Welcome to the Orientation to the Office of Developmental Programs. This lesson is Part 1 of a two-part webcast focused on *Using Information and Tools for Quality Management*.

The information presented here was developed and reviewed by ODP leadership for you to build your knowledge in your important role as a member of the ODP team.

Future lessons in this series will be made available, providing an overview of information related to the Office of Developmental Programs that focuses on core philosophies, operational components, and business practices.

Separate lessons within this series will focus on the program bureaus within ODP including Community Services, State Centers, and Autism Services. Common focus areas to be highlighted in the series are ODP's role in oversight of service planning and delivery of services, ensuring health and safety, and continuous quality improvement.
Please adjust your computer volume to a comfortable listening level for you.

While viewing this webcast, there is a pause and reverse button that can be used throughout the presentation.
Hello, my name is Diana Ramirez. I am ODP’s Quality Management Coordinator working to support ODP staff and stakeholders to implement quality management across ODP. In this role, I have participated in the development and writing of ODP’s Quality Improvement Strategy for the Consolidated and P/FDS Waivers, including performance measures, remediation, and improvement strategies.

I will be presenting the first section of this webcast. Later in the presentation, Amy Henasey will be narrating.

Amy is the Quality Assurance/Risk Management Coordinator for the State Centers, within the Bureau of Supports for People with Intellectual Disabilities. In this role, Amy has developed, implemented, and evaluated quality management and improvement activities consistent with the Quality Management Strategy of the Office of Developmental Programs.
Before beginning our session today, let’s briefly recap some of the highlighted information presented in Module 101. In Module 101, we learned about:

- Quality concepts and how these concepts have evolved over time
- ODP’s Quality Management Strategy and its use of the Home and Community-Based Services (HCBS) Quality Framework
- The Design, Discovery, Remediation, and Improvement (DDRI) model described and promoted by the Centers of Medicare & Medicaid Services and
- The Plan, Do, Check, Act methodology used in ODP’s Quality Management Strategy

Having gained some basic knowledge about quality management concepts and models, we can now embark on a more detailed discussion that describes how ODP uses information and tools to further support its quality management agenda.
The objectives for Module 102 are:

Understanding the importance of data and information and how ODP uses information to support its Quality Management Strategy

Introducing development of meaningful, understandable performance measures that reflect ODP’s success or need for improvement in reaching identified objectives, and

Identifying ways ODP collects or discovers its data (data sources), and how the data are organized

Let’s talk first about the importance of data.
Obtaining data about performance at all levels within an organization helps the organization to tell:

- Whether it is functioning as intended
- Whether it is meeting the needs of the individuals it serves, and
- Whether its resources are used efficiently and effectively
When an organization uses data to assist in decision-making, decisions can be made to improve the organization’s overall performance based on sound and reliable information. Data also assists an organization in monitoring its performance when the organization’s goals and measures are well defined.

So, let’s think about what happens when an organization makes decisions that are not based on facts or evidence.
We have all made decisions, whether personal or professional, based on anecdotal information or gut feelings. We’re elated when our decisions result in positive outcomes and disappointed when the outcomes are less than desirable.

While gut feelings, or intuition, can sometimes play a role in the decision-making process, members of an organization must be very careful when considering anecdotal information to make important decisions because:

• Information gets distorted in the telling and retelling of events
• Memories are imperfect
• Events may be exaggerated, and
• Details can get muddled

Decision-making based on anecdotal information or gut feelings can frequently lead an organization off course and away from its goals. Further, since anecdotal or gut-feeling decisions are not based on data, an organization will be unable to track its progress and will not be able to truly know if it is performing well.

It is always preferable to initiate goals and organizational decision-making based on facts and reliable data.
As opposed to anecdotal or intuition-based decision-making, data-based decision-making helps an organization manage its operation by using a systematic approach.

Let’s look at two examples:

1) A store owner visits one of his many stores and meets with its manager to learn about customer satisfaction with the sales support and the quality of the products. The manager had gathered information by asking customers to describe their experience with the product and the sales support. The manager reports that the customers who were questioned responded positively to the product and the sales support.

2) Or . . . the store owner notices there is a decline in revenue by 10%. The owner is concerned that customers are not satisfied with the sales support or the products. A survey is developed and implemented in all his stores; the information reveals that of his 20 stores, 15 have a greater than 95% satisfaction in both areas. Five stores are below 85% satisfaction.

In the second example, you can see that by using a data-driven approach and documented facts, analysis of performance is much easier. It provides the organization with a justifiable foundation to develop action in response and make the best use of it resources. There are tremendous amounts of data and information available, but not all of it is useful in Quality Management.
In addition, management decisions made through data collection and analysis:

- Will be more successfully implemented and effective
- Will lead to professional accountability, and
- Will help the organization to respond proactively to situations
Keeping data-based management principles in mind, ODP designed an Information Management System, a set of processes, which is intended to assist in the organization’s efforts to collect, organize, and analyze data that it needs to make decisions based on fact, also known as evidenced-based decision-making.

ODP uses the data it collects and analyzes to:

- Monitor levels of achievement in all of its program areas
- Make management decisions, and
- Consider opportunities for program improvement or planning for the future
Before collecting and analyzing data, however, ODP had to identify its program goals and objectives. To accomplish this, ODP staff worked collaboratively to first:

- Define ODP’s mission, vision, and values
- Identify major program functional or focus areas, and
- Determine desired outcomes in each of the identified areas

To break things down further, let’s define the terms Goals and Objectives.
A goal is a broad statement of purpose.

It is established by considering the mission, vision, and values of an organization.

ODP’s mission is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice, and opportunity in their lives.

In keeping with its mission, one of the goals of ODP is to deliver person-centered services and supports.
An objective states a specific result that a person or system aims to achieve within a time frame and with available resources. There could be a series of objectives for each goal.

So, in order to deliver person-centered services and supports, ODP has identified this as one of its objectives: to ensure that services and annual individual support plans are based on person-centered assessment of the individual’s needs.
After considering its mission, vision, and values and defining its goals and objectives, ODP needed to determine ways to measure progress toward achieving those identified goals and objectives.
Performance measures are the way to measure progress towards achieving goals and objectives.

The term *Performance Measures* may be used interchangeably with *Performance Indicators*. For the purposes of this training, we will be using the term *Performance Measures*. 
Performance measures are quantifiable measurements, agreed to beforehand, that reflect the critical success factors of an organization. Since mission and goals vary from organization to organization, so, too, will the performance measures.

Performance measures are informed through collection and analysis of data from all identified sources and by studying results over time, so that an organization can conclude “how well did we do?”
Whatever Key Performance Measures are selected for the organization, they must:

- Reflect the organization’s goals
- Be key to its success
- Be quantifiable or measurable
A performance measure should show what is *the right thing to do* -- at the right time, and for the right person.

We use measures to help us determine if what we already know to be the best practice is actually being implemented. Performance measures help us decide if our current practice is acceptable. We use measures to screen and/or assess organizational performance issues. The focus is on the variance from the acceptable standard or threshold.
There are three basic types of performance measures:

- A Structure Performance Measure looks at aspects essential for operation and the ability to provide service, such as appropriate number of staff.

- A Process Performance Measure assesses the degree to which the appropriate or expected course of action occurs, such as whether a yearly screening test occurs as required.

- An Outcome Performance Measure evaluates the degree to which the expected outcome was met. For example, the percentage of infections, the rate of weight loss, etc.
As organizational staff carry out their particular roles and responsibilities, they should be asking themselves:

Were our interactions caring, timely, effective, respectful, safe, appropriate, and accurate?
For example, a school may evaluate its success by measuring graduation rates of its students. This measure is a reflection of the dimension of *effectiveness*.

A Customer Service Department may have, as one of its goals, to achieve speedy customer service and therefore utilize the percentage of customer calls answered in the first minute as a performance measure. This measure evaluates the dimension of *timeliness*.

A Residential Services organization might be tracking the percentage of all incidents in which preventive measures are put in place to prevent recurrence, thus measuring the dimension of *safety*.
So, when choosing a performance measure, ask these questions:

What is the intent? For example, do you intend to measure performance of an internal process or an outcome of a specific service or support?

What is the expectation? Are you measuring compliance with regulatory requirements or improvement activities in the organization?

Are data available or able to be collected?

Amy Henasey will discuss the factors organizations consider when deciding on areas in which to focus and, a little later, how ODP collects and organizes data.
Thank you, Diana.

When deciding on areas in which to focus, you should also look at these key organizational factors:

**High Volume** affects a large percentage of the population served and, therefore, has a greater potential to implement positive change in an organization. This might involve looking at staffing patterns, cost to support a program or service, or types of risk management events.

**High Risk** has the potential for serious complications or negative outcomes for the organization.

**Problem Prone** processes within the organization have been known to impede the effective and efficient functioning of the organization in providing services to individuals.
After deciding upon a specific area or areas in which to measure performance, the following must be determined:

- The method of measurement
- The population to be measured
- The data source, and
- The time period or frequency for measurement
When you are ready to write your measures, you must now:

• Define data elements, or the important pieces of information being measured. This may include a numerator and a denominator. Make sure to keep statements measurable and clear.

• Define the population, or all individuals or items with the characteristic one wishes to collect data on. This may include an entire population or a sampling.

• Define the target goal or an observable and measurable end result to be achieved within a specified timeframe.
So, keeping these definitions in mind, your performance measure may be a simple number, or count, such as how many individuals participated in a community outing.

Or, you might instead use an equation to calculate the percentage of individuals who participated in a community outing. In this case the numerator, which is the upper part of the equation, would be the number of individuals who participated in a community outing. The denominator, or the lower part of the equation, would be the total number of individuals who potentially could have participated in a community outing.

Your target goal in this case might be 100% participation.
We should also distinguish between aggregate performance measures and sentinel events.

Data aggregation is a process in which information is gathered and expressed in a summary form, for purposes such as trending organizational performance in achieving an objective over time to identify opportunities to improve as a system.

For instance, ODP’s Bureau of Supports for People with Intellectual Disabilities, in its Community Services Division, has identified key performance measures in each of the CMS Waiver Assurance Areas. ODP compiles information related to its compliance with these performance measures and submits reports to CMS using aggregate data.

For demonstration purposes today, let’s look at the Service Plans performance measure which reads as follows:

“Number and percent of waiver participants whose Annual ISPs were reviewed and/or revised and approved within 365 days of the prior Annual ISP.”

Data to inform this measure are derived during Administrative Entity Oversight Monitoring Process reviews.

ODP’s statewide compliance rate related to this performance measure is determined by aggregating, or summing, the number of compliant cases in each AE – the number, indicated by the pound sign -- and dividing by the total number of cases reviewed – indicated by the lower case n. For instance, let’s say that during a particular reporting period, the total number of individual cases reviewed in all AEs, across all four ODP regional areas, was 25. In 22 of the 25 cases, reviewers found that individual ISPs were updated timely. Dividing our total number of 22, by our number of cases reviewed of 25, we calculate an aggregate statewide compliance rate of 88%.
Unlike aggregate data collection and reporting processes in which information is gathered and expressed in a summary form, data related to sentinel events are analyzed and reported on a case-by-case basis and require immediate action.

A sentinel event is an event that is unanticipated and can result in a major adverse consequence. It may involve death of an individual or major permanent loss of function, not related to the natural course of the individual's illness or underlying condition, and is associated with the treatment or lack of treatment that places an individual at risk of death or serious harm. Other examples of sentinel events include events of abuse or neglect and applications of restraint. Sentinel events require thorough analysis and follow-up. The organization must strive to identify lessons to be learned and implement prompt action to prevent such occurrences in the future.
Let’s continue our discussion about performance measurement by looking at some performance measures currently used by ODP.

On this slide, you see that we are measuring the:

Number (indicated by the pound sign) of individuals transitioned from the State Centers to the community on trial leave.

This is an example of a simple number, or count, being measured, as opposed to . . .
ODP Performance Measure

% of recipient case reviews that identified an overpayment or underpayment

**Numerator:** # of recipient case reviews that identified an overpayment or underpayment

**Denominator:** # of recipient case reviews

... this performance measure. In this measure, we are calculating the:

Percent of recipient case reviews that identified an overpayment or underpayment.

This is an example of an equation used to calculate a percentage.
Sometimes it is necessary to revise performance measures after you have begun to use them – for example, a definition may need to be further clarified, or an unexpected obstacle may result in a barrier to accurate data. What is important is that you are gathering useful information.

Now let’s discuss how we collect and organize data.
To review, data are collected to:

• Monitor the stability of processes
• Identify opportunities for improvement, and
• Identify changes that will lead to improvement and sustain improvement

A formal data collection process is necessary as it ensures that data gathered are both defined and accurate and that subsequent decisions are based on the findings and are therefore valid. The process can provide a baseline on which to improve and, in certain cases, help to establish a target goal.
Data collection usually takes place early on in an improvement project or while fact-finding and is often formalized through a data collection plan.

Always remember that the data need to be collected in the same manner by all, using the same data collection tools to ensure accurate outcomes.
These are some examples of data collection tools:

A _Behavior Observation Checklist_ is a list of behaviors or actions among participants being observed. A tally is kept for each behavior or action observed.

_Restords_ include information from things such as records, files, and receipts.

_Logs and Journals_ record in narrative form a person’s behavior and/or reactions to a situation.

_Databases_ systematically arrange collections of computer data, structured so that they can be automatically retrieved or manipulated.
ODP collects, or “discovers,” data in a variety of ways.

For instance, ODP has historically used four main data sources to ensure compliance with CMS waiver assurance requirements and ODP standards, policies, and procedures for Community Programs in the Bureau of Supports for People with Intellectual Disabilities:

- **Administrative Entity Oversight Monitoring (AEOM)** is a tool used to monitor whether Administrative Entities are in compliance with all ODP requirements including waiver assurances and administrative functions delegated to them by ODP.

- **Home and Community Services Information System (HCSIS)** is a web-based application that supports DPW (including ODP) by enabling users to enter and retrieve data, information, and reports on participants enrolled in its programs.

- **Provider Reimbursement and Operations Management Information System (PROMISiT™)** is a single system that processes human services claims and manages financial information activities for the Consolidated and Person Family Directed Service (P/FDS) Waivers.

- **Independent Monitoring for Quality (IM4Q)** is a structured interview process that helps ODP gather information related to quality of life for individuals with intellectual disabilities.
Regardless of where your data come from, it is important to keep your information organized to ensure that your data is accurate and accounted for.

There are many ways that data can be organized. Again, the important part is to ensure that one form of data collection is being used by everyone who collects the data. Excel and Access databases are often used to organize data.

Here are some tips for organizing data:

• Set up a protocol on how to receive and record the information as it comes in.
• Label all data immediately as you collect or receive it.
• As data are received, check for completeness and accuracy of information.
No discussion about data collection or data organization is complete without addressing sampling. The purpose of sampling is to select a subset of individuals from within a statistical population in order to accurately estimate characteristics of the whole population.

The three main advantages of sampling are that the cost of collecting data is lower, data collection is faster, and since the data set is smaller, it is possible to ensure homogeneity and improve the accuracy and quality of the data.

ODP collects and organizes large amounts of data to monitor compliance with CMS Waiver Assurances as well as Federal ICF requirements and ODP standards. Many times, management staff want to know the answers to all sorts of questions. These questions may be large in their scope. For example, were services and supports in the approved ISP received by our waiver recipients in all 67 counties in Pennsylvania? Did all waiver participants receive the services and supports they need? These kinds of questions are huge in the sense that they require us to keep track of hundreds of individuals and their respective ISP information.
Statistics simplifies these problems by using the technique of sampling. Since it’s normally either impossible or impractical to track down every member of a population, the next option available is to sample the population. As we said in the previous slide, a sample is any subset of a population, so its size can be small or large. We want a sample small enough to be manageable by our computing power, yet large enough to give us statistically significant results.

In general, the population of a study is what we’re trying to learn something about. It consists of all of the individuals who are being examined. A population can really be anything. All Person/Family Directed Services Waiver recipients, Service Plans, Incidents, or Counties could be considered populations, depending on the question.
By conducting a statistical sample, our workload can be cut down immensely. The purpose of sampling is to select a subset of individuals from within a statistical population in order to accurately estimate characteristics of the whole population.
The sampling process is the point at which you must choose or specify a sampling method and the number of observations or items to include in a sample — the sample size.

There are a variety of sampling methods which can be employed. A more in-depth discussion about sampling methods and statistical sampling will be addressed in a subsequent training module.
This concludes the ODP Orientation lesson on Part 1 of Using Information and Tools for Quality Management.

Both Parts 1 and 2 are second in our series of quality management modules for certification. The series is designed to serve as a resource for leaders in ODP and the service delivery system.