PROMOTING INNOVATIVE NURSING HOME CARE MODELS

Report to the Texas Legislature

As Required by:
The 2014-15 General Appropriations Act,
(Article II, Health and Human Services Commission, Rider 72, S.B. 1, 83rd Legislature, Regular Session, 2013)

The

Health and Human Services Commission

in coordination with the

Texas Department of Aging and Disability Services

October 2014
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Executive Summary

The 2014-15 General Appropriations Act (Article II, Health and Human Services Commission, Rider 72, S.B. 1, 83rd Legislature, Regular Session, 2013), requires a report identifying additional opportunities to encourage culture change in Texas nursing facilities (NF), including the development of Green House Projects and similar small house models (10-12 bed) as an alternative to traditional skilled nursing facilities (16 bed).

The Department of Aging and Disability Services (DADS) established a Culture Change Initiative in 2011 to address the aging infrastructure of Texas’ NFs and to encourage a change in the culture of caring for NF residents. As of August 2014, there were 93,804 individuals residing in Texas NFs. Consistent with other state and federal initiatives, and for the purpose of this report, culture change is defined as a movement that aims to de-institutionalize the NF environment. It involves moving away from traditional systematic models of care toward a person-directed model of care. The primary culture change goal for NFs is to improve residents’ quality of care and quality of life.

Quality of care in long-term care settings has gained national and federal attention in recent years. The heightened awareness, along with the promotion of quality of care activity, both at the federal and national level has influenced long-term care quality activities in Texas. It has influenced the research of public sector best practices; as well as the identification of federal funding opportunities through the Centers for Medicare & Medicaid Services (CMS). Nine key accomplishments that occurred in Texas between 2006 and 2014 are described in this report. Accomplishments were achieved in the areas of education and training, conference presentations, webinars and revision of applicable Texas Administrative Code (TAC) rules to encourage the construction of small house models targeted for Medicaid beds. DADS will continue to offer training in a variety of venues and locations on topics relevant to support the goal of improved care and services.

DADS is involved in multiple projects and ongoing activities to inform and educate NF providers and the public on strategies to improve residents’ quality of care and life. DADS provides support for two legislatively mandated programs, the Regulatory Services Regional Liaisons and the Center for Policy and Innovation Quality Monitoring Program (QMP). These programs provide consultation and information to professional NF staff outside the regulatory process in an effort to build and strengthen relationships. Additionally DADS manages two websites, one promoting culture change in NFs and the Texas Quality Matters webpage, which is a centralized web-based portal that contains links to all QMP information.

As required by S.B. 1, Rider 72, HHSC and DADS will continue to collaborate to identify additional opportunities to encourage culture change in Texas NFs, including the development of long-term care facilities modeled after the Green House Project and similar small house models as an alternative to traditional skilled nursing facilities. In the adoption of amended and new rules to support the small house model strategy, there have been 14 applications for new construction of homes since April 1, 2014.
Promoting Innovative Nursing Home Care Models

Background

S.B. 1, Rider 72 requires HHSC and DADS to collaborate to identify additional opportunities to encourage culture change in Texas nursing homes, including the development of Green House Projects and similar small house models as an alternative to traditional skilled nursing facilities.

HHSC must report findings to the Governor, Lieutenant Governor, Senate Finance Committee, Senate Health and Human Services Committee, House Appropriations Committee and House Human Services Committee.

The Culture Change Initiative for Texas NFs began in 2011 under the leadership of former DADS Commissioner and present HHSC Chief Deputy Commissioner, Chris Traylor. The original project charter articulated a vision that culture change is an environment of home and community within NFs. The home and community environment should nurture and inspire the individuals who reside there. The vision included a paradigm shift to person-centered and person-directed care. The focus shift aims to emphasize the dignity and worth of an individual’s preferences related to routine daily tasks, as well as empower and support the value of direct care workers.

Related National Activity

Advancing Excellence in America’s Nursing Homes

The Advancing Excellence Campaign (AEC) was formed in 2006 by 28 organizations. AEC’s mission is to make NFs better places to live, work and visit. The campaign is implemented by committees that provide leadership, vision and training to all participants in the NF industry. The campaign provides free, practical and evidence-based resources to support quality improvement efforts in NFs. Central goals of the campaign include staff continuity to build and strengthen relationships; reduction of hospitalizations; promotion of person-centered care; and education promoting the value of a stable workforce that recognizes the experience and knowledge direct care workers contribute to resident health and well-being. The Local Area Network for Excellence (LANE) is an organizational resource used to assist participating NFs in achieving campaign goals of providing resources to actively engage NF staff and residents. Texas’ LANE meets several times each year via teleconference. DADS staff, regional CMS and other interested parties participate in these meetings.

Other National Activity

DADS draws information, speakers and training ideas from additional national resources, including, but not limited to, The Pioneer Network, The Commonwealth Fund and the Picker Institute. These sources provide information on reliable, evidence-based best practices for quality improvement.
Promoting Innovative Nursing Home Care Models

Related Federal Activity

CMS actively promotes improvements in quality of care and quality of life indicators across the states. This includes the philosophy that the individual receiving services is the expert on what constitutes quality of care and life. Research has shown that NF residents thrive when living in environments where the individual controls daily choices such as waking, sleeping, bathing, eating and personal care activities. Additionally, when individual choice of preferred meals and activities is supported, all indicators of improved well-being, such as healthy weight, fewer health issues and reduced need for medication, especially antipsychotics, can be observed.

Examples of CMS emphasis on quality care:

- May 5, 2014: CMS press release on the enhanced Quality Improvement Program; and
- May 9, 2014: CMS published grant opportunity CMS-1K1-14-001, Reinvestment of Federal Civil Monetary Penalty (CMP) Funds to Benefit NF Residents. Notes: This grant is not available to individual states. There is a second CMP fund managed by DADS that is mentioned in this report on page 8.

Texas Accomplishments Completed to Date

The following is a list of activities DADS completed to promote, encourage, educate and train providers and the public on culture change initiatives and small house models. DADS collaborated with other state agencies, advocacy organizations and stakeholder groups for completion of many of these activities.

- August 2006: DADS sponsored joint conferences titled "Putting the Pieces Together" with the Texas Health Care Association, Texas Health Care Association Education Foundation, Educational Institute on Aging, Texas Association of Homes and Services for the Aging and the Texas Medical Foundation (TMF) Health Quality Institute. The conferences were held in Austin, Bryan-College Station, McAllen and Arlington. Breakout sessions included topics such as: Before and After Care Plan Samples; Artifacts of Culture Change Checklist; Getting to Know You; and Positive Outcomes.
- June-August 2008: DADS sponsored conferences titled “The Elements of Care Planning”. The conferences were held in Arlington, Austin and San Antonio. The conferences provided information on the regulatory aspect of care planning, findings for the NF quality review of 2007 and person-directed approaches to care planning.
- January 2011: DADS adopted a project by charter to promote real and lasting culture change in the NF industry. Goals were set to improve consistent communications and collaborative activities among DADS and stakeholders. Stakeholders include NF residents, NF providers and other entities involved in the Texas NF industry.
• July 2011: DADS sponsored a joint symposium titled “Culture Change: Enriching Lives in Nursing Homes” with TMF Health Quality Institute. The symposium was held in Austin and covered staff roles, staff continuity, music therapy, regulatory concerns and the Green House Model. A nursing facility administrator panel was included. Approximately 320 people attended.

• August and November 2012: DADS hosted symposiums titled "Person-Directed Care is the Heart of Culture Change" in Lubbock, Dallas, San Antonio and Houston. Symposium topics included creating home environments, dining, overcoming barriers to creating home environments, quality of life activities, building codes and non-pharmacological behavioral health interventions. Approximately 440 people attended.

• 2012-14: DADS hosted ten webinars on topics including: Positive Behavior Support; Consistent Assignment of Staff; Value of Spending Time Outdoors; Decreasing Inappropriate Use of Antipsychotic Medications in the Dementia Population; Person-Directed Approach During Move In; Activities in a Person-Directed Environment; The Bathing Experience; The Dining Experience and Volunteering in a Nursing Facility. Approximately 1,889 people attended.

• 2012-14: DADS staff presented culture change topics to a variety of audiences, including: American Society of Consultant Pharmacists; Leading Age; DADS regional providers; Texas Culture Change Coalition; National Association of Social Workers/Texas; program directors and instructors of the Nurse Aide Training and Competency Evaluation Program; Texas Association of Aging Program and the Texas Association of Area Agencies on Aging. Approximately 5,351 people attended.

• April 2014: Revisions to Title 40 TAC, Chapter 19, Nursing Facility Requirements for Licensure and Medicaid Certification, were implemented. DADS revised §19.2322(h) to add a small house NF Medicaid bed allocation waiver. The waiver is designed to promote the construction of smaller NF buildings that provide a home-like environment. Medicaid bed allocation requirements are set by rule in 40 TAC, Chapter 19, Nursing Facility Requirements for Licensure and Medicaid Certification, Subchapter X, Requirements for Medicaid-Certified Facilities, §19.2322. The purpose of allocation is “to control the number of Medicaid beds that DADS contracts, to improve the quality of resident care by selective and limited allocation of Medicaid beds, and to promote competition.” The DADS Regulatory Services division, Licensing and Credentialing section, accomplishes this task through the review, approval or denial of a series of exemptions and waivers submitted to DADS by applicants for additional Medicaid beds per §19.2322(f) and (h).

• April 2014: DADS added §19.345 Small House and Household Facilities to Title 40 TAC, Chapter 19, Nursing Facility Requirements for Licensure and Medicaid Certification. This provides requirements for small house model facility construction. A small house facility or household is limited to a maximum of 16 beds and must have its own living, dining, social and staffing areas for the exclusive use of the individuals living in the home. Each resident bedroom must be occupied by only one or two residents, if they are members of the same
family. The bedroom must contain access to a private bathroom which includes a lavatory, toilet and a shower or bathing unit. Structural design must include windows in the living area that do not exceed 36 inches from the floor to allow for an outside view from a seated position.

Recent construction activity within Texas NFs indicates recognition of the desirability for, and a trend toward, more home-like environments such as the Green House Project or other small house models. The following table includes small house model projects built in Texas as of the date of this report. These facilities were constructed prior to the effective date of the new rules, but meet the new rule requirements. Each location has multiple small buildings containing no more than ten beds.

Table 1: Small House Projects Built in Texas

<table>
<thead>
<tr>
<th>City</th>
<th>Number of Licensed Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Angelo</td>
<td>72</td>
</tr>
<tr>
<td>Longview</td>
<td>20</td>
</tr>
<tr>
<td>Sulphur Springs</td>
<td>144</td>
</tr>
<tr>
<td>Tyler</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>336</strong></td>
</tr>
</tbody>
</table>

Ongoing and Current Efforts

It is DADS belief that all NFs can ascribe to some aspect of culture change. DADS acknowledges that real, lasting culture change takes time and effort from NFs. DADS continuously engages in activities promoting culture change to support NFs during the transition.

- **DADS Culture Change Website**
  The mission of DADS culture change initiative is to promote and support NF providers as they transition from the traditional system-directed culture to a person-directed and centered culture. The DADS Culture Change website aims to accomplish this mission by including information on culture change events; contact information for DADS expert staff on NF culture change; additional relevant resources and information; and publicizing formal training opportunities. DADS staff maintain this website, which can be found at: [http://www.dads.state.tx.us/culturechange/](http://www.dads.state.tx.us/culturechange/).

- **Quality Monitoring Program**
  The QMP was established by S.B. 1839, 77th Texas Legislature, Regular Session, 2001, in Chapter 255 of the Texas Health and Safety Code. The QMP represents an educational, non-regulatory approach to quality improvement. Quality monitors, who are licensed nurses, pharmacists and dietitians, provide technical assistance regarding evidence-based best
practices on a variety of clinical topics to NF staff. The quality monitors perform on-site structured assessments to determine if clinical systems are consistent with the key elements of best practice. The results of the assessments are used to identify what types of technical assistance are needed to promote best practice in service delivery with resident assessment, care planning and outcomes. QMP staff provide in-service educational programs to facility staff, residents and their families. QMP staff disseminate best practice educational tools and materials and are available to provide Rapid Response Team visits. The purpose of these visits is to identify systemic issues that may result in deficient practices and poor regulatory. Technical assistance is provided by an interdisciplinary team (IDT) to improve the quality of care. Rapid Response visits may be requested by NF staff or initiated by DADS.

- **Culture Change within the Regulations**
  Since 2006, DADS Education Services has presented a one-day class titled “Culture Change: Transforming Care within the Regulations.” The training is offered, at no cost, to DADS Regulatory Services staff and NF providers. In 2013, the class was presented in 12 cities across Texas. In 2014, the class was presented in Angleton, Bay City, Houston, Paris, San Antonio, San Augustine, Sealy, Texarkana, and Tyler; training dates continue to be scheduled.

- **Texas Quality Matters Website**
  In support of best practice strategies, DADS established the Texas Quality Matters website which is a centralized web-based portal containing links to all QMP information. This user-friendly website provides NF staff with best practice information, tools and resources on a variety of relevant topics and upcoming QMP events. The website provides an opportunity to email QMP staff with questions or request additional information. The website is found at: [https://www.dads.state.tx.us/qualitymatters/](https://www.dads.state.tx.us/qualitymatters/).

- **Training for Person-centered Thinking**
  During fiscal year 2015, all QMP staff will participate in person-centered thinking training provided via professional certified trainers through the Institute for Person-Centered Practices. Content will focus on the development of core skills and learning to balance individual preferences with health and safety needs.

- **Regulatory Services Facility Liaison Program**
  S.B. 1839, 77th Legislature, Regular Session, 2001, created the facility liaison program. Facility liaisons are DADS Regulatory Services staff trained to help improve care for long-term care NF residents by enhancing communication between facility and DADS Regulatory Services staff. Liaison functions include:

  - Establishing ongoing dialogue between long-term care ombudsmen, NF and industry staff to identify goals, issues and problems for which joint efforts could be beneficial in achieving improved resident care and services;
- Meeting regularly with providers to discuss issues and concerns related to regulatory practices to increase understanding and consistency;

- Meeting with providers, DADS Regulatory Services staff and long-term care ombudsmen to facilitate resolution of conflicts and individual situations that require additional problem-solving input;

- Clarifying state and federal regulations for participants;

- Creating an environment for the sharing, discussion and promotion of best practices; and

- Working closely with the DADS Joint Training unit, Long-term Care Ombudsman program and DADS QMP to ensure efforts enhance, not conflict.

### Facility Applications for Small House Models

As of August 20, 2014, DADS had received 14 applications, related to §19.2322 and §19.345, for a total of 1,100 beds in the counties shown below:

#### Table 2: Small House Models Applications

<table>
<thead>
<tr>
<th>Location</th>
<th>Beds Requested</th>
<th>Location</th>
<th>Beds Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bexar County</td>
<td>75</td>
<td>Harris County</td>
<td>75</td>
</tr>
<tr>
<td>Brazoria County</td>
<td>80</td>
<td>Midland County</td>
<td>80</td>
</tr>
<tr>
<td>Collin County</td>
<td>80</td>
<td>Montgomery County</td>
<td>80</td>
</tr>
<tr>
<td>Comal County</td>
<td>80</td>
<td>Tarrant County</td>
<td>155</td>
</tr>
<tr>
<td>Dallas County</td>
<td>75</td>
<td>Travis County</td>
<td>80</td>
</tr>
<tr>
<td>Fort Bend County</td>
<td>80</td>
<td>Williamson County</td>
<td>80</td>
</tr>
<tr>
<td>Galveston County</td>
<td>80</td>
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</tr>
</tbody>
</table>

In order to qualify as a small house, a single building or household cannot contain more than 16 beds; but, a single application may contain more than 16 beds through the use of additional, multiple small house buildings or households. For example, in eight of the applications listed above, the proposal was for five 16-bed households, plus a new 40-bed ‘anchor unit’ that would not be considered small house and would not be part of the Medicaid bed award. Such facilities have 120 beds, 80 will be small house Medicaid beds and 40 will be regular, licensed-only beds. The effective date for providers to begin submitting applications was April 1, 2014.
• **S.B. 1, Article II, DADS Rider 30 - Implementing a Person-centered Care Pilot Project for Nursing Facilities**
  DADS Regulatory Services will conduct on-site visits to nursing facilities in Tyler, Beaumont, Houston and Austin focusing on consistent assignment of staff, resident choice in daily living and activities and personalized environments that treat each person with dignity and respect. This activity is in the planning stages, and on-site visits are scheduled for completion by the end of February 2015.

• **Antipsychotic Medication Reduction Strategy**
  DADS staff, in collaboration with TMF Quality Improvement Organization (QIO) and other stakeholders, are developing a project to reduce the use of antipsychotic medications in NFs; improve pain management in individuals with dementia; increase the use of alternative strategies to manage dementia care and provide further direction on federal citation tags F309 (Quality of Care) and F329 (Unnecessary Drugs), which have regulatory impact. Phase I of the project was a day-long training session provided in ten regions across the state during July and September 2014. July training sessions were held in Tyler, Lufkin, Austin, Arlington and San Antonio. October sessions were held in Lubbock, Abilene, Houston and Corpus Christi. Phase I of the training offered providers an opportunity to sign-up for individual assistance and support unique to their NF. Phase II will be the provision of the requested individualized assistance and support provided by a combination of IDT members including, but not limited to, QMP staff, TMF QIO quality consultant staff, long-term care ombudsmen, Regulatory Services facility liaisons and other interested parties. DADS is awaiting approval from CMS for a one-time sum of dollars from the Civil Money Penalties (CMP) fund to cover costs related to September Phase I activities and all Phase II activities.

**Additional Opportunities**

Per S.B. 1, Rider 72 requirements, HHSC and DADS have identified the following opportunities to encourage culture change in Texas NFs and encourage the development of Green House Projects and similar small house models:

• **Nursing Facility Enhanced Payment Program**
  Currently HHSC is exploring potential strategies to further encourage the NF industry to move toward adopting the Green House Project or similar small home models. One such effort includes studying the feasibility of establishing a Nursing Facility Enhanced Payment program, providing enhanced payments to qualified NFs that meet specified performance measures. The goal is to provide structure and reasonable incentives through the use of Intergovernmental Transfers (IGT) and federal funds for qualified NFs to achieve outcomes that improve the quality and efficiency of care in Texas’ Medicaid program, improve health outcomes and increase patient satisfaction. HHSC has worked closely with NF stakeholders, soliciting ideas and feedback on various strategies, some of which have been implemented in other states. Given the aging stock of Texas NFs, any program will likely include incentives for changes to the physical plant that promotes an environment of home and community within the facility, such as is seen with the Green House project homes and similar small house models.
• **Resource Surveillance**
  DADS QMP continually seeks opportunities to increase resources, increase resource utilization and knowledge of current evidence-based best practices. QMP staff routinely monitor the CMS grants website to identify additional funding opportunities for relevant projects that encourage and support the culture change initiative.

• **Civil Monetary Penalty Funds**
  On May 27, 2014, DADS issued a notice that CMP funds were available for NFs to use for improvement projects. In accordance with §1819 and §1919 of the Social Security Act, CMPs imposed by CMS may be used to fund projects and activities that benefit NF residents. Examples of appropriate projects may include initiatives to support and protect residents of a facility that closes or is decertified, support resident and family councils to ensure quality care or improve the facility through CMS-approved initiatives, such as culture change. Effective June 1, 2014, DADS began accepting application requests for a grant of CMP funds to finance such projects. Information about this process and applications for CMP funds can be found at [http://www.dads.state.tx.us/providers/NF/civil_money.html](http://www.dads.state.tx.us/providers/NF/civil_money.html). This aspect of the CMP fund is managed by the DADS Regulatory Services division with final approval from CMS to release funds for projects.

**Recommendations**

HHSC and DADS offer the following recommendations:

• Continue to identify ways to expand collaborative efforts with other organizations (e.g., the Texas Culture Change Coalition) to provide training opportunities to NF providers on best practice techniques and strategies to encourage and lead providers in improving the services delivered to NF residents.

• Conduct an independent study of the 16-bed model created under 40 Texas Administrative Code, Chapter 19, §19.2322(g) and §19.345. Include in the study a comparison of outcomes for residents, facility staff, state regulatory functions and providers in this model against outcomes of homes using the Green House model (typically 10-12 bed models).

• Develop an enhanced or special facility-specific rate for NFs to encourage and support the development of small house models rooted in culture change as an alternative to traditional NFs.