Reception Room

- Good morning! The meeting will start shortly.
- Participants are muted on entry.
- Check the chat box: Information about the training, including information about how to access captions and view the slides, is available there.



- To view captions for this event: You can view captions in Teams by clicking the More (...) button in the Teams window, then "Language and Speech," and choose "Turn on live captions."
- If you have any technical issues, please visit the Microsoft support page for Teams or email Health.HRDCommunications@state.mn.us.



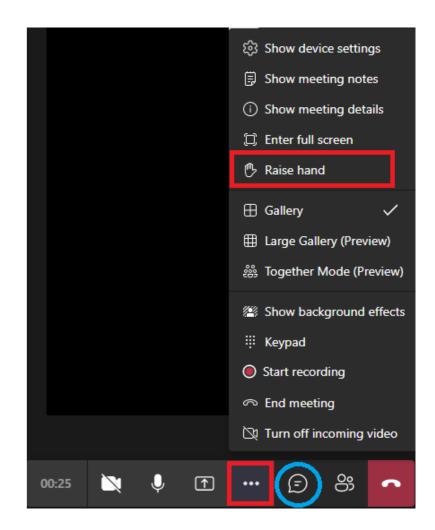
Nursing Home Regulatory Updates October 2024

Tennessen Warning

- The Minnesota Department of Health is hosting this joint regulatory training for providers of long-term care and Health Regulation Division staff.
- Your comments, questions, and image, which may be private data, may be visible during this event. You are not required to provide this data, and there are no consequences for declining to do so.
- The virtual presentation may be accessible to anyone who has a business or legal right to access it. By participating, you are authorizing the data collected during this presentation to be maintained by MDH.
- To opt out of the presentation, please exit now.

How to Ask a Question

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 - 1. Raise your hand (outlined in red).
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Welcome & Updates

Citations | Complaint Quarterly Review

Working with the QIO | Stratis Health

Welcome

Maria King
Health Regulation
Division Director

Sarah Grebenc Executive Regional Operations Manager



Provider Feedback Questionnaire

- Thank you for continuing to complete HRD's Feedback Questionnaire!
 - Provided during recertification and complaint surveys on the Federal and State side.
 - Goal is to expand to other federal provider types.
- MDH uses the information to make improvements to our processes.

Feedback Questionnaire About Your Experience

The Minnesota Department of Health (MDH) and the Health Regulation Division (HRD) values your feedback about your experience during the survey/evaluation or investigative process. This questionnaire supports MDH'S culture of learning and collaborative safety by providing opportunities for facilities and providers to give MDH their perspectives about MDH's procedures, how MDH representatives communicated and whether the facilities and providers felt heard.

Please fill out this anonymous questionnaire and it will go to the Planning and Partnership Office in the Health Regulation Division. Your feedback is important to MDH, and your perspective will help identify ways for us to improve our procedures and communication. In addition, the summarized anonymous data from all feedback questionnaires received will be made available on the HRD Website. If you want to discuss any of your responses further, please contact

<u>susan.winkelmann@state.mn.us</u> in the Planning and Partnership Office or call 651-201-5952.

Note: If you have specific concerns about an individual MDH Employee, we invite you to bring those concerns



Internet Quality Improvement & Evaluation System

Beginning in May 2021, State Survey Agencies (SAs) and CMS locations began a phased transition to the Internet Quality Improvement and Evaluation System (iQIES), which is an internet-based system that includes survey and certification functions.

Voting Document

Election and Voting Guidance for Long Term Care Facilities.

Collaboration Between MDH, Office of Ombudsman for Long-Term Care, Long Term Care Imperative, and Office of the Secretary of State.

- Nursing Homes MDH
 (https://www.health.state.mn.us/facilities/regulation/nursinghomes)
- <u>Election and Voting Guidance for Long-Term Care Facilities</u>
 (https://www.health.state.mn.us/facilities/regulation/nursinghomes/voting guide.html)



Citations | Complaints

Sarah Grebenc | Federal Executive Operations Manager

Top Tags Cited in 4th Quarter FFY24

- > F880 Infection Control
- > F684 Quality of Care
- > F689 Accidents/Supervision
- > F812 Food Procurement
- F758 Free from Unnecessary Medications

- ➤ F609 Reporting Abuse
- > F677 ADL Care for Dependent Residents
- > F686 Treatment of Pressure Ulcers
- F883 Influenza and Pneumococcal Immunizations
- > F761 Label/Store Drugs and Biologicals

Complaints 4th Quarter FFY24

- 2,302 Total Complaints and Facility
 Report Incidents (FRI's) received for all provider types.
- Nursing homes received 744 Complaints and 974 FRI's
- 319 Triaged as an Immediate Jeopardy
 (IJ) complaints for all provider types.
- 252 Were triaged as IJ for Nursing Homes
- 23 IJ's were called in nursing homes
 - 1 called on recertification surveys
 - 22 called on complaint investigations



IJs cited in 4th Quarter FFY24

F689 Accidents (L)

F578 Formulate Advance Directives

F678 CPR and Following Advanced

Directive

F660 Discharge Planning

F684 Quality of Care

F695 Respiratory/Trach Care

F689 Free from

Accidents/Supervision

F806 Resident Allergies, Preferences, Substitutions

F600 Abuse



Working with the QIO





Nursing Home Regulatory Statewide Webinar

Oct 15, 2024
Tabitha Meyer, MHA, LNHA
Lisa Olson, RN

Overview: Quality Improvement Organizations

QIO Program initiatives include:

- Beneficiary and Family Centered Care-Quality Improvement Organizations (BFCC-QIOs)
- Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs)
- Hospital Quality Improvement Contractors (HQICs)
- The American Indian Alaska Native Healthcare Quality Initiative (AIANHQI)
- The Opioid Prescriber Safety and Support initiative (OPSS)



Superior Health Quality Alliance

Three Quality Improvement Organizations

- IMPROve Health MI
- Stratis Health MN
- MetaStar WI

Four Hospital Associations

- Illinois Health and Hospital Association
- Michigan Health and Hospital Association
- Minnesota Hospital Association
- Wisconsin Hospital Association

End Stage Renal Disease Network

Midwest Kidney Network





SUPERIOR HEALTH
Quality Alliance

We Make Lives Better



Lead collaboration and innovation in health care quality and safety and serve as a trusted expert in facilitating improvement for people and communities.

Core expertise is designing and implementing improvement initiatives across the continuum of care.

Organizational priorities include advancing rural health, health equity and addressing the opioid crisis.





Stratis Health Strategies

Co-design system changes that connect health care and community organizations to improve health. Advance a
safe and
compassionate
health care
environment for
those receiving
and those
providing care.

Accelerate
evidenceinformed and
culturally
responsive care
and services.



Age 65 and older.



In rural places.



Experiencing substance use disorder (SUD).



Experiencing health disparities.



Support Stratis Health can provide

Consulting Services through Stratis Health

- Strengthening Organizational Capacity
- Redesigning Care Delivery
- Building Bridges Between Health Care and Community

<u>Current Iniatives</u> examples include:

- Social drivers of health (SDOH)/Health-related social needs (HRSN)
- PATH
- Rural health
- Medications for opioid use disorder (MOUD)





Offered Supports

Nursing Home Focus Areas:

- Chronic Disease Management and Prevention
- Patient Safety
- Care Coordination
- Infection prevention and control
- Behavioral Health and Substance Use Disorder



Structured Collaboratives

- Highest level of technical assistance.
- Cohorts of structured learning through a teleECHO or virtual training that allows for sharing and networking.
- Will likely require several sessions (weekly, biweekly, monthly) to view progress over time.

Structured Collaboratives Designed for large scale improvement

Small collaborative groups to enhance learning

Intensive approach to assisting and supporting implementation of proven interventions

Real-time collaborative sessions focused on sharing, tracking and monitoring improvements





Affinity Groups

- Builds a virtual community by connecting individuals, health care organizations and community-based organizations across our region
- Participants work together to achieve common goals and improve health.
- All-teach-all-learn environment where best practices are identified and spread.
- Activities within the group are determined based on input from the participants.
- Moderate level of technical assistance.

Affinity
Groups
Designed for
online learning

Connects participants virtually across the region for a diverse and collaborative learning experience

Virtual communities organized by healthcare setting and topics of interest



Independent Implementation

- Lowest level of technical assistance.
- Great for self-guided learners.
- Ability to use these resources at your own pace.
- Could be:
 - Checklists
 - Educational resources
 - One-time webinars
 - Self-guided learning modules

Independent Implementation

Designed for greater autonomy in (QI) quality improvement

Unlimited access to Superior Health resources (videos, elearning, webinars)

Flexibility to adopt best practices at your own pace



Chronic Disease Management Initiatives

Cardiovascular disease including hypertension

Diabetes

Chronic kidney disease (CKD)

Cardiac rehabilitation participation

Tobacco cessation activities



Chronic Disease Management Activities and Outcomes

Self-measured Blood Pressure (SMBP) Program

21.3% û

 Controlled blood pressure Diabetes Affinity
Group

57.9% û

Controlled blood sugar

Chronic Kidney
Disease
Collaboratives

24% 分

Screening & diagnosis



Patient Safety & Care Coordination Initiatives

Prevent adverse drug events (ADEs)

Improve Emergency Preparedness Reduce hospitalization & re-hospitalization



Patient Safety & Care Coordination Activities & Outcomes

Promote medication safety best practices

Short Stay: 5.3% ↓ ADEs

Long Stay: 3.0% ↓ ADEs

Emergency Preparedness

Table-Top Exercises

216 NH attendees

9-Part EPP Learning Series

- 191 Registered participants
- 1,366 video views

EPP Reviews

• 852 plans reviewed

Performance Improvement Plans

31.5% û IPC compliance

20.4%

↓ of hospitalizations due to CDI in Long Stay residents



Infection Prevention & Control Initiatives

Improve Infection Control Practices

Increase Immunization Rates Decrease harmful infections



Infection Prevention & Control Activities & Outcomes

Front Line Forces
Modules

96% Users satisfied

7,486 completed quizzes

25+ Topics

Immunization clinics and education

Residents: 77.1% û

Staff: 90.7% ↑

Nursing Home Leadership Roundtables

5,668+ video views

600+ registered participants

Average 45
 participants per event





Behavioral Health & Substance Use Disorder Initiatives

Increase knowledge about stigma

Decrease opioid related ADEs



Behavioral Health and Substance Use Disorder Activities & Outcomes

Shine a Light on Stigma

188 total pledges

- 20 organizations
- 168 individuals
- 19 states
- 356 podcast plays

Ensuring MOUD
Through the Care
Continuum

775+ attendees

70+ evaluation surveys

Alternatives to Opioids (ALTO)

4-part webinar

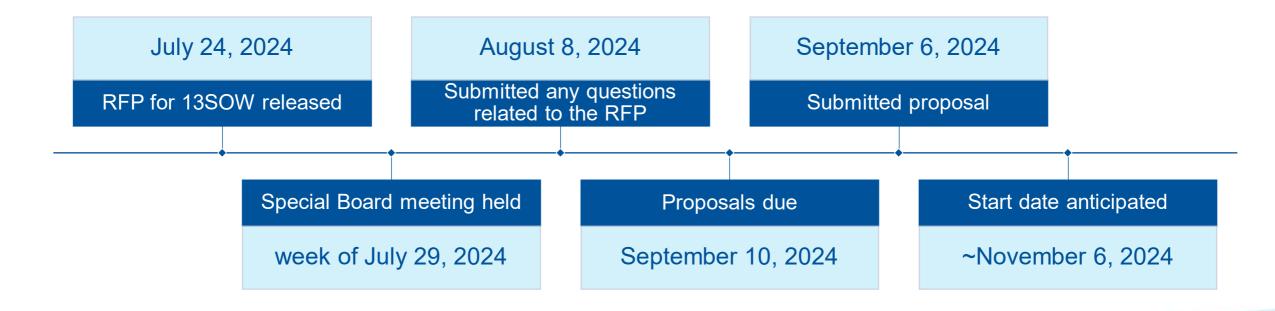
76+ registrants



CMS QIN-QIO 13th Statement of Work

Superior Health submitted a bid for the new CMS Region 4:

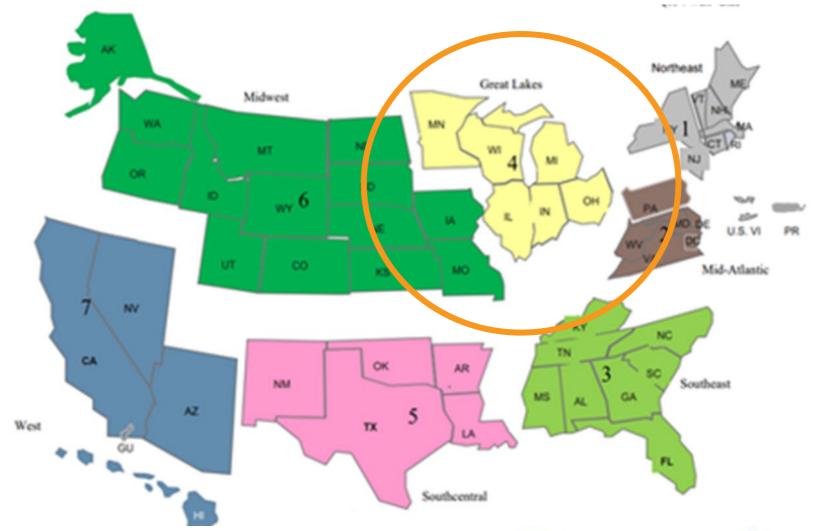
Michigan, Minnesota, Wisconsin, Illinois, Indiana, Ohio







CMS Pre-Defined Regions for 13th Scope of Work





Resources





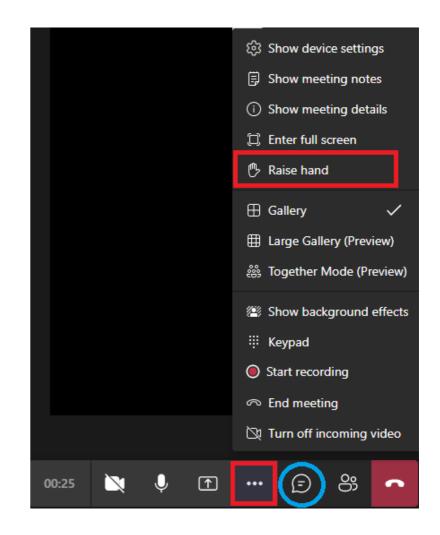
Superior Health Resources

- Resource Library Superior Health Quality Alliance (superiorhealthqa.org)
- Home Health Within-Stay Potentially Preventable
 Hospitalization (PPH) (pdf)
 (https://www.superiorhealthqa.org/wp content/uploads/Home Health PPH 508-1.pdf)
- Vaccination Clinic Toolkit for Pharmacy and Nursing Home Partnerships (pdf) (https://www.superiorhealthqa.org/wpcontent/uploads/VaccinationClinicToolkit August24.pdf)



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Thank You!!!

Sarah Grebenc | Sarah.Grebenc@state.mn.us