VCP Centers of Excellence: A Primer in Quality Improvement

July 13, 2018
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Success is achieved through meeting the needs of those we serve.
### Quality Assurance

“*The planned and systematic activities implemented in a quality system so that quality requirements for a product or service will be fulfilled.*”

- American Society for Quality

### Quality Control

“*The observation techniques and activities used to fulfill requirements for quality.*”

### Quality Improvement

“*Continuous improvement is an ongoing effort to improve products, services or processes. These efforts can seek “incremental” improvement over time or “breakthrough” improvement all at once.*”

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| - Annual blood borne pathogen trainings  
- Sexual harassment training  
- Mostly used to comply with the standards | - Direct observation of counseling session  
- Direct review of clinical notes for quality | Process that balances quality improvement and performance measurement |

- Process that balances quality improvement and performance measurement
Thoughts about Quality Improvement

- The goals of QI
  - To understand process, reduce unintended variation in care, eliminate errors, remove unnecessary steps, and improve communication and accountability
  - Process is designed toward outcomes
  - Quality improvement depends on measurement

- Quality: meeting and/or exceeding expectations of customers
- Success: achieved through meeting the needs of those we serve
- Most problems are found in processes, not in people
- CQI does not seek to blame, but rather to improve processes
Questions often addressed by Quality Improvement

• Were services provided in timely manner?
• Was necessary care provided?
• Was care provided efficiently?
• Was the expected outcome achieved?
• Are patients, clients and customers satisfied with provided services?
Group Poll

- Do you have a formal quality improvement process/policy within your agency?

- ON line polling: Please enter this URL into your browser: http://etc.ch/tD78
Why should I care about Quality Improvement?

- Our world is changing – Payment Reform and Value Based Payments
- By the way ... the people we are hired to support and the staff we hire expect us to provide high quality services and supports!
Important Context
We are experiencing a culture shift....
Over the past decade, the VCP network has experienced:

- National and regional pressures for changes in health care environment
- Local discussions promoting alternative models of health care and payment
- Capped funding with enhanced scrutiny of spend
- Difficulty articulating value and contribution of individual agencies and network as a whole in a climate of shrinking funding, integration and competition
- To this end, national models of accreditation don't fit or articulate the contribution of home and community-based models of care delivery (and are really expensive!)
Group Poll

• Do any of you feel you are knowledgeable about health reform and value based payment?
Health Care Reform is Happening

Partnerships with:
- Accountable Care Organizations
- Blueprint for Health
- Other community providers
- Regional groups - ACOs and Blueprint have created Unified Community Collaborations

Focus on Vermont’s Health Care Reform Goals:
1. Reduce health care costs and cost growth
2. Assure that all Vermonters have access to and coverage for high-quality health care (health care includes mental and physical health and substance abuse treatment)
3. Support improvements in the health of Vermont’s population
4. Assure greater fairness and equity in how we pay for health care
How we are paid is changing

**Value Based Payment Reform Goals:**
- To improve the quality of care being provided
- To achieve enhanced outcomes for our clients
- To truly provide need based cost effective mental health, developmental disability, and substance use disorder services.

This will occur through a combination of:
- Blending current funding streams
- Utilization of innovative pay-for-performance payment methodologies
- Further development and enhancement of our quality assurance and improvement processes
- Maintaining our partnerships in the provision of truly integrated and holistic care.

→ Our work with COE is helping us articulate our value in the Payment reform landscape
VCP-COE Is The Solution

Assuming:
- Integrated delivery systems
- Value-based payments
- Enhanced regional control mechanisms
• Are you familiar with Results Based Accountability?
Results Based Accountability

Network’s First Step Towards Unified Approach to Quality Improvement – RBA!

- **How much did we do?** – tells us how much we did
- **How well did we do it?** – quality of the service or activity
- **Is anyone better off?** – are we achieving the desired results
VCP COE Fits Neatly with Results Based Accountability

- All member agencies have incorporated RBA into their quality improvement efforts
- **RBA is now the law** – In the 2014 Legislative Session Act 186 was passed
- AHS has structured our Master Grant around RBA
- VCP COE Measure set fits into the RBA framework
Goals of COE Project

The VCP-COE process is unique from other health care certification processes in that it:

- Is relevant to community based work
- Applies to individual agencies and the network in aggregate
- Is informed by assessment
- Promotes and guides continuous quality improvement
- Promotes peer review, learning and support
- Highlights the value contributed by each agency and by the VCP network as a whole
- Invites external expert review by the Jeffords Institute for Quality at the University of Vermont Medical Center
- Informs Healthcare and Payment Reform
VCP-COE Timeline

- **2014** – CEO’s of network agencies explore National Council model for Centers of Excellence
- **2015 – 2016** – Measure development
- **2016 – 2017** – Piloting of measures with 3 network agencies
- **July 2017** – Certification open to agencies for review
- **November 2017** - First agency fully certified
- **March 2018** – Two agencies awarded full certification as Vermont Care Partners Centers of Excellence
- **End of FY20** – All network agencies reviewed
- **FY21** – Revised manual used for next round of reviews
1. **Easy Access** - Right care at the right time

2. **World Class Customer Service** – Excellent, personalized, high quality care

3. **Comprehensive Care** – A broad scope of mental health, substance use, co-occurring disorder, developmental disorder, and other social services that address the social determinants of health

4. **Excellent Outcomes** – Clients and consumers achieve Excellent Outcomes that are important to the client, agency and community

5. **Excellent Value** – Improved outcomes result from efficient use of services
VCP-COE Measure Set Overview

- 42 measures to assess 5 areas of COE available with full description in the VCP-COE manual
- Focus on access to quality data in first round (reporting)
- Future focus on benchmarks for appropriate measures
Element 1
Easy Access

Known for ensuring new and existing clients can get the right care, at the right time, in the right setting and with the right provider.
# Element 1: Easy Access

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<tbody>
<tr>
<td>Schools have co-located services</td>
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<tr>
<td>Clients are offered a face-to-face contact within five days of initial request</td>
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<tr>
<td>Agency provides co-located services in primary care offices</td>
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<tr>
<td>Agency promotes consumer access to and maintenance of healthcare services</td>
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<tr>
<td>Clients are seen for treatment within 14 calendar days of assessment</td>
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<tr>
<td>Clients enrolled in Developmental Services Programs have a completed Individual Support Agreement (ISA) within 30 days of enrollment</td>
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Element 2: World Class Customer Service

- Built on a Culture of Engagement and Wellness
- Known by the community, clients and staff for going the extra mile
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<tr>
<td>Clients indicate they were treated with respect</td>
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<tr>
<td>Clients indicate they would refer a friend or family to agency</td>
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<tr>
<td>Clients with developmental disabilities indicate they like where they live</td>
</tr>
<tr>
<td>Staff feel driven to help organizational success</td>
</tr>
<tr>
<td>Staff would recommend agency to a friend or family for employment</td>
</tr>
<tr>
<td>Staff would recommend the agency to a friend or family member for services</td>
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<tr>
<td>Staff are satisfied with the culture of the workplace</td>
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<tr>
<td>Agency is working to improve staff turnover rates</td>
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<tr>
<td>Staff retained after three years of employment</td>
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<td>Staff are encouraged to take action when they see a problem</td>
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<tr>
<td>Staff are satisfied with their benefits package</td>
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<tr>
<td>Staff pay commensurate with similar jobs in the non-profit community</td>
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<tr>
<td>Agency has a plan or process to promote cultural competency and training in the organization</td>
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<tr>
<td>Agency has a process for reviewing and monitoring client and staff safety</td>
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<td>Agency has an employee wellness program</td>
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Element 3
Comprehensive Care

Known for offering a broad scope of mental health, substance use co-occurring disorder and developmental disabilities services that are integrated with medical care and other services and supports
Element 3: Comprehensive Care

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<td>Clients indicate services were right for them</td>
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<tr>
<td>Clients indicate they received the services they needed</td>
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<tr>
<td>The agency asks clients if they have a primary care provider</td>
</tr>
<tr>
<td>The agency helps clients who report not having a primary care provider enroll with a primary care provider</td>
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<tr>
<td>People are provided a follow-up service within 7 days after discharge from psychiatric hospitalization</td>
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Known for achieving results for clients. It can measure what is important to clients and achieves excellent outcomes on those measures.
## Excellent Outcomes

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<tr>
<td>Clients indicate services made a difference</td>
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<tr>
<td>Clients indicate services improved their quality of life</td>
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<tr>
<td>Clients are improved upon discharge</td>
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<tr>
<td>Clients make progress on Individual Support Agreement (ISA) goals</td>
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<tr>
<td>Clients (CRT and Adult DS clients) receive six or more supported employment services</td>
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<tr>
<td>Clients are assessed for tobacco use</td>
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<tr>
<td>Reduction in risk level for individuals supported by developmental services who participate in the offender program</td>
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Known for providing high value. This means the organization achieves improved health outcomes that matter to clients relative to the cost of achieving those outcomes.
### Excellent Value

| Evidence that agency has a workflow that demonstrates integration with healthcare team |
| Evidence that depression screening is integrated into the intake process |
| Agency has a process that refers to or offers tobacco cessation services to clients |
| Agency has a system to improve response rate to customer satisfaction surveys |
| Agency has a process for utilization review to allocate and monitor the use of clinical services |
| Agency maintains programs that are known to reduce use of more expensive community resources and monitors their utilization |
| Trauma screening is integrated into the intake process |
| Domestic violence screening is integrated into the intake process |
| Substance use screening is integrated into the intake process |
VCP has chosen the Clear Impact Scorecard as a way to communicate information about agency-level and system-wide progress on the VCP-COE measure set.

VCP System Scorecard
https://app.resultsscorecard.com/Scorecard/Embed/23716
Review Process

Application and Scorecard

Review by Peers and External Experts

Certification Decision
1. Full - 3 years
2. Provisional - 1 year
3. No certification

Informed Quality Improvement
COE and Quality Improvement at the Agency Level

- Can occur across a system or at the programmatic level
  - Smaller changes easier at the programmatic level
  - It is up to agencies how to effect change to promote systemic improvement

- Improvement is about learning
  - Trial and error (scientific method)
  - Improvements requires change, however not all changes are an improvement

- Measure your progress
  - Only data can tell you whether improvements are made
  - Integrate measurement into the daily routine

- Improvements through continuous cycles of changes
  - Plan-Do-Study-Act approach (one example)
  - Changes are initiated on a small scale to test them before implementation

- Leadership is needed
  - Establish organizational commitment and support staff and activities
How do we get started?

- Discuss with leadership!
- Develop a committee
- Review manual and complete self-assessment to determine where your agency “sits” with these measures
- Ask your representative from COE to participate in meeting (often it is an Outcomes Representative)
- Ask me for help!
  - Reach out, I’m here!

- Some fun ideas:
  - HC had a trivia game they did with leadership to educate them on COE and the process
  - UCS had “town meetings” to get staff educated, psyched and participating in COE prep
  - WCMHS created COE Champions to lead the charge across the agency
In conclusion.....

Ask Any Questions
Make Any Comments, and,
Share Any Thoughts