let consumers search for information on nursing homes. It compares data taken from the minimum data set (MDS) to create 15 quality measures. The site is designed to be used to compare the quality of facilities with each other (as well as the state average). CMS hopes consumers will use the site to make an informed placement decision regarding which nursing home within their community is delivering the best care. Nursing homes are not rated by CMS.
- California Nursing Home Search (CalNHS): Launched in 2002, CalNHS uses CMS data and also includes information on facility characteristics, resident characteristics, complaints, deficiencies and citations, and financial indicators. These other data points come from various state and federal government agencies. CalNHS uses a star-rating system that denotes whether facilities are "better than average," "average," or "worse than average" compared to other California facilities.

The benefits of having this information available publicly are that it helps nursing homes identify areas for improvement in care and holds them accountable for their performance. As consumers, hospitals, and physicians discover these valuable Web sites, it can stimulate competition in improvement between facilities, thereby increasing quality overall.

Understanding and Using Quality Measures

- Educate Staff Regarding the Importance of Data
 Collection and MDS Accuracy. Ensure that the MDS is
 accurately completed. Guided by management, every
 member of the nursing home (including housekeeping and
 maintenance staff) should know and understand the importance of collecting accurate MDS data. Support the MDS
 coordinator. Offer to pay for certification and membership
 to associations such as the American Association of Nurse
 Assessment Coordinators.
- Use Quality Data to Begin Quality and Safety Improvement Initiatives. Research has found that using quality indicators is an effective way to start quality improvement initiatives and evaluate the impact of those efforts. If a facility has a high number of residents with pressure ulcers, for example, begin a quality improvement initiative to reduce that number and measure frequently to determine if the interventions are effective. Use small-scale, rapid tests of change to find and test new ideas for quality improvement such as the PDSA (Plan, Do, Study, Act) cycle.



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- Post Quality Data and Reports in the Employee Breakroom. Publicly display your facility's quality results or provide a graphical dashboard to call staff's attention to key indicators of performance. This is useful to motivate staff to achieve better results. Provide access to Web sites where staff can look up performance data.
- Share Quality Information with Families and Residents. Provide families, caregivers, and residents with a handout that describes your facility's activities, including survey results and plans of correction. Use this opportunity to explain what the organization is doing to correct actions, to educate staff, and describe to prospective customers what quality improvement initiatives have been implemented.
- Focus on Organizational, Not Just Clinical Quality.

 Quality measures do not capture items such as staff turnover or resident satisfaction. Educate staff, residents, and their families that these are also key performance measures.
- Use Your State's Quality Improvement Organization. CMS has contracted with quality improvement organizations (QIOs) in every state to help facilities develop quality improvement programs. See the Web links below for the link to Lumetra, the state of California's QIO.

References

Crecelius C. Wilson KM. "Making (up) the grade; What you need to know about nursing home report cards." *Caring for the ages*. Aug 2002; 3(8)

Goldfarb NI, Weston C. "The quality quandary: the need for quality measurement and improvement systems, and overview of key performance measures and the challenges in managing these measures." *Caring for the ages.* Sep 2004; 5(9); 40-46

O'Meara J, Collier E, Harrington C. "Guide to understanding nursing home data on CalNHS.org." Jan 2005. University of California San Francisco.

Simon S, LaBelle S, Littlehale S. "Measuring quality with QMs." *Provider.* Feb 2003;29(2):37-40, 43.

Vickery K. "Data pave the way to quality." *Provider*. Oct 2003;29(10):39-40, 43-34, 47.

Web links

Nursing Home Compare (CMS) www.medicare.gov/NHCompare

California Healthcare Foundation's California Nursing Home Search (CalNHS) www.calnhs.org

Lumetra Nursing Home Quality Connections www.lumetra.com/nursinghomes

American Association of Nurse Assessment Coordinators www.aanac.org

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