CRITICAL QUESTIONS WORKBOOK

Section I
Introduction to the Critical Questions Workbook

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Critical Questions Workbook
Section I

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Introduction

The *Critical Questions Workbook* is designed as a tool to support the work of Local Quality Assurance Coordinators and Quality Assurance Committees. The responsibilities of these groups are defined in the State Quality Plan and its revisions, submitted to Centers for Medicaid and Medicare Services (CMS), and in the Oregon Administrative Rules (OARs) on Community Developmental Disability Programs (CDDPs) 411-320-40 (9) (08/03/04).

Oregon's Seniors and People with Disabilities (SPD) submitted the State's Quality Plan as part of its application to CMS for renewal of a waiver. The plan includes information on how state and local developmental disabilities programs will assure six features of service—referred to as the "six assurances." SPD, therefore, has established six "Goals" for the service system for persons with developmental disabilities, related to achieving these six assurances. Each Goal includes a set of "Desired Outcomes." Because these six Goals—and their Desired Outcomes—are the cornerstone of how CMS reviews state systems for quality, this workbook is designed around them.

> The Six Goals
>
> Goal #1: Participant Health and Safety
> Goal #2: Plans of Care
> Goal #3: Qualified Providers
>
> Goal #4: Determining Level of Care Need
> Goal #5: State Administrative Authority over the Waiver
> Goal #6: State Financial Accountability

The workbook includes one "Critical Question" related to each Goal and worksheets related to each Desired Outcome. Additional chapters of the Workbook include an orientation for Quality Assurance Committee Members, sample worksheets for use with QA Committee members, and other sample pages for use in working with the Committee.

The *Critical Questions Workbook* provides guidance to Quality Assurance Coordinators and CDDPs to organize information for the Quality Assurance Committee to "review and comment on the results of information gathered

by the CDDP and the effectiveness of corrective actions" {OAR 411-320-0040(9)(e)(B)(iii) }. Each Critical Question asks the Committee to determine how well the local area is meeting that goal, in two ways:

1. The extent to which the expected local CDDP Quality Assurance **processes** related to this Critical Question are in place and functioning to standards.

2. The quality of **results** discovered through those Quality Assurance process, i.e., how well the county as a whole is performing related to the Critical Question and its Desired Outcomes.

To allow the Committee to review and comment on results, the QA Coordinator will need to establish data systems that summarize the relevant data for Committee review.

Through contract, Administrative Rule, or at Department request, CDDPs are required to maintain a set of local processes or participate in statewide activities for gathering, reviewing and responding to data. These quality assurance processes are referred to by SPD as "Quality Components." For example, file reviews, licensing and certification, and the SERT system are examples of Quality Components. SPD's document "**CDDP Quality Assurance Plan Content Requirement Summary"** (April 2005) is presented at the end of this introduction and summarizes quality components that are expected of CDDPs.

Each chapter identifies required local and statewide Quality Components (quality assurance systems) and some suggested ways to measure (quality indicators) tied to each Desired Outcome.

Quality Coordinators may choose to use this workbook in several different ways:

1. Use the *Critical Questions Workbook* Section I as a guide for the QA Coordinator for developing quality indicators (measures) for working with Committee members.

2. Use the Committee Workbook Sections II-VI as presented, directly with committee members. The worksheets included in these sections have been simplified for Committee members. A few options

are presented, and QA Coordinators may select the formats that work best for their Committee. The Committee worksheets help to organize information given to the Committee, and place it into context.

3.   Use the Committee Workbook Sections II-VI as samples, but develop local formats for materials and information for working with Committee members.
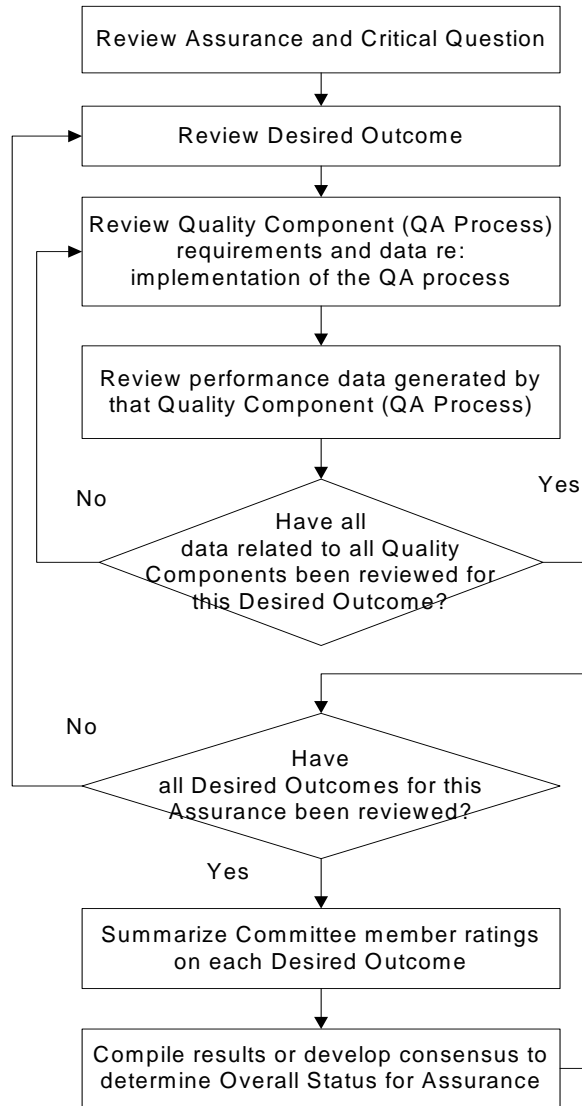
CDDPs are NOT required to use any sections of the *Critical Questions Workbook* for QA Coordinators and the associated Committee materials. They are provided solely as a resource.
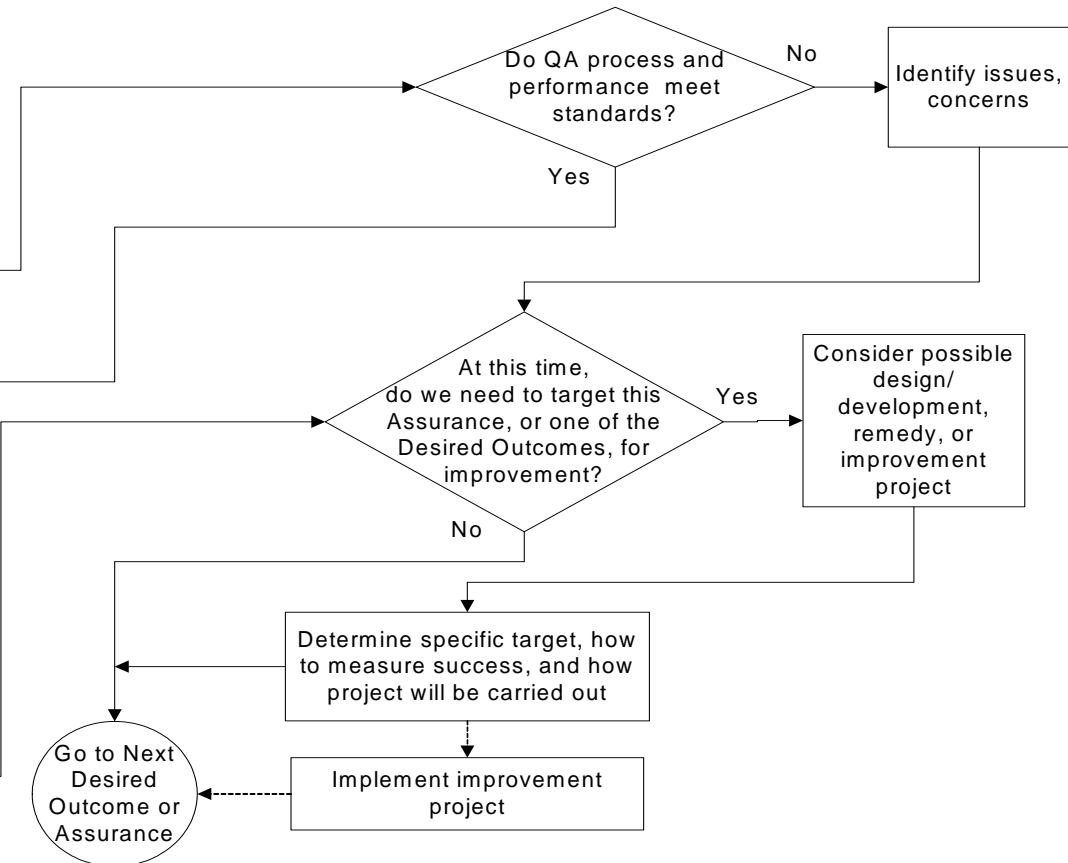
ORGANIZATION AND CONTENTS OF THE WORKBOOK

Section II: Worksheets to assist QA Coordinators with selecting appropriate measures for reporting quality assurance results related to each Quality Component, Desired Outcome, and Goal.

Section III: An orientation for use with Quality Assurance Committee members that explains their role related to reviewing the results of quality assurance activities.

Section IV: Quality Component Lists and Rating Forms worksheets --for use with the QA Committee, and instructions for how to use them.

Section V: An alternate version of worksheets for use with QA Committees--"Process and Results Rating Forms"—and instructions for how to use them.

Section VI: Sample Helpful Pages.   This section includes additional forms that may be used by QA Coordinators with QA Committees. Forms included are "Summary of Desired Outcomes," "Do We Need to Target this Goal?," "Defining a Project," "State Plan Formats," and "Quality Assurance/Quality Improvement Plan Detail."

CDDP Role: Review with Committee

General Process for Working with Quality Assurance Committees Using the Critical Questions Workbook

Review Assurance and Critical Question

Review Desired Outcome

Review Quality Component (QA Process) requirements and data re: implementation of the QA process

Review performance data generated by that Quality Component (QA Process)

Quality Assurance Committee Role

No — Have all data related to all Quality Components been reviewed for this Desired Outcome? — Yes

Do QA process and performance meet standards? — No → Identify issues, concerns

Yes

No — Have all Desired Outcomes for this Assurance been reviewed? — Yes

At this time, do we need to target this Assurance, or one of the Desired Outcomes, for improvement? — Yes → Consider possible design/ development, remedy, or improvement project

No

Summarize Committee member ratings on each Desired Outcome

Determine specific target, how to measure success, and how project will be carried out

Compile results or develop consensus to determine Overall Status for Assurance

Go to Next Desired Outcome or Assurance

Implement improvement project

HINTS for Working with the
Critical Questions Process and the Quality Committee

- Keep notes on how you developed the data related to Quality Components and Desired Outcomes. Often, there are many ways to select and compile data, so notes will help you to do it the same way next time, or to improve your data presentation. The QA/QI Plan Detail Form included in the Sample Forms section is useful for this purpose. For example, one of the Quality Components required for the Desired Outcome, "Individuals live in safe physical environments" is Licensing and Certification Reviews. However, which items from these reviews will be reported? Only Corrective Actions related to safe physical environments? All results on a specific set of questions that relate to "safe physical environments"? Both? There is space included after each Quality Component for listing the measures used. Use the space provided for including the more detailed notes as well. List the time period from which you summarized data, the type of service setting being reported, or other factors that will help provide a context to the data presented to the committee, and assist you the next time you need to prepare similar information.

- For each Quality Component presented, include information on the implementation of the Quality Component itself, e.g., present not only the results found through Facility Checklists (Service Coordinator reviews), but what percent of facilities were reviewed using the checklist.

- Whenever presenting results, list the time period from which the data were drawn.

- Your CDDP or Committee may choose to review areas that are not obviously covered by the Goals or the *Critical Questions Workbook*, but are locally important. Please do review those. Use the general format and process of the *Critical Questions Workbook* if they are helpful.

- Whatever process you choose to use, remember at each meeting to ask your Quality Committee if it is meeting their needs, and how you can improve the process or the format of the data you are presenting.

The Process for Working with the QA Committee

The figure already presented suggests a general process for working with the QA Committee: Present data related to Quality Components that report performance on a single Desired Outcome and Goal. Ask the committee to help decide if that Desired Outcome and Goal need to be targeted for improvement. If so, then define a Design/Development, Remedy or Improvement project and how it will be carried out.

Rating the Status of Each Desired Outcome and Answering the Critical Question. The *Critical Questions Workbook* suggests a 4 point scale for rating each Desired Outcome: Exceeds Standards, Meets Standards, Needs Improvement, and Priority Problem Area. You may choose to use any scale you want—or no scale at all. For example, you may ask members to score the Desired Outcome with a number between 1 and 10, or by using red, yellow, and green colored cards to designate Problem, Caution, and Good. The purpose of these ratings is to determine whether the Committee believes the CDDP should target the Goal or one of its Desired Outcomes for a Design/Development, Remedy, or Improvement Project. Instead of ratings, you may simply ask the Committee to discuss the results presented and determine through the discussion any concerns the Committee members have related to this area.

The *Critical Questions Workbook* Sample Forms include pages to help with summarizing ratings for each Goal. The chart, "Summary of Desired Outcomes," lists all the Desired Outcomes for the Goal, along with the rating levels, in a matrix format. You may use this matrix directly, or draw a similar matrix onto newsprint for the whole Committee to be able to see. QA Coordinators and Committees, however, may choose to use dialog instead to determine if the CDDP and Committee need to target this Goal for improvement. Using ratings, however, is helpful to move the committee from discussion to action. Whichever approach the Committee uses, the Committee should determine if the Goal needs to be targeted now, targeted at a later time, or does not need to be targeted, based on current Quality Component processes and results.

Determining a Project. Another of the sample pages provided will be useful if the answer to the Critical Question indicates that the CDDP and Committee need to target this Goal for improvement at this time. This page again

lists all of the Desired Outcomes for the Goal, asking the Committee to select which Desired Outcome they will target. There also is space for writing the specific aspect of the Desired Outcome that they will target. For example, if data on the Outcome "Individuals live in safe physical environments" revealed that foster care homes don't maintain functioning smoke alarms, then a specific project could be defined around improving the performance of foster homes regarding maintaining functioning smoke alarms.

The page presents three types of projects: Design/Development, Remedy, or Quality Improvement.
    <u>Design/Development Project</u>--Develop a new system or process, e.g., a form, a method to report compiled data on PSIs, a way to compile important data from the home visits
    <u>Remedy Project</u>—Address an aspect of participant safeguards that falls in the "Priority Problem Area" or "Needs Improvement" range
    <u>Quality Improvement Project</u>—Address an aspect of participant safeguards that falls in the "Meets Standards" or "Exceeds Standards" range.
Our example of smoke alarms in Foster Care Homes would likely be considered a "Remedy Project" because the Committee felt the results were below standard.

The final two questions on this page ask "How will we know that the project is successful?" and "How will we carry out the project?" These are important planning questions, and the Committee should have input into answering them. "How will we know that the project is successful?" means "How will we measure success" or "What do we want to accomplish through this project" or "How will we know when we are finished with the project?" In "How will we carry out the project?" the Committee and QA Coordinator consider the format of the project and the resources that will be applied to it. Will it be completed by the Committee, or a subgroup of the Committee, or by CDDP staff? When does the Committee expect the project to be completed? When will the Committee expect a report on project results? Completing these discussions will help to assure a successful project.

With this overview, we hope that you are ready to start supporting your Quality Assurance Committees to review data in order to answer the Critical Questions regarding the status of services for people with developmental disabilities in your area.

Some Helpful Definitions

Exceeds Standards:	The performance of the Quality Assurance Component by the CDDP and the results that were reported both are above what is expected by standard, rule, or contract.
Meets Standards:	The performance of the Quality Assurance Component by the CDDP and the results that were reported both are approximately equal to what is expected by standard, rule, or contract.
Needs Improvement:	Either the performance of the Quality Assurance Component by the CDDP OR the results that were reported DOES NOT MEET what is expected by standard, rule, or contract.
Priority Problem Area:	Either the performance of the Quality Assurance Component by the CDDP OR the results that were reported or both are substantially below what is expected by standard, rule, or contract.
Process:	For the purposes of the *Critical Questions Workbook*, the word Process is used to refer to a Quality Assurance Component.
Quality Assurance Component:	A process that is defined by SPD through OAR or contract, or by the local CDDP, with the purpose of measuring performance in a defined area to assure Quality. Thus, it may be viewed as a "data source." The Quality Assurance Components included in the *Critical Questions Workbook* are required by SPD to be maintained on an ongoing basis by CDDPs. There are additional Quality Assurance Components, not included here, that may be required occasionally, on request, by SPD, or that may be defined by the CDDP itself.
Results:	The data gathered through the implementation of a Quality Assurance Component. For example, having records of foster provider training and testing is a Quality Assurance Component; the results would include the percentage of foster providers who meet training and testing standards.

CDDP Quality Assurance Plan Content Requirement Summary
April 2005

I. What are the primary expectations of a CDDP Quality Assurance Plan?

The plan must describe activities that: a) directly support the Department's (Seniors and People with Disabilities— SPD) goals and outcomes for home and community-based developmental disability services and b) demonstrate management of service quality by evaluating performance information and adjusting practice as indicated by the data. The plan must reflect unique organizational structure, policies, and procedures of the CDDP and must be updated at least annually.

II. What are SPD's QA plan goals and desired outcomes?

SPDs 2003 quality assurance plan for developmental disability services featured processes for assuring services meet basic Centers for Medicare and Medicaid Services (CMS) requirements. SPD has since adopted an initial set of goals and outcomes for those processes from the Home and Community Based Services Quality Framework, a collaborative product of CMS and its national senior, physical disability, and developmental disability service partners. SPD is also working with its DD Quality Assurance Committee now to finalize goals, outcomes, and measurable indicators of success. The current set of goals and outcomes include:

    A. Participant Health and Welfare. Individuals in home and community-based waiver services are safe and secure in their homes and communities, taking into account their informed and expressed choices.
        1. Individuals live in safe physical environments.
        2. Individuals are protected from abuse.
        3. Grievances and complaints are resolved in a timely fashion.
        4. Individual risk and safety considerations are identified and appropriate interventions designed taking into account individual informed and expressed choices.

5. There are systematic safeguards in place to protect participants from critical incidents and other life-endangering situations.

6. There are safeguards in place to protect and support participants in the event of natural disasters or other public emergencies.

B. **Developing, Monitoring, and Reviewing Plans of Care.** Home and community-based waiver services and supports are planned and effectively implemented in accordance with each participant's unique needs, expressed preferences and decisions concerning his or her life in the community.

1. Comprehensive information concerning each participant's preferences and personal goals, needs and abilities, health status and other available supports is gathered and used in developing a personalized plan.

2. Individuals freely choose between waiver services and institutional care, and among waiver services and providers.

3. Individuals receive services required to meet needs.

4. Individuals are satisfied with plans and outcomes.

C. **Services Provided by Qualified Providers.** All agency and individual providers of home and community-based waiver services possess the requisite skills, competencies and qualifications to support participants effectively.

1. Individual and agency providers are qualified to provide waiver services.

2. Staff of agency providers receive training to provide waiver services.

3. Service Coordinators possess skills, competencies, and qualifications to provide waiver services.

D. **Determining Level of Care Need.** Each individual's need and eligibility for home and community-based waiver services are assessed and determined promptly and accurately.

1. Level of care assessments are completed accurately and on time.

2. Level of care assessments are completed by qualified persons.

E. **State Administrative Authority Over the Waiver.** The Department carries out its duties and responsibilities as Oregon's single state Medicaid Agency with regard to home and community-based waiver services.
1. Providers of home and community-based waiver services receive information regarding Medicaid-specific requirements.
2. Individuals are informed of, and exercise, the right to due process associated with waiver services.

F. **State Financial Accountability.** The Department maintains, and participates in, systems and procedures that promote financial accountability at all home and community-based waiver service levels.
1. Expenditures for waiver services are accurately and appropriately assigned and reported.

III. **What are local and state quality assurance activities that support the Department's current QA plan?**

At minimum, these are the quality systems and processes featured in the Department's 2003 quality assurance plan and identified as either "County Processes" or as "Processes Operated by State Offices, with County Cooperation" in the May 2003 "grid" version of the Department's quality assurance plan:

A. **Protection from Harm**
1. Provide investigation and protective services for adults with developmental disabilities
2. Implement Serious Event Review Team (SERT) system
3. Provide mandatory abuse reporter training to providers (optional)
4. Participate in ISP processes related to protection from harm
5. Participate in licensing visit processes related to protection from harm
6. Provide protective services for children with developmental disabilities
7. Maintain licensing processes related to protection from harm
8. Provide support, training, and technical assistance related to protection from harm

B. <u>Individual Support Plan</u>

1. Implement Individual Support Plan (ISP) system processes
2. Monitor ISP implementation
3. Other processes, e.g.: annual summaries for CM-only; advise of rights, choice, fair hearing; TXIX waiver form

C. <u>Qualified Providers</u>

1. Complete licensing and certification
2. Monitor compliance
3. Provider processes, with cooperation of county: criminal records checks; self-assessments and plan of improvement; qualifications of in-home support staff; maintain necessary license or certification; hire qualified staff
4. Monitor providers
5. Provide training and technical assistance

D. <u>Other Administrative Issues</u>

1. Provide administrative oversight
2. Processes re Waiver
3. Processes re licensing and certification
4. Processes re state and county quality assurance
5. Measure consumer satisfaction
6. Processes operated by organizations in cooperation with county (e.g. policy addressing opportunities for individual to participate in decisions regarding operation of program; procedures for incorporating direction, guidance, advice of individuals and family members in the administration of the organization; emergency contingency plans)
7. Design system for administration, oversight, and quality Improvement
8. Manage SERT system
9. Provide oversight

E. Fiscal Accountability
1. Manage CPMS and Provider Financial Forms
2. Waiver processes
3. Act as State's fiscal agent in administering community based services
4. Maintain county financial system
5. Processes maintained by providers, with cooperation of county (e.g. provider financial records, client personal fund records
6. Maintain state financial system
7. Maintain CPMS system
8. Conduct audits
9. Conduct reviews

IV. What sources of information, or "quality assurance components" provide data that can be used to measure how well the quality assurance systems or processes are working toward goals and desired outcomes for developmental disability services?

The table on following page summarizes the quality assurance components currently identified in SPDs quality assurance plan. CDDPs have varying degrees of participation in, or responsibility for, generation or maintenance of the information and that can be reflected in local plans. CDDPs may also have local sources of information that are regularly reviewed to assist evaluate progress toward desired outcomes; those local information sources can become part of the local QA plan.

Quality Assurance Components	Maintain local process for gathering, reviewing,	Participate in statewide activity by Rule, Contract, or at Department request	Establish local success indicators related to Department goals and desired outcomes	Establish local benchmarks unless otherwise specified by Department	Establish local timelines unless otherwise specified by Department	Quality system or process from 2003 State QA Plan
Licensing, certification reviews	X	X	X	X	X	5, 7, 12, 13, 19
SERT	X	X	X	X	X	2, 4
Service coordinator monitoring, inc. annual plan reviews (24-hour res., foster home)	X	X	X	X	X	10, 13
OIT and local investigator information re protective services investigations	X	X	X	X	X	1
PSI investigator training, technical assistance, mentoring		X				1,8
Death reports	X	X	X	X	X	1,2,24
Records of individual complaints, inc. contested case as well as other types	X	X	X	X	X	20, 21
Service coordinator and provider training surveys		X				8, 16
Individual file reviews (re rights, plans, etc.)	X	X	X	X	X	11,20, 23
Annual sample file review using HCB Waiver Service Review checklist	X	X	X	X	X	11, 18
Service coordinator plan implementation reviews (Family Support, In-Home Comp)	X	X	X	X	X	9, 10
Employment Outcome reports		X				15
CDDP Records (e.g. service coordinator qualifications, training; actions re QA)	X	X	X	X	X	20, 23
Records of provider sanctions and contested case hearings	X	X	X	X	X	18, 20
Direct Care staff turnover records		X				15
Special training project records		X				8, 16
Records of foster provider training and testing	X	X	X	X	X	16
Individual/family satisfaction surveys	X	X	X	X	X	21
Audits, financial reports, special inquiries/investigations re state or local operations	X	X	X	X	X	26-34