

Does your facility have a DOT.COM? Dementia Oversight Team.Care Options Meeting

What is a DOT.COM?

A DOT.COM is a weekly resource meeting that addresses needs-driven behaviors (NDBs) in residents with dementia.

What does an effective DOT.COM look like?

An effective DOT.COM should last one hour, with time spent reviewing 3—5 residents with a dementia diagnosis to ensure all clinical, psychosocial, spiritual, and physical needs are being met. This includes a conducting a chart review of the care plans and examining behavior flow sheets, medication administration records, interdisciplinary notes, and recent assessments.

Who should be involved in my DOT.COM?

- **Direct-care staff members**
- **Activities staff members**
- Case managers
- Nursing administration
- Social-services staff members
- Executive management
- **Family members**
- Pharmacy consultants
- Physicians/nurse practitioners/psychologists

Why is an effective DOT.COM a valuable resource for my skilled nursing facility (SNF)?

An effective DOT.COM challenges SNF staff members to look more closely at their care approaches and incorporate person-centered care (PCC), quality of life, data-driven Quality Assessment Performance Improvement (QAPI), and rapid-cycle change testing (Plan-Do-Study-Act: PDSA). The DOT.COM also uses the NDB theory as a guide for evaluating residents with dementia to achieve optimal patient safety outcomes.

How many residents should I review in my DOT.COM? How do I keep track of what was discussed?

- Do not try to review all residents in a unit or in the entire facility in one meeting.
- Consider reviewing 3–5 residents very thoroughly on a weekly basis.
- An easy approach is to review each resident due for a care plan or Minimum Data Set Assessment that week.
- Several tools are being developed for consideration when reviewing NDBs, nonpharmacological care approaches, and appropriate activities options to meet individual resident needs.

What benefits can I expect from my DOT.COM?

- Bridge relationships between nursing home staff members and families to discuss better ways to address individual resident needs and care approaches. This helps families realize that their input is valued and they are care-team allies. The DOT.COM approach also sends a message to direct-care staff members that their input is valuable and increases their willingness and excitement about contributing to the oversight team and improving care systems.
- Prepare SNFs for better survey results in the areas of quality of life, PCC, care planning, use of unnecessary medications, new QAPI regulations, and potentially many other clinical areas.
- Lower SNF cost and liability through decreased use of unnecessary medications and increased patient safety across a variety of clinical areas.
- Decrease unnecessary hospitalizations by anticipating NDB in-house before crises occur.

Federal Nursing Home Regulations that can be positively impacted by a DOT.COM.

F222	Chemical Restraints
F240	Quality of Life
F241	Dignity
F242	Self Determination and Participation
F246	Accommodation of Needs
F248	Activities
F250	Social Services
F252	Environment
F257	Comfortable and Safe Temperature
F258	Maintenance of Comfortable Sound Levels
F272	Resident Assessment
F280	Participation in Care Planning and Treatment
F281	Professional Standards of Quality
F309	Quality of Care
F320	Mental and Psychosocial Functioning
F329	Unnecessary Drugs
F385	Physician Services
F425	Pharmacy Services
F428	Drug Regimen Review
F490	Administration
F498	Proficiency of Nurse Aides
F520	Quality Assessment and Assurance

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