



INTERDISCIPLINARY PRACTICES DESIGNED FOR OPTIMAL PATIENT-CENTERED PERFORMANCE

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This past January, CMS released their updated Long-Term Care Survey Process Materials. In addition to a focus on infection control policies and procedures, CMS surveyors will now investigate any concerns related to residents who have experienced a significant decline in their condition during the Public Health Emergency. The COVID-19 impact on the elderly population has been significant. There is an increase in isolation, decreased socialization, and limited interaction with caregivers. Understanding the surveyor’s guidance is the first step to a successful survey. Proactive measures, as well as accuracy in baseline data for all residents, will improve the survey process, and enhance the quality of care provided.

Preparation, planning, and instilling best practices are the keys to success for surveys. The LTC team(s) should strive to be “survey ready” 365-days a year. A thorough understanding of the Quality Measures (QM) standards and State Survey Guidance, allows providers the confidence in knowing that systems and procedures have been implemented keeping their facility survey-ready at all times. Sustaining quality of care is best when practiced on a daily basis, and thereby becomes ingrained as part of the culture. Collaboration between nursing and rehab for QM’s and survey standards provide for effective processes among interdisciplinary teams, an additional set of eyes on the resident and a more integrated and comprehensive care plan. Proactive patient-centered programs will ensure the quality of life for residents in long-term care.

QUALITY MEASURES AND STRATEGIES

Percent of long-stay residents who lose to much weight is a Quality Measure where team collaboration and comprehensive care planning provide a holistic view of the resident.

This QM description focuses on a weight loss of 5% or more in the last month or 10% or more in the last six months, for residents who were not on a physician-prescribed weight loss regimen.

F TAGS	DESCRIPTION
F692	Assisted nutrition & hydration
F676	Ensuring ADLs do not diminish
F677	Ensuring care is provided when the resident is unable to perform ADLs

Table 1: F Tags Associated with Percent of Long-Stay Residents Who Lose Too Much Weight

Surveyors will expect to see ample documentation, including the reasons for any unplanned weight loss, and a comprehensive assessment of the resident including the following:

- The degree to which the resident can self-feed, and the amount of supervision required (especially swallowing precautions) during meals/snacks
- The use of adaptive equipment, if required
- Portion size/caloric value, restrictions, and appropriate textures/consistencies
- Positioning during meals
- Accurate weight-taking procedures
- Training and competencies of aide staff

Percent of Long-Stay Residents Whose Need for Help with Activities of Daily Living Has Increased: Reports on residents whose need for help with late-loss ADLs has increased - including the self-performance of bed mobility, transfer, eating, and toileting. These components look at the residents’ self-performance of the late loss ADLs.

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Percent of Long-Stay Residents Whose Ability to Move Independently Worsened: Reports on residents who have experienced a decline in locomotion on the unit. Obviously, a change (decline) in self-care or ADLs can be detrimental to a residents’ quality of life.

Team collaboration is necessary to provide expertise from each discipline and to improve or maintain the residents’ ability, quality of life, and minimize risk to the resident and facility.

F TAGS	DESCRIPTION
F675	Quality of Life
F676	Ensuring ADLs do not diminish
F677	Ensuring care is provided when the resident is unable to perform ADLs

Table 2: F Tags Associated to Percent of Long-Stay Residents Whose Need for Help with Activities of Daily Living Has Increased and Percent of Long-Stay Residents Whose Ability to Move Independently Worsened

INTERDISCIPLINARY PATIENT ROUNDING

A proactive interdisciplinary rounding program is a comprehensive practice in which SLP, OT, PT and nursing teams come together providing a multidimensional patient assessment that includes a collective approach in reviewing medical records and care plans.

Dining Rounds: This model allows teams to observe residents during meals, in order to provide the assurance that a residents’ personalized care plan are performed as designed and to identify any issues that may require corrective action. Rounding includes:

- Reconciling the dietary card with the food on the plate (texture, portion, diet, swallow precautions) and adaptive equipment on the tray
- Observing the dining environment (lighting, distractions, etc.) and equipment

Resident Rounds Program: Is an interdisciplinary approach to conduct a thorough audit of the residents’ abilities through:

- Resident and staff interviews
- Medical record and care plan review
- Observe the resident in their living environment while performing the mobility and self-care tasks

The implementation of a quarterly resident rounds program is likely to lead to a positive survey. Combining the unique skills with therapy and nursing disciplines ensures a holistic, patient-centered assessment of each resident. When comprehensive rounding programs are in place, teams are able to review additional areas related to the QM and survey procedures including:

- Environmental assessments
- Pain management
- Skin integrity and wound care protocols
- Reducing restraints/positioning programs
- Communication and allowing residents to address their needs
- Infection control procedures

When the design of a proactive patient-centered model is applied to skilled nursing facilities, it provides the collaboration with a team of experts to monitor and observe any subtle changes with residents. Interdisciplinary teams are able to take immediate action on any observations, or findings that may affect a resident. When early corrective measures are applied, residents may experience minimal losses with mobility or ADL’s. The implementation of this model develops and establishes an effective, individualized care plan to maintain the quality of life for long-term care residents.

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