INTRODUCTION TO THE QUALITY MANAGEMENT PLAN

The Quality Management Plan is a tool for managing quality within an agency. Simply put: It is a way to know at any given point how the agency is performing. It provides a venue to make things better.

There are two steps to developing a Quality Management Plan.

1. Design a system for monitoring performance and continuous quality improvement.
2. Establish a process to measure the agency's performance and improve the quality of your organization.

DESIGN A SYSTEM: MONITORING PERFORMANCE AND QUALITY IMPROVEMENT

DESCRIPTION OF THE AGENCY'S QUALITY SYSTEM

Description of the agency's quality system: *The agency may utilize an agency committee, a quality council, a peer review committee, internal/external committee membership or other internal agency systems to monitor the data on the quality management plan and implement quality improvement actions.*

Best Agency in WV will have a Quality Committee with 6 members who meet once every six months. The four (4) program supervisors will conduct peer reviews of ten charts and personnel files. The results will be submitted to the agency director. The director will provide a report of the findings to the Quality Committee prior to each meeting. The Committee will make recommendations to the director for quality improvement. The reviewers will be using the agency performance measures for chart review and personnel file review. The director will present the results of the data to the committee and the committee will provide input and recommendations on Quality Improvement efforts. The committee chair may assign sub-groups to work on improvement projects or the improvement projects may be conducted by administrative staff at the agency.

The following are additional examples for designing a quality management system.

Example of Agency Quality System: Best Agency will establish a Quality Committee, chaired by the RN. The Committee will have eight members consisting of at least one Case Manager, one ADW Participant, one RN, the executive director and a Personal Attendant. Once per year, the agency executive director will present a new Quality Management Plan to the Quality Committee for input. Sub-committees will be utilized for quality improvement projects.

Example of Description for Monitoring Quality Management Plan: The Quality Committee will meet once per quarter, review the findings from the Quality Management Plan data and make recommendations to the agency for quality improvement activities. Any specific area out of compliance found by the agency administration will have specific remediation (resolution to the problem).

THE DASHBOARD

A "dashboard" is a way to monitor the most important things at your agency. Think about the critical areas that are important to know about your agency. Begin with the most "risky" areas such as health and safety, service issues, training or certification issues, policy or form noncompliance. All could result in a risk to a participant or staff member, loss of agency certification, loss of participants served by the agency or repayment of funds.

DESCRIPITON OF CATEGORIES

For an agency, there are three categories for your dashboard.



For example: For health and safety, you may choose a performance measure regarding the incident management system. For Certification, you may choose performance measures regarding staff training, CIB's, etc. For Compliance, you may choose performance measures regarding Service Plans, Personal Attendant Logs, etc. For Administrative Oversight, you may choose performance measures regarding claims, Quality Improvement Plan (following state monitoring); ensuring new hires are qualified for work, etc.

CENTER FOR MEDICARE AND MEDICAID SERVICES (CMS) ASSURANCES

With federal funds such as Medicaid, requirements and expectations accompany the funds. CMS has "Assurances" that are expectations for states. There is an expectation that states measure the quality of home and community based waiver services and show CMS how the state is performing with these expectations (requirements). These expectations go all the way to the provider level. This is the reason that the state monitors specific areas as they are collecting data and evidence to send to CMS. Example: Current Service Plans, the certification system, etc. Below is an overview of the specific CMS Assurances:

- **Level of Care:** Ensure annual determinations of medical eligibility (Pre-Admission Screening or the PAS) are conducted within policy requirements.

- **Service Plan:** Ensure the Service Plan/Personal Attendant Log meets policy requirements and is person-centered, identify and plan for participant needs, and ensure services are implemented per the plan.
- **Qualified Providers:** Ensure ADW providers meet all training, CIB, and other provider requirements and continuing certification qualifications as required by the ADW policy manual.
- **Health and Welfare:** Ensure the health and welfare of ADW participant (incidents, participant experience, risk mitigation, participant back-up planning, etc.).
- **Financial Accountability:** Ensure claims/services/documentation are provided and billed as required or allowed in the ADW policy manual.
- **Administrative Authority:** Ensure the agency's administrative oversight of the ADW program at the provider agency level allows for compliance, identification of issues, remediation and quality improvement.

PROCESS FOR QUALITY MONITORING

What is Quality Monitoring? Quality monitoring is an ongoing process of making things better. It is a good tool to manage your agency, ensure compliance, provide good services and make improvements. There are 3 steps for a system for monitoring quality at your agency.

1. **Discovery:** Discovery is collecting data to assess the ongoing implementation of the program, identify strengths and opportunities for improvement. By using data to make decisions, you are not operating on a "hunch" about the agency. You will know if your agency is in compliance. Example: Number of Service Plans that are out of date. If you review ten Service Plans and eight are noncompliant, it is a potential area of risk for your agency. This is an area that needs quality that needs improvement.

2. **Quality Improvement:** Quality Improvement is utilizing data and information to engage in actions that lead to continuous improvement in the ADW program. This means that you will continue to look at systemic issues at your agency and make improvements. If you provide training to the Case Managers and find five out of ten Service Plans are noncompliant, it may be related to a new Case Manager. The agency process for training new Case Managers may need to change.

HOW TO WRITE A PERFORMANCE MEASURE

1. Describe the outcome expected in the performance measure.
2. Decide how you will collect the data and how often you will collect data.
3. Understand how you will be monitoring it.

The following is an example of a performance measure.

PERFORMANCE MEASURES AND TRACKING DATA FOR QUALITY MONITORING

Assurance:	Performance Measure
1. Plans	Numbers of the Personal Attendant Logs in charts reviewed are compliant with the ADW policy manual.

	Method of Data Collection (How?)	Data Frequency (how often?)	6 Month Data Results	Annual Data Results
1.	Peer review team will review 10 PAL's per month checking for policy compliance. Total data on Quality Report.	At 6 months and annually		
Quality Improvement Strategy: New RN was hired. Provided training for new RN and reviewed charts for a month.				
Quality Improvement Strategy: Set up a tracking system for RN's for the PAL due dates.				

CALCULATING DATA

Numerator and Denominator: When calculating your data, the first number (9) is the numerator. 9 is the number of PAL's in the charts that were reviewed by the team. The second number (10) is the denominator. 10 is the total number of charts reviewed by the team. When plans are not noncompliant, this could lead to health and safety issues for participants, services not being provided as needed or repayment of claims to Medicaid. All are risks to the agency.

Percentage: To determine the percentage for each quarter, simply divide the 9 by 10. The result is 90%. Your agency may choose to use the numbers or percentage or both.

CONTINUOUS QUALITY IMPROVEMENT

After review of the data, you may find that some areas need "fixed" or improved. Document any action taken to make things better. Then, see if what you did made a difference. If it did not fix the issue, think about an alternate plan to improve the problem. Below is an example of the description of the agency's Quality Management System, how the agency will monitor the data and make improvements.

QUALITY MANAGEMENT PLAN TEMPLATE

Provider Agency Name:
Executive Director Name/Contact Information:
Agency Designee to Monitor Quality Management Plan*:*

DESCRIPTION OF THE AGENCY'S QUALITY SYSTEM

Description of the provider agency's quality system: *The agency may utilize an agency committee, a quality council, a peer review committee, internal/external committee membership or other internal agency systems to monitor the data on the quality management plan and implement quality improvement actions.*

Assurance:	**Performance Measure**
1.	

	Method of Data Collection (How?)	**Data Frequency (how often?)**	**6 Month Data Results**	**Annual Data Results**
1.				
Quality Improvement Strategy:				
Quality Improvement Strategy:				

Assurance:	Performance Measure
2.	

	Method of Data Collection (How?)	Data Frequency (how often?)	6 Month Data Results	Annual Data Results
2.				

Quality Improvement Strategy:

Quality Improvement Strategy:

Assurance:	Performance Measure
3.	

	Method of Data Collection (How?)	Data Frequency (how often?)	6 Month Data Results	Annual Data Results
3.				

Quality Improvement Strategy:

Quality Improvement Strategy:

Assurance:	Performance Measure
4.	

	Method of Data Collection (How?)	Data Frequency (how often?)	6 Month Data Results	Annual Data Results
4.				

Quality Improvement Strategy:

Quality Improvement Strategy:

Assurance:	Performance Measure
5.	
Describe "how to monitor"	

	Method of Data Collection (How?)	Data Frequency (how often?)	6 Month Data Results	Annual Data Results
5.				

Quality Improvement Strategy:
Quality Improvement Strategy:

QUALITY MANAGEMENT PLAN ACTIVITY WORKSHEET

Date: **Agency Name:** Awesome Attendants

Step 1: *"You are opening a new agency called "Awesome Attendants" and it is a Personal Attendant Agency. To open your new agency, you will need to write a Quality Management Plan. You are the owner and director."*

In the first box, please describe how your agency will be monitoring, collecting data and tracking the performance of the agency. Also, describe how the agency will do quality improvement when an issue is identified.

Describe your Quality Management System:

Step Two*:* "You have decided to monitor PAL compliance. The reason you chose this: Problems with the PAL could result in health and safety risks, repayment of funds, policy noncompliance and poor services. You have been operating for 1 year. Now, your data shows noncompliance with the PAL."

A. Write the Performance Measure for the PAL. B. Describe a way to improve the problem.

Assurance:	**Performance Measure**
1.	

	Method of Data Collection (How?)	**Data Frequency (how often?)**	**6 Month Data Results**	**Annual Data Results**
1.				
Quality Improvement Strategy:				