



Center for Clinical Standards and Quality/Survey & Certification Group

Ref: S&C: 15-31-NH

DATE: March 27, 2015

TO: State Survey Agency Directors

FROM: Director
Survey and Certification Group

SUBJECT: 2014 Final Report & 2015 Expansion Project – Centers for Medicare & Medicaid Services (CMS) Focused Dementia Care Survey Pilot

Memorandum Summary

Final Report: Attached is a final report that outlines the basis for the Focused Dementia Care Survey Pilot, the process utilized, conclusions gathered based upon post-pilot data analysis, as well as next steps for the future.

Expansion of Focused Dementia Care Survey Efforts: The CMS plans to expand upon the work of the focused survey pilot and has invited States to conduct such surveys in FY2015 on a voluntary basis. The expansion project will involve a more intensive, targeted effort to improve surveyor effectiveness in citing poor dementia care and the overutilization of antipsychotic medications, and broaden the opportunities for quality improvement among providers.

Deficiency Implications: Deficient practices noted during the surveys will result in relevant citations. In the event that additional care concerns are identified during on-site reviews, those concerns will be investigated during the survey or will be referred to the SA as a complaint for further review.

Background

In 2012, CMS launched the *National Partnership to Improve Dementia Care*. One important aspect of the initiative to improve dementia care is to improve and expand the use of non-pharmacological approaches to care and reduce antipsychotic medication use in long-stay nursing home residents. The first year goal was to reduce such medication use by 15 percent nationally. By late CY 2014 nursing homes in the U.S. had achieved a 19.4 percent reduction in antipsychotic drug use. Nursing homes in certain States and regions had achieved greater reductions. However, much more remains to be done to address issues related to caring for residents with dementia, such as management of symptoms (e.g., pain), decision-making, caregiver stress, and other factors important to providing competent and comprehensive care.

The CMS, and national organizations that are actively participating in the *Partnership*, recently announced an updated goal to achieve a 30 percent reduction in the use of antipsychotic medications nationally, no later than the end of CY2016.

On February 13, 2015 CMS also added two measures of antipsychotic use (one for long stay residents, one for short-stay) to the algorithm that is used to calculate each nursing home's quality measure score on the CMS *Five Star Quality Rating System* that is publicly available on the CMS *Nursing Home Compare* website. Previously the results of those measures were reported on the CMS website, but not used in calculating a facility's quality measure or overall quality ratings.

In addition, in CY2015 is expanding the use of a targeted Dementia Care survey in a few States (described in more detail below). CMS piloted a focused Dementia Care survey in 2014 in order to more thoroughly examine the process for prescribing antipsychotic medication and assess compliance with other federal requirements related to dementia care practices in nursing homes. The focused survey was piloted to gain new insights about surveyor knowledge, skills and attitudes and ways that the current survey process may be streamlined to more efficiently and accurately identify and cite deficient practice as well as to recognize successful dementia care programs.

The CMS invited States to participate in the pilot to test new surveyor worksheets and processes, focused on dementia care in nursing homes. Of those that volunteered, five States (California, Minnesota, New York, Illinois, and Louisiana) participated in the pilot. Between the months of July and September, each State completed four focused surveys and an observation visit. A subject matter expert accompanied each survey team on their first survey/visit.

Final Report

The attached report describes in more detail the results of the focused survey pilots conducted in 2014, the process utilized, and the conclusions gathered based upon post-pilot data analysis. Upon completion of the initial focused survey pilot, CMS revised the survey materials and tools based upon surveyor feedback and data analysis.

Expansion Project

The CMS plans to expand upon the work of the focused survey pilot and has invited States to conduct such surveys in FY2015 on a voluntary basis using the revised survey tools. The expansion project will involve a more intensive, targeted effort to improve surveyor effectiveness in citing poor dementia care and the overutilization of antipsychotic medications than was previously done in FY2014. Generally, stand-alone focused surveys require a team of 3 to 4 staff members for a period of 1.5 to 2 days. There is also the option of incorporating this focused review into an extended or complaint survey process. For States that volunteer to conduct these surveys, CMS will provide criteria for determining specific facilities to be surveyed and will work with States to identify dementia care experts to accompany surveyors for the first survey, whenever possible.

The CMS has initiated a comprehensive survey effort in Texas, with additional States expected. Texas will be conducting focused reviews in selected areas of the State. A CMS subject matter expert will accompany each survey team on its initial survey.

In addition, CMS will work with the Texas State Agency (SA) and other stakeholders to discuss key components of the *National Partnership to Improve Dementia Care* to provide additional discussion training and quality improvement opportunities for nursing home providers.

Training

As with the previous focused survey effort, CMS will provide training for those States participating in the focused reviews via webinar. This training will be mandatory for those SA staff conducting reviews, as well as one manager or trainer within the SA.

The CMS will also be available for ongoing phone and email support while SAs are conducting the reviews.

Deficiency Implications

Deficient practices noted during the surveys will result in relevant citations. In the event that additional care concerns are identified during on-site reviews, those concerns will be investigated during the survey or will be referred to the SA as a complaint for further review.

Next Steps

A conference call will be held in early summer for interested SAs to further discuss this focused survey expansion effort. States planning to participate in this call are expected to send notification via email to dnh_behavioralhealth@cms.hhs.gov of their interest.

For questions on this memorandum related to the dementia care survey, please contact Michele Laughman via email at dnh_behavioralhealth@cms.hhs.gov.

Effective Date: Immediately. The information contained in this memorandum should be communicated with all survey and certification staff (including the State RAI Coordinator), their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/

Thomas E. Hamilton

Attachment: Final Report

cc: Survey and Certification Regional Office Management