February 2020 Newsletter



Sorry for the lateness in sending our February Newsletter.....very busy times......

Coronavirus, now known as COVID-19, has been the top news story for several weeks in the U.S. and across the world. We know the best way to keep on top of the developments is through reliable resources such as the World Health Organization (WHO), Centers for Disease Control and Prevention, Vice President's Task Force on Coronavirus, National Institute of Allergy and Infectious Diseases, and state and local public health departments.

Yesterday, Vice President Pence stated that the testing of individuals for COVID-19 is now considered an Essential Benefit and covered under all insurances. If anyone suspects they might have or been exposed to COVID-19, they should contact their primary care provider by phone and seek instructions on next steps and where to go for testing.

It is in times like these that we are reminded of the major sacrifices and contributions that our front line healthcare providers and public health play in caring for those in need. Every day they are there to support those in need while acutely aware of some of the dangers they confront. Remember to give thanks and extend a 'hand bump or elbow bump' to our healthcare providers.

February's Newsletter includes:

- COVID-19 Interventions and Data
- Dr. Brian Isetts Podcast
- IHC Comfort Scales and Menus
- Patients as Partners in Diagnostic Research
- Step 2 in Nursing Home Transformation
- CMS Quality Conference
- Celebrations

COVID-19 Interventions and Data



On February 4, the Centers for Medicare and Medicaid

Services announced several interventions to address the spread of COVID-19. CMS stated that effective immediately and, until further notice, State Survey Agencies and Accrediting Organizations will focus their facility inspections exclusively on issues related to infection control and other serious health and safety threats, such as allegations of abuse – beginning with nursing homes and hospitals. Critically, this shift in approach, first announced yesterday by CMS Director Seema Verma will allow inspectors to focus their energies on addressing the spread of COVID-19. This change in focus is in the hopes of stopping the spread of coronavirus in

practice communities where patients and residents are at greater risk for serious harm.

As providers know, CMS and CDC have helpful voluntary spreadsheets for conducting a self-assessment of infection control and prevention practices for <u>nursing homes</u>, <u>hospitals</u>, and <u>dialysis centers</u>

In keeping these spreadsheets current through ongoing organizational review, one should be able to avoid new infections and allow everyone to know how to manage present on admission infections. Additionally, CMS Director Seema Verma specifically stated that statutorily-required inspections will also continue in the 15,000 nursing homes across the country using the approximately 8,200 state survey agency surveyors. Surveys will be conducted according to the following approach:

- "All immediate jeopardy complaints (a situation in which entity noncompliance has placed the health and safety of recipients in its care at risk for serious injury, serious harm, serious impairment or death or harm) and allegations of abuse and neglect;
- Complaints alleging infection control concerns, including facilities with potential COVID-19 or other respiratory illnesses;
- Statutorily required recertification surveys (Nursing Home, Home Health, Hospice, and ICF/IID facilities);
- Any re-visits necessary to resolve current enforcement actions;
- Initial certifications;
- Surveys of facilities/hospitals that have a history of infection control deficiencies at the immediate jeopardy level in the last three years;
- Surveys of facilities/hospitals/dialysis centers that have a history of infection control deficiencies at lower levels than immediate jeopardy."

CMS urged all provider staff to review their protocols and refer to a **Q&A** that has been prepared on infection prevention issues and also other issues related to managing the COVID-19 Surveys by State Surveyor organizations.

Data. One of the best resources that has emerged in tracking national and international trends is through Johns Hopkins. The site is routinely updated and provides a dashboard on confirmed cases geographically as well as deaths and recovered cases. To view the site, click **here**

Dr. Brian Isetts



In Project Patient Care's <u>February 2020 Podcast</u> we highligh the changing role of pharmacy and pharmacists as part of the care team for patients. We explore how pharmacists are engaged with patients, families, caregivers, and care teams in identifying the best medication treatment programs for patients and helping patients understand and self-manage their medications. We even venture into a not too far away futuristic discussion on the key role of precision medicine and pharmacogenomics!

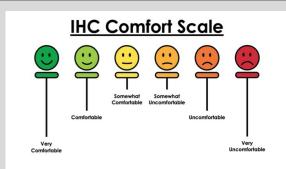
Our February Champion Change Agent, Brian Isetts, Ph.D., BCPS, FAPhA, is a Professor at the University of Minnesota College of Pharmacy, and a pharmacist with 30 years of experience as a

practitioner, educator and researcher. Brian has devoted his career to building a medication use system our country deserves where persons and families can confidently manage their medications. He has many notable accomplishments including three years of service at the Centers for Medicare & Medicaid Services in Washington D.C. where he was a federal co-lead for reducing adverse drug events across 4,000 hospitals in America.

Dr. Isetts sets the bar high for the role of the pharmacist in engaging patients in their medication management plan. His goal is to train, educate, and model a systems approach that will lead to zero adverse events through engagement of patients and providers in coordinating and managing medication treatment.

Project Patient Care Podcasts cover a variety of timely topics and we always include healthcare patient or provider leaders that understand the value of engaging patients, families, and caregivers in health and healthcare improvements. Check out the past, but still timely, podcasts by clicking **here**

IHC Comfort Scales and Menu Options



In our Podcast with Dr. Brian Isetts, we discussed the ongoing challenges with the Opioid Crisis in the United States. Having collaborated with the Iowa Health Collaborative, known as IHC, Brian was involved and familiar with their approach to engaging patients and care teams in managing pain without the usage of opioids.

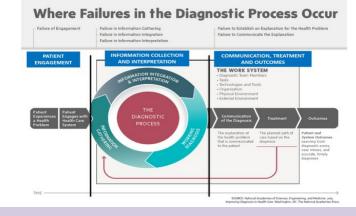
"The IHC Comfort Scale was created by IHC to reframe pain assessment to a comfort focused

assessment. The goal is to utilize the IHC Comfort Scale in place of the pain scale with regular patient encounters. Ask the patient, "What is your comfort level." Allow them to use the scale and point to their comfort level as necessary. Accompanying the scale is the IHC Comfort Menu to be used in conjunction with the IHC Comfort Scale. Once a patient has identified their comfort level, the menu can be used to suggest options to increase the patient's comfort level. The IHC Comfort Menu items can be modified to better fit what your facility has to offer. It can also be modified to fit patient preference."

The Scales and Menus are available for outpatient and inpatient settings and are in both English and Spanish. To view them on the IHC website, click Here The IHC Scales and Menus are also available on the PPC Podcast page as resources identifiedy by Dr. Isetts.

Patients as Partners in Diagnostic Research

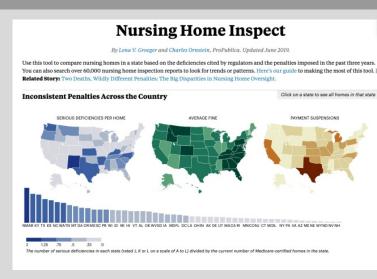
Project Patient Care was the patient engagement lead on a Patient Centered Outcomes Research Institute (PCORI) Award under the Society to Improve Diagnosis in Medicine.



The National Academy of Medicine (NAM) recently released a Perspectives report on the Patients Improving Research in Diagnosis. While codeveloping a curriculum for patients, families, and caregivers on how to effectively participate in the design of research studies, the team developed a diagnostic process that helped patients function as partners and is highlighted in the NAM article

entitled, "What If?: Transforming Diagnostic Research by Leveraging a Diagnostic Process Map to Engage Patients in Learning from Errors." Co-authors included Sue Sheridan, Pat Merryweather, Diana Rusz, and Dr. Gordon Schiff.

Step 2 in Nursing Home Transformation



Part 2 of the Five Part Strategy for Nursing Home Transformatn was announced by CMS Director Seema Verma on February 18. The Five Part Strategy includes:

- Strengthen Oversight
- Enhance Enforcement
- Increase Transparency
- Improve Quality
- Put Patients Over Paperwork.

Part 2 of the Strategy includes strengthening State Survey Agencies (SSA) and their surveyors so that nursing homes

can evenutally be evaluated on a national basis and not just within states. SSA performance is now assessed using the recently developed using the *State Performance Standards System*. CMS also targeted key areas for additional enforcement on quality of care including the inapproriate use of anti-psychotic medications and lack of meeting nurse staffing standards.

To view CMS Director Seema Verma Blog on Part 2 of the Five Part Nursing Home Strategy, Click <u>Here</u> To view the "National Partnership to Improve Dementia Care in Nursing Homes: Antipsychotic Medication Use Data Report (October 2019)" and see where your state is in reducing anti-psychotic medications, click <u>Here.</u>

CMS Quality Conference



Acting Director of CMS Center for Clinical Standards and Quality (CCSQ) Jean Moody-Williams opened the February 23-25, 2020 CMS Quality Conference followed by CMS Director Seema Verma.

Both Jean and Seema had a lively discussion on Strategic directions including:

- 'CMS establishing clear and reasonable expectations for quality by setting government standards and quality measures... in other words, the rules of the road,
- CMS will strengthen oversight and enforcement of those standards to ensure accountability.
- CMS will promote transparency, competition, and consumer choice by providing the public with the information needed to make decisions

about their care; And

- CMS will work to modernize quality improvement efforts for all through advances in data

analytics and technology, while prioritizing resources for those that need it most.'



The end of the Grand Plenary was a very exciting celebration of two patients that received transplants. Jean Moody-Williams discussed the transplant journeys with Precious McCowan, a kidney transplant recipient, and Dr. Robert Montgomery, a heart transplant recipient.



Jean Moody-Williams and Pat re-connecting with Pat thanking Jean for her leadership and vision for transformation.

CELEBRATE GOOD TIMES!!!

On February 15, Marty Hatlie and his partner of 40 years, Chuck Holland, were surrounded by their large and extended families and friends as they were joined together in marriage. It was a beautiful ceremony and reception filled with love, friendship, and fun as they exchanged their vows and then danced through the night. Several patient safety advocates joined in the celebration.





SHARING SKILLS AND KNOWLEDGE



National Institute of Rural Development leadership meeting in India focused on addressing the water and sanitation issues as 19% of Indians have no access to clean water and 56% have no access to toilets.



Pat led a Women's Leadership track with women from India, Thailand, and USA on the importance of STEM and toilet facilitites for girls to continue with their education at the Water, Waste Management Conference in Hyderabad, India.



Pat visited several Rotary grant project sites that she is working on with the Indians, including a dialysis center, free clinic, school for 1000 impoverished girls, and a Blood Bank for Thalassemia and hospitalized patients.



We Love to Hear From You!

We are always happy to hear from you - please feel free to contact us at any time.

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Thank you!