

Annual Report on Quality Management and Performance Measurement/Improvement
Calendar Year 2014

Introduction:

Life Alliance is committed to providing quality services to our consumers. We also understand that this goes beyond direct care. Our approach to quality assurance and continuous improvement is to learn from best practice and utilize tools from area programs and other government agencies. We set standards for management, supervisory, staff, and consumer service quality that strive to meet or exceed the industry standard.

The Life Alliance Quality Management Committee meets on a quarterly basis. Both leadership and the Quality assurance Coordinator have standing seats on the committee. The committee performs, at a minimum, the following tasks:

- Reviews 40% of all consumer and employee charts annually
- Review and formulate a plan to address all formal complaints/grievances
- Review and formulate a plan to address all MCO Plans of Correction
- Set and review performance management, measurement, & improvement goals, results, etc
- Review the results of consumer satisfaction surveys
- Review credentialing status
- Review the results of all internal/external audits

Performance Measurement, Management, and Improvement System:

Life Alliance utilizes a two-pronged approach to performance measurement, management, and improvement system. The primary method is Plan, Do, Check, Act. This means identifying opportunities for improvement, implementing the proposed improvement, checking the results, and, based on the results, making the improvement a routine activity.

The planning phase is where the measurement and management is primarily utilized. Goals, objectives, and performance indicators are set to measure the effectiveness and efficiency of business and service delivery functions. These are set via committee meetings, during the reviews of various plans, and by recommendation of employees and stakeholders.

All objectives and indicators are listed in a Walker Grid/Balanced Scorecard spreadsheet that tracks goals and results and shows the data utilized in the measurement and the person or persons responsible for collecting the data. Currently all goals are measured annually and tracked for progress quarterly.

Committee-based goals are tracked and reported on annually to their respective committee. Strategic, Health & Safety, Risk Assessment, Accessibility, and Financial goals are tracked and reported annually by the Leadership Committee. Human Rights goals and Incident Report analyses are tracked and reported annually by the Human Rights Committee. Quality Management, Quality Assurance, and Formal Complaint analyses are tracked and reported annually by the Quality Management Committee.

The measurement and management spreadsheet is kept by the Quality Assurance Coordinator and on the company shared drive, available for all applicable staff to review. The annual analyses are kept on the shared drive and placed on the website for review by consumers and other stakeholders.

Annual Quality Management Goals:

Review consumer and employee charts

Goal- 40%

Result- 24%

Extenuating Factors: The committee had a full agenda at every meeting which limited the members' time. The Office Manager completed 7% of all charts and the Quality Assurance Coordinator picked up the rest. This goal is part of policy and procedure and will not be revised.

Maintain High Consumer Satisfaction Survey Scores

Goal- 90%

Result- 95%

Extenuating Factors- N/A

Reduce Formal Complaints/Grievances

Goal- 1 or less

Result- 0

Extenuating Factors: See Annual Report on Complaints and Grievances 2014

Complete Evaluation of QM/Performance Measurement, Management, Improvement System

Goal- 1

Results- 1

Extenuating Factors- N/A

Reduce MCO Plans of Correction

Goal- 1

Results- 5

Extenuating Factors- See Annual Report on Complaints and Grievances 2014

Annual Quality Assurance Coordinator Goals:

Attend CARF trainings

Goal- 1

Result- 2

Extenuating Factors- N/A

Maintain contact with CARF Specialist

Goal- 2

Result- 6

Extenuating factors- Goal was exceeded primarily due to input on medication policy.

Attend MCO trainings/meetings for stakeholder input

Goal- 4

Result- 6

Extenuating Factors- N/A

Review all consumer and employee files

Goal- 60%

Result- 69%

Extenuating Factors: The Quality Assurance Coordinator took on additional charts to ease the time constraints of the committee members. This goal is set by policy and procedure and will not be revised.

Other Committee Activities:

There were four topics that dominated the committee's attention for this calendar year. They are as follows:

1 – Medication: The issue on how to proceed with medication policy was discussed at all committee meetings. Input was sought from outside stakeholders including CARF and our contracted Managed Care Organizations. The company nurse also gave input and direction.

For many years Life Alliance's medication policy was that our employees do not handle medication in any way. As circumstances and consumer requirements changed we attempted to find a middle ground with Assistance with Self-Administration.

Shortly after getting the Assistance policy together we were informed that assistance with self-administration would not be feasible for our Alternative Family Living consumers. It was then determined that all employees whose consumer does not have a medication refusal must be trained and credentialed annually by the company nurse in medication administration.

Policy and Procedure section 7001 now covers all items discussed by the committee. This includes, but is not limited to, administration, documentation (MAR), training, disposal, purchase, transportation, error reporting, parental consents, and physician's order.

The Quality Management team considers the medication matter resolved. Any incidents involving medication administration or documentation errors will be directed to the Human Rights Committee.

2- Consumer/Employee Records: The system in which employee and consumer charts and filed and archived was altered by the Administrative team for maximum efficiency. Also, in response to MCO Plans of Correction, additional criteria was added to the chart review criteria. Further information on this can be found in the Annual Report on Formal Complaints and Grievances 2014.

3- Alternative Family Living- Life Alliance has gained several new AFL cases throughout the year. These cases have requirements that may differ from other forms of service. Utilizing the MCO Routine Monitoring Tool for AFLs, policy section 1701 was created. These policies and

procedures are specific to AFLs and include additional requirements from our general policies and procedures.

As AFL cases are both relatively unique and growing, the committee will continue to monitor and discuss the progress of our AFLs.

4- Relative as Direct Service Employee: In the past, allowing a parent, guardian, or other relative living in a consumer's home to be hired by a provider and direct services has been acceptable practice. Additional documentation and supervision was required, and the situation had to be pre-approved, but it was not uncommon.

Recently the requirements have become much more stringent. Justifications for Relative as Direct Service Employee are limited and the arrangement considered rare and potentially not best practice. This calendar year has seen a large spike in denials.

The employees and consumers in a RADSE arrangement are, needless to say, extremely upset by what they feel is a sudden change in policy. The Quality Assurance Coordinator and President/Owner have attended numerous meetings where this was discussed, including a presentation by the North Carolina Deputy Secretary of Health and Human Services.

The Quality Management team has been diligently working to ease this transition. Memos have went out to all consumers explaining the situation, as well as in-person and telephone contact. The supervisory team is developing strategies for presenting appropriate justifications and stepping up attempts to staff cases with non-relative employees.

This issue will likely remain in discussion at all committee and company levels for next calendar year and beyond.