



DBHDD

# **Quality Management Strategies Used to Make Quality Changes**

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# Session Topics

1. Introduction to the Georgia Quality Management System
2. Why we Care about Measuring Quality
3. Provider Quality Improvement Plans

# **INTRODUCTION TO THE GEORGIA QUALITY MANAGEMENT SYSTEM**

# What is Quality?

“The degree to which services and supports for individuals and populations increase the likelihood for desired health and quality of life outcomes and are consistent with current professional knowledge.”

- *Centers for Medicare  
and Medicaid Services (CMS)*

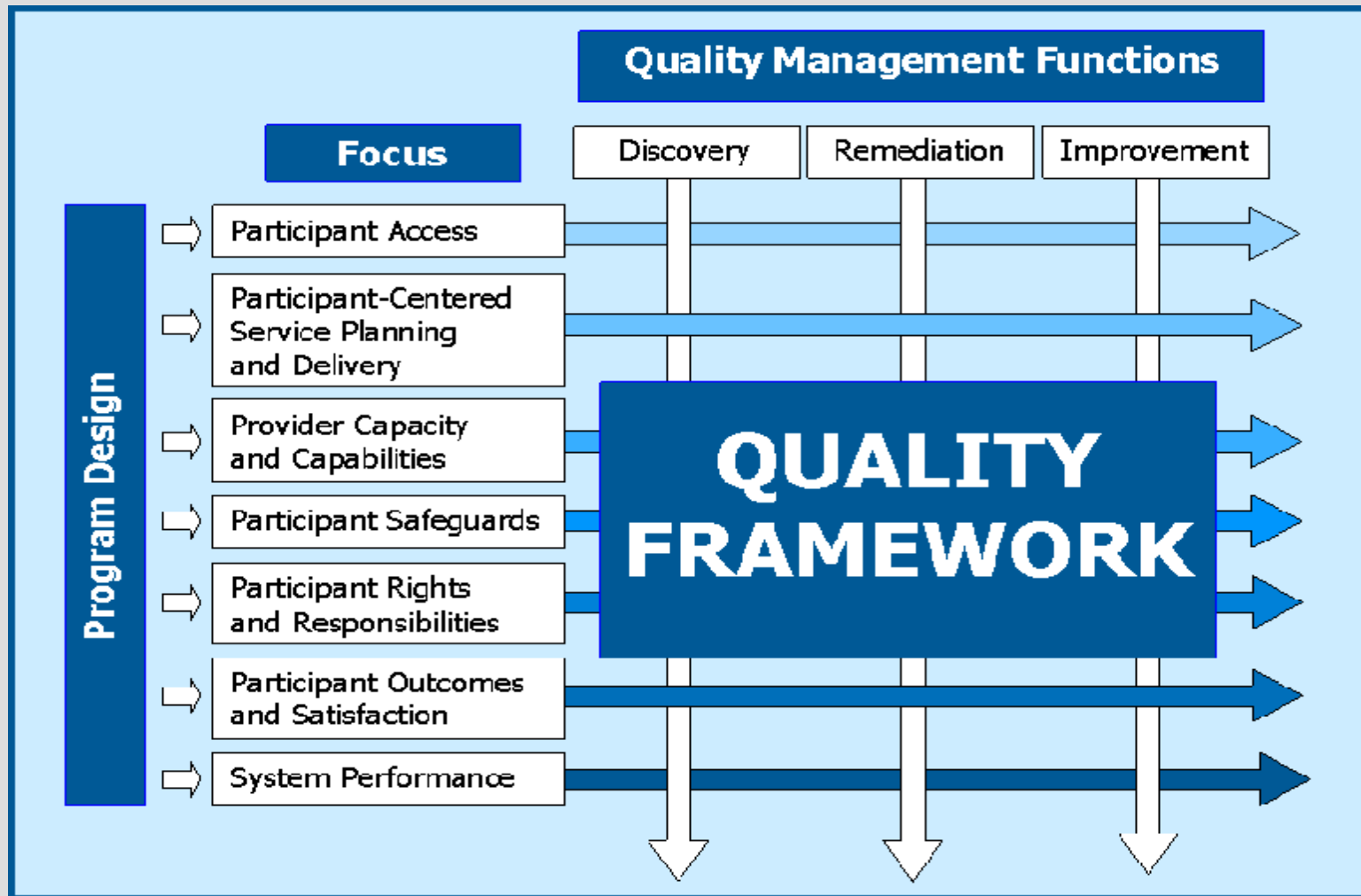
# What is a Quality Management System?

A dynamic system which gauges the effectiveness and functionality of program design and pinpoints where attention should be devoted to secure improved outcomes.

# Georgia's Quality Management System

Georgia's approach to quality management will assure that Quality Assurance and Quality Improvement activities are integrated and working as intended to achieve the desired outcomes defined in the CMS Quality Framework for Home and Community Based Services.

# Federal Diagram of a State's Quality Management Focus Areas and Functions: CMS/ HCBS "Quality Framework"



# Components of Georgia's Quality Management (QM) System

- Delmarva
- Person Centered Reviews
- Quality Enhancement Provider Reviews
- Follow Up with Technical Assistance Consultations
- Quality Improvement Councils
- Trainings
- Incident Reporting Tracking and Trending System
- Reporting System





# The Delmarva Foundation

- National, not-for-profit organization with a mission to improve health in the communities we serve.
- Established in 1973, the Delmarva Foundation (DF) today has two offices in Maryland as well as offices in the District of Columbia, South Carolina, and Florida and provides services throughout the United States.
- DF brings both expertise and experience to running a statewide quality assurance program.
- 75% match funding from CMS – Funding does not effect waiver dollars for individuals.

# Philosophy of Review Processes

- The review focuses on enhancing the effectiveness of the person's service delivery system, to produce results that reflect communicated choices and preferences that matter most to the person.
- The review is designed to be person-centered & outcome based.
- The review is interactive and consultative in nature.

# Review Processes

- Person Centered Review (PCR)
- Quality Enhancement Provider Review (QEPR)
- Follow Up with Technical Assistance (FUTAC)

# Person Centered Reviews

- Individual interview is the starting point
  - NCI Consumer Survey
  - Additional Interview Questions
- Observations
- Direct Service Provider Interview(s)
- Support Coordinator Interview
- Records Review (Provider and Support Coordination)
- Includes ADA Settlement Agreement Population

# Quality Enhancement Provider Reviews

- Onsite review with providers
- Individual interviews start the process
- Administrative Review
- Observations
- Direct Service Provider Interview(s)
- Records Review

# Follow Up with Technical Assistance Consultation

- Provide additional support to help ensure continuous quality improvement
- Centers for Medicare and Medicaid requirement for Remediation of issues and concerns identified
- Requests from providers

# Reports

- Annual Quality Assurance Report
- State National Core Indicator Report
- Web-based PCR and QEPR reports
- Annual Quality Improvement Study

# Quality Improvement Councils

- 6 Regional and 1 Statewide Council
- Quality Improvement Councils
  - Individuals Receiving Services
  - Family Members
  - State and Regional Developmental Disabilities Staff
  - Providers
  - Support Coordinators



# Purpose of Councils

- Provide oversight to the statewide quality assurance program
- Review and evaluate the service delivery system
- Identify areas needing improvement
- Recommend ideas for improvement
- Possibly modify state policy and procedures

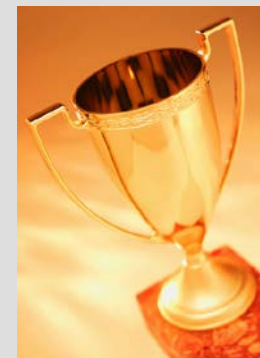
# Web Addresses

- Department of Behavioral Health and Developmental Disabilities
  - [www.dbhdd.georgia.gov](http://www.dbhdd.georgia.gov)
- Georgia Quality Management System
  - [www.dfmc-georgia.org](http://www.dfmc-georgia.org)
- Provider Reporting Website
  - [www.georgiaddproviders.org](http://www.georgiaddproviders.org)

# WHY WE CARE ABOUT MEASURING QUALITY

# Why We Care About Measuring Quality

- Federal government (Centers for Medicare and Medicaid Services, CMS) requires that states must demonstrate oversight of waiver services, including identifying areas for improvement and making changes.
- People with disabilities and family members want and need information.
- All stakeholders need to know what works and what doesn't.



# Provider Quality Improvement (QI) Systems in Georgia

- Providers must demonstrate a functioning QI system
- QI Systems assess service quality and document how providers:
  - Identify areas for improvement
  - Implement strategies to improve services & monitor impact
  - Demonstrate that an ongoing process is in place to scan for new areas for improvement

(Source: Provider Manual, Quality Improvement Process & Management of Risk to Individuals, Staff and Others is a Priority, Part II, Section II)

# Provider Quality Improvement (QI) Requirements in Georgia

- Areas of risk identified
  - Incidents, accidents, complaints, grievance, limited freedom of choice, medication management
- Indicators of performance used to assess and improve organizational quality
- 5% of records are reviewed quarterly
- Utilization of staff is assessed
  - Competency, qualifications, staff ratios, staff necessary to provide needed services/supports

(Source: Provider Manual, Quality Improvement Process & Management of Risk to Individuals, Staff and Others is a Priority, Part II, Section II)

# **GEORGIA PROVIDERS' QUALITY IMPROVEMENT PLANS**

# Georgia Providers' QI Plans

## **Describe your QI Plan:**

- Data / information collected about your services
- Who you gathered at the table to review the information?
- How an area for improvement was prioritized?
- How you came up with strategies to address the issue?
- Difficulties implementing your change strategies?
- How will you measure impact of change strategies?
- What went well?





## Establishing your QM System

- Educate individuals and staff on your self assessment process and their participation.
- Develop tools with input from individuals, staff, family members, etc.
- Develop a data collection tracking system to track and record data collected.
- Develop a timeline for the implementation of the self assessment and periodic review of the results.
- Identify the responsible persons to conduct the self assessment and be responsible for follow up based upon the QIP.

# Set Goals & Performance Indicators

- Start with your organization's mission.
- What goals do you have as an organization?
- How will you know when your goal is met?
- How will you collect data to determine if you are meeting your goals?
- Document the quarterly review of information gathered.
- Document goals you are meeting and how you addressed goals you are not meeting.



## Wrap Up

- Need to develop a robust internal quality assurance and quality improvement mechanism.
- May require improvements in technological capabilities including software that links client data re: identified goals, services rendered, serious incidents and injuries, health conditions, etc.
- Create performance indicators to benchmark progress and mark when you have met a targeted goal.
- Establish an internal quality management committee to involve families and people with disabilities in the process of quality improvement and assurance.

# Technical Assistance & Resources

- Where can you go for help?
  - Division of DD staff
  - Regional Office of DD Staff
  - Best practices will be posted to Delmarva website ([www.dfmc-georgia.org](http://www.dfmc-georgia.org))
  - Use your QI Council & Delmarva staff as a resource
  - Network with other providers

# Contact Information

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