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National Data Points to Improved Nursing Home Quality

Strides Made Possible Through Culture of Cooperation between Quality Improvement Organizations and Long Term Care Providers

Washington, DC – The Agency for Healthcare Research and Quality’s (AHRQ) release of its second annual State Snapshots based on the *National Healthcare Quality Report* highlights the improved quality in our nation’s nursing homes – improvements made possible by an unprecedented ongoing partnership and cooperation between QIOs and individual nursing homes in every state. The QIOs are state-based organizations that provide hands-on assistance to local health care providers and entities to help them improve the health care system.

Though the AHRQ data illustrate significant improvement in select patient outcomes, it does not reveal how the culture of cooperation between nursing homes and QIOs is accelerating the quality gains in America’s long term care system.

“We are fully committed to improvement efforts that ensure the frail, elderly and disabled have access to the highest quality nursing home care and services,” stated Bruce Yarwood, president and CEO of the American Health Care Association. “This most recent AHRQ data reaffirms that collaborative efforts between nursing homes and QIOs are an effective tool to improve care for our nation’s most vulnerable populations.”

More recent data on nursing home performance from the Centers for Medicare and Medicaid Services (CMS) strongly suggests that when QIOs partner with individual nursing homes, patient outcomes improve. All nursing homes in every state receive basic improvement assistance from their local QIO, but a subset of nursing homes in each state receives more intensive QIO assistance. Based on data collected between the fourth quarter of 2004 and the fourth quarter of 2006, all nursing facilities across the country averaged a 9 percent relative improvement in the incidence of pressure ulcers and a 21 percent relative reduction in the use of physical restraints. But the facilities receiving intensive QIO assistance achieved a laudable 16 percent relative improvement in pressure ulcers and a 32 percent relative improvement in pain management.

Since August 2005, QIOs have expanded their work with nursing homes to include 145 homes identified by state regulators as low performers due to quality deficiencies. These homes also demonstrated performance improvement greater than the national average, achieving 15 percent relative improvement and 37 percent relative improvement on pressure ulcer care and use of physical restraints, respectively.

“We are tremendously proud of the work of the QIOs nationwide, which has enabled thousands of nursing facilities to achieve quality improvements in care that really matters to residents” stated David Schulke, Executive Vice President of the American Health Quality Association (AHQA), a national association representing the QIOs.

“Looking ahead, Medicare should fund an expanded role for QIOs in improving quality outcomes both in typical nursing homes and those that are low performers. Accelerating efforts to strengthen and broaden the system of quality measurement in nursing homes, just as Medicare is doing in hospitals and physician office practices, will also lead to even greater improvement. But until these changes take place, providers and QIOs are committed to working within the current system to continue the nation’s progress on the path to excellence,” continued Schulke.

“We know that the involvement of the QIOs has been invaluable in improving nursing home care,” continued Yarwood. “Some of the nursing homes receiving QIO assistance may also have been designated as ‘Special Focus Facilities’ that receive extra scrutiny from state survey agencies. We’d like to understand how the Special Focus Facilities are selected for greater regulatory scrutiny – to better enable QIOs to improve patient outcomes in these settings.”

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