Quality of Life and Experience Information

Person Centered Module of CO Assessment

Discussion

- Focus will be on the **Quality of Life and Experience** component of the Person Centered module for the CO Support Plan Assessment
- Need guidance on the direction HCPF prefers to explore and develop

PC Components We Are Including In Assessment Approach

Personal Profile

People Important to Me

My Support Planning Meeting
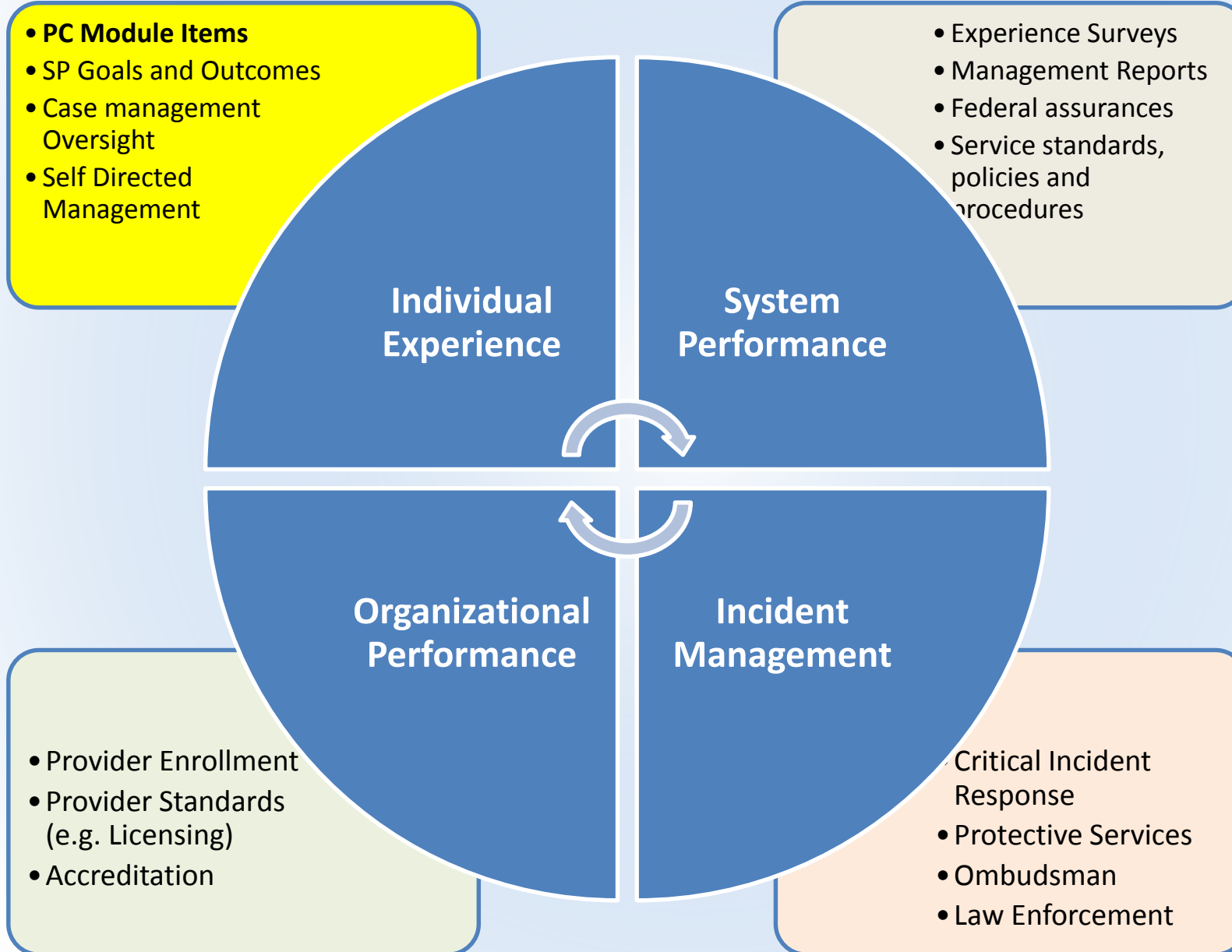
Quality of Life and Experience Items

My Future

Preferences

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What is the Purpose for Including a Quality of Life and Experience Component?

- Purpose is to understand more about the participant's perception of his/her quality of life and experience with services.
  - *For example, quality of life might include items about perceptions of safety or frequency of "good days vs. bad days".*
  - *Experience items might include information about staff attendance or staff abilities to perform duties.*
- Also offers opportunities for using information as part of Department's Quality Improvement and Management strategy. (see next slide)

Quality Tools - Areas of Influence

- **PC Module Items**
- SP Goals and Outcomes
- Case management Oversight
- Self Directed Management

- Experience Surveys
- Management Reports
- Federal assurances
- Service standards, policies and procedures

Individual Experience

System Performance

Organizational Performance

Incident Management

- Provider Enrollment
- Provider Standards (e.g. Licensing)
- Accreditation

- Critical Incident Response
- Protective Services
- Ombudsman
- Law Enforcement

What is Being Proposed?

- Include items about quality of life and experience with services in the assessment and reassessment.

- Use "closed-ended" items, adapted from existing and validated tools for this purpose.

- Consider using a subset of items in the assessment
  - Not all items are necessary for use in the assessment
  - The use of all items would make the assessment process too long and cumbersome for participants

Tools Under Consideration

- ## HCBS Experience Interview
  - Being developed by CMS and will be piloted by TEFT states

- ## National Core Indicators
  - A cooperative venture among state developmental disabilities agencies, Human Services Research Institute (HSRI) and the National Association of State Directors of Development Disabilities Services (NASDDDS).
  - National Association of States United for Aging and Disabilities (NASUAD) has recently developed a version of core indicators for use with other target populations.

- ## Personal Outcome Measures
  - Developed by Council on Quality and Leadership in 1993 and updated thereafter

Major Advantages and Disadvantages of Each Tool

HCBS Experience Interview - Pros

- HCPF will be piloting as part of TEFT, creating opportunities to coordinate across the initiatives.

- Provides a way to evaluate the most efficient/effective means of collecting and using information from the survey during the piloting phases.

- Department could take advantage of the training and technical assistance available through the TEFT grant for using the experience survey items.

- Items and supporting materials are in the public domain and would not require license fees or purchase of registered or copyrighted material.

HCBS Experience Interview - Cons

- Bulk of items are not relevant for initial assessment because they deal with service/staff experience.

- Service/staff experience items could be included during reassessment, except for case management services because of the conflict of interest with the case manager performing the reassessment.

- Other items relating to quality of life would need considerable adaptation to be useful in an initial assessment.

- Tool is still in design phase and is not as strongly tied to HCBS performance evaluation.

National Core Indicators (NCI) - Pros

- Tool is established and well validated.

- Currently used in over half the states to provide information about HCBS and it aligns with waiver quality management requirements.

- Performance outcomes are focused on person-centered results, could be a good source of information for designing support plans.

- May be possible to connect the broader survey efforts already occurring in Colorado with data collected as part of the assessment process.

- In recent, exploratory discussions with HSRI, NASDDDS and NASUAD about using items for individual assessment, agency staff indicated they are "intrigued" with the potential link between individual level information and its use in both individual quality assurance and system level evaluation.

NCI - Cons

- Designed as an experience survey for evaluation of system level performance. Use of a subset of items within the assessment process represents a new use of the items and data.

- ID and Aging/Disabilities use two different tools to collect information. Tools are similar but not all items are alike.

- Some effort and cooperation from HSRI, NASDDDS and NASUAD would be necessary to ensure that protocols and items work appropriately for use in the individual access process

Personal Outcome Measures - Pros

- Relevant across all population groups receiving LTSS

- Sustained efforts of CQL to establish valid indicators of person-driven service delivery.

- An excellent and relevant profile for evaluating outcomes and performance of HCBS.

- CQL has recently cross-walked the outcome measures with federal HCBS assurance requirements.

- CQL staff appear open to working with CO to adapt measures for use in the assessment process.

Personal Outcome Measures - Cons

- Similar to the NCI tool, the use of the CQL measures has been primarily to evaluate system and organizational performance and to accredit agencies.

- Unknown whether CQL would require a fee to be paid for use of items. (Currently accreditation fees are associated with the use of outcome measures in the accreditation process.)

Decisions Needed on Item Inclusion

What (if any)Items to Include in Assessment?

1. Include only quality of life items (as perceived by the participant) that can be measured independent of services. These types of items would be relevant to **both** initial assessment and reassessment and could act as triggers for actionable steps within the support plan.

2. Include a limited number of experience items along with the quality of life items described above in reassessment.

3. The Department could also decide not to include any quality of life nor experience items within the assessment process. This information could still be obtained through independent survey tools; however, there would be no direct tie-in to the support planning process.

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Fit With Existing Quality Improvement System

IF INCLUDED, how should the use of Quality of Life and Experience items in the assessment fit with the existing QI system efforts?

1. Will it only be used at the individual and case manager level?

   - If only used at the individual and case manager level, then any of the tools might work, however creator interest in agreeing to adapt might be less.
   - Other tools exist that might also be an option.

   OR

2. Will information in the assessment be used to inform about system or organizational performance (develop an aggregate picture of how individuals perceive QoL and service experience)?

   - If yes to #2 above, how does this fit with the existing QI efforts, such as DIDD use of the NCI surveys and TEFT grant piloting of HCBS Experience Interview tool? (Should a subset of the same survey be used?)
   - If yes to #2, information could be aggregated to create profiles a various management levels, such as state wide, regional, provider/case management agency.