Dear Administrator:

This letter is to notify you that the Department of Health has declared “War on the Sore” and established improving pressure ulcer prevention and treatment in nursing homes as a statewide priority initiative for 2007.

The Centers for Medicare and Medicaid Services (CMS) has established improving pressure ulcer care as a national priority through September 30, 2007. New York’s performance on national measures that are related to pressure ulcer care suggests that our state’s nursing homes can achieve significant improvement in this area of care.

Based on the latest available information, New York’s overall nursing home pressure ulcer prevalence rate currently rank 32nd in the nation. The state’s aggregate prevalence rate of 9.1 percent is higher than the national goal of 5 percent.

To address this issue, the Department’s nursing home surveillance program (Program) is convening a workgroup to develop and implement initiatives to improve pressure ulcer prevention and treatment across the continuum of care. This effort consistent with the national “Advancing Excellence in America’s Nursing Homes” initiative. The Program’s intent is to address issues including, but not limited to:

- *Improving communication, coordination, and information transfer between providers when individuals move from one care setting to another:* Pressure ulcer prevention is a serious health issue across the continuum of care. The Department encourages local collaborative projects involving nursing homes, hospitals, and home health care agencies, that focus on improving communication, cross-provider training on standards of practice, and standardizing data collection and reporting;

- *Improving consumer knowledge about pressure ulcer prevention and treatment.* Education and training for residents, their representatives, ombudsman and others will facilitate public awareness of the importance of pressure ulcer prevention;
• Ensuring the provision of care consistent with acceptable standards of practice. Nursing homes should conduct comprehensive reviews of their assessment, prevention and treatment protocols and processes. Clinical experts may be available to assist in these evaluations.

In addition, DOH surveillance reviews will expand their depth and scope. Nursing home survey staff will direct an additional emphasis on those providers that have experienced continuing quality of care compliance issues related to pressure ulcer care over the past three years. Surveillance in other DOH programs, such as hospitals and home care, will also increase its focus in this area.

DOH Expectations

The Department expects every long term care provider to meet the accepted standard of care: to have in place an effective pressure ulcer prevention and treatment program. An acceptable program includes:

• An active Medical Director who is directly involved in developing, implementing, and monitoring compliance with policies and procedures that are consistent with accepted evidence-based standards of care. The Medical Director is expected to work with the facility leadership, including the Quality Assurance Committee, to monitor care and ensure that care is consistent with standards of practice;

• A Director of Nursing who actively manages nursing staff and the interdisciplinary team to ensure that staff are trained on current prevention and treatment protocols, and that care delivery complies with standards;

• An Administrator who establishes a culture of appropriate care throughout the facility. The Administrator is expected to ensure that staff fully understand the value of following standards of practice, and the adverse outcomes residents can suffer from deviation from accepted protocols;

• Staff who understand the importance of appropriate preventive care and are adequately trained in effective practices.

The Department has established a performance improvement target of a 2 percent reduction in the overall prevalence measure by September 30, 2007. Several partners have joined the Department in this initiative because of its importance to the health, safety, and quality of life of our nursing home residents. These partners include provider associations, professional organizations representing nursing home administrators and medical directors, labor organizations, the Island Peer Review Organization (New York’s federal Quality Improvement Organization (QIO)), and the New York State Board of Examiners of Nursing Home Administrators.
Each of these organizations has implemented its own activities, and is committed to addressing this important quality of care issue. However, only your organization can make New York achieve our improvement goals. I challenge you to adopt this issue as an organizational priority immediately, and to contact your provider or professional organization, or the QIO, to begin your journey toward sustained improvement in pressure ulcer care.

The Department and its partners will send more detailed information on these initiatives in the near future, but I encourage you to take action NOW. Our residents are depending on you.

Please call my office at (518) 408-1267 if you have any questions regarding this initiative. On behalf of our nursing home residents, thank you in advance for accepting this challenge.

Sincerely,

Keith W. Servis, Director
Division of Quality & Surveillance
for Nursing Homes and ICFs/MR