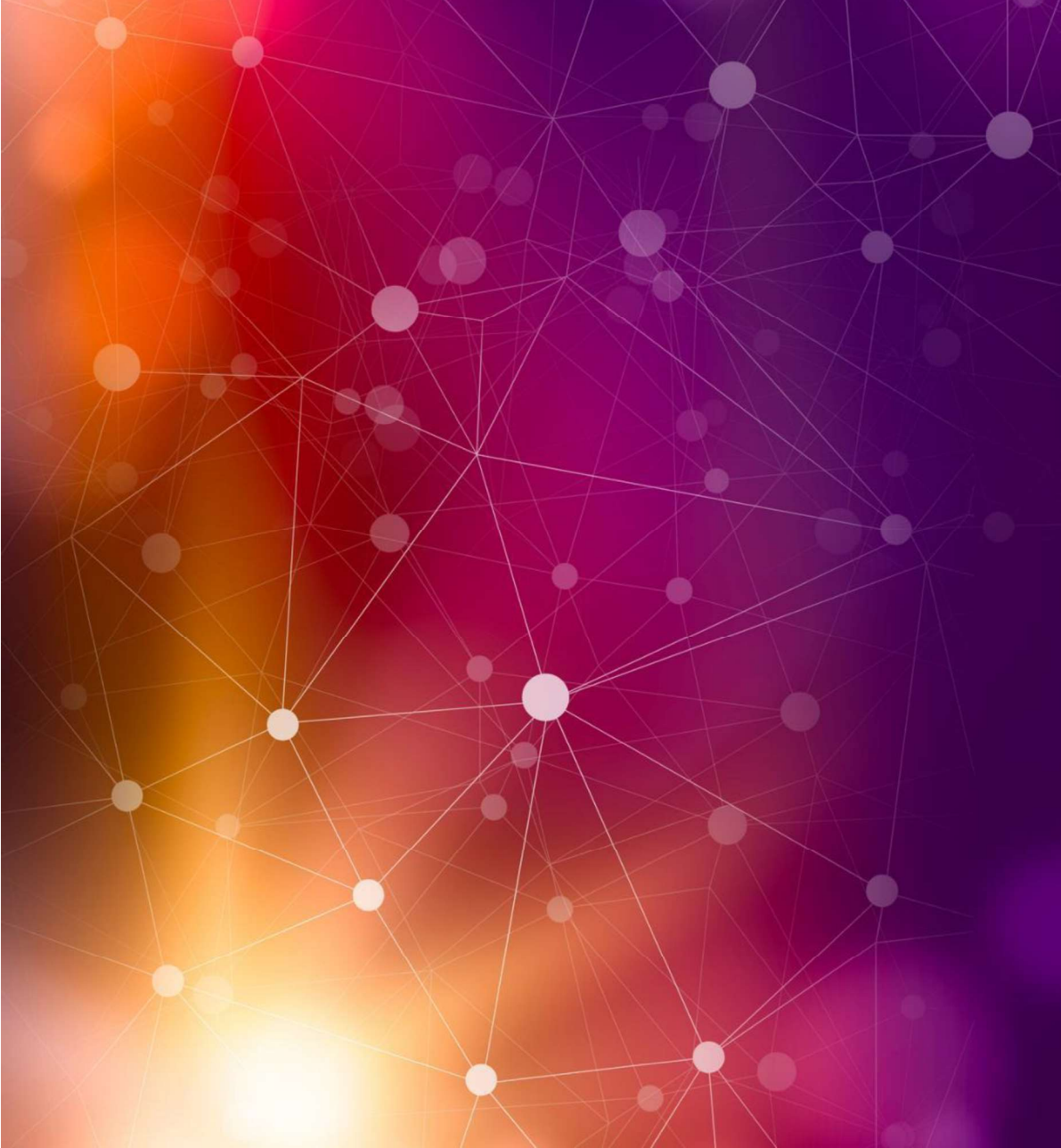




WHAT MATTERS MOST





What Matters

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, advance care planning and goals of care, and across settings of care.

Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.

An initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI) in partnership with the American Hospital Association (AHA)

What Quality Measures does Poor Nutrition Impact?

Nutrition = Quality of Life

Good Nutrition important to.....



Mood



Mobility



Skin Integrity



Cognition



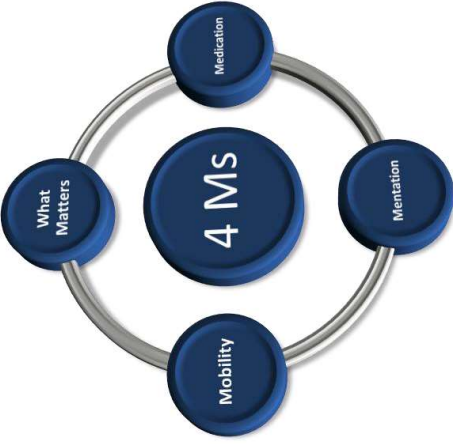
Weight Loss



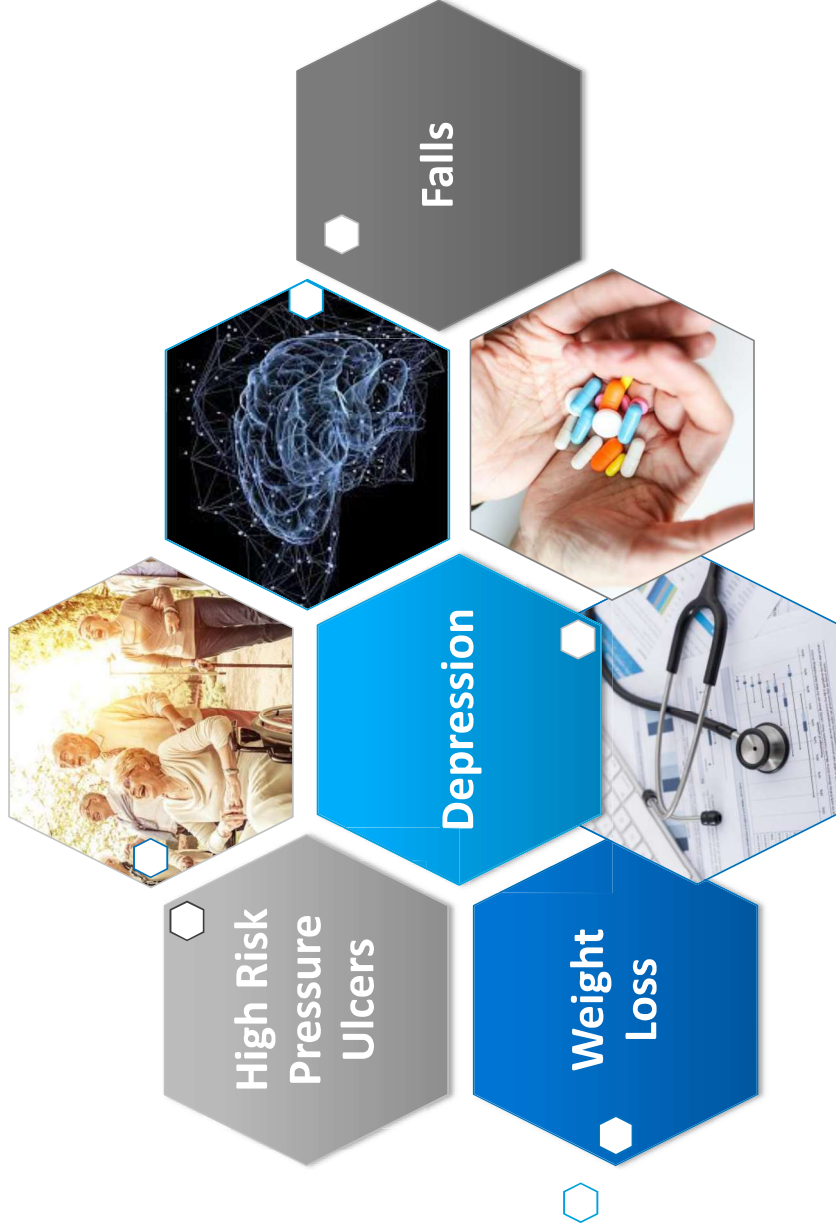
Infections

Quality of Life





Age-Friendly Homes



Facility Level Quality Measure Report



MDS 3.0 Facility Level Quality Measure Report

Facility ID: NH5531

CCN: 375256

Facility Name: **check facility name**

City/State: OKLAHOMA CITY, OK

Report Period: **check the report period**

Comparison Group: 05/01/2019 - 10/31/2019

Report Run Date: 01/03/2020

Data Calculation Date: 12/30/2019

Report Version Number: 3.02

Note: Dashes represent a value that could not be computed

Note: S = short stay, L = long stay

Note: C = complete; data available for all days selected, I = incomplete; data not available for all days selected

Note: * is an indicator used to identify that the measure is flagged

Note: For the Improvement in Function (S) Measure, a single * indicates a Percentile of 25 or less (higher Percentile values are better)

Measure Description	CMS ID	Data	Num	Denom	Facility Observed Percent	Facility Adjusted Percent	Comparison Group State Average	Comparison Group National Average	Comparison Group National Percentile
Hi-risk/Unstageable Pres Ulcer (L)	N015.03	C	8	62	12.9%	12.9%	9.8%	8.1%	81 *
Phys restraints (L)	N027.02	C	1	117	0.9%	0.9%	0.2%	0.2%	92 *
Falls (L)	N032.02	C	70	117	59.8%	59.8%	52.0%	45.4%	86 *
Falls w/Maj Injury (L)	N013.02	C	12	117	10.3%	10.3%	4.9%	3.5%	97 *
Antipsych Med (S)	N011.02	C	4	129	3.1%	3.1%	2.2%	2.0%	81 *
Antipsych Med (L)	N031.03	C	19	116	16.4%	16.4%	17.4%	14.2%	66
Antianxiety/Hypnotic Prev (L)	N033.02	C	4	78	5.1%	5.1%	9.4%	6.5%	51
Antianxiety/Hypnotic % (L)	N036.02	C	31	89	34.8%	34.8%	25.9%	19.7%	90 *
Behav Sx affect Others (L)	N034.02	C	3	100	3.0%	3.0%	18.2%	20.8%	8
Depress Sx (L)	N030.02	C	0	108	0.0%	0.0%	4.0%	5.5%	0
UTI (L)	N024.02	C	2	112	1.8%	1.8%	4.8%	2.8%	48
Cath Insert/Left Bladder (L)	N026.03	C	4	111	3.6%	3.6%	2.9%	2.2%	75 *
Lo-Risk Lose B/B Con (L)	N025.02	C	8	39	20.5%	20.5%	37.8%	48.2%	7
Excess Wt Loss (L)	N029.02	C	10	84	11.9%	11.9%	5.3%	5.7%	89 *
Incr ADL Help (L)	N028.02	C	9	82	11.0%	11.0%	14.4%	14.9%	32



Team



Cassidy

DON



Naomi

CNA



Natalie

Activities
Coordinator



Hank

Dietary



Interventional Approaches to maintain Good

Nutrition

- Balanced Healthy Diet
- Activities- staying mobile, exercise
- Likes & Dislikes
- Socialization, staying connected
- Textures and Appearance
- Food as a Celebration
- Positive state of mind

MDS Resident Level Report

MDS Report: Resident Level Data (Sample)

Note: S = short stay, L = long stay, X = triggered, b = not triggered or excluded, C = complete, data available for all days selected, I = incomplete; data not available for all days selected

Resident Name	Resident ID	A0310A/B/F	SR Mod/Severe Pain (S)	SR Mod/Severe Pain (L)	Hi-risk Pres Ulcer (L)	New/worse Pres Ulcer (S)	Phys restraints (L)	Falls (L)	Falls w/Maj Injury (L)	Antipsych Med (S)	Antipsych Med (L)	Antianxiety/Hypnotic (L)	Behav Sx Affect Others (L)	Depress Sx (L)	UTI (L)	Cath Insert/Left Bladder (L)	Lo-Risk Lose B/B Con (L)	Excess Wt Loss (L)	Intr ADL Help (L)	Quality Measure Count
Active Residents																				
		02/99/99	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	0
		02/99/99	b	b	b	b	b	b	b	b	b	b	X	b	b	b	b	b	b	1
		04/99/99	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	0
		02/99/99	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	0
Raphone, Mike	#123456	04/99/99	b	b	X	b	b	X	b	b	b	b	b	b	b	b	b	b	X	3
		04/99/99	b	b	b	b	b	X	b	b	b	b	b	b	b	b	b	b	b	1
		03/99/99	b	b	b	b	b	X	b	b	b	b	b	b	b	b	b	b	b	1
		04/99/99	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	0
		04/99/99	b	b	b	b	b	X	b	b	b	b	X	X	b	b	b	b	b	3
		02/04/99	b	X	b	b	b	b	b	b	b	b	b	b	X	b	b	b	b	2
		02/99/99	b	b	b	b	b	b	b	b	b	X	b	b	b	b	b	b	b	1
		02/99/99	b	b	b	b	b	X	b	b	b	b	b	b	b	b	b	b	b	1
		02/99/99	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	b	0
		04/99/99	b	b	b	b	b	b	b	b	b	b	X	b	X	b	b	b	b	2

Performance Improvement Project (PIP) Documentation

Nursing Home Name: _____ Start Date: _____

PIP Team Members:	Staff Name	Title
	ADM	
	DON	
	MA	
	Wound Care Nurse	

PIP Team Project:

Quality Measure of Focus	Baseline Rate of QM	Improvement Goal for QM	Goal Rate	Date to reach the goal rate
H-Risk Pressure Ulcers	22%	Below State Average	8.7%	June 2022

Goal Monitoring:

Current Date	Current Rate	Current Date	Current Rate	Current Date	Current Rate
Feb 2022	22%				
Apr 2022	15%				
May 2022	10%				

Interventions: The following are the interventions implemented:

Start Date	Intervention Description	Intervention Notes	Outcome/Results
Feb 2022	Identify PIP Team		
Feb 2022	Run MDS CASPER Resident Level Quality Measure Report		
Feb 2022	Identify residents trigger for HR PU		
Mar-2022	Wound Care Nurse- In-Service Education on Rotation		
Apr 2022	Educational In-Service- Save our Skin prepared and presented by OFMQ and OU		

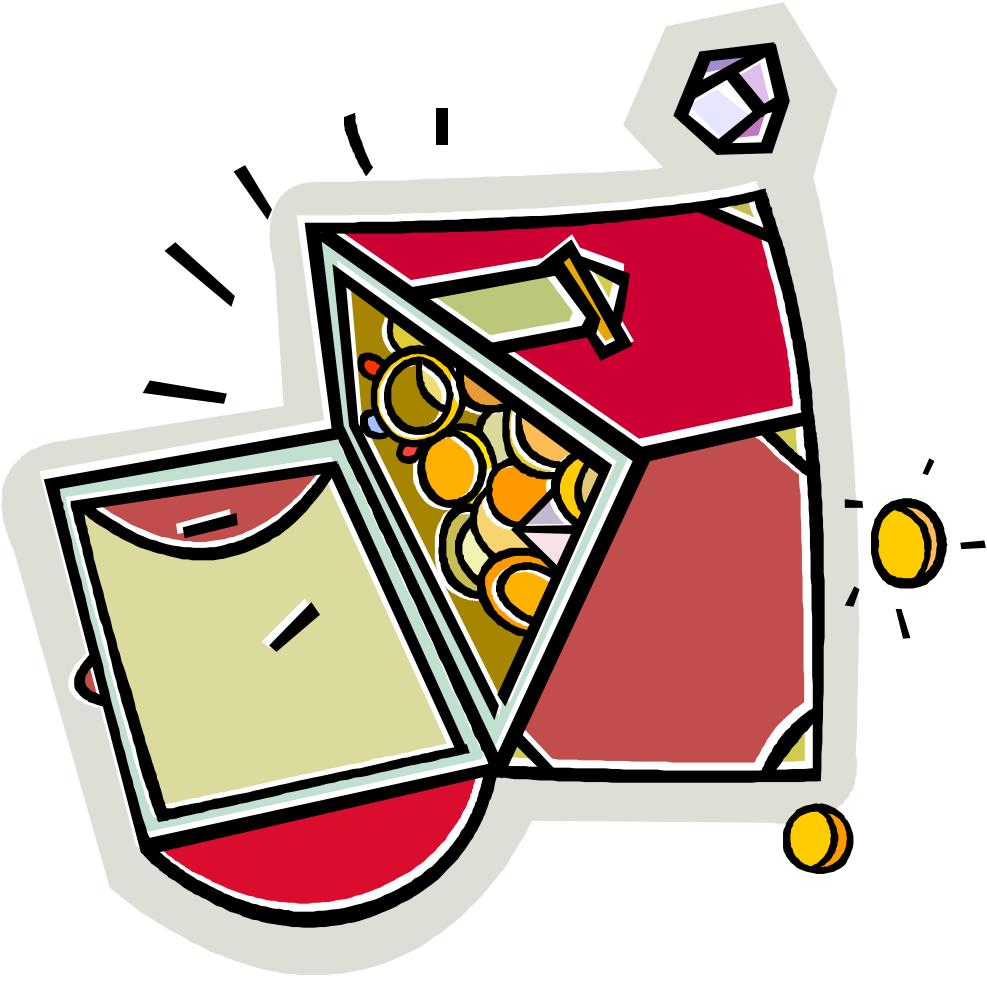
Outcomes: Use the table below to document what has worked, what has not worked, or lessons learned.

Intervention Successes	Intervention Barriers	Lessons learned
Communication with sign and EHR reminders for rotation and wound care.	Shift Change- Education, Turnover	Signage and Communication for residents at greater risk works

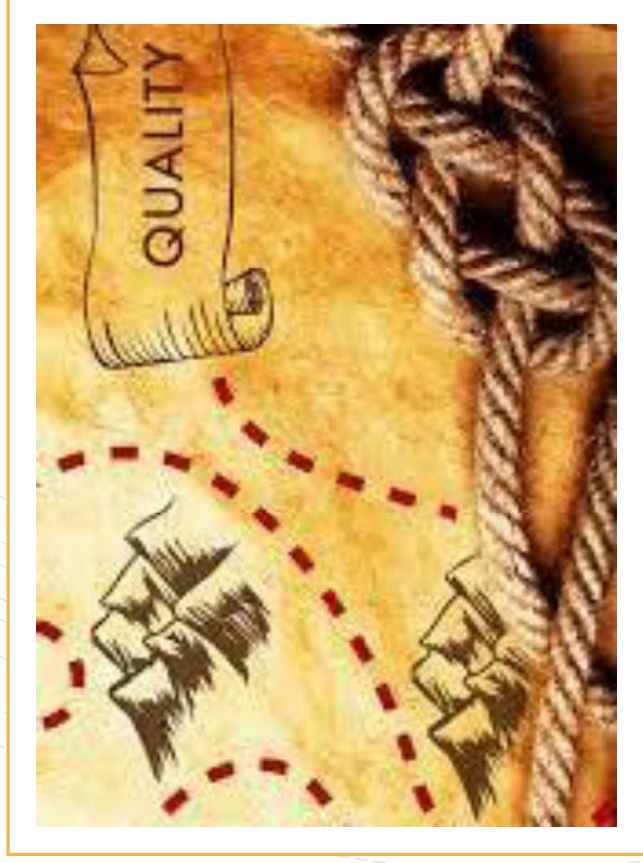
PIP IT: Use Increasing Good Nutrition as an Intervention.

- Team Members
- Project Focus
- Goal Monitoring
- Interventions
- Outcomes

Treasure Hunt



Treasure Hunt



- **Objective:** Experience the difficulties an elder may encounter while eating, due to conditions such as vision impairment and arthritis. A time limit placed on mealtime emphasizes these difficulties.
- **Lesson:** Physical limitations can be a factor in poor nutritional intake. Poor nutrition is a risk factor in developing multiple health issues
- **Interventions:**
 - Provide assistance for residents to eat.
 - Understand how patients/residents may feel about their limitations.
 - Note a decline or change in eating habits and investigate possible causes.
 - Choose foods/supplements that are tasty.
 - Consider choice in dining as a strategy to increase weight.

Dawn Jelinek

Age-Friendly Clinics and LTC

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