



Reinventing Quality  
Developing and Integrating Quality Initiatives  
to Improve  
Performance and Enhance Inclusion

August 2004

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*“Aligning State QA Systems  
with a  
Quality Framework”*

*Session II-C  
August 9, 2004*

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Pennsylvania Department of Public Welfare  
Office of Mental Retardation*

# About Pennsylvania

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- ✓ **Total # Of Counties - 67**
- ✓ **Number Of County Mental Health/Mental Retardation Programs – 46**
- ✓ **Adults And Children Served- 80,000+**
- ✓ **Mental Retardation Community Budget – \$1.3 Billion**
- ✓ **Over 700 Providers Enrolled**
- ✓ **Strong County Model**
- ✓ **Counties Contract With Providers Directly**
- ✓ **Mix Of State Facilities And Private Providers**



# Fundamentals Driving Quality Management

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- Demand for Self Determination
- High Demand for Quality
  - Consumers and Families
  - Legislature
  - CMS
  - State Administration



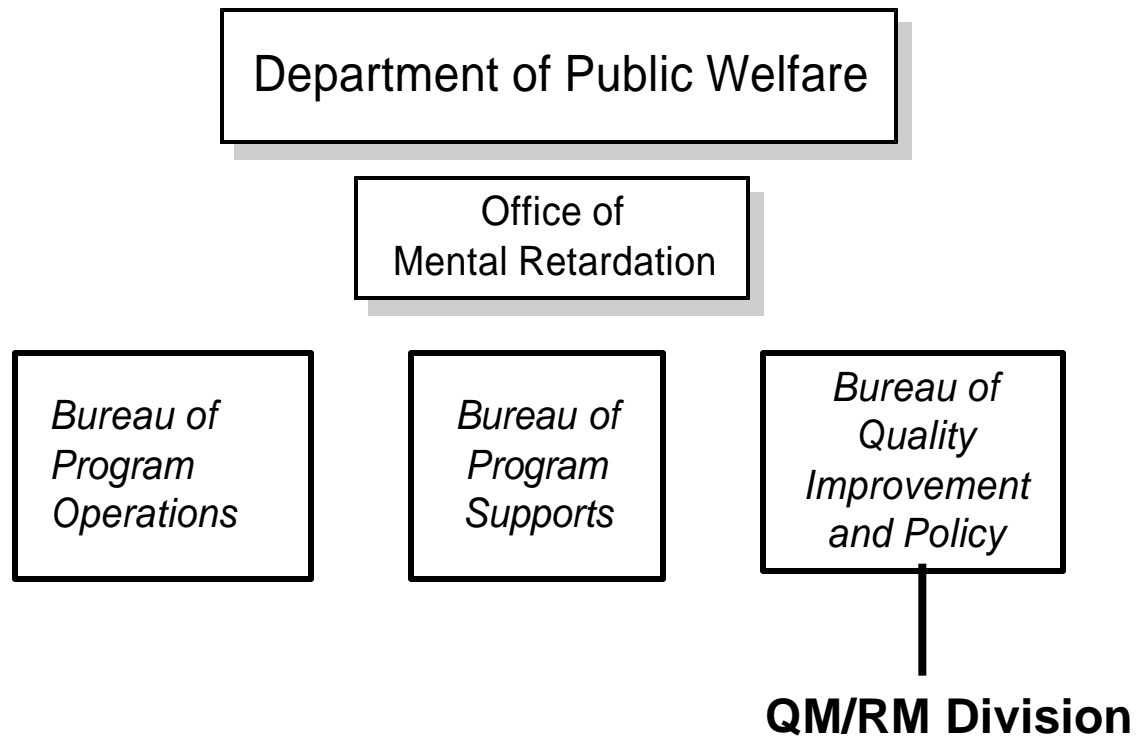
# Fundamentals Driving Quality Management

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- Medicaid Requirements
  - Statewide program....1 program not 46
  - Incident Management
  - Supports Coordination Monitoring
  - Account for Expenditures/Cost Effectiveness

# Overall Organizational Structure

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# OMR's QM Framework

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- A Common Frame Of Reference Was Established Between OMR And The Centers For Medicaid And Medicare Services (CMS)
- OMR Embraced All Seven Focus Areas, and
- Added “Workforce Stability” To Provider Capacity And Capabilities

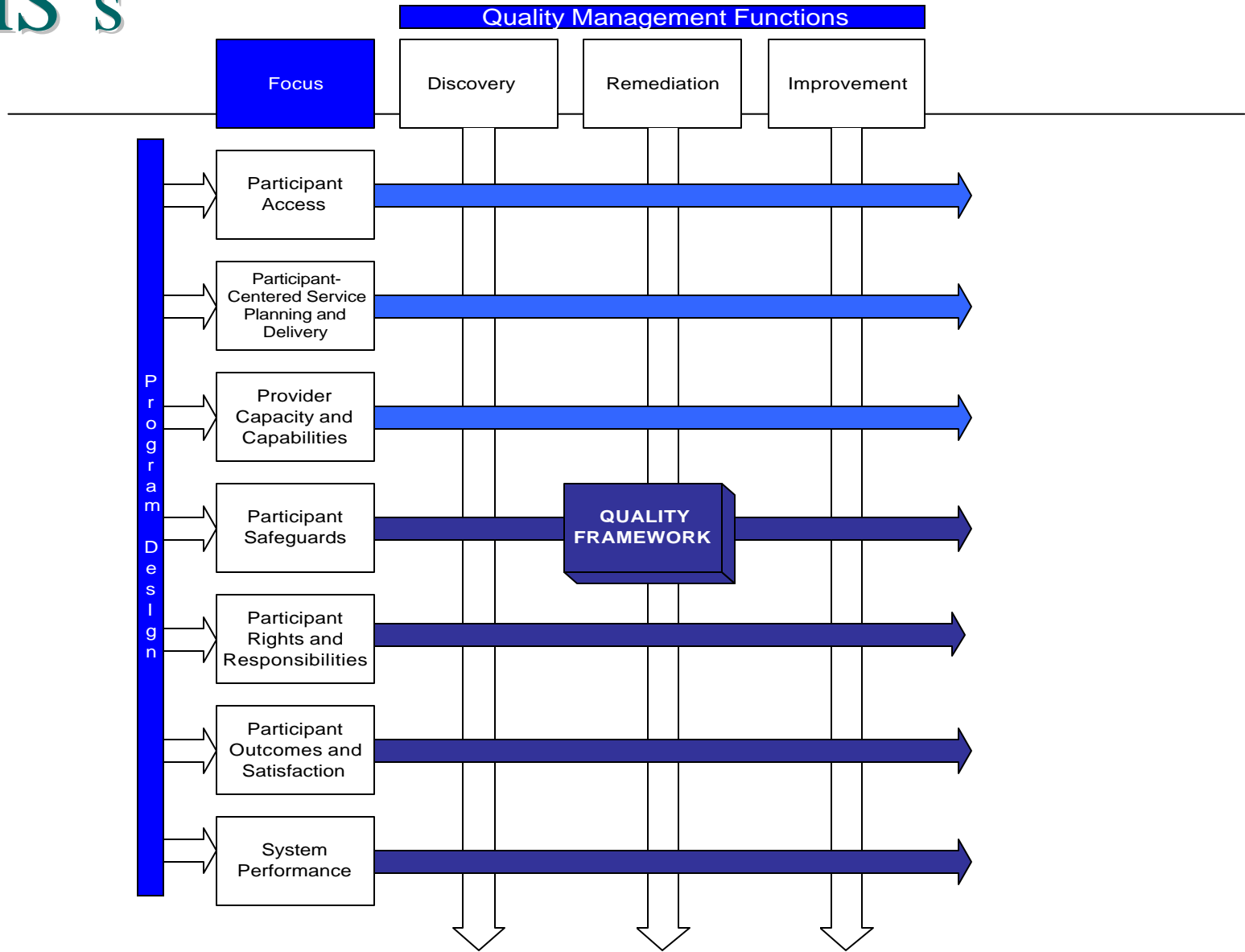


# OMR's QM Framework

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- Mission Statement/Statement of Purpose/Core Values
- Scope
- Accountability and Responsibility
- Methodology
  - Information Management
- Evaluation

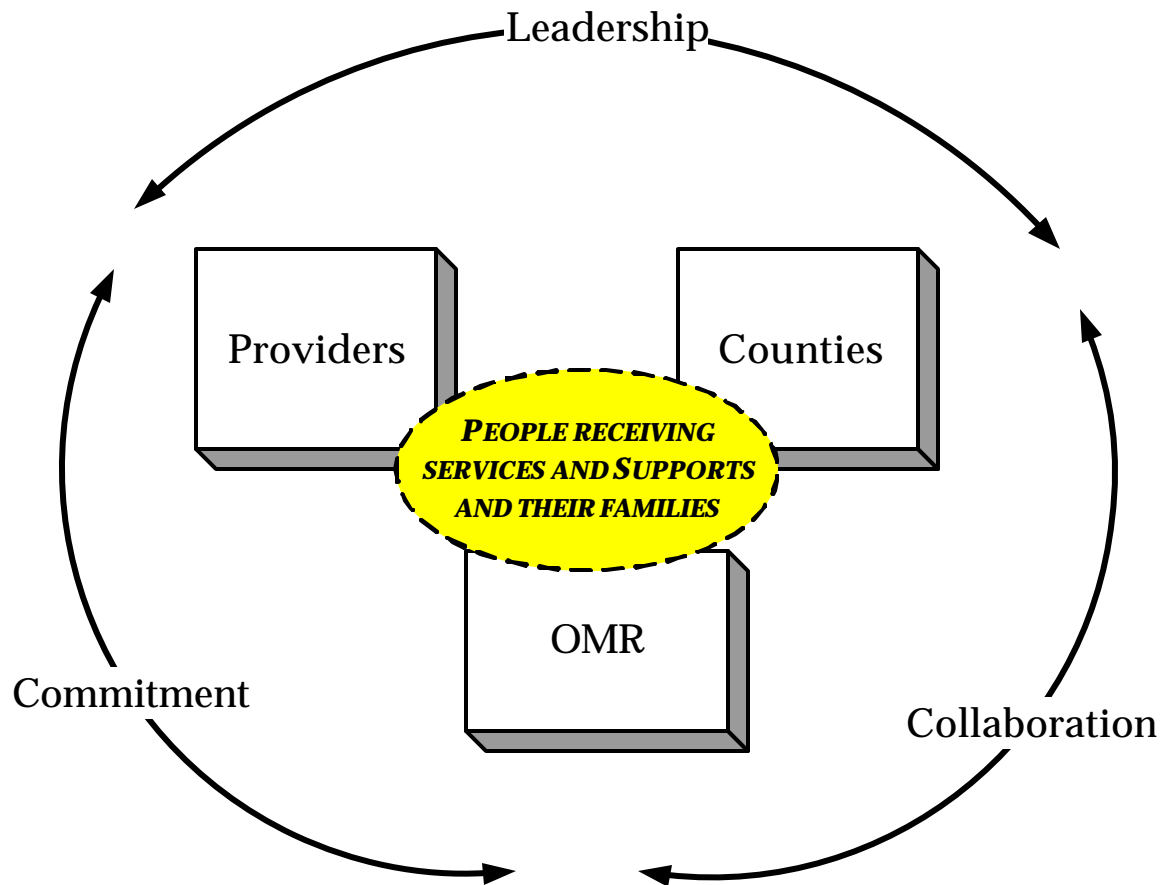
# CMS's



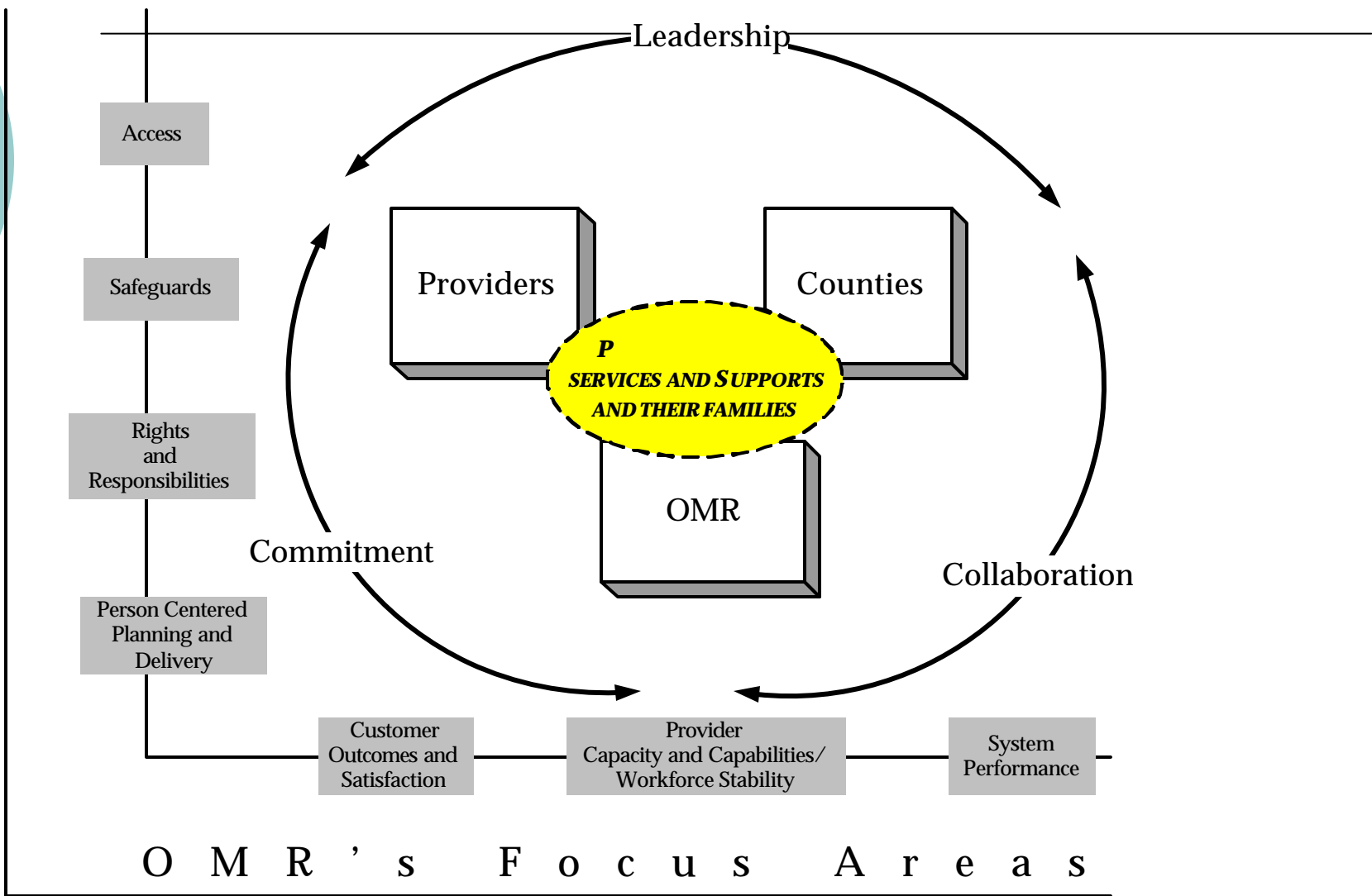


# OMR's View of Quality Management

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# OMR's View of Quality Management





# Building QM Structure

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✓ *Executive Level*

**Quality Leadership Board**

✓ *Bureau Level QI Councils*

**Community**

**State Centers**

✓ *Regional QI Councils*

**Four Regions**

✓ *State Center QI Councils*

**Five State Centers**

# Linking Focus Areas to QM Standing Committees





# QM Standing Committees

## **Access**

*Utilize quality management practices and available data to evaluate the capacity of the system to ensure access to services and supports.*

## **Assistive Technology**

*Proposed*

## **Customer Satisfaction and Outcomes**

*Utilize quality management practices and available data to assess customer satisfaction and individually identified outcomes to enhance the quality of people's lives.*

## **Employment**

*Meeting the Week of August 2<sup>nd</sup>, 2004*

## **Mental Health Support Process**

*Utilize Quality Management practices and available data to evaluate mental health practices within the system and develop a relationship and insight to effect change.*

## **Person Centered Service Planning and Delivery**

*Utilize Quality Management practices and available data to empower each person through planning and supporting the unique needs, desires and decisions concerning his or her life by encompassing the core values of Everyday Lives.*

## **Positive Health Practices**

*Utilize quality management practices and available data to evaluate and improve physical and mental health services.*

## **Safeguards**

*Utilize quality management practices and available data to effectively reduce or eliminate risk to the safety, security and rights of people.*

## **Statewide Incident Review Committee**

*Utilize quality management practices and available data to review and analyze statewide HCSIS incident management data.*

## **System Capacity and Capabilities**

*Utilize quality management practices and available data to evaluate and ensure that quality training and recruitment opportunities exist which assures that sufficient and responsive Home and Community Based Services Providers are available, who possess and demonstrate the capability and competence to effectively, efficiently serve participants.*

# HCSIS: A Fully Integrated, Internet Based Solution





# Data Source:

## Independent Monitoring for Quality

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- 39 Independent Agencies
- Consumer And Family Satisfaction Surveys
  - 6,000 Persons Receiving Services
  - 5,000 Families
- Survey Questions Merged With The National Core Indicators



# Data Source: Incident Management

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- Provider Based Reporting
- County And State Review Roles
- Certified Instructors/State Sponsored Training
- Collects Non-reportable Incidents For Providers To Use For Their Own QA Activities





# Data Source: Incident Management (con'd)

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- Common Format Used By All Providers Across Commonwealth
- Automated Investigation Business Rules
- Data Reports Available For Providers



## Data Source: OMR Monitoring of Counties

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- Annual Waiver Monitoring Tool Used By OMR Regional Staff
- Based On CMS Waiver Monitoring
- Once Sample Is Selected Home and Community Services Information System (HCSIS): Pre-populates The Monitoring Tool For That County Program
- Tracks County Program Plan Of Correction



## Data Source: Health Risk Profile

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- 8 Regional organizations (Health Care Quality Units) linked to county groups
- HRPs are done by sample
- Results are used to provide training and technical assistance to providers and county programs



# Questions

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