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What is ACL's Interest in HCBS Quality?

Webinar

April 5, 2017 2pm EST



Webinar Agenda

i. Introduction:

1. Welcoming Remarks: Edwin Walker, J.D.

ii. Overview of ACL Quality Initiatives:

1. Overview of quality measurement: Susan Jenkins, PhD
2. National Quality Forum work on HCBS quality: Eliza Bangit, J.D.
3. National Core Indicator Contract: Shawn Terrell, MSW
4. Rehabilitation and Research and Training Center on Outcomes Measurement – Amanda Reichard, PhD

iii. Closing:

1. Questions/comments
2. Next webinar topic and date

Welcoming Remarks

Edwin Walker, J.D., Deputy Assistant Secretary for Aging
ACL's involvement in Home and Community-Based Services (HCBS)
quality measures:

Why it is important and the progress made



What is ACL's Interest in HCBS Quality?

The Basics of Quality Measurement

Susan Jenkins, PhD

Director, Office of Performance and Evaluation



Why is Quality Measurement Important?

The original mission of program evaluation and performance management was to **assist in improving the quality of programs.**

GPRRA-Modernization Act of 2010

The GPRRA Modernization Act of 2010 (GPRAMA) aims to ensure that agencies use performance information in decision making and holds them accountable for achieving results and ***improving government performance.***

Office of Management and Budget

- In *Memorandum M-13-17* the Office of Management and Budget provides guidance to Federal agencies about “harnessing evidence and evaluation”
- It discussed delivering “a smarter, more innovative, and more accountable government for citizens.”
 - An important component of that effort is ***strengthening agencies' abilities to continually improve program performance*** by applying existing evidence about what works, generating new knowledge, and using experimentation and innovation to test new approaches to program delivery.”

FY 2018 Budget Blueprint

The Administration will take an evidence-based approach to improving programs and services—using real, hard data to identify poorly performing organizations and programs. We will hold program managers accountable for improving performance and delivering high-quality and timely services to the American people and businesses...”

Why Measure?

For many reasons, including:

- Measures drive improvement.
- Measures inform consumers and other stakeholders.
- Measures influence payment.

Measurement is a quality improvement tool, not an end in and of itself

- *A performance measure is a way to calculate whether and how often the system does what it should.*

What to Measure?

Not everything that counts can be counted, and not everything that can be counted counts

But...

You can't improve what you don't measure

Areas for Measurement

1. Quality

- Structures of care
- Processes of care
- Outcomes
- *Intermediate clinical outcomes*
- *Health outcomes (mortality, complications, etc.)*
- *Patient-reported outcomes (experience, functional status, engagement, quality of life, etc.)*

2. Resource use/cost

3. Efficiency (combination of quality and resource use)

How to Create Measures?

In order to be most effective, objectives should be clear and leave no room for interpretation. S-M-A-R-T is a helpful acronym for developing objectives that are

- *specific,*
- *measurable,*
- *achievable,*
- *relevant, and*
- *time-bound*

● Source: <http://www.cdc.gov/healthyyouth/evaluation/pdf/brief3b.pdf>

Explanation of a basic performance formula

Numerator (What, How, When)

of individuals with a person-centered plan of care

Denominator (Who, Where, When) – Exclusions (NOT)

of individuals enrolled in a program

Cartoon Depiction



What is ACL's Interest in HCBS Quality?

*Quality in Home and Community-Based Services to Support
Community Living:*

Addressing Gaps in Performance Measurement

Eliza Navarro Bangit, J.D.

Director of the Office of Policy and Analysis and Development



National Quality Forum (NQF)

- The organization that endorses national consensus standards for performance measurement located here:
http://www.qualityforum.org/story/About_Us.aspx
- NQF is the designated consensus-based entity

Project Components

- Develop a standard home- and community-based services (HCBS) definition
- Design a conceptual framework for HCBS measurement, including domains and subdomains of development
- Identify characteristics of high-quality HCBS
- Produce an environmental scan of existing HCBS measure, measure concepts, and instruments

Project Components (cont.)

- Identify promising measures and measure concepts
- Identify gaps in measurement
- Craft recommendations for prioritization in HCBS measurement

How Was This Project Conducted?

- NQF formed a 22-person multi-stakeholder committee of national experts on HCBS quality
- NQF partnered with a five-person Federal Liaison Team from HHS to help advise on its work
- NQF held Committee in-person and Web meetings (open to the public), workgroup calls, online surveys
- NQF published four reports and taken public comments - final report released in September 2016

HCBS Definition

- The term “home and community-based services” (HCBS) refers to an array of services and supports delivered in the home or other integrated community setting that promote the independence, health and well-being, self-determination, and community inclusion of a person of any age who has significant, long-term physical, cognitive, sensory, and/or behavioral health needs.

Characteristics of High Quality HCBS (1 of 4)

- Provides for a person-driven system that optimizes individual choice and control in the pursuit of self-identified goals and life preferences
- Promotes social connectedness and inclusion of people who use HCBS, in accordance with individual preferences
- Includes a flexible range of services that are sufficient, accessible, appropriate, effective, dependable, and timely to respond to individuals' strengths, needs, and preferences and that are provided in a setting of the individual's choosing

Characteristics of High Quality HCBS (2 of 4)

- Integrates healthcare and social services to promote well-being
- Promotes privacy, dignity, respect, and independence; freedom from abuse, neglect, exploitation, coercion, and restraint; and other human and legal rights
- Ensures each individual can achieve the balance of personal safety and dignity of risk that he or she desires
- Supplies and supports an appropriately skilled workforce that is stable and adequate to meet demand

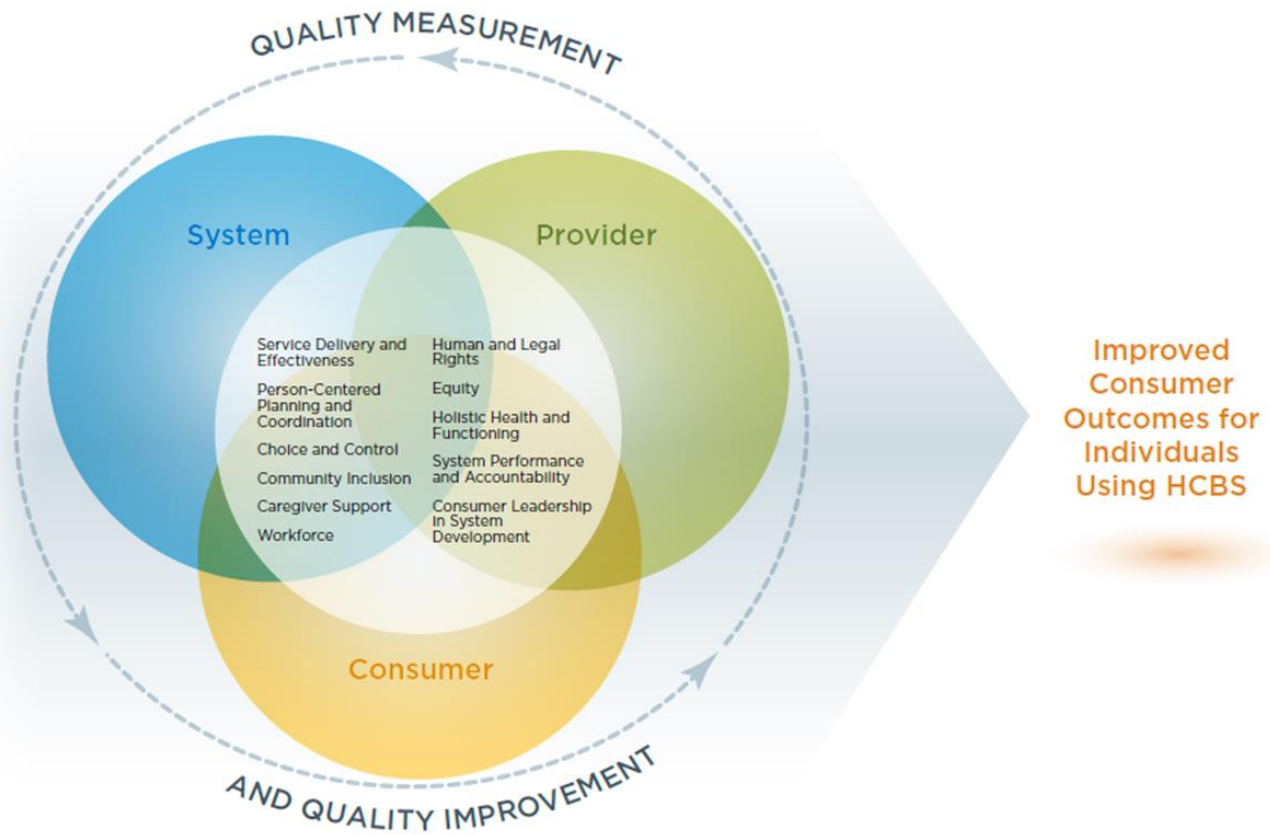
Characteristics of High Quality HCBS (3 of 4)

- Supports family caregivers
- Engages individuals who use HCBS in the design, implementation, and evaluation of the system and its performance
- Reduces disparities by offering equitable access to, and delivery of, services that are developed, planned, and provided in a culturally sensitive and linguistically appropriate manner
- Coordinates and integrates resources to best meet the needs of the individual and maximize affordability and long-term sustainability

Characteristics of High Quality HCBS (4 of 4)

- Delivers—through adequate funding—accessible, affordable, and cost-effective services to those who need them
- Supplies valid, meaningful, integrated, aligned, accessible, outcome-oriented data to all stakeholders
- Fosters accountability through measurement and reporting of quality of care and recipient outcomes

Conceptual Framework



HCBS Domains and Subdomains

- 11 Domains and 40 Subdomains
- Domains
 - Service Delivery and Effectiveness
 - Person-Centered Planning and Coordination
 - Choice and Control
 - Community Inclusion
 - Caregiver Support
 - Workforce
 - Human and Legal Rights
 - Equity
 - Holistic Health and Functioning
 - System Performance and Accountability
 - Consumer Leadership in System Development

Gaps in HCBS Measurement

- Gaps within all of the domains and subdomains
- Barriers to measuring HCBS quality include:
 - Lack of standardized measures
 - Lack of or limited access to timely data
 - Variability in reporting across programs
 - Administrative burden

Global Recommendations to Advance HCBS Quality Measurement

- *Support quality measurement across all domains and subdomains*
- *Build upon existing quality measurement efforts*
- *Develop and implement a standardized approach to data collection, storage, analysis, and reporting*
- *Ensure that emerging technology standards, development, and implementation are structured to facilitate quality measurement*
- *Triangulate assessment of HCBS quality using an appropriate balance of measure types and units of analysis*
- *Develop a core set of standard measures for use across the HCBS system, along with a menu of supplemental measures that are tailorable to the population, setting, and program*
- *Convene a standing panel of HCBS experts to evaluate and approve candidate measures*

Resources

NQF page on Measuring HCBS Quality

- http://www.qualityforum.org/Measuring_HCBS_Quality.aspx

Final Report

- http://www.qualityforum.org/Publications/2016/09/Quality_in_Home_and_Community-Based_Services_to_Support_Community_Living_Addressing_Gaps_in_Performance_Measurement.aspx

Project archive

- <http://www.qualityforum.org/ProjectMaterials.aspx?projectID=77692>

What is ACL's Interest in HCBS Quality?

National Core Indicator Contract

Shawn Terrell, MSW

Office of Policy Analysis and Development



Developing HCBS Quality Measures from National Core Indicators for Intellectual and Development Disabilities, and Aging and Physical Disabilities (NCI-IDD/AD)

- The NCI-IDD/AD:
 - Two distinct but related sets of survey instruments
 - Designed to assess state systems performance along a number of key indicators related to community living for various populations.

NCI

Focus population:

Adults with I/DD who receive at least one service in addition to case management from state IDD systems

- NCI began development in 1997
- Survey Suite: Adult Consumer, Family, Staff Stability
- 46 states and DC
- Funded in by state membership fees with ACL support for specific expansion activity
- Most participants are receiving services under an HCBS Waiver
- A small % are either state only, or ICF/ID

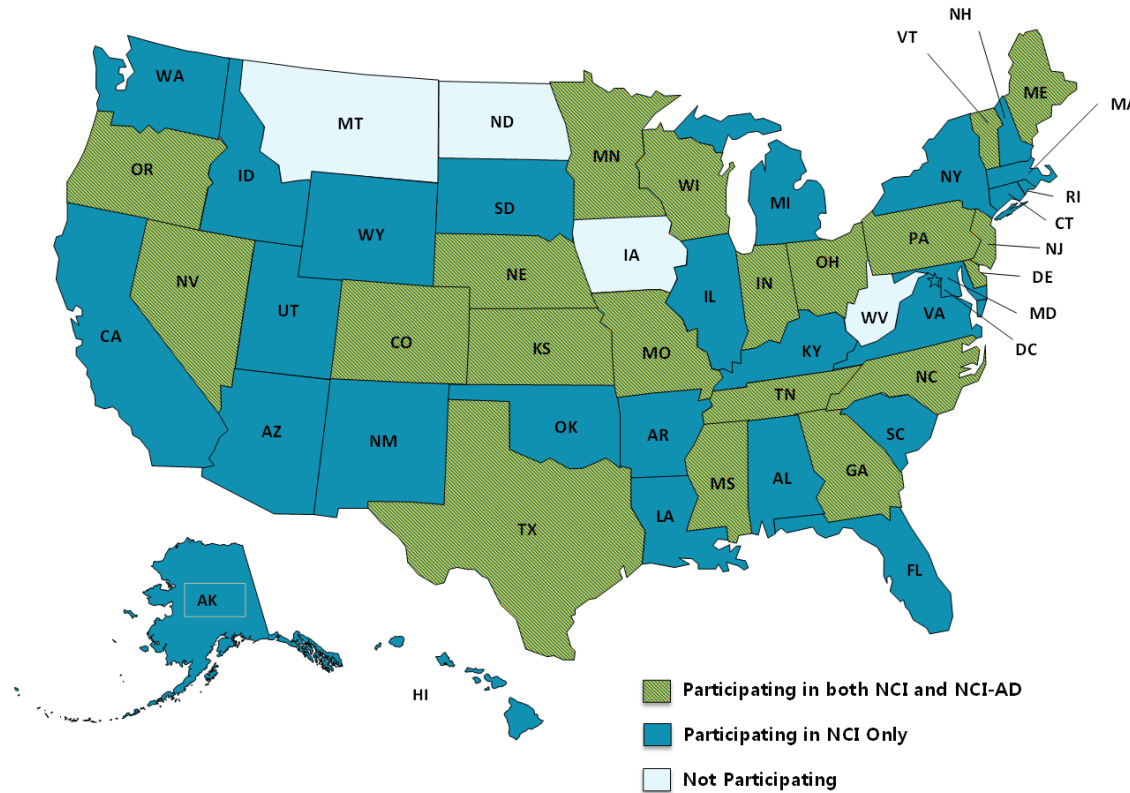
NCI-AD

Focus population:

Older adults and adults with physical disabilities accessing publicly funded services in:

- Skilled Nursing Facilities
 - Medicaid Waivers
 - Medicaid State Plan
 - State Funded Programs
 - Older Americans Act Programs
 - PACE
 - MLTSS
-
- NCI-AD began development in 2012
 - Adult in-person survey only
 - Pilot report on initial 3 states published 2014
 - Survey was revised in 2015 based on pilot results
 - 20 states are participating in 2017-2018 survey year.

NCI/NCI-AD Survey State Participants



NCI-AD/IDD Indicators

NCI-IDD

- Community Inclusion
- Choice and Decision Making
- Relationships
- Satisfaction
- Service Coordination
- Work
- Self-Determination
- Access
- Health
- Medications
- Wellness
- Respect and Rights
- Safety

NCI-AD

- Community Participation
- Choice and Decision Making
- Relationships
- Satisfaction
- Service Coordination
- Care Coordination
- Work
- Self-Direction
- Access
- Health Care
- Medications
- Wellness
- Rights and Respect
- Safety
- Everyday Living
- Affordability
- Future Planning
- Control

ACL Contract with Human Services Research Institute

- NASDDDS and NASUAD are collaborators
- Refine and expand use of NCI and NCI-AD surveys:
 - Publish results in peer reviewed journals:
 - Psychometric testing (reliability, validity)
 - Sampling procedures
 - Interview protocols
 - Implementation consistency & validity across states
 - Revise existing measures for person-centered planning questions/survey to adapt to current expectations

ACL Contract with Human Services Research Institute

- Submit at least 20 measures for NQF endorsement from NCI and NCI-AD surveys
- Technical Assistance to States
 - Sampling procedures
 - Implementing surveys and analyzing results
 - How to use results for system improvement
 - Support recruitment of additional NCI and NCI-AD

What is ACL's Interest in HCBS Quality?

Rehabilitation Research Training Center: University of Minnesota
Home and Community Based Services Outcome Measurement

Amanda Reichard, PhD

National Institute on Disability, Independent Living, and
Rehabilitation Research



Research and Training Center (RRTC) on Outcomes Measurement for Home and Community Based Services

- ACL's (NIDILRR) announced a new grant on September 30, 2015 – the Research and Training Center on Outcomes Measurement for Home and Community Based Services
 - Grantee: University of Minnesota
 - The grant is for \$875,000 per year for 5 years.

UMN RRTC on Outcomes Measurement for Home and Community Based Services

- Through this grant measures are being developed that can be used across populations of people with disabilities and aging populations who receive HCBS services.
- The grantee team includes partners and collaborators organizations that cross disability populations and age groups.

The UMN RRTC Responds to the Following NIDILRR/ ACL Priorities:

- Identify or develop measures, and then test the reliability, validity, and usability of those measures to assess the person-centered outcomes of individuals with disabilities who are receiving home and community-based services
- Work closely with NIDILRR, ACL, and the National Quality Forum's project on HCBS Quality
- Develop procedures and mechanisms for applying HCBS outcome measures in policy and service delivery settings to maximize quality and appropriateness of HCBS from the end-user perspective
- Collaborate with stakeholder groups to develop, evaluate, or implement strategies to increase utilization of new HCBS outcome measures
- Serve as a national resource center related to person-centered measurement of HCBS outcomes

Starting Point

NQF OHCBS Outcome Measurement Framework

- 11 Domains (each with 2 to 7 Subdomains):
 - Consumer Leadership in System Development
 - System Performance & Accountability
 - Equity
 - Service Delivery & Effectiveness
 - Person-Centered Service Planning and Coordination
 - Caregiver Support
 - Workforce
 - Holistic Health and Functioning
 - Community Inclusion
 - Human and Legal Rights
 - Choice and Control

RRTC/OM Research Studies

- Study 1: Soliciting broad stakeholder input on NQF HCBS Measurement Framework
- Study 2: Gap analysis – NQF HCBS Measurement Framework & Current Instruments
- Study 3: Identification of high quality/fidelity implementation practices
- Study 4: Refinement and development of measures
- Study 5: Ascertain Reliability, Validity & Sensitivity to Change of Measures
- Study 6: Identification & testing of risk adjusters

Q&A:
**“HOW DO YOU MEASURE HCBS
QUALITY?”**

Next Webinar: June 28, 2pm EST

Representatives from the National Quality Forum and the SCAN Foundation will discuss the progress made in quality framework development in our next webinar.

- National Quality Forum Final Report:
 - Quality in Home and Community-Based Services to Support Community Living: Addressing Gaps in Performance Measurement
- The SCAN Foundation Publication:
 - Essential Attributes of a High-Quality System of Care for Adults with Complex Care Needs