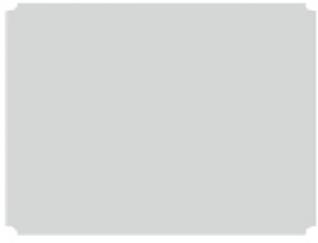
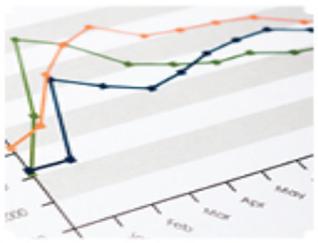


Quality Prevention of Excessive Weight Loss



Facility Level Quality Measure Report



CASPER Report MDS 3.0 Facility Level Quality Measure Report

Page 1 of 1

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

Quality Improvement: Your Mission



- Consistency
 - Same Scale, Same Person, & Same time
- MDS Coding
- Dental Visits
- Monitor changes closely and frequently
- Team Huddles- Shift Changes
- PIP
- Root Cause Analysis

MDS Coding – Weight Loss

K0300: Weight Loss

K0300. Weight Loss

Enter Code

Loss of 5% or more in the last month or loss of 10% or more in last 6 months

0. **No** or unknown
1. **Yes, on** physician-prescribed weight-loss regimen
2. **Yes, not on** physician-prescribed weight-loss regimen



"I am not overweight. I'm gravity enhanced."

Definition –

- 5% Weight Loss in 30 days
- 10% Weight Loss in 180 days

Performance Improvement Project (PIP) Documentation Excess Weight Loss

Nursing Home: Amazing Home

Start Date: 1/20/2022

PIP Team Members:

Staff Name	Title		

PIP Team Project:

Quality Measure of Focus	Baseline Rate of QM	Improvement Goal for QM	Goal Rate	Date to reach the goal rate
Excess Weight Loss	15.1%	State/National Avg	4.8% / 6.2%	January 2022

Goal Monitoring:

Current Date	Current Rate	Current Date	Current Rate	Current Date	Current Rate
1-2022	15%				
5-2022	12%				

Interventions: The following are the interventions Implemented:

Start Date	Intervention Description	Intervention Notes	Outcome/Results
	Create Excess Weight Loss PIP team (members, meeting time, day, etc)	Multidisciplinary team (include dietary)	
	Identify residents triggering this measure	Run CASPER Quality Measures Report – Resident Level Talk with residents/family about diet, food preferences, appetite, etc. Talk with team about what they have observed with these residents.	
	Weight Monitoring Process	Who does this, timing, same scale. Go over the entire process of taking weights for your residents	

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

Intervention Successes	Intervention Barriers	Lessons learned
Consistency in time of day and scale	Location of scale Employee process training	Process Training Needed Same Staff Member Conducting Weighing Process

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

PIP IT: Excessive Weight Loss

Accurate Weights

Have maintenance staff routinely check/calibrate scales

Train staff members on the policy/procedures for obtaining resident weights

Teach staff to properly calibrate scale prior to weighing residents

Instruct staff to subtract weight of assistive devices: prosthetics, wheelchairs, cushions, etc.

Perform a skills check for staff members who collect resident weights

Have the same staff person weigh residents each time

Have resident in the same position each time

Use same type of scale each time



Causes of Weight Loss

Physical

- Health Conditions
 - Diabetes
 - Crohn's Disease
 - Cancer
 - Oral Pain or Issues
 - Non-fitting dentures, missing teeth, tooth pain
- Dementia
- Stomach Ulcer or Pain
- Swallowing
- Medications
- End of Life

Psychological

- Anorexia
- Depression
- Individual Preferences
- Previous/Past Trauma
- Cultural Preferences

Spiritual

- Avoidance of certain foods
- Religious Observances

Challenges

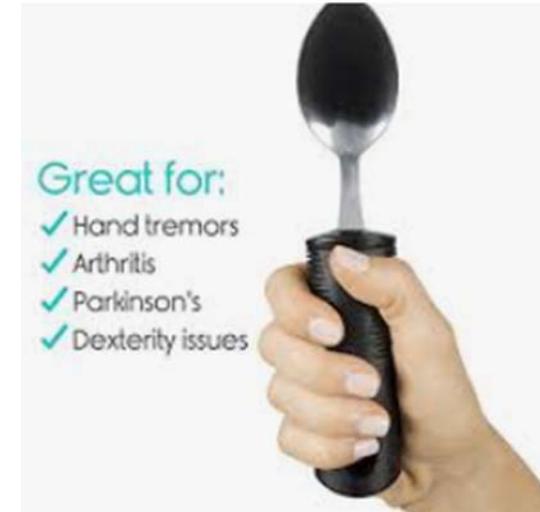
- Cutting food
- Balancing food on a utensil
- Getting distracted
- Unsure what to do next
- Sleepy
- Overwhelmed with the amount of food offered
- Too many options

Suggestions

- Offer finger foods
- Demonstrate steps
- Assistive devices
- Limit distractions
- Eat together
- Be flexible with choices
- Small portions
- Fewer choices

- **Occupational and Speech Therapy Assessment to Determine:**

- Is adaptive silverware needed?
- Is the person left-handed?
- Does the person need prompting or visual cues to eat?



Best Practices

Avoid rushing residents through mealtime

Lower expectations of slower eaters to speed up

Bring slower eaters in earlier

Offer small frequent meals and snacks

Ask resident or family member for favorite recipes or meals



Ask family & friends to visit at mealtimes



Presentation & Communication



Action

PIP QI
Measures

Conduct a
Root Cause
Analysis

Discovery
from your
team huddles

Dawn Jelinek

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