

**Quality Management Committee Meeting  
November 16, 2006  
Meeting Minutes**

**Present:** Adele Edelman, Cindy Smith, Dagny Hoff, Don Grabowski, Erin Weaver, Jane Culver, Jerry Bernard, Joe Carlomagno, Karen Topper, Linda Berger, Marie Bean, Stephen Morabito, B. Scott West, Veda Lyon

**Facilitators:** Stephen Morabito and Joe Carlomagno

**Recorder:** Jane Culver

**Meeting Objectives:** Review the first draft of the Quality Management Plan and prepare to gather feedback over the next month.

**Announcements:** Scott West is replacing Lynette Shepard as Adult Day representative. Ed Kent passed away unexpected earlier this week. His wife Millie intends to continue on the committee.

**1. Outline of the process for the next few months.**

- a. Feedback
  - Committee members will get feedback from their groups to bring back to the December 14<sup>th</sup> QMC meeting.
  - Feedback is also being sought from DDAS/DAIL staff.
  - Joe and Stephen will look over all the feedback and integrate it into the document
  - In January the final draft will be presented for public feedback via public forums, town meetings and an ITV presentation.
  - The ITV presentation can be recorded and shared with anyone who is interested.
  - The plan will be finalized in February.
  - The QMU will be trained in QMP details in February.
  - The QMP will be used for the first time in a March 2007 review.
  - Lead reviewer assigned to each agency will be available to help each provider/agency and will be their liaison with the QMU.
- b. Annotations
  - Annotations will be in a consumer friendly version of the plan, using consumer friendly language.
  - It will be a separate document, available upon request, in different formats.
- c. Consumer Interview Tool development and testing.
  - The consumer interview tool is being developed for testing.
  - Questions are currently being developed which will be put into a software program for use on a laptop computer.
  - QMU will be involved in development and testing this tool.
  - The consumer questions will be tested on real people.

- The questions tie back to the Outcomes and Indicators document.
- There was a concern voiced that the use of a laptop computer during interviews may be off-putting or intimidating for clients.
- Staff will be trained in techniques for using computers in interviews.

**2. Review sections of the draft QMP; ask questions, get clarity so that Committee members are prepared to obtain feedback from stakeholder groups.**

**Introduction:** Review and orientation of draft QMP.

- Feed back is most helpful if it is specific and in language that can be used in the QMP.
- The introduction outlines the continuing role of the committee in review of the plan.

**Purpose of the QMP**

**Ongoing Review of this Quality Management Plan**

- The Plan is expected to change over time as things in systems change and new services are added.
- This is an ongoing document that will be revisited by the QMC.
- It is a living document that can be edited.
- People need to know when they are doing things well. The Plan should reflect the good things that are happening too.

**Technical Assistance in Understanding and Using QMP**

- Technical assistance for agencies will be provided through a liaison or contact person.
- This contact information will be attached to the Quality Management Plan.
- Agencies will be contacted before reviews to find out what they might need.

**Shared Values**

- This is the mission of the department.

**Desired Outcome of Services**

- All outcomes are related to at least one of the HCBS Quality Framework Focus areas.
- A crosswalk of the Outcomes and Indicators document and the HCBS Quality Framework Focus Areas will be available on line.

**Program Descriptions**

- Programs are intermixed with services in some areas.
- Services should be reviewed and rewritten by each program.
- Descriptions should only be a brief overview of services

### **The Onsite Review Process: Discovery and Remediation**

- The purpose of this paragraph is to introduce the process as the fundamental way the State deals with findings.
- We will not use 'discovery' and 'remediation' in the Quality Management Plan. It is used here to relate back to the HCBS framework.
- Reviews are now on a 2 year cycle due to limited resources and staff.

### **Quality Improvement: Public Reporting for Systems Change.**

- Information gathered public reporting about what we do.
- The more focus we put on things the more impact we have on long term improvement.
- Looking at systems issues and develops a report in aggregate.
- Identify issues that are coming up and.
- All findings and reports are open to the public. Audiences – legislature, advisory board. Local agency boards.
- Feedback provided to agencies and people who receive services.
- Proposal to have annual forum for agencies and people and families who receive services to provide public feedback on quality of services.

### **Technical Assistance in Service Delivery**

- The lead reviewer will be available to help each agency develop, implement, and follow up on results of a review finding.
- The lead reviewer will also be available to implement a QM Plan.
- There is a grid that outlines areas where agencies may need assistance and the DDAS person who is available and responsible for areas of concern.

Need for ombudsman outside the state system to get immediate action.

Seems like a closed system.

A watered down version of the system that used to be in place.

### **Internal Quality Management Plan Minimum Requirement**

- Many agencies doing this already and usually provide good services.
- Describes types of things that we want to see in the plan.
- Identifies what we want agencies to pay attention to.
- Internal quality plan – part of review process and will be a finding. Help will be available to providers in formulating a QMP.

## **Quality Management and Consumer Managed Services**

- Consumer managed services require a different way to measure quality.
- A different methodology needs to be put in place to insure quality.
- Outcomes need to be the same for everyone no matter who they receive services from.
- Samples are used to review services.
- Some services are family managed. The consumer is not really directing services.
- Training need for consumer directed people.
- This needs to be included in the QMP.

## **Related Policies and Other Quality Management Activities**

### Program Standards and References

- Each program has standards and operational protocols.
- The QMP is not meant to replace these standards but to supplement them and to insure they are being adhered to.
- Some things may overlap and some standards may need to be modified to reflect this process.

### Designation and Certification

- The plan is to do both these things together to make it easier on everyone.
- QMU is responsible for certification of programs, case managers, ADS, homes that provide Choices for Care services.

### Protective Services

### Background Check Policy

- All providers are required to follow the policy.

### Critical Incident Reporting Policy and Procedures.

- DDAS is beginning to form a draft CI policy that will apply to all of the services in AHS.
- It is expected that a written policy will be available for feedback in 2007.
- We are moving to a tech based system that will allow providers to report CIR information online.
- The system will generate real-time reports to the people responsible for taking action.

### Complaints, Appeals and Grievances

- With Global commitment a new policies will be coming out.
- Procedures will change.

### Case Management Standards

- Standards require an exam, certification, and training.
- The exam is given two times a year.
- Information is on line.
- Certification for CFC does not apply to TBI.

### Qualified Development Disabilities Professional

- Their certification is similar to case managers.
- Agencies are responsible for assuring that workers have knowledge and capability.
- There is also an exam.

### Provider Agreements

- Some statements and contracts or agreements in some form that agency will comply.
- CFC has no provider agreements.
- As agreements are developed they will be included in the QMP.

## **Appendix A: On-Site Review Protocol**

### Introduction

- This creates language that frames the spirit and intent of this process.
- A review is intended to assist agencies and consumers in making changes for improvement. This is not an auditing process.
- It's a way of looking at things in a way that will improve the quality of services.

### 1. Sample selection

- Samples are no less than 10% of clients served or a minimum of 4 people.
- The intent is to get a good sample in order to see what is happening at an agency.
- Samples are not completely random so as to insure all areas of service are reviewed.

### 2. Notification and Scheduling.

- It is the intent to give agencies as much notice as possible.
- Promise a 30 day notice. In the future we will probably be able to give more than 30 days.
- The lead reviewer contacts the agency director to schedule an initial meeting to go over the process and outline the steps.
- The director contacts consumers in sample to set up and coordinate interviews.
- We are looking for consumers to be informed about the QM review to avoid confusion by the consumer.
- The agency notifies QMU know of any circumstances to be aware of before go into a consumers home.

- There needs to be some mechanism to get consumer interviews scheduled.
- The timeline needs clarification

### 3. Consumer Interview

- The order of steps 3, 4, & 5 to be decided by the Lead reviewer.
- Make sure if a consumer needs a proxy (not a staff member) that arrangements have been made. .
- Would like interviews to take place in people's homes in order to get a bigger snapshot of their lives.

### 4. Record Review.

- Outlined in data sources as data point items that need to be looked at - service plans, case notes, individual files, agency policies and procedures.
- Checklists for individual files, agency requirements.
- Look at files in a private area for confidentiality concerns.
- Agency contact person arranges for these things to be ready for the review.
- All documents are all in data source and data points.

### 5. Discussion with agency staff.

- Structured ways were difficult to manage.
- Talk to agency representative to find out the best ways of doing this.
- Informal discussion does not mean off the record.
- Our data source is people. The way we talk to them is not important.
- The questions will be the same and are directed by the Outcomes and indicators document

### 6. Focus group with key agency staff.

- This is the last piece of data collection.
- Anything that is still up in the air or needs clarification can be asked in this focus group

### 7. Feedback Discussion.

- Feedback should happen throughout the entire review.
- The idea here is to have formal feedback at the end to go over the report identifying strengths and areas that need improvement.
- Last opportunity for agency to give information the review may have missed

## 8. Quality Services Reporting and Quality Action Plans

- Lots of differences with finding and action wording which needs feedback from the public forums.
- Involvement in development Consumers and family member will be involved in some part of Quality action plans.
- Advisory groups to deal with this

## 9. Technical assistance

- Technical assistance is available to help with Quality Action Plan as well as systems changes.

### **Areas of Inquiry: Quality Services Standards**

- Data points ranked by what is most important to do.
- Black boxes denote primary data points and are required to be asked.
- They may also use if secondary data is needed.
- The italicized questions are the primary questions.
- The other questions may be used for clarification of the primary question.
- The areas of inquiry still needs to be tested.