

Minnesota Housing Stabilization Services (HSS) Medicaid Academy

Session 7: Quality Assurance and Continuous Quality Improvement

February 9th, 10 a.m.-1 p.m. CT



Ei-Consultants



NORTH STAR POLICY CONSULTING

Welcome! We'll Begin Shortly

You are muted to reduce background noise

Zoom Meeting



Talking:

Meeting Topic: Test Meeting

Host: Tim Ng

Passcode: 48q.8i

Numeric Passcode: 166513
(Telephone/Room Systems)

Invite Link: <https://zoom.us/j/96172335252?pwd=b1Z4aytWTFY1RC8vL...>
[Copy Link](#)

Participant ID: 480464

Select here to
unmute

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share your
video



Join Audio

Computer Audio Connected

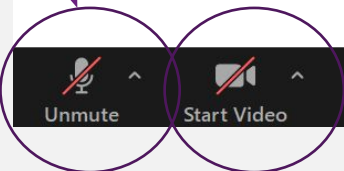


Share Screen

Select here
to open the
chat



Invite Others



2
Participants

Chat

Share Screen

Record

Leave



WELCOME!



Terri Power



Marcella Maguire



Amber Buening

Today's Facilitators

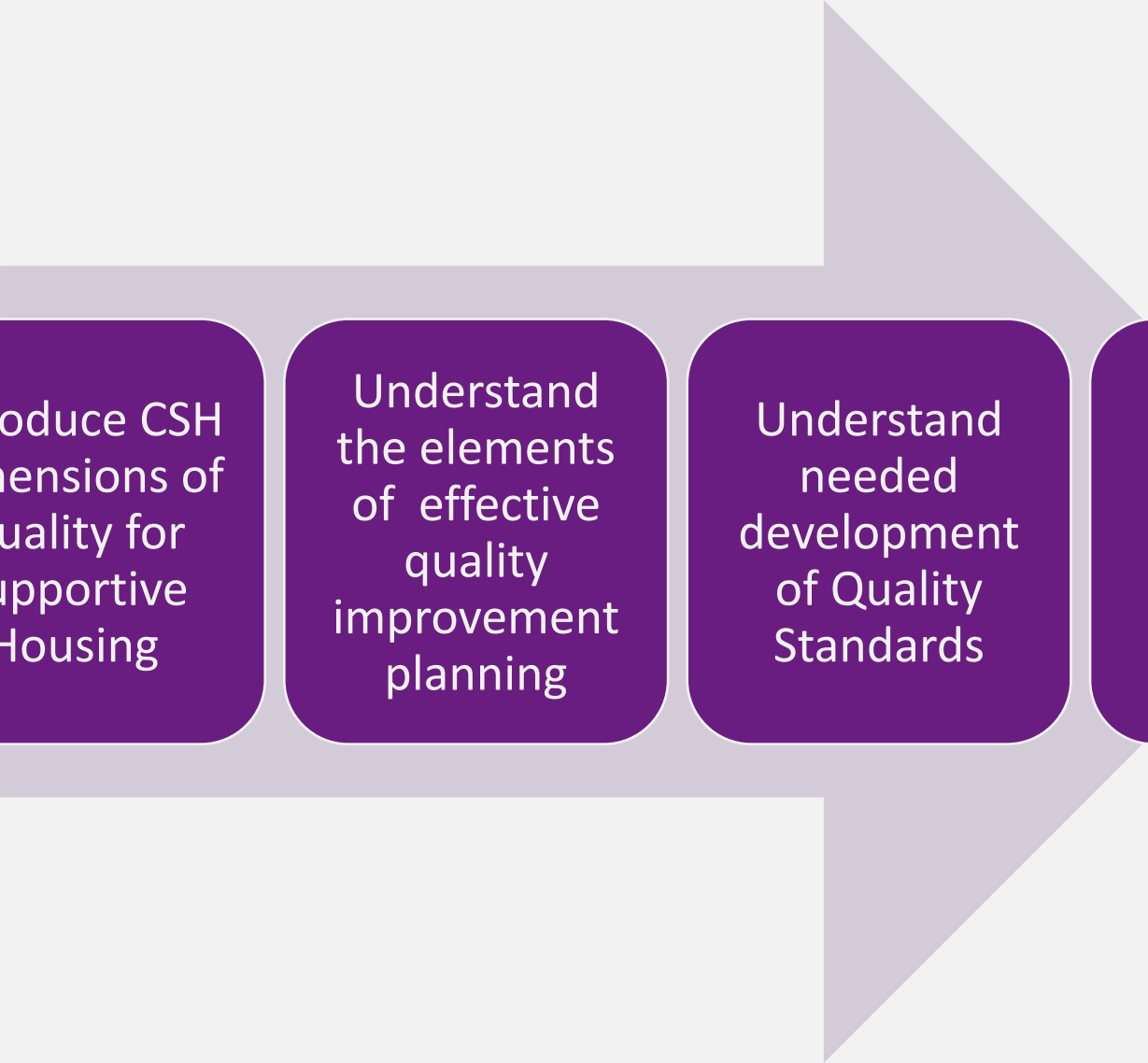
Purpose of Learning Sessions

DHS provides the WHAT
Housing Stabilization Services
TA Team helps with HOW so
you can develop a plan for
your agency

Each session will include:

- Helpful tips and tools provided by the TA team
- Time to update your work plan
- Open Q&A on topic
- Opportunities for sharing experiences across agencies

Key Takeaways



Introduce CSH
Dimensions of
Quality for
Supportive
Housing

Understand
the elements
of effective
quality
improvement
planning

Understand
needed
development
of Quality
Standards

Identify and
measure
outcomes



Group Sharing Activity

*share one
work plan
goal*

What is impacted at the agency-level when becoming a Medicaid provider?



- **Programmatic**
 - Service provision
 - Staffing & Training
- **Strategic**
 - Business partnerships
 - Strategic long-term planning
- **Analytical**
 - Data management
 - Quality Assurance
- **Logistic**
 - Financial operations
 - Legal agreements
 - HR considerations

CSH Dimensions of Quality Supportive Housing

Deep Dive into Dimensions

Dimensions of Quality: An Overview

Tenant Centered

- *Every aspect of housing focuses on meeting tenant needs*

Accessible

- *Tenants of all backgrounds and abilities enter housing quickly and easily*

Coordinated

- *All supportive housing partners work to achieve shared goals*

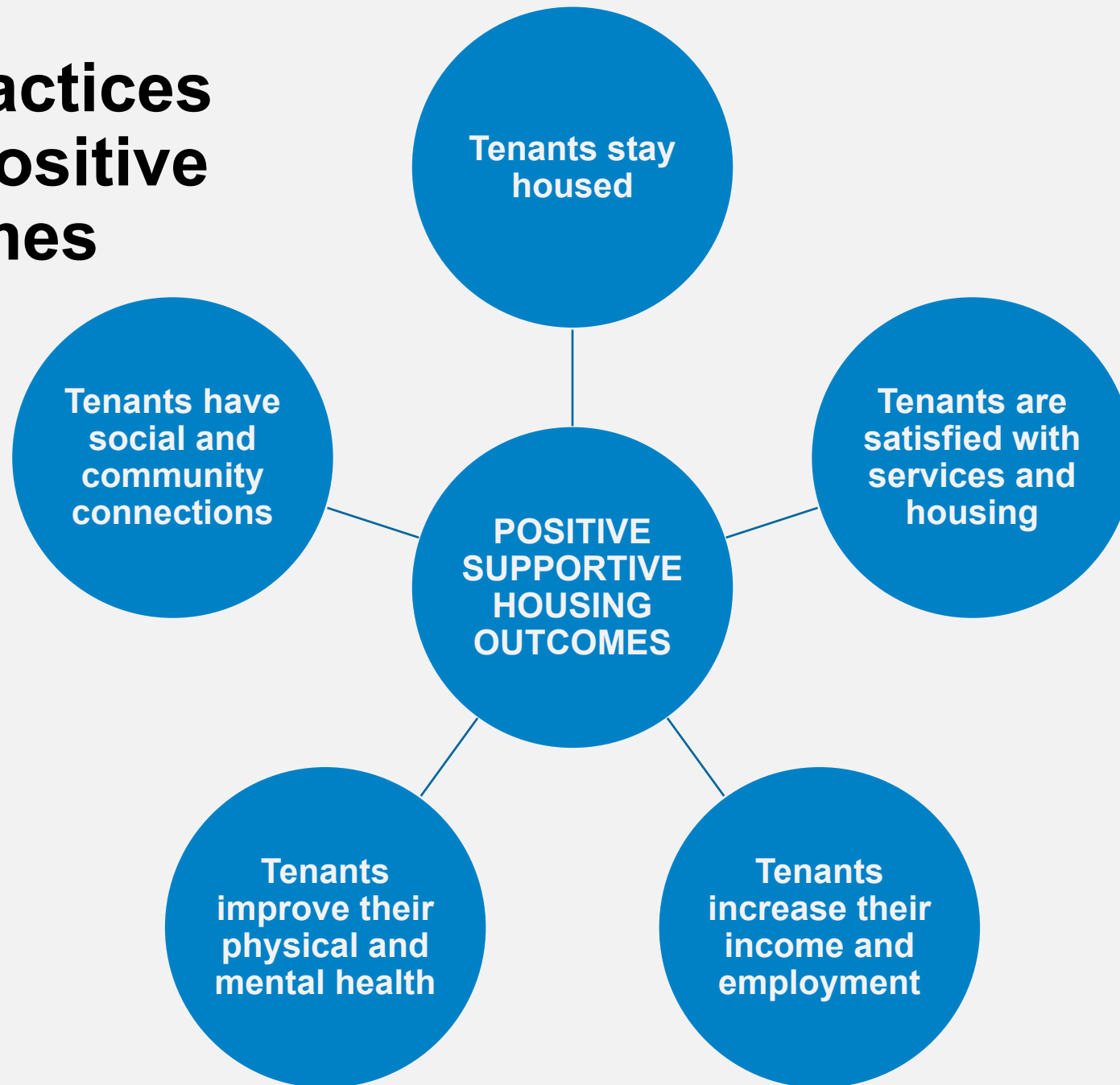
Integrated

- *Housing provides tenants with choices and community connections*

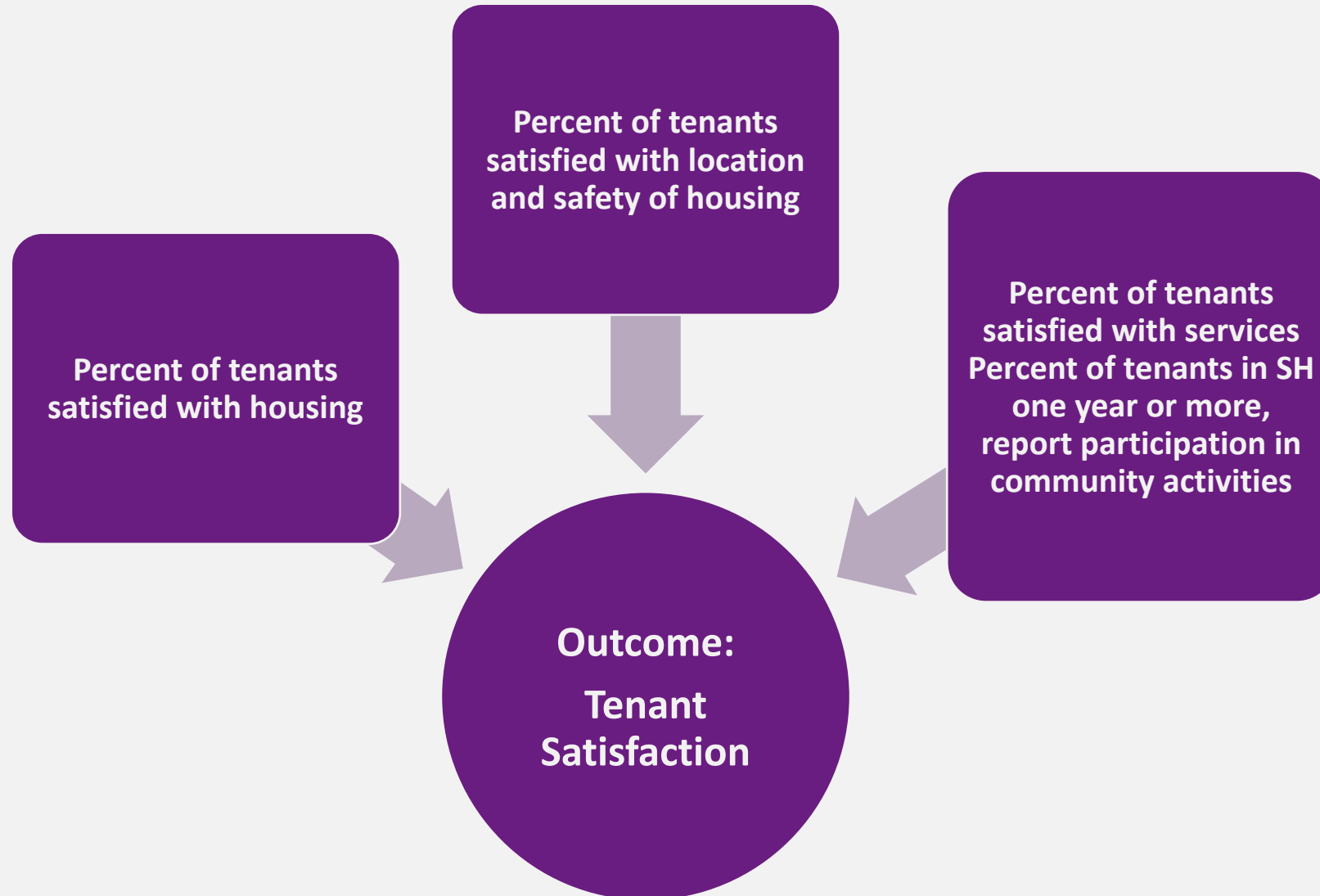
Sustainable

- *Housing operates successfully for the long term*

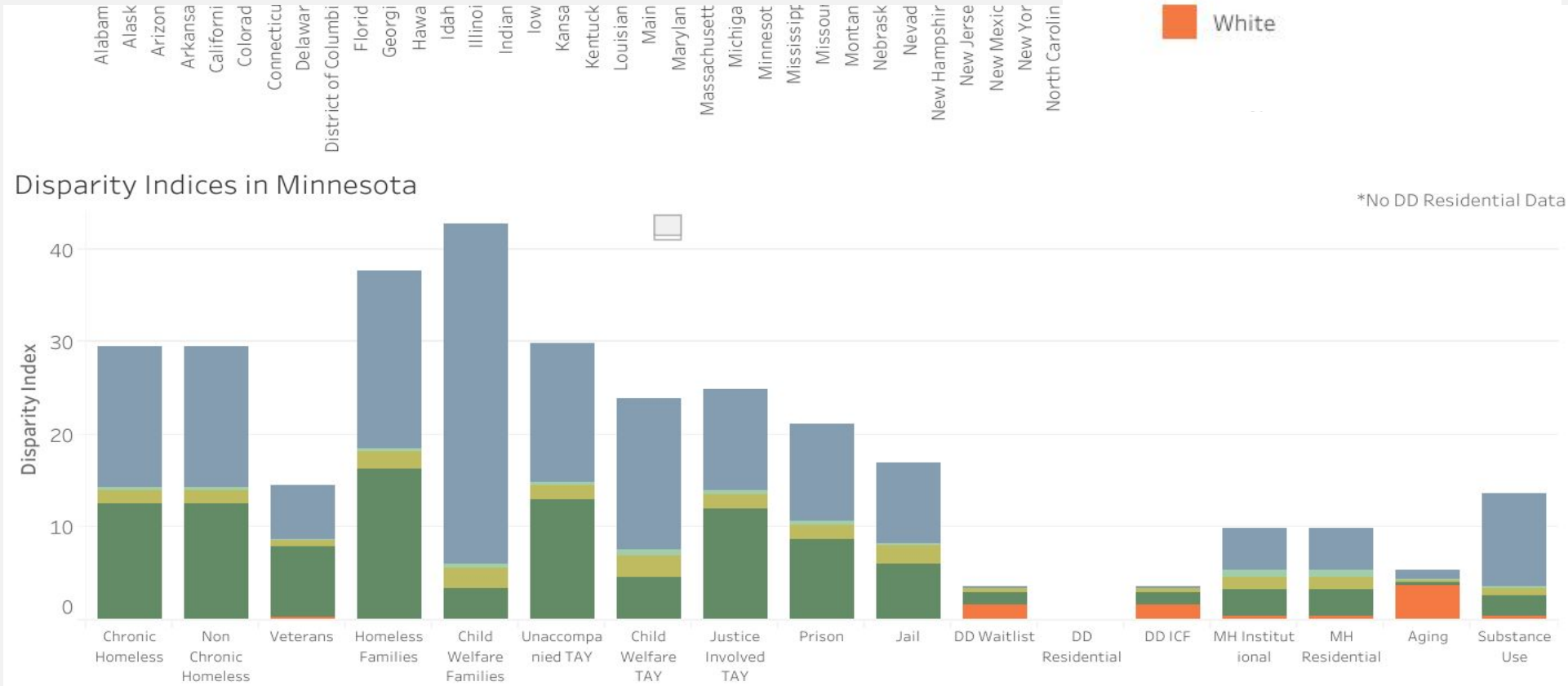
Quality practices result in positive outcomes



Outcomes – Tenant Satisfaction



CSH's Racial Disparities and Disproportionality Index



The Disparity Index

Disparity Indices are calculated by comparing a racial group's rate of representation in a system with all other groups. It measures the likelihood of a group experiencing system involvement compared to all other groups.

Incorporating Quality Standards that Promote Race Equity

Scenario:

In a recent Quality Certification site visit, it was discovered that the experience of younger African-American men in one of the supportive housing projects was different than other tenants in the building.

In a tenant focus group when asked about program rules and which rules can lead to eviction, it came out that only the younger African American men had been written up for rules like "no slippers or tank tops in common areas of the building". Other tenants weren't aware of these rules or said that they saw the signs but regularly wore these items in public without being approached by PM staff or written up. All of the African American men in the focus group had received verbal or written warnings related to this rule.

- *How do we as an agency and staff make amends to the residents who were harmed by this disparate treatment?*
- *How do we revise our policies and procedures to help prevent this disparity in the future.*
- *What training, supervision and/or support do staff need to help prevent this disparate treatment from re occurring?*

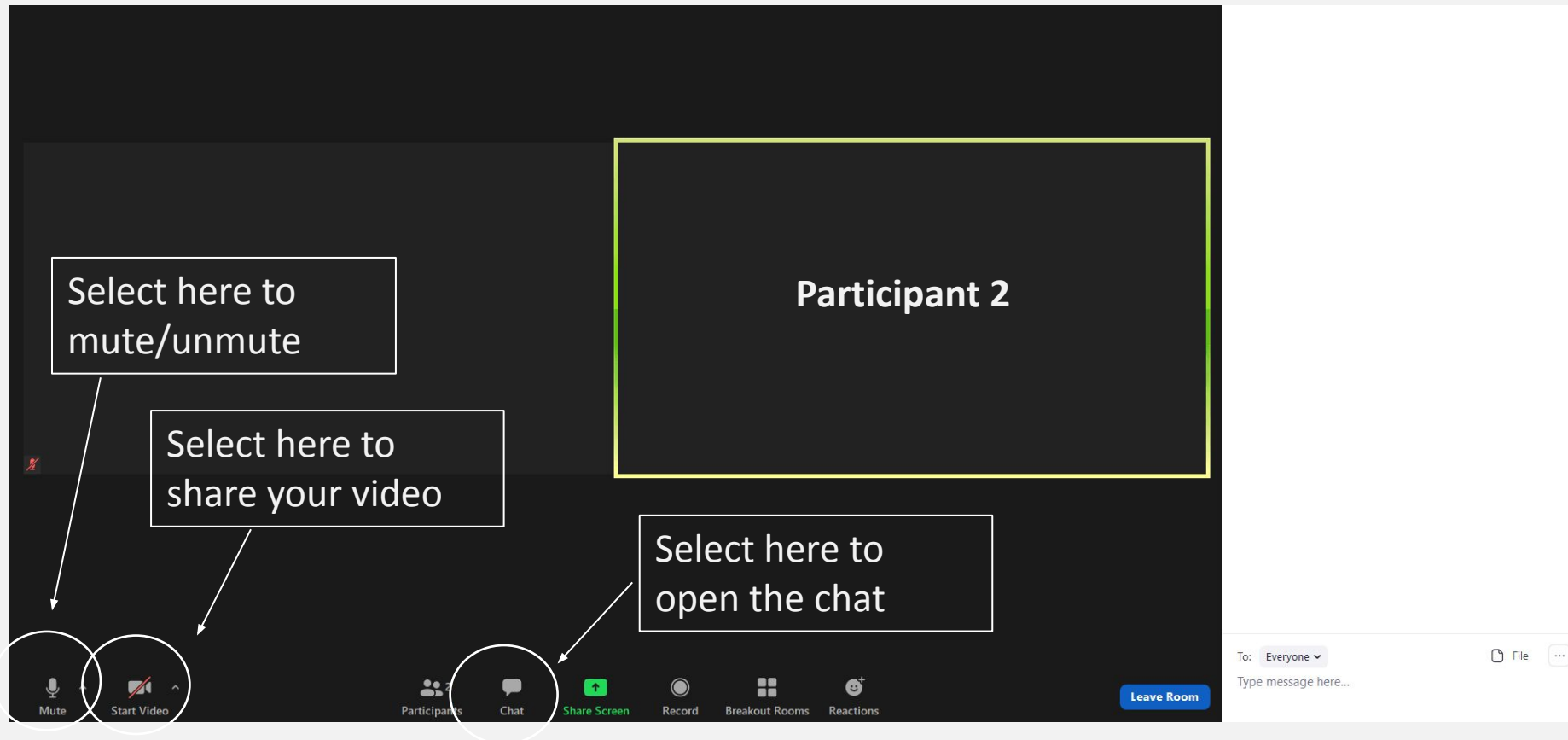
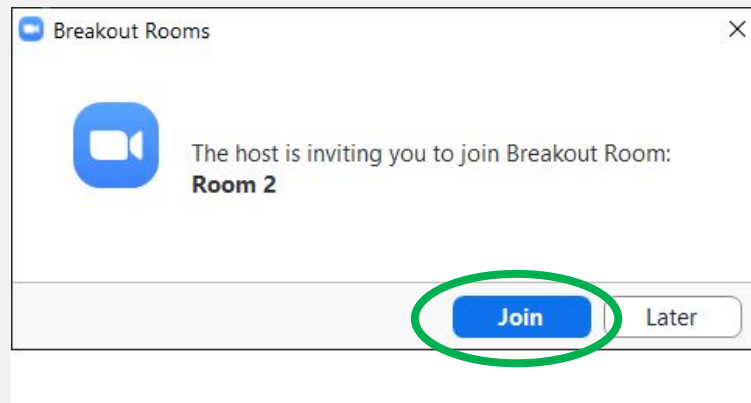
A Discussion About Racial and Indigenous Disparities

What has your agency done or could they do to address disparities in your work?



How can you use your Quality Improvement Program to address racial disparities?

Breakouts



Commitment to Quality: An Ongoing Process

DHS committed to CMS that they will:

State: **Minnesota**
TN: 18-08
Effective: July 1, 2020

§1915(i) State plan HCBS
Approved: 8/1/19

State plan Attachment 3.1-i:
Page 32

Supersedes:

Quality Improvement Strategy

Quality Measures

(Describe the state's quality improvement strategy. For each requirement, and lettered sub-requirement, complete the table below):

System Improvement: <i>(Describe process for systems improvement as a result of aggregated discovery and remediation activities.)</i>			
Methods for Analyzing Data and Prioritizing Need for System Improvement	Roles and Responsibilities	Frequency	Method for Evaluating Effectiveness of System Changes
The state Medicaid agency will regularly survey recipients, stakeholders, providers and organizations regarding the quality, design, and implementation of the services. A team of program and policy staff from the State Medicaid Agency will review and analyze collected survey, performance measure, and remediation data. This team will make recommendations for systems and program improvement strategies. Problems or concerns requiring intervention beyond existing remediation processes will be targeted for new/improved policy and/or procedure development, testing, and implementation.			

Quality Measures

Service Plans Updated Annually. Plans must address all the person's assessed needs

Eligibility requirements reviewed annually

Providers Meet Required Qualifications
[DHS-4138](#)

Follow the HCBS Settings Rule

The state identifies, addresses, and seeks to prevent incidents of abuse, neglect, and exploitation,

DHS will review and analyze survey, performance measure and remediation data.

DHS will create systems and program improvement strategies

Questions to ask?

- Audits
 - Who?
 - When?
- Any other standards beyond those listed on the previous slide?
- If other standards will be developed? How? With what stakeholder engagement?

Stretch Break

10 min



Quality Improvement and Compliance

Quality Improvement Overview



Growing your Quality Improvement Program

Documentation

Chart Reviews

Preparing for Audits

Continuous Quality Improvement

Quality Improvement Plan

Reviews

- Client Chart
- Billing
- Medicaid Compliance
- Targeted

Program Outcome Measures and Funder Requirements

Staff Training Plan

Client Satisfaction Surveys

- Focus Reviews

Program and Services Overview

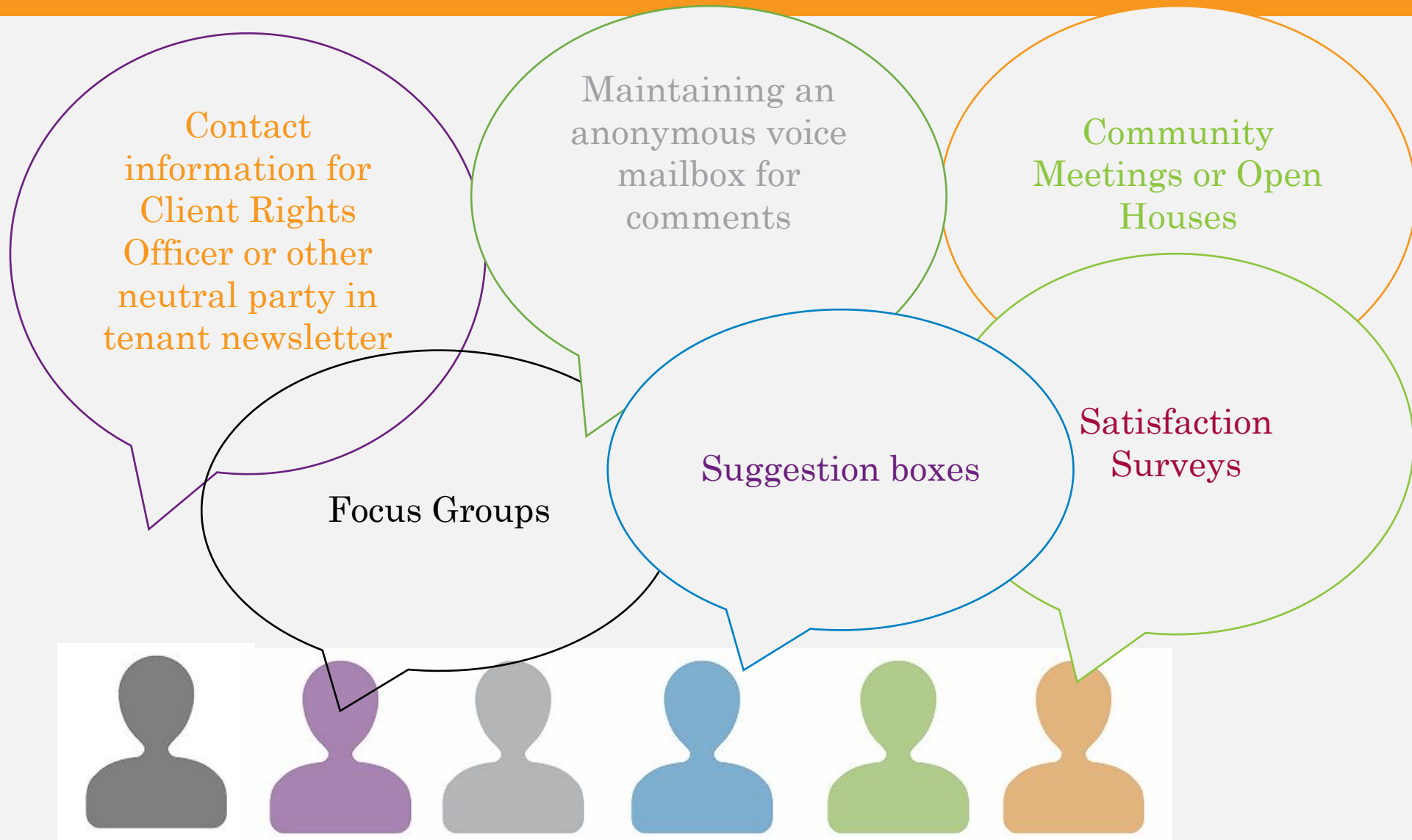
Program and QI staff Responsibilities

Policy and procedure review

Staffing and Supervision Considerations



Gathering and Incorporating Stakeholder Input



Tenant Survey

[Tenant Survey](#) editable word doc, English

Tenant Survey, editable word doc, [Spanish language version](#)

The image shows two pages of a survey form titled "CSH QUALITY SUPPORTIVE HOUSING TENANT SATISFACTION SURVEY".

Page 1 (Left):

- Agency Name: _____ Project Name: _____
- Dear Tenant,
- Thank you for taking this survey. Please tell us what it is like living in your apartment. Thank you for your honest answers. There is a comment section at the end. Please feel free to comment on any of the questions.
- Please do not put your name on this form. Your answers are anonymous and will not be shared with anyone.
- 1. How long have you lived in your apartment? (Check one)
 - ☐ Less than 1 month
 - ☐ 1 to 6 months
 - ☐ 7-12 months
 - ☐ 13 to 18 months (1 ½ years)
 - ☐ More than 1 ½ years
- 2. Which services do you use? (Check any that apply)
 - ☐ Employment
 - ☐ Substance Abuse
 - ☐ Medical
 - ☐ Mental Health
 - ☐ Education
 - ☐ Case Management
 - ☐ HIV Prevention Education
 - ☐ Peer Support Worker or Direct Support Professional
 - ☐ Other: _____

Page 2 (Right):

- Agency Name: _____ Project Name: _____
- Please check Yes, No, or Not Sure for each question. (Check one box)

	Yes	No	Not Sure
3. Do you like your apartment?	☐	☐	☐
4. Does your apartment meet your needs?	☐	☐	☐
5. Do you like the available services?	☐	☐	☐
6. Do the services meet your needs?	☐	☐	☐
7. Do you join community activities? This might be things like faith based groups or church, clubs, volunteering, going to a gym, or park district program.	☐	☐	☐
8. Do you have better social supports and connections now than when you first moved in?	☐	☐	☐
9. Do you like the location of your apartment?	☐	☐	☐
10. Do you feel safe in your apartment?	☐	☐	☐
11. Did you have an orientation for your apartment or building when you first moved in?	☐	☐	☐

What Do You Do with All the Input?



- Review and revise policies and procedures, house rules
- Discuss at tenant meetings, QI Committee to identify action steps
- Create new social, advocacy or training opportunities
- Offer opportunities for tenants to share their ideas with decision makers
- Other??
- Whatever you do – make it known

Quality Improvement Strategies

Assign or designate a staff person

All levels of staff are part of the ongoing process

Schedule a calendar of meetings

Schedule a calendar of client chart reviews

Process and timelines for reviewing policies and procedures

Plan for communication of program outcomes, chart review results, programmatic changes, and changes in requirements

Plan for ongoing compliance

Close the loop



Closing the
Loop



Reminder: quality and compliance don't end when you receive the contract!



Outcomes planning

Simple Outcome Measurement Plan

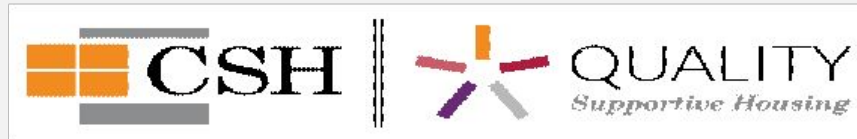
Outcome measures	
Calculation	
Goal	
Data Source	

Outcome Measurement Plan

CORE OUTCOMES MEASURES

<u>Outcome Measure</u>	<u>Calculation</u>	<u>Goal</u>	<u>Data Source</u>
Successful Housing Outcomes: The percentage of tenants entering the housing who either remained housed for at least one year within the supportive housing or who exited to other permanent housing in the community.	The total number of tenants who remained stably housed over a one year period divided by the total number of tenants who were in housing at the beginning of the one year period.	At least 80%	HMIS/APR data, property management records, and/or tenant files.

Outcome Measurement Plan



Outcomes Measurement Plan: Results

Team Name: _____

Start Date: _____

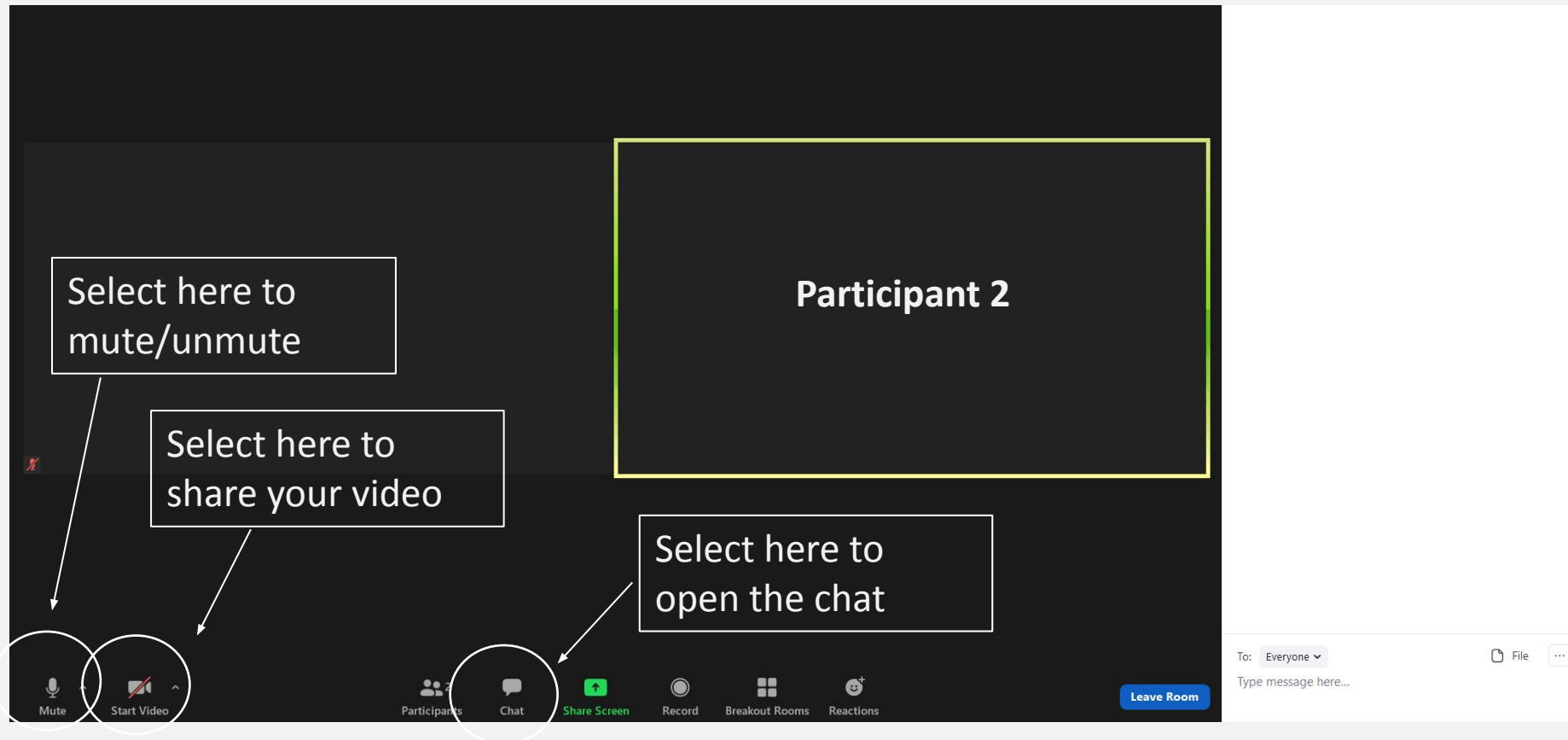
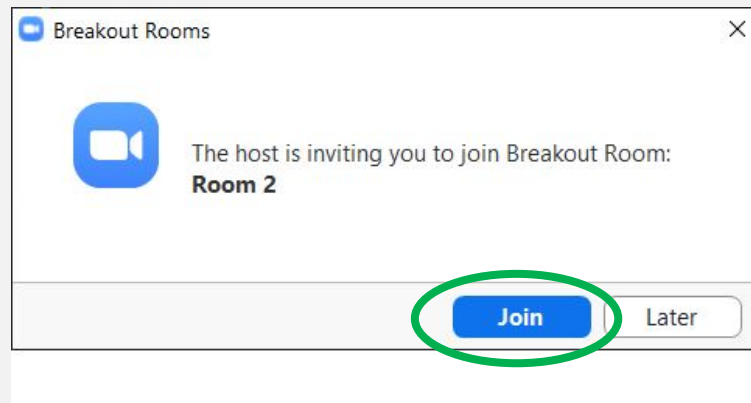
End Date: _____

CORE OUTCOMES MEASURES									
Outcome Measure	Goal	Date	Result*	Date	Result	Date	Result	Date	Result*
Successful Housing Outcomes	At least 80%								
Increase in Income	At least 40%								
Tenant Satisfaction with Housing	At least 80%								
Annual Turnover Rate	Averages less than 20%								
ADDITIONAL OUTCOMES MEASURES									

Example Quality Improvement Plan

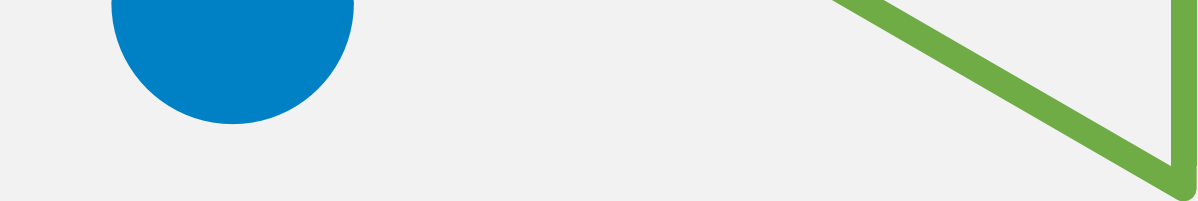
Project Name:				Quality Improvement Action Plan				
Plan				Do	Check	Act		
Priority	Issues To Be Addressed (Based Upon Indicators)	Quality Improvement Strategy (Action Steps)	Planned Outcome (Expected Change)	Responsibility (Persons/Orgs)	Timing	Review (Progress & Outcomes)	Timing	Continue, End, or Revise Plans (Based on Review)

Breakouts



Agency Work Planning: 15 minutes





Up Next:

**Session 8:
February 11th, 10-12
p.m. CT**

Planning ahead for Session 8: What are ongoing TA needs?

Who needs to attend: Whole team

What do you need to gather and have access to during Session 8:
Review your work plan? Where do you need assistance next?



THANK YOU

Please join us again for one of our many course offerings.

Visit www.csh.or/training