

Centers for Medicare & Medicaid Services
National Nursing Home Stakeholder Call
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Webinar:

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Jean Moody-Williams: Good afternoon, and thank you for joining today. I'm Jean Moody Williams, the Deputy Director of the Center for Clinical Standards and Quality at CMS. Thank you all for joining us. Before we get started, I always like to remind you that today's webinar is being recorded and it will be posted on the CMS transcript and podcast page.

All participants will be muted throughout the call and closed captioning, however, is available via the link in the closed caption window on the bottom of the screens. Members of the press, may be on the call today, however, all press media questions should be submitted to using the CMS media inquiry form and that can be <https://www.cms.gov/newsroom/media-inquiries>. I think you all are pretty familiar with, where to find that form. As usual, we have a full agenda would lots of information and wonderful speakers. I want to jump right in. I am very excited to welcome the CMS Principal Deputy Administrator Jonathan Blum to share a few remarks about the recent White House announcement of the new efforts to improve safety and quality of care in the nation's nursing homes. I will turn it to John now.

Jonathan Blum: Thank you. I want to give some more insight to how we're thinking about fulfilling the presidents call for a safer nursing home. We want to talk about how we came to the policies, the process that CMS took but more importantly what we plan to do moving forward. During the past year, CMS has worked tirelessly to talk to all the stakeholders and that includes consumers patients or family's caregivers, nursing home staff nursing home operator state officials relate to help us understand what can we do to work in full partnership to improve safety-- to improve the overall care experience. That led us to develop a comprehensive plan that really has three primary themes. The first, we want to understand what staffing is required to ensure safer care and that will require CMS to work with you to engage in careful study, analysis and put forward thoughtful policies about staffing. What is required to ensure safer care, more patient centered care?

The second thing to us is to focus on dedicating resources for those providers that present the overall greatest risk. We understand the federal state environment for oversight by definition has constraints and has limited resources. We want to focus on where we have the greatest risk. The greatest opportunity for improvement but also to ensure safer care. Really focused on how we think about those facilities that today have rigorous analysis, constitute the overall greatest risk.

Third, we have heard on many calls from consumers, their families, their advocates, states, the Congress, to provide greater transparency to the ownership status for those facilities that participate within Medicare and Medicaid. We have been working to build more tools that we and the public can better understand the relationships of the ownership status. Who is participating within the Medicare, Medicaid program and the relationship to overall care. These are three things that will drive our work. Similarly, to how we got here, which was working to really understand a very complex issue, working to understand the multiple stakeholder perspectives, really collecting data to make sure any decisions that we go forward with are based on sound data analysis. That's how CMS will continue to work -- going forward as we put forward

proposed regulations, new guidance documents, new data systems that will be done in continual partnership. And, while we have an obligation to promote safer care, more consumer centric care, we also have an obligation to work in full partnership to understand the full complexity to these issues and that will be the pledge going forward. The CMS team will work tirelessly. Walk us through more details. We are in full court sprint for new regulations, new safety guidance, new systems. Those will be developed with folks here on the phone today and folks throughout the country to help us get to the best policies going forward. With that, we will turn back to Jean. We have more than 2500 people on this call. Thank you for taking the time to learn, listen and to give us thoughtful feedback. Jean, back to you.

Jean Moody-Williams:

Thanks Jon and we do appreciate the number that have joined in and have consistently joined us to give feedback and, as you know, we have always listened to so I'm just going to give a few more details and my colleague Will is here with us to address some of the questions that we are receiving. As John outlined, this is an incredibly ambitious body of work. To improve accountability, transparency, quality and safety for both residents and staff within our nation's nursing homes. There are 21 initiatives spread across five key strategic goals. I want to highlight those. The first one being ensuring taxpayer dollars, support nursing homes that provide safe, adequate and dignified care. The focus being on quality and safety. And the second enhancing visibility, also increasing transparency. And the fourth being, creating pathways to paid jobs with a free and fair choice to join a union- especially for nurses. And the fifth being ensuring pandemic and emergency preparedness- in nursing homes. I'll note that, while these initiatives are bucketed into these kinds of five distinct strategic goals. This plan isn't in its entirety representative of a holistic approach to improving conditions in nursing homes for residents and staff. These are complex issues, which is why we are taking a comprehensive and thoughtful approach. John said that, I am saying that, and that is a concept you are really going to hear us repeat throughout today's discussion.

As we look at the 21 initiatives, one of the core areas that CMS has begun, in earnest, is seeking to establish minimum staffing standards in nursing homes. To improve safety and help ensure staff are able to deliver high-quality care to residents. Our goal with this initiative is to empower staff to provide Medicare by developing evidence-based and appropriate requirements. That is going to be supported by a regular study that will be used to permanently inform our efforts to strengthen quality of care and ensuring that facilities have enough well-trained staff on duty to provide the services needed to the residents who rely on them. There is no doubt that we must adopt a careful, considerate approach to implementing this initiative. We have heard that from you as well. It is in order to find a meaningful balance and avoid unintended consequences- that includes being cognizant of different needs of each facilities residence and we want to make sure we are hearing from all stakeholders. I know we have a broad stakeholder audience on this call.

We want to hear from all of you as we work through the nuances. We are really grateful to have this forum. We have had it for now almost two years to engage with the long-term care community. You have always provided great comments. We also know that within the long-term care community, we have clinicians, families, residents, ombudsman, advocates. It is a broad community. Some of the initiatives we are exploring on short-term implementation, all this work cannot be done at once, on the short-term we are looking at addressing the inappropriate use of antipsychotics in nursing homes. This is work we have been doing for a while. There is still room for improvement. Overhauling the special focus facility program. Increasing accountability and transparency on nursing home owners. Improving the use and availability of data about nursing homes on care compare websites, so it is really informative of respective residents and their families. And, continuing to address the COVID-19 areas within nursing homes. And importantly, applying lessons learned from the last two years, to strengthen quality and safety of these facilities. I am going to come back to that point in just a minute.

Undeniably, there is a lot of work to get done and we are actively planning our approach to implementing these important initiatives. Keeping in mind we want to take, we want to be deliberate. Our focus right now

is identifying those initiatives where we can take specific action in the short-term while strategically planning efforts that will require a longer-term approach, but still acting with urgency.

We will continue to get the work done using our existing authorities and levers to the fullest so that we can ensure that people living and working in these facilities are counting on us to do so in a deliberate manner. I mentioned the COVID-19 efforts which we had discussed on most of these calls.

I want to continue the momentum of discussing best practices around vaccines. I have reviewed the latest booster numbers and the national averages for residents who have received their booster and it is almost 70%. The staff rate is approximately 40%. While the average rate for resident booster rate uptake is higher than the national average for people over 65, the average for staff is still lower than the national booster uptick rate. It is so crucial in protecting against COVID-19. We are continuing to encourage you to do everything you can to increase the booster uptake rate. I remember one comment I got in the chat on one of these calls that says, "you are preaching to the choir." And I know that, but I am taking the message to you to take that to some people who may not be in the choir. As you may recall during our last call, we heard from Tina Sandri

She is the CEO of Forest Hills of DC. During our call, Tina outlined several tactics she used to encourage staff including every communications channel available, phone recordings, texts, emailed, posters, flyers, videos, huddles, town halls. It was really impressive that full court press that they implemented. Although restrictions are relaxing nationwide, we want to encourage you to keep up the momentum and continue to encourage the booster uptake. We will continue to monitor data. We will continue tailor interventions. For example, CMS' is quality improvement organization continue to work to promote mobile vaccine sites. We are still working to support those efforts. I know we have gone over quite a bit of information already. While we won't have a lot of time to answer all of your questions, we already received some. I am going to pause for a moment and I am going to turn to my colleague, will. He is a senior advisor in the administrative office who can address some of the most common questions that we have received so far, since the announcement. Will, I am turning it over to you.

William Harris:

Thank you very much, Jean. I want to acknowledge that I know that many caregivers usually call into this stakeholder call people who are providing direct care for nursing home residents providers who are caring for them every day, and we do want to make sure that we take the opportunity to thank you for all the hard work that that you're doing and continuing to do during the pandemic particularly family and caregivers who we know, have been so critical to the care of nursing home residents want to be sure to We want to be sure to shout them out.

We have been looking at the Q&A function on the call and we want to encourage you to keep using that. If we don't get to many questions today, we are certainly going to be looking at those as we undertake this initiative. Please use that function even if we don't get to the questions today. We will have that, we will have a record of that and we will be considering those comments. Either encouragement, concerns, questions you have. That is very important to us. Please use that function. I want to hit on a few questions we have been getting pretty regularly in our Q&A since the president announced that initiative. The first one is some people have told us they are very glad they have seen a new focus on nursing homes, but what might that need -- mean for people who want to get care at home? Which is a great question.

At CMS, we all believe that people should be able to access long term care in the most appropriate setting of their choice- and that includes through home and community-based services, the nursing home reforms that we're talking about today and that the President announced last week.

The nursing home reforms that we are talking about today and the president announced last week really reflect a both/and approach. The residents that rely on that care, as well as the people who care for them

and working at those nursing homes are counting on CMS to raise the bar. We are prioritizing parallel efforts to strengthen. At the same time strengthen and invest in home community-based services. To ensure people with disabilities, seniors and others have quality options when making decisions about where to receive that care, without any institutional bias. It is very important to us.

I want to mention to get that out there. The next question we heard a lot about in the Q&A portion today is how does the strategy account for the difficulties that facilities are currently facing and recruiting new workers? At CMS, we recognize that increasing staffing won't happen overnight. That's why we're taking a holistic approach to improving the long-term sustainability of the nursing home workforce. Growing the workforce will involve not just the staffing requirements, but also strengthening the pipeline by addressing financial barriers to training and expanding recruitment. Additionally, improvements to job quality through opportunities for advancement and safe staffing levels will increase retention, as well as support new recruitment. We've heard directly from nursing home workers that creating meaningful career ladders recognizing experience and ensuring a safe work environment would increase retention, as well as the quality of care is delivered in nursing homes across the country.

So as that fact sheet describes and if you haven't seen the fact sheet on the White House website, yet I encourage you to read it, because it is lengthy and gives you some more to read about what each of the initiatives means, but as that fact sheet describes, we intend to propose a new minimum staffing standard within one year.

The other initiatives listed have their own timeframe. In all cases, we want to make sure that we're building in meaningful feedback so we get the details right. Our Administrator Chiquita Brooks-LaSure, who with along with our Principal Deputy Administrator Jon Blum who we heard from earlier are the driving energies behind this initiative. Last year, Administrator Brooks-LaSure announced her six strategic pillars for how she would approach running the Centers for Medicare and Medicaid services. One of those pillars is integrating stakeholder feedback into our policymaking.

It something that she challenges all of us to do every day. Something we take very seriously in our day-to-day work. In each of these initiatives, we are going to make sure there is an opportunity for meaningful stakeholders to be able to get that to CMS and help to inform our policymaking. We want to hear from the people who have lived experience, with our programs, either receiving, giving or delivering that care. We want to hear from you. Want to hear from anyone running their own business. We want to hear from anyone who will be touched by these policies to make sure they hear that and we can use that in our decision-making.

When we are making those changes and rolling that out, we are going to make sure those announcements and changes have opportunities and instructions on how you can provide that feedback to us. I think that is all I have got. At the moment, many of you have been confuse -- continuing to use the Q&A function which I appreciate. We will definitely be looking at those and are going to be considering and have that record, so thank you very much for using them. Jean, I will turn it over to you.

Jean Moody-Williams:

Thank you, Will. I have been glancing at the Q&A as they've been coming in, and there are lots of offers to help- and lots of folks with data, so I think that's encouraging and we do have a record of this and we will keep let you know about future meetings of the sort. I did also see questions about some of the recent QSO memos. We didn't have that on the agenda, but thanks for putting that in the chat and we can come back at our next call perhaps--specifically QSO memo 2038 and 2039.

I wanted to remind everybody that earlier this week, we announced that registration is open for the CMS quality conference. We are looking forward to another exciting conference with many presentations and listening sessions that will be of interest to the long-term care community. The website is easy, it's www.CMSqualityconference.com to register. As you know, if you've attended in the in the past, spaces fill up quickly. So, register as soon as you can.

With that, as both Jon, Will, and I have mentioned, we look forward to engaging with you as this work commences and we are going to end the call now and I thank you very much for joining, thank you.