

# Focus on Quality Outcomes



irwin siegel agency, inc.  
insurance and risk management  
human service programs





**Focus on  
Quality Outcomes**



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## Defining Quality

Quality is “a life-long commitment to continuous improvement in customer service resulting in a totally satisfied customer.”

*Deming*

Quality of Care [is] the degree to which...services for individuals and populations increase the likelihood of desired...outcomes and are consistent with current professional knowledge. Dimensions of performance include the following: client perspective issues, safety of the care environment, and accessibility, appropriateness, continuity, effectiveness, efficacy, efficiency and timeliness of care.

*Joint Commission on Accreditation of Healthcare Organizations. 2001*

## New Standards of Quality

Traditionally, one assessed quality by reviewing what went into a program and its procedures. Processes were reviewed, but outcomes were not analyzed from the point of view of the person receiving services. There is a growing realization that compliance with procedural requirements alone does not necessarily lead to a better quality of life. The current focus is shifting to outcomes that address the true desires and quality of life of the people being served. When desired outcomes are not met, changes are needed.

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## **Focus on Continuous Quality Improvement**

Reliance solely on outside audits is a weak approach to quality assurance. A proactive approach towards continuous quality improvement should be an integral part of management's duties. It allows for growth and development of organizational quality. Self-audits prepare organizations well in advance of state audits, relieve “cramming” to be ready to for the periodic inspection, and lead to a high standard of care throughout the year. They are a catalyst for continuous improvement, employee involvement, and generate action based on facts, analysis and feedback.

Providers now are implementing ongoing quality monitoring to provide a continuous loop of fact finding, problem solving, training, action and reassessment.

Self-evaluation provides an effective tool for identifying problems and developing timely solutions. Comprehensive Quality Assurance needs to be an integral part of operations. It should be a major element of the work an organization does and be a priority in all departments. Comprehensive Quality Assurance addresses regulations, corporate compliance, and quality of life issues. It is proactive and responsive.

### **Comprehensive Quality Assurance may include:**

- Consumer Satisfaction and Quality of Life Surveys and Interviews
- Ongoing incident and accident reporting, investigation, committee review, and follow-up. See Irwin Siegel Agency’s booklet, “The Investigation Process, a Key to Eliminating and Reducing the Recurrence of Accidents and Abuse” for details.
- Annual formal site reviews
- Informal site reviews and/or “walk and talk throughs” at least 4 times a year, preferably monthly, checking physical plant safety and the quality of care
- Consumer Satisfaction and Quality of Life Surveys and Interviews
- Parent Survey by parent volunteer
- Staff Surveys
- Self-survey committee meetings to review findings, recommendations and follow-ups
- Review of Fleet Safety Program, tracking of accidents, and training needs
- Internal audits for administrative and fiscal compliance; review billing and reimbursement records for accuracy and completeness
- Identification of the federal, state and local laws governing the organization to ensure corporate compliance
- Establishment and review of an accounting system with built in checks and balances among different staff
- Accessible Quality Assurance staff with QA as their primary responsibility

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## **Benefits of Internal Quality Assurance**

- Creates continuous feedback loop, which is essential to effective quality management
- QA plays a supportive role and is appreciated, not feared
- Catches problems and addresses them before a crisis develops
- Provides a formal system for self evaluation and improvement
- Enables prompt identification and correction of problems
- Empowers consumers
- Improves overall quality
- Can reduce the stress of licensing authorities' regulatory audits

## **Regulatory Compliance**

Audits from those outside of the organization can be beneficial when continuous improvement systems are in place throughout the year. A consistent level of quality expectations and feedback best prepares staff for an audit. When an outside auditor does review the program, s/he can bring the benefit of a fresh pair of eyes to the situation and an opportunity for further growth and development. This could become a welcome addition to the overall quality review process, rather than the dreaded day on which everyone scrambles to “look good.”

## **Does Compliance Equal Quality?**

Providers need to be ever alert as to how they can improve safety and quality. For instance, is driver training and having a Fleet Safety Program a standard of care in your state? It is, in fact, an essential part of a quality program. Do all you can to address each individuals transportation needs in their individual program plan. Review vehicle incidents with the same diligence you would other kinds of incidences.

## Focus on Outcomes

Are you achieving your agency's mission? What are the desires and needs of the people you serve? Are you helping them meet their personal goals? Input from the people served is essential to answering these questions. Surveys, interviews, observation of nonverbal cues and interactions with others, and discussions with people close to the individual, are all ways to assess if the desired outcomes of service delivery are taking place. Implementing a system that monitors activity is essential.

**Litmus Test for Quality** is a model for gauging quality and customer satisfaction, developed by *People on the Go in Maryland* (410-571-9320). It is a series of questions with suggested appropriate responses.

- Did you ask me?
- Will I be safe?
- Is my health protected?
- Do I have privacy?
- Are my rights and individuality protected?
- Am I spending time the way I choose?
- Does it help me be a part of the community?
- Does the service make sense?

### How do you measure customer satisfaction?

- **Customer Satisfaction Surveys:** These work best if they are individualized, updated regularly, and include an interview, follow-up, and feedback to the person completing the survey.
- In an environment of greater choice, customer satisfaction could be measured by the number of consumers who select, or are referred to your agency for service delivery. When there is a high demand for services, but a limited choice of supports, this is a less relevant measure, as people may be with an organization because it is the only service option they have.
- **Peer Advisory Committee (PACs):** Offers an organized opportunity for individuals to routinely express their opinions and concerns to management and to each other.
- **Number of change requests or complaints from the people served:** The input of people served should be welcome. It may be true that a proactive provider may initially have more complaints than one who doesn't seek input or pay attention to the complaints of individuals they serve. Within a provider agency however, one can gage their progress in meeting the desires of individuals served.
- Family input about service delivery and outcomes is also essential.
- Surveys, or suggestion opportunities, should be available to provide necessary staff feedback.

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## Focus on Solutions

Investigate any unwanted incidents to determine what happened and the possible causes. Take appropriate action to prevent recurrence and clearly communicate changes to all necessary parties. Be sure to provide a feedback loop to report incidents and monitor the effectiveness of changes made.

## Quality Checkpoints

A quality improvement program today focuses on **outcomes**. When outcomes are disappointing, look at all elements of quality within the service delivery system. Identify what changes may be made to improve outcomes. These elements include **Consumer Outcomes, Inputs, Employees, the Service Delivery Process, and actual Services Provided.**

## Consumer Outcomes

### SATISFACTION, COMMUNITY INCLUSION AND PARTICIPATION IN DESIRED ACTIVITIES

**The Quality Management Program should be driven by outcomes.** You can tell how well you are doing by seeing if desired outcomes are being achieved. Adjustments in services, service delivery and inputs will be propelled by outcomes observed.

#### Note:

- Consumer satisfaction
- Opportunities for consumer choice and meaningful relationships
- Respect for individuals rights and dignity
- Opportunities to pursue meaningful activities and employment
- **Safety Outcomes - Has anyone been hurt? Could an accident have been prevented?**

#### Check:

- Frequency and severity of claims, accidents and injuries
- Types of claims, trends
- Loss Ratio - The cost of losses compared to premium paid
- Number of incidents reported per individual
- Number of serious and reportable incidents
- Number of incidents of abuse or neglect
- Number of times physical restraint was used

## People tell us these things are Signs of Quality Responses to the “Ask Me” Survey, People on the GO, 2001

(Based on 1,000 responses from 35 states)

- I can call **friends** whenever I want
- Staff should arrange for special friends for those without family
- I have chances to express my opinion and it counts
- Staff are trained to be **good listeners** (don't assume to know what I want)
- I am respected by staff
- Staff treat us nice and not mean
- Staff get phone calls until a certain hour, they do not disturb our sleep
- **I can choose** my food, clothes, work and fun things to do
- I can move if I want
- I can go out or stay in
- I vote
- I know my neighbors
- I have responsibilities in my community, at church and other places
- The services I receive make sense and I want them
- I know how to complain if I want something changed
- **Transportation**
- I have opportunities
- I don't have to go out when everyone else does
- I use public transportation
- I like the car I ride in
- I can decide when I want to go out to do things that are important to me

### Inputs

#### **MONEY, MATERIALS, FACILITIES, POLICY, PEOPLE AND TRAINING**

Are dollars given directly from the government to service providers, or are funds given directly to consumers and their fiscal intermediaries to use for services desired? Does the method of payment affect the quality of outcomes. Agencies need to lobby for appropriate funding for service initiatives that meet the desires of the individuals served. Does the form of the facility and service delivery follow function, or are services supporting choice being offered in program facilities that were not designed with consumer choice in mind? This could affect the quality of the outcome of the service delivered. Larger, aging facilities may sometimes make it more difficult to offer choice and individualized services, community integration, and appropriate behavioral supports.

Policies should outline procedures to limit accident and injury, what to do in case of an emergency, and protocol for supplying desired services. Agencies need to meet state and federal standards of compliance

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in financial management, hiring, service delivery and billing.

**Inputs That May Affect Quality:**

- Agency's Mission
- Top Management Commitment to Quality
- Encouragement of a Quality Culture
- 3-5 year plan
- Funding, financial status
- Community Access (transportation and other services)
- Personnel
- Vehicle selection, quality and maintenance

## **Employees**

### **SELECTION, TRAINING, SUPERVISION**

The quality of a program is directly affected by the quality of its workforce. Selection should include rigorous background checks, thorough interviews giving realistic job expectations and documentation of all steps prior to hire.

Training should prepare staff with tools necessary to treat individuals with dignity and respect, and to offer them choices and opportunities for community involvement and relationship building. Employees should be conscious of their key role in quality service provisions.

Supervision should demonstrate respect for the direct care professional while providing clear expectations, direction, ongoing training and support, job performance evaluation and opportunities for communication and feedback.

**• Human Resource Indicators That May Affect Quality:**

- Consumer Satisfaction with Support Providers
- Vacancy Rate
- Hiring Practices: background checks, necessary credentials, experience
- Staff Morale
- Staff Training: Orientation, Behavior Management, Individualized Training Information, Procedures, Individual Rights, Supervisory Training
- Staff Supervision

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## **Service Delivery Process**

### **FLOW OF PEOPLE, DATA, AND MATERIALS**

Effective service delivery requires communication and feedback about supports received, desired and needed. To protect individual rights when sharing this information, agencies need to meet the privacy standards as outlined in federal and state regulations.

- Individualized Program Plans reflect Individualized Risk Management - what safeguards are needed for each individual as they pursue their life ambitions
- Health Care Accessibility and Follow up
- Admission and Discharge Planning and Procedures
- Communication procedures between staff, service providers, individuals served
- Family Involvement
- Quality Controls:
  - Incident Reporting and Review
  - Safety Committee, Incident Review and/or Human Rights Committee
  - Compliance and Licensure, Current Deficiencies and Plan of Correction
  - Accreditation Process
  - Completion and review of vehicle safety checklists and follow-up

## **Actual Provision of Services**

### **HOUSING, TRAINING, COUNSELING AND SUPPORTS**

It is important to develop and implement safety features, precautions and training based on past experience and outcomes.

- Physical Plant Safety, Fire Safety
- Transportation Safety and Options
- Program Design
- Number of Medication Errors
- Placement Rate and Job Retention Rate
- Incidents of skin break down
- Frequency of each individual's trips into the community

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## Summary

### QUALITY CHECKPOINTS INCLUDE:

- Outcomes - Most Important
- Inputs
- Employees
- Service Delivery Process
- Actual Services Provided

Frontline staff plays a key role in assuring quality outcomes for consumers within the human services community. In a consumer directed service delivery system, a more competitive environment for providers, the role of the direct support specialist becomes even more critical. Staff evaluations should monitor and reinforce the importance of tasks that enhance safety and quality outcomes.

Quality Enhancement must not be driven solely by mandates to meet regulations. Quality management should be used to bring about continuous quality improvement, as measured by whether the outcomes generated are those that the consumer desires.

### Other Resources:

Pinnacle <http://www.siegelagency.com> - A Self-Auditing Tool for Quality

The Pinnacle program is an proactive online assessment tool to guide organizations on a road towards quality improvement.

The Investigation Process, A Key to Eliminating and Reducing the Recurrence of Accidents and Abuse  
Employee Dishonesty

Here's What I Dream, A Look at Person Centered Approaches

Dollars and Sense of Risk Management

One Step Ahead Series

College of Direct Support, 1400 East Fifth Ave., Knoxville, TN 37919, [www.collegeofdirectsupport.com](http://www.collegeofdirectsupport.com)

For more information please contact our Risk Management Department at 800-622-8272.

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## **Seven Key Components to Reduce, Detect and Prevent Abuse and Neglect**

- 1. PREVENT:** The provider has the capacity to detect and prevent the occurrence of abuse and neglect, and reviews specific incidents for lessons learned, which form a feedback loop to affect necessary policy changes.
- 2. SCREEN:** The provider makes the effort to determine the appropriateness of a prospective employee's experience in working with individuals with specific conditions and needs, and seeks to identify and verify any previous charges of abuse and neglect of a prospective employee. The provider also screens individuals receiving services to determine whether the individual's needs can be appropriately addressed within the provider's setting.
- 3. IDENTIFY:** The provider creates and maintains a proactive approach for identifying events and occurrences that may constitute or contribute to abuse and neglect.
- 4. TRAIN:** The provider gives all employees, through orientation and ongoing training programs, information regarding abuse and neglect. Training should include reporting requirements and procedures for detection, intervention and prevention. Individuals receiving services should be trained to recognize and identify signs and symptoms of abuse and neglect; they should also be informed of ways in which they and their family members can support detection and prevention efforts.
- 5. PROTECT:** The provider seeks generally to support and protect individuals receiving services, their families and staff. Additionally, the provider makes an effort to protect individuals from abuse and neglect during investigation of allegations of abuse or neglect.
- 6. REPORT AND INVESTIGATE:** The provider puts in place measures that facilitate and assure the reporting of abuse and neglect. The provider also assures timely, thorough and objective investigation of all allegations of abuse, neglect or mistreatment.
- 7. RESPOND:** The provider assures that the appropriate corrective, remedial or disciplinary action occurs in accordance with applicable local, state or Federal law, in response to findings resulting from investigations.

**These seven Key Components comprise an integrated approach for the detection and prevention of abuse and neglect. The objective of this approach is to address abuse and neglect at critical points in program planning, policy development and operations.**

Source: CMS's *Appendix Q, Guidelines for Determining Immediate Jeopardy*.  
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agency inc.

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PO Box 309, Rock Hill, NY 12775  
800.622.8272 / [siegelagency.com](http://siegelagency.com)