Integrating Compliance, Risk And Quality Assurance In A Long Term Care Facility

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Objectives for Today

- Explore the tensions between QAPI and Compliance
- Discuss potential pitfalls of combining QAPI and Compliance Meetings
- Discuss what a Compliance Officer really needs to know
Tensions of Today

- Tension between Compliance and Clinical?
- Tension between Compliance and Operations?
- Tension between Compliance and Risk?
- Tension between Compliance and the Centers?
- Do the Centers trust the Compliance Department?

Confusion Today

- What is the difference between QAPI and Compliance?
- What does the Compliance Committee do?
- Who follows up on areas of concern?
Compliance vs. QAPI

- Compliance
  - High level oversight and monitoring
  - Ensures systems are effective via auditing and analysis
  - Monitors system implementation for successful reduction in risk
  - Directs further investigation and root cause analyses
  - Reviews QAPI outcomes and continued functioning

What is a Compliance?

- Compliance
  - Focused on prevention, detection and response to non-compliant practices throughout organization
  - Reviews system breakdown which could lead to negative outcomes
  - Data analysis
  - Monitors outcomes of QAPI
Compliance vs. QAPI

- **QAPI**
  - More granular analysis of quality outcome metrics
  - Implements Performance Improvement Plans as corrective action
  - Identification of high risk negative outcomes should be reported to Compliance
  - Not responsible for compliance

QAPI vs. Compliance?

- Both are very important (and required)
- QAPI is focused on implementing “fixes”/action plans at the Center level.
- Compliance looks at systemic breakdowns
- Compliance conducts investigations
**Scenario**

During a routine audit of ADL documentation the Compliance Director identifies a center has documented on several residents after discharge.

The Compliance Director contacts the Administrator and requests the QAPI committee initiate a root cause analysis.

QAPI Committee reviews and directs the DON to complete the analysis.

DON reports back to QAPI Committee with findings

QAPI Committee reports back to Compliance Department

**Scenario Results**

Root Cause analysis identifies recent staffing turnover issue and a failure to properly train new nursing assistants on the importance of accurate documentation.
Scenario Results – Compliance Department Next Steps

Compliance Department:
- Determines extent of billing issue and remedies specific resident occurrences
- Conducts an audit to determine the scope of the documentation issue across organization
- Reviews and ensures training materials for new hire orientation are updated
- Implements a new hire orientation audit
- Continues to audit ADL documentation

Scenario Results – QAPI Committee Next Steps

QAPI Committee Next Steps:
- Determines scope of the issue
  - PIP Needed?
  - Action Plan Needed?
- Retrains recently hired nursing assistants
- Conducts all staff training
  - Related to the importance of documentation
  - Impact of falsification of records
Compliance v. QAPI Synopsis

- Both Compliance and QAPI play an important role within post-acute care
- Information must flow between the two functions
- May create duplicity at times but good collaboration between functional leaders will help reduce duplicity

Pitfalls of Combining QAPI and Compliance

- QAPI and compliance serve different purposes
- Privilege of QAPI may be compromised if combined with compliance
- Routine compliance activities and meetings are not privileged
- Combination may impede authority
What Should a Compliance Officer Really Know?

OIG Compliance Officer Expectations

- Compliance Officer shall ensure compliance with:
  - Federal health care program requirements
  - Professionally recognized standards of care
- Compliance Officer shall:
  - Ensure organization adopts procedures and systems intended to identify and correct quality of care issues
OIG Compliance Committee Expectations

- The Compliance Committee shall:
  - Monitor the adequacy of care being provided
    - Reported by Senior Management
    - Reported by Senior Representatives of Nursing Centers
  - Ensure internal quality audits and reviews are completed
  - Monitor Quality of Care Metrics (via a Quality of Care Dashboard)

More Tension?

- How does Compliance:
  - Ensure standards of care are met?
  - Ensure systems of identification and correction of quality of care are successful?
OIG Compliance Committee Expectations

- Create a Quality of Care Dashboard:
  - Identify and establish the overall quality improvement goals based on assessment of quality of care risk areas
  - Identify and establish the quality indicators for the goals
  - Establish performance metrics for each quality indicator
  - Measure, analyze and track metrics monthly
  - Re-evaluate metrics every six months

- Measure whether the organization:
  - Is reviewing Quality of Care related incidents
  - Is completing root cause analyses
  - Is completing action plans appropriately, timely, implemented and enforced
  - Has the quantity, quality and composition of nursing staff to meet resident care needs
Conclusion

- Delineation of roles of compliance and QAPI essential to foster functionality of both
- Improved communication at all levels benefits organization

Resources And Useful Information
Resources

• Institute for Health Care Improvement
  – IHI uses the Model for Improvement as the framework to
guide improvement work. Plan-Do-Study-Act (PDSA) cycles.
  – http://www.ihi.org/knowledge/Pages/HowtoImprove/default.a
    spx

• “Getting Better All The Time” – Working Together for
  Continuous Improvement: A Guide for Nursing Home
  Staff
  www.cobblehill.org/brochures/Getting_Better.pdf

Resources

• Quality Partners of Rhode Island: quality
  improvement workbook for nursing home teams
  http://www.riqualitypartners.org/2/Site/CustomFiles/Qlty_D
  ocMgr/QIWorkbook.pdf

• Stratis Health: recorded webinars
  http://www.stratishealth.org/events/recorded.html

• Oklahoma Foundation for Medical Quality
  http://www.ofmq.com/nhtoolsandresources
## Resources

- Advancing Excellence in America’s Nursing Homes National Campaign
- Implementing Change in Long-Term Care, by Barbara Bowers:
- The Long Term Care Improvement Guide
- Agency for Healthcare Research and Quality
  [http://www.ahrq.gov/qual/qualix.htm](http://www.ahrq.gov/qual/qualix.htm)

## Resources

- Health Resources and Services Administration provides quality improvement tools and resources
- Quality First
  – American Health Care Association
    [http://www.ahcancal.org/quality_improvement/quality_first_initiative/Pages/default.aspx](http://www.ahcancal.org/quality_improvement/quality_first_initiative/Pages/default.aspx)
- Leading Age
Questions????

Thank You!

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