

Long-Term Care Survey Alert

LTC Trends: Facilities Get An 'A' For Pain And 'Needs Improving' For Pressure Ulcer Scores

The national report cards are out, and while nursing homes are looking good on pain and physical restraint reduction, their pressure ulcer scores don't appear headed in the right direction.

The good news is that the percent of residents with chronic pain dropped by more than 30 percent (from 10.7 percent to 7.3 percent) since the **Nursing Home Quality Initiative** rolled out in November 2002. Nationally, the chronic pain measure improved each quarter since then. The percent of short stay residents who experienced pain decreased nationally by 11 percent in one year (from 25.4 percent to 22.6 percent).

Facilities are also showing inroads in reducing the physical restraint quality measure. The percent of residents who were physically restrained declined by 15 percent (from 9.7 percent to 8.2 percent) nationally - improvement that has been seen in 92 percent of states. Nationally, the daily physical restraint measure has improved each quarter since the initial rollout in November 2002.

On the downside, the pressure ulcer measure has remained stuck over the last 12 months at 8.5 percent to 8.8 percent. And the overall trend on this measure points to a worsening performance in 82 percent of states. CMS concedes, however, that this change could be an artifact of more accurate reporting rather than poor clinical care.

"The pressure ulcer measure results are an interesting example of the interaction between measurement and clinical improvement," said **Dennis Smith**, acting CMS administrator, in a statement. Smith vowed that CMS will work with nursing homes to improve both over time.

Interesting Question: Could nursing homes also be inheriting more residents with pressure ulcers on admission? The number of patients in hospitals nationwide with pressure ulcers is climbing, according go the Agency for Healthcare Research & Quality's recent national health care quality report. "And these are hospital patients admitted either from home with ulcers or developing them in the hospital," notes Ruta Kadonoff, senior health policy analyst for the American Association of Homes & Services for the Aging. "So you figure that a certain percentage of these patients are admitted to SNFs. Yet the existing pressure ulcer quality measures have no way of reflecting those higher admission rates," she notes (See "Prevent Your Pressure Ulcer Scores From Becoming A Sore Point With Surveyors And Consumers").