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QAPI and Compliance: Addressing the government's nursing home care concerns

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On September 6, 2018, Ruth Ann Dorrill, the Regional Inspector General of the Department of Health and Human Services, Office of Inspector General (OIG), testified before the U.S. House of Representatives regarding federal efforts to ensure quality of care and resident safety in nursing homes. Her testimony focused on: (1) harm to residents, (2) nursing home emergency preparedness, and (3) state agency enforcement.[1]

This testimony highlighted the February 2014 OIG report titled "Adverse Events in Skilled Nursing Facilities: National Incidence Among Medicare Beneficiaries," in which the "OIG found that one-third of residents in SNFs experienced harm from the care provided in nursing homes and more than half of the harm (adverse events) were preventable had the facilities provided better care."[2]

Ms. Dorrill noted that:

> What is needed is a shift in thinking about the care provided in nursing homes. Our work identifying adverse events in nursing homes and other settings showed that nursing home residents often had care needs similar to patients in hospitals, with residents sometimes seriously ill and impaired. The hospital community has focused keenly on patient safety and, while still experiencing high harm rates in some categories, has made substantial changes in the provision of patient care and safety systems. Sustained improvements in nursing homes will require a cultural shift that recognizes clinical harm and elevates reduction of harm as a priority for nursing home care.

It should be noted that nursing home providers, for the most part, subscribe to the belief that reduction of harm is a priority. However, there are significant reimbursement factors that distinguish hospitals from nursing homes and affect their ability to prevent and address adverse events successfully. Of course, money is no excuse for systemic failure to deliver compassionate and compliant care to vulnerable residents. The OIG recommended that Quality Assurance and Performance Improvement (QAPI) programs be the focal point for guidance by the Centers for Medicare & Medicaid Services (CMS) in order to address this issue.