

Nursing Home Care: An Introduction

Ana Tuya Fulton, MD

Practicing nursing home medicine can be both rewarding and challenging. Nursing homes provide a low overhead, flexible, self-designed practice setting with varied, complex patients.

With recent changes in the health care system, nursing homes have become places of increasing medical acuity, and are no longer only places of long term residential care. Increasing efforts by **Centers for Medicare and Medicaid Services (CMS)** to improve quality of care have led to exciting initiatives. The current 9th *scope of work (SOW)* emphasizes continued quality of care, with a focus on transitions of care with continued focus on patient safety, and chronic disease management and prevention. Rhode Island's **quality improvement organization (QIO)**, **Quality Partners of Rhode Island (QPRI)**, works in close partnerships with Rhode Island nursing homes to reduce rates of pressure ulcers, reduce rates of restraints, improve medication safety, and promote seamless transitions across the spectrum of care.

This issue reviews some recent areas of interest and change in nursing home medicine. To start, the 2008 **Center for Medicare and Medicaid Services (CMS)** nonpayment rules drew attention to pressure ulcer treatment and prevention. Now firmly considered a preventable condition, regulators scrutinize the standard of care around pressure ulcer prevention and treatment. The article in this edition reviews physician responsibilities around pressure ulcer treatment, and summarizes risk factor modification, ulcer identification, staging, documentation and treatment.

Dementia prevalence is on the rise and is one of the most common conditions treated in the long term care setting. Many patients will ultimately reside in nursing homes or special care units due to the inevitable, progressive functional and cognitive decline associated with dementia. Behavioral symptoms are often the most challenging symptom for physicians, nurses and families to manage. Two articles will address the

management of behavioral symptoms from both the pharmacologic and non-pharmacologic viewpoints.

The increasing recognition of dementia as a terminal illness has led to a more prominent role for and the push to further involve palliative care in the nursing home setting. An article discusses the indications for referral to palliative care, and the symptoms of advanced dementia that can benefit from palliative interventions.

Finally, nursing homes are subject to the same trends and outbreaks that affect the general population. Last year's pandemic of H1N1 was felt among nursing home residents and often with higher rates of morbidity and mortality. The final article reviews the effect of both seasonal influenza and pandemic influenza on the older adult population.

Hopefully, this special edition provides useful information and updates for those who practice in nursing homes, and for those who care for older adults in the community.

Ana Tuya Fulton, MD, is Chief of Internal Medicine, Butler Hospital, and Assistant Professor of Medicine, Department of Medicine, Division of Geriatrics, The Warren Alpert Medical School of Brown University.

Disclosure of Financial Interests

The author and/or spouse/significant other have no financial interests to disclose.

CORRESPONDENCE

Ana Tuya Fulton, MD
Butler Hospital
345 Blackstone Blvd, Center House Rear 207
Providence RI 02906
Phone: 401-455-6421/401-455-6362
E-mail: afulton@butler.org

