

Quality Improvement

Putting the Pieces Together

August 22, 2019



Virginia Department of
Behavioral Health &
Developmental Services

DBHDS Quality Management System



- The DBHDS Quality Management System includes:
 - Quality Assurance
 - Risk Management
 - Quality Improvement

Quality Assurance/Risk Management



- **Division of Compliance, Legislative and Regulatory Affairs**
- Office of Human Rights
 - Monitors compliance with human rights regulations by promoting the basic precepts of human dignity, advocating for the rights of persons with disabilities in the service delivery system and managing Human Rights dispute resolution program
- Office of Licensing
 - Acts as regulatory authority for licensed service delivery system (i.e. initial application reviews, initial site visits, licensed provider reviews, unannounced inspections, issuance of corrective action plans, investigations of complaints)

Quality Improvement



- **Division of Chief Clinical Officer**
 - Office of Clinical Quality Improvement
 - Data Quality and Visualization (DQV)
 - Quality Committees

Clinical Quality Improvement



The Office of Clinical Quality Improvement:

- Provides technical assistance and consultation to internal and external state partners and licensed community-based partners
- Facilitates the use of data in the quality improvement process to identify trends
- Supports all DBHDS quality committees in the establishment of quality improvement initiatives
- Develops training resources for quality improvement
- The office provides oversight, either directly or indirectly, of quality service reviews
 - National Core Indicators
 - Quality Service Reviews
 - Support Coordinator Quality Reviews

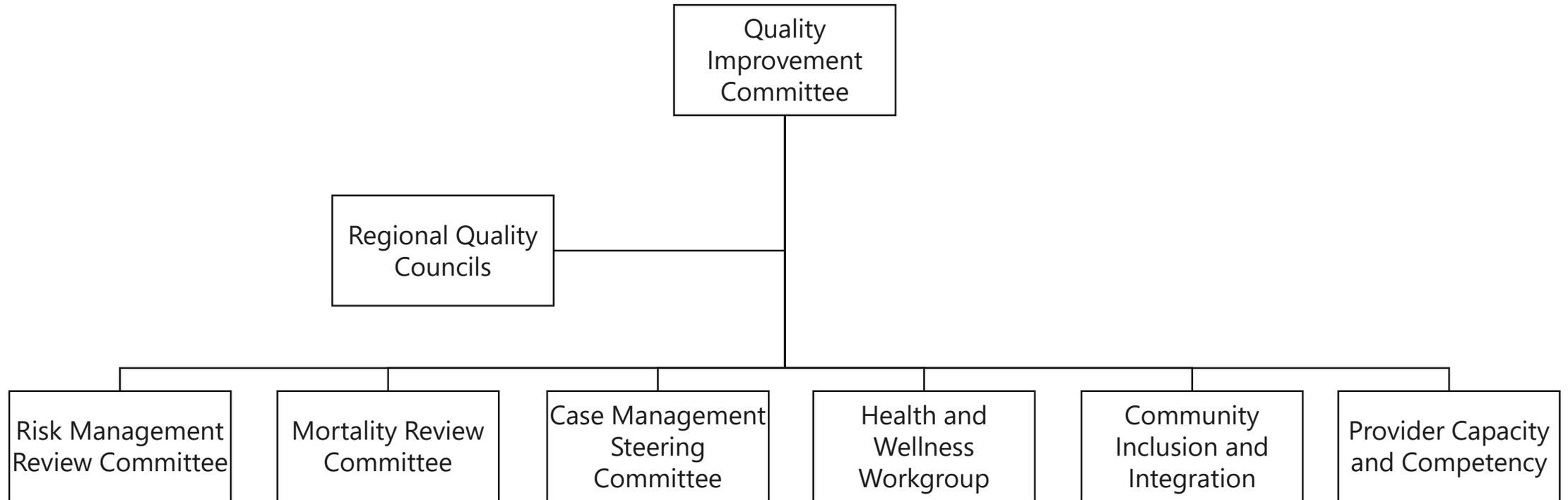
Office of Data Quality and Visualization



Quality improvement efforts are supported by the Office of Data Quality and Visualization's (DQV)

- DQV assists programs throughout the agency by working to identify, evaluate, refine and document processes that already exist in their respective areas and assist to determine where improvements are needed.
- Data are captured from prescribed points in a process. Understanding the process from which data originate is a necessary component when deciding what data should be collected, reported and analyzed.
- By identifying the population, and the settings, a true sense of where the data originates can be understood and objectively evaluated.
- DQV enables programs to accurately and simply communicate the story of their data.

DBHDS Quality Committee Structure



DBHDS Quality Committees



QIC

- Highest level quality committee for the agency and overall oversight of the Quality Management Program
- All other quality committees report into QIC, known as sub-committees to the QIC
- Ensures a process of continuous quality improvement and maintains responsibility for prioritization of needs and work areas
- Maintains a charter and ensures that all sub-committees have a charter describing standard operating procedures
- Ensures that providers, Community Services Boards, and other stakeholders are informed of quality improvement initiatives approved for implementation

DBHDS Quality Committees



Regional Quality Councils (RQCs)

- Composed of private and public providers, individuals and family members
- Activities are targeted at the regional level
- Monitors and evaluates data to identify and respond to trends to ensure continuous quality improvement
- Identifies and recommends quality improvement initiatives to improve the provision of services
- Reports annually to the QIC on results of implemented quality improvement initiatives

DBHDS Quality Committees



Risk Management Review Committee (RMRC)

- Enables DBHDS to identify and prevent or substantially mitigate risks of harm
- Reviews aggregate data of provider compliance with serious incident and human rights reporting requirements and establishes targets for performance measurement indicators (PMIs)
- Monitors trends and uses the results of data reviewed to identify areas for improvement
- Identifies priorities and determines quality improvement initiatives as needed, including identified strategies and metrics to monitor success

DBHDS Quality Committees



Mortality Review Committee (MRC)

- Reviews deaths of individuals with IDD who received a licensed service at the time of death
- Reviews of unexplained OR unexpected deaths completed within 90 days of the death
- Recommends actions or interventions for the provider as applicable
- Addresses risk factors and gaps in service and recommends prevention strategies
- Identifies and implements quality improvement initiatives to reduce preventable deaths

DBHDS Quality Committees



Case Management Steering Committee

- Coordinates mechanisms for monitoring case management performance across responsible entities
- Reviews data from multiple sources, analyzes trends and progress toward meeting established targets
- Identifies and implements quality improvement initiatives to improve the provision of case management services

Key Performance Areas



DBHDS has identified three Key Performance Areas (KPAs) which:

- Align with the DBHDS Vision and Mission
- Have cross disability applicability
- Are focused on establishing performance measures for the Eight Domains noted in the Department of Justice Settlement Agreement

Workgroups



Health and Wellness

Safety and Freedom from Harm

Physical, Mental, and Behavioral Health Wellbeing

Avoiding Crisis

Community Inclusion and Integration

Community Inclusion

Choice and Self Determination

Stability

Provider Capacity and Competency

Provider Capacity

Access to Services

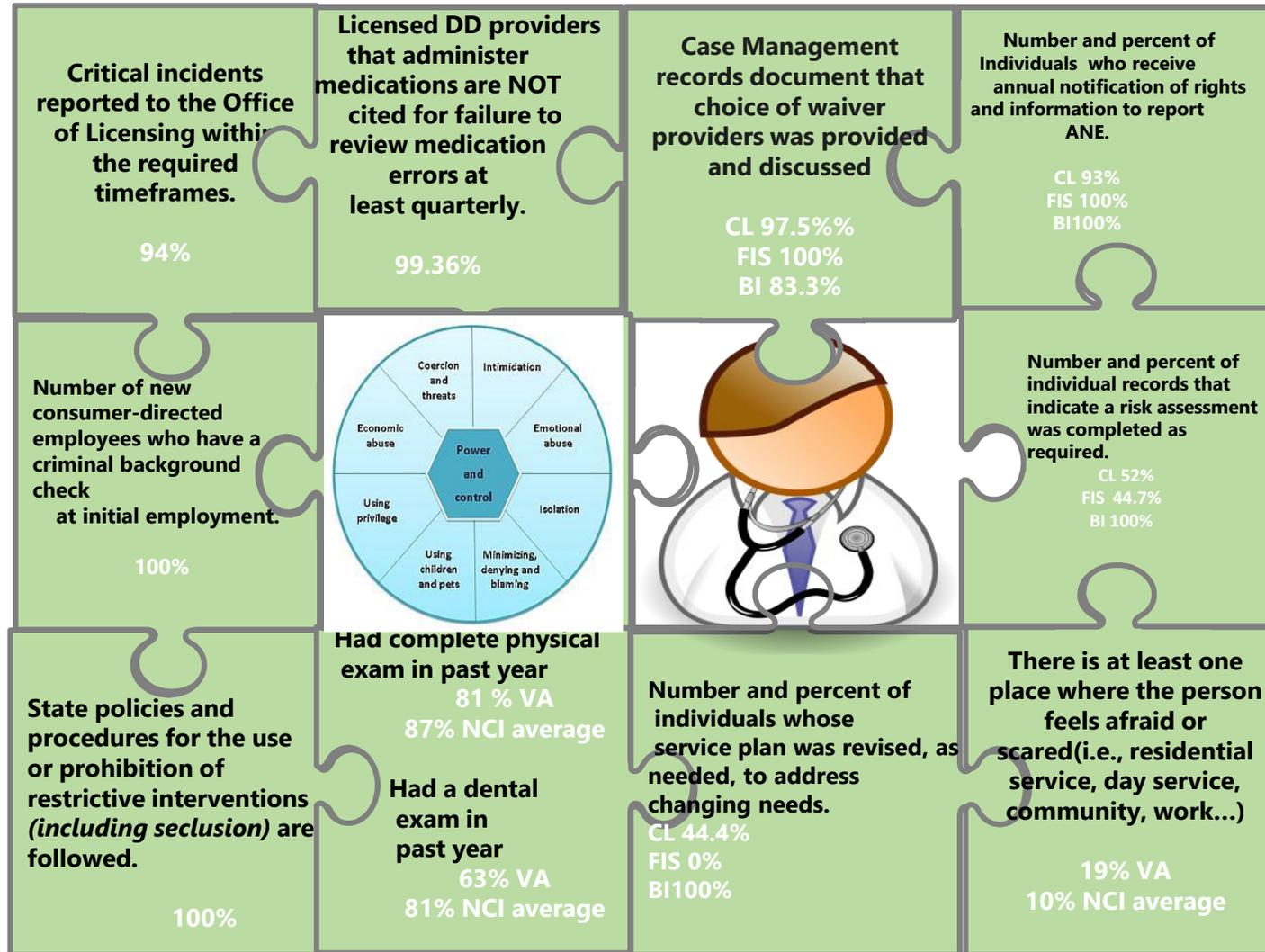
Performance Measure Indicators



For each KPA, the committees will:

- Establish performance measure indicators (PMIs)
- Consider a variety of data sources for collecting data
- Include baseline data when available and applicable
- Define measures and the methodology for collecting the data
- Establish a target and timeline for achievement
- Analyze data and monitor for trends
- Recommend quality improvement initiatives
- Report to the QIC for oversight and system-level monitoring

Performance Measure Indicators (PMIs)

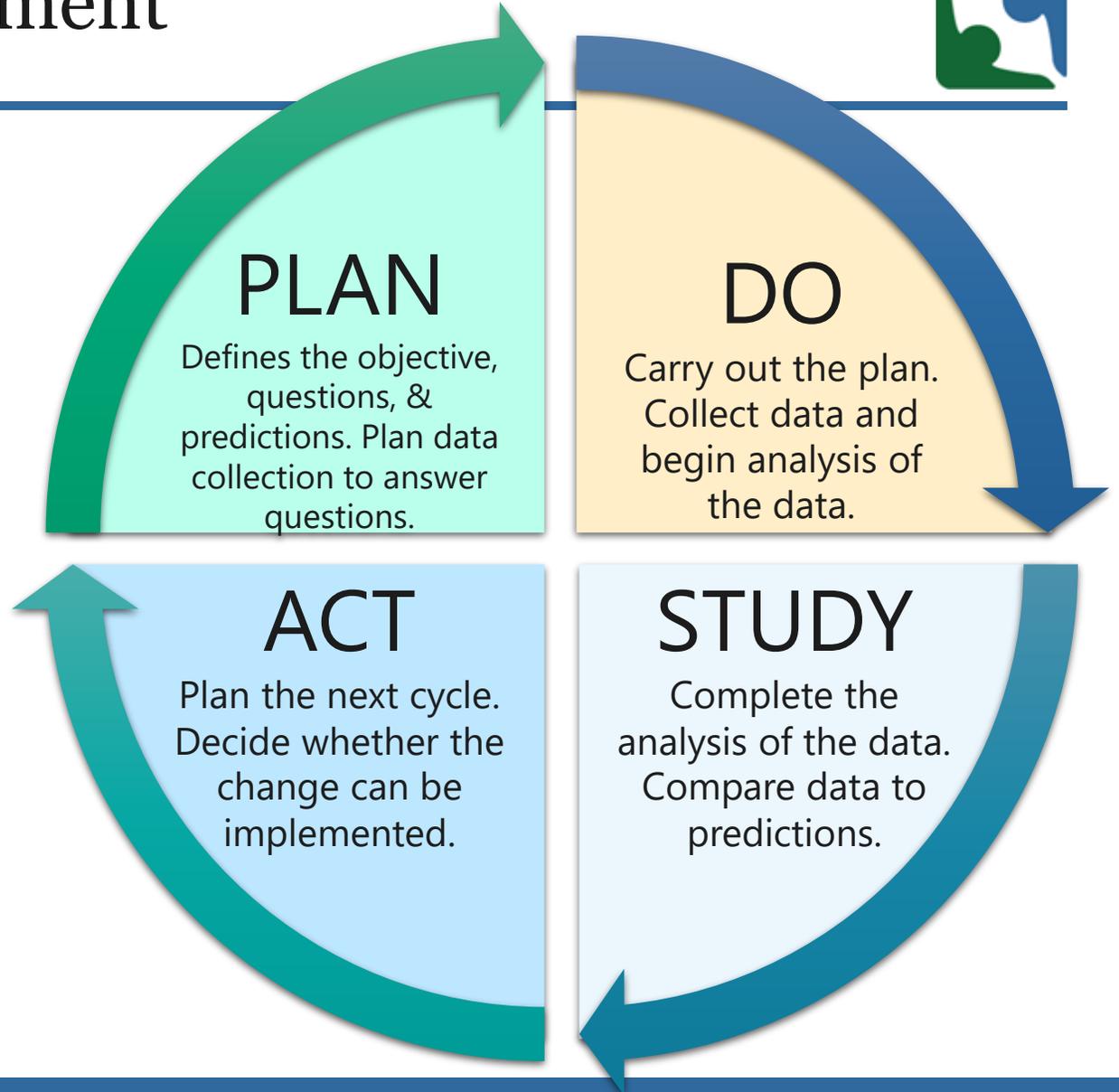
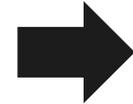


Building A Culture of Quality



- Quality is a shared responsibility
- Quality is not a one time activity, it is a continuous process
- Quality improvement is a data driven process

Model for Quality Improvement



Quality Leadership Collaboratives



The Virginia Department of Medical Assistance Services (DMAS)
Waiver quality improvement:

- DMAS Quality Management Reviews
 - Onsite quality reviews of individuals receiving services
- DMAS/DBHDS Quality Review Team
 - Ensure that waivers are being implemented as intended through review of waiver program data and quality improvement activities

Quality Leadership Collaboratives



The DBHDS Quality Management System also includes other state and local agencies/organizations which provide an opportunity for enhanced collaboration and coordination of quality aims at a cross agency or cross sectoral level:

- Virginia Department of Social Services
- Virginia Department of Health
- Virginia Association of Community Services Boards
- Advocacy Organizations (i.e., Partnership for People with Developmental Disabilities; disAbility Law Center of Virginia)
- Community Provider Service Organizations

Where are we headed?



- Create a Quality Management (QM) System that is:
 - Cross disability/cross continuum
 - Leadership supported
 - Person driven
 - Empowers ALL stakeholders to be change agents
 - Has an infrastructure that is sustainable and continuous

How do we get there?



- Development of a DBHDS Quality Management Plan
 - Describes what the agency is planning to accomplish and reflects what is currently happening
 - Serves as a guidance document that informs the organization as to the direction, timeline, activities related to QI
 - Living document that is revised and updated at regular intervals
- Includes a Data Quality Plan that guides the improvement of key data sources and monitors progress over time

Quality Management Plan



- Part I: Quality Management Program Description
 - Describes the current structure, framework, and existing quality committees for the agency
- Part II: Quality Management Work Plan
 - Contains the charters of each quality committee outlining the purpose and aims of the committee and anticipated quality initiatives
- Part III: Quality Management Annual Report and Evaluation
 - Summarizes the key accomplishments of the Quality Management Program, work plans, and challenges to meeting stated goals

Quality Management Plan



- Quality Committee Charters:
 - Charge
 - Statement of Purpose
 - Authorization
 - Chair
 - Membership Responsibilities
 - Attendance at meeting
 - Come prepared
 - QIC Liaison
 - Report to QIC
 - Quorum
 - Frequency of Activities of the Committee

Regional Quality Councils

