

## Long-Term Care Survey Alert

### Accreditation: GET READY FOR PATIENT SAFETY STANDARDS IN 2003

Hopefully, nursing facilities were taking good notes as they watched hospitals implement sweeping new patient safety accreditation standards last July.

"**The Joint Commission on Accreditation of Healthcare Organizations** has revised standards and intent statements for resident safety and medical/health care error reduction for long-term care, which will go into effect Jan. 1, 2003," **Marianna Kern Grachek**, JCAHO executive director of long-term care and assisted living accreditation programs, tells **Eli**.

The safety standards for long-term care mirror those that turned hospitals on their heads in implementing a "culture of safety" where everyone - including patients and families - work together to identify ways to improve the organization's safety track record. This approach trades the "blame and shame" approach to medical errors for a root-cause framework where the system is viewed as the villain when near misses or medical errors occur.

#### A Slate of New Standards

According to Grachek, key patient safety issues addressed in the Comprehensive Accreditation Manual for Long Term Care standards include the following:

1. The responsibility of leadership to create an environment that encourages risk- and error-identification, facilitates education in the likelihood of occurrences, and minimizes individual blame or retribution for involvement in a medical/health care error;
2. Active engagement by the organization in proactive systems analysis and improvement as an error prevention strategy;
3. Training throughout the organization that focuses on teamwork, avoidance of adverse events, and error identification, analysis and prevention;
4. The use of available knowledge to guide safetyimprovementsandreduceerrors;
5. The need to inform the resident, and, when appropriate, his/her family of unanticipated outcomes of care; and
6. Solicitation of input from the resident and his/her family on steps that could be taken to enhance safety and reduce errors.

To prepare for the new standards, nursing facilities should be strengthening their safety committee or safety programs, says **Lynn Swisher**, an accreditation consultant with **Chase Health Consultants**, in Lincoln University, PA. The focus on preventing medical errors should also occur under the umbrella of the facility's quality improvement or performance improvement umbrella, in her view. "The facility leadership should have a strong quality or performance improvement initiative,empowering staff to come up with creative solutions to patient safety," Swisher tells **Eli**.

"By approaching the patient safety standards with the intent of finding ways to learn from medical errors and 'near misses,' the facility leadership takes the punitive nature out of it," Swisher notes. "This is critical to getting total staff participation and buy in to the process."

#### Take the Sting Out of Deficiencies

Using the quality improvement process as a framework for patient safety can take the negativity out of deficiencies cited by state surveyors. "No one is going to call a deficiency wonderful, of course, because they have that negative

connotation, which is what the state has chosen to do," Swisher points out.

Yet facilities can "reframe" the process, Swisher says, by identifying a deficiency as an issue that provides an opportunity to do things in a better way - as opposed to, "you will be punished if you don't make this change." To pull this off, however, administrators have to look for the germ of truth in each deficiency.

Swisher believes the government may change its approach to regulatory oversight as more nursing facilities adopt the nonpunitive, systems approach to patient safety issues. In her view, organizations can hasten a more collaborative alliance with surveyors by inviting them into their facilities to attend staff training programs on patient safety that highlight this new approach.

Not everyone is optimistic about eventual movement toward a less punitive regulatory oversight of nursing homes. "That's what everyone hopes will happen, but there's no real indication we're making headway in that direction," says **Jade Gong**, principal of **Health Strategies Associates** in Arlington, VA.