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

- 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

OIG Compliance Committee Expectations

- 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.aspx](http://www.ihi.org/knowledge/Pages/HowtoImprove/default.aspx)
- "Getting Better All The Time" – Working Together for Continuous Improvement: A Guide for Nursing Home Staff

- Quality Partners of Rhode Island: quality improvement workbook for nursing home teams
- Stratis Health: recorded webinars
  - [http://www.stratishealth.org/events/recorded.html](http://www.stratishealth.org/events/recorded.html)
- Oklahoma Foundation for Medical Quality
  - [http://www.ofmq.com/nhtoolsandresources](http://www.ofmq.com/nhtoolsandresources)
Resources

- Advancing Excellence in America’s Nursing Homes National Campaign
  http://www.nhqualitycampaign.org/star_index.aspx?controls=resByGoal2
- Implementing Change in Long-Term Care, by Barbara Bowers
- The Long Term Care Improvement Guide
  http://www.residentcenteredcare.org/
- Agency for Healthcare Research and Quality
  http://www.ahrq.gov/qual/qualix.htm

Resources

- Health Resources and Services Administration provides quality improvement tools and resources
  http://www.hrsa.gov/quality/toolsresources.html
- Quality First
  – American Health Care Association
    http://www.ahcancal.org/quality_improvement/quality_first_initiative/Pages/default.aspx
- Leading Age
  http://www.leadingage.org/Article.aspx?id=1841

Questions????
Thank You!

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