



**Assisted Living Facility Quality Measures Work Group
Meeting Minutes**

September 11, 2019

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On September 11, 2019, the Department of Social and Health Services convened the eleventh meeting of the Assisted Living Facility Quality Measures Work Group. This work group was established in response to [Engrossed House Bill 2750](#), passed during the 2018 legislative session, with authority found in [RCW 18.20.510](#). The meeting was facilitated by DSHS staff, Jessica Dingwall-Salquist.

Work Group attendees: G De Castro (Asian Counseling and Referral Service), Robin Dale (Washington Health Care Association), George Dicks (Harborview Medical Center), Erica Farrell (Alzheimer’s Association Washington), Candy Goehring (DSHS-Residential Care Services), Carolyn Ham (Department of Health), Patricia Hunter (LTC Ombuds), David Lord (Disability Rights Washington), Linda Moran (resident representative), and Alyssa Schnitzius (LeadingAge Washington)

Work Group attendees on the phone or webinar: David Black (King County Behavioral Health Ombuds), Ian Davros (Consumer Representative), Morei Lingle (Argentum), Betty Schwieterman (Developmental Disabilities Ombuds), and John Swenson (resident representative)

Department of Social and Health Services staff attendees: Amy Abbott, Jeanette Childress, Beverly Court, Jessica Dingwall-Salquist (facilitator), Roger Gantz, Trish Harmon, Cathy McAvoy, and Jim Sherman.

Department of Social and Health Services staff attendees on the phone or webinar: Ken Michie and Tracey Rollins

Guest attendees: Dave Foltz (Fred Lind Manor/ LeadingAge Washington) and Delores Gaines (member of the public)

Guest attendees on the phone or webinar: Lindsay Schwartz (NCAL)

Logistics and introductions

Jessica Dingwall presented the housekeeping instructions and reviewed the ground rules. Members introduced themselves.

Review of July Minutes

The only requested change to the minutes was to spell out the acronyms. The minutes were reviewed. Linda Moran made a motion to approve the minutes and a vote to approve the minutes passed. David Lord, George Dicks, David Black, and Ian Davros abstained from voting.

Study of the States

EHB 2750 mandated that at least one meeting is dedicated to other state's efforts. Roger Gantz presented the Study of the States. Several questions regarding the material included:

In New Jersey if an ALF participates in the Health Care Association of New Jersey Foundation's program, are they subject to fewer compliance visits? Candy Goehring asked if this inspection cycle was in their statute? Carolyn Ham asked if there is information on the percentage of participating facilities that have Medicaid contracts? Do any of the states risk adjust their measures?

Linda Moran asked if the resident surveys define the term environment. David Lord asked if residents are paid for completing the surveys.

Beverly Court explained there is an algorithm to calculate the expected rate, which you compare with the observed rate.

Patricia Hunter stated that risk adjustments are important because it is tied to rates.

Candy Goehring stated some of these measures would take a long period of time and the results are not available to public. She asked if the work group might want to use these types of domains. The information used to decide cost and location should balance with what we do not already consider.

Robin Dale stated that North Carolina is based on survey data by regulatory information only and a survey is only a snapshot in time. It will not show improvement if the facility has improved since their last survey.

Carolyn Ham asked where the accountability is with New Jersey's system if providers self-report on the measures. Roger Gantz responded with the consultants and the facilities.

Lindsay Schwartz submitted that there are now 20 vendors qualified to administer the resident and family satisfaction surveys for NCAL's CoreQ measures. How the resident and family surveys are administered is very prescribed. She also shared that there is no CoreQ certification for vendors. Vendors just need to include CoreQ as it was developed (with exact wording of questions, in order, and using the exact rating scale).

Robin Dale stated that North Carolina doesn't have any input from residents from their satisfaction surveys. Information posted is based solely on the licensing survey results.

He cautioned the group not to confuse North Carolina's star rating with CMS's star rating. The CMS system is very sophisticated.

Carolyn Ham asked if Oregon has a plan for facilities that have mental health or dementia units. Some facilities may not have the minimum number to meet the reporting requirement.

Beverly Court stated that in Minnesota the legislature only funded the resident survey for Medicaid residents; it is coming out this fall.

Patricia Hunter stated that what she liked about the Ohio and North Carolina Disclosure of Services forms are that they provide a bit more detail. She asked what the outcome was from their past discussion about posting the form on the WA website. She asked if we know if the form could be posted online as it is by other states.

Candy Goehring responded that no, the form would be hard to upload and keep updated. It would be a workload for ALFs and the state. It is a resource issue.

Cathy McAvoy asked Dave Foltz if their Disclosure of Services form is posted on the Fred Lind Manor website, to which he responded some buildings post their form but it is rare. In the case of Fred Lind Manor, it is posted on the opening page of the website.

Betty Schwieterman asked if we are finding that any states exclude ALFs that serve specific populations (TBI, I/DD), stating, "I don't believe that is a good idea but am interested if you found any states that have that practice."

George Dicks inquired if there are other facilities that provide other services.

Robin Dale stated that Wisconsin has 81 domains while New Jersey has 15. Both are voluntary programs and providers find value in certification. Rich Kortum with NRC Health (a vendor for resident satisfaction surveys) supported CoreQ so people don't lose interest by having to respond to too many questions. If we are going to designate metrics and require providers to report for a rating, we should consider if it is something that helps providers or improves quality. What is the value for providers?

Dave Foltz stated that resident surveys could be a part of a toolbox for providers.

Robin Dale stated that AHCA/NCAL's LTC Trend Tracker measures your performance against everyone else.

Roger Gantz stated that Wisconsin has the most robust filters.

Dave Foltz suggested buildings use customer satisfaction surveys yearly versus surveying former resident families after departure.

Patricia Hunter indicated that she would like the group to go out to ALFs and hold focus groups. Perhaps work group members could partner with other members to sponsor listening sessions.

Carolyn Ham asked if other states asked consumers to develop their metrics.

Candy Goehring stated that she wants to keep our scope on what consumers value and to keep it simple, not complex.

David Long added that it is important that consumer reports are reflected using simple language and that they have value to consumers.

Linda Moran stated that it is important that any metrics that the work group pursues get resident feedback. Information should be for consumers not for marketing efforts by the ALF.

Discussion About a System to Track and Monitor Performance

Jessica Dingwall-Salquist facilitated a preliminary discussion about potential ideas for monitoring and tracking performance based on the findings of the study of other states. Jessica Dingwall-Salquist highlighted some of the issues and comments by work group members:

- Questions reasonable – minimal.
 - Mindful of quality
 - Time/accuracy
- Focus on value
 - Provider improvement, quality improvement
 - Not the quantity
- Robin Dale and Alyssa Schnitzius will discuss the value of resident surveys with their members.
- Morei Lingle entered a comment: I agree with Robin- we do this know with our resident and team member survey results. We benchmark the key areas and compare properties across the company and the industry. It is a great way to get a little friendly competition going that ultimately results in the industry overall getting better for the residents we all serve.
- Keep in mind frequency of tracking – annual, quarterly or yearly.
- Thoughtfulness on burden to providers
- Carolyn Ham questioned whether other states had gathered information from consumers. Robin Dale responded that AARP should have that information.
- Guiding star – Informing consumers is the focus
- Easy, Simple not complex:
 - Able to understand results
 - Use plain language
- Confidential
 - Whoever administers survey do not provide resident care
- Locator/Directories

- Gather feedback from residents now prior to decision-making. Utilize resources with our contacts and who is in the room.
- Robin Dale stated if we could make it work prior to the meeting that would be great. He also wondered if that is a disclosure form issue.
- John Swenson submitted a comment that the consumer wants to know if they will still be a person with their own life or just a number that pays their way in a facility.
- Candy Goehring commented that if we could identify domains and get the feedback from the consumers this could help find out if we are on the right track.
- Cathy MacCaul asked if exits interviews with families and residents could be a process domain.
- Alyssa Schnitzius requested that the group pick different facility types.
- Carolyn Ham stated AARP might have starting place with feedback from residents and family members.

Public and work group comment period

Patricia Hunter reported that she had someone, who wanted to remain anonymous, who wanted to address the work group. The anonymous caller requested that facilities have some uniform method for billing that clearly itemizes charges, the dates, the due date for the payment. He would like them itemized similar to what credit card statements include. These bills can be confusing to family members even if they try to stay on top of the payment.

Delores Gaines joined the meeting after seeing the signs posted in the lobby. She shared her thoughts and experiences working the homeless in Tacoma.

October Workshop

The workshop is dedicated to determining the domains/measures using Liberating Structures activities. Amy Besel and the Organizational Development Team will facilitate the meeting.

Robin Dale had concerns with the structure of the meeting and wants the domains/measures driven by the 23 members of the work group and not someone outside of the group that may be steering the group in a particular direction.

Jeanette Childress explained that Liberating Structures is just a model to facilitate the discussion.

Candy Goehring asked Cathy McAvoy to send a link with more information regarding Liberating Structures.

Roger Gantz stated he would send the draft Study of the States with the appendices prior to the workshop so it could be used for reference.

Lunch options were discussed. Three options are available: eat lunch at a nearby restaurant, bring your own lunch, and order delivery by a local restaurant.

Next meeting

A regular monthly meeting will not be held in October. The work group will instead participate in a work shop on Tuesday, October 29, 2019, from 9:00 a.m. to 4:00 p.m. at the Alzheimer's Association Office, Southcenter Corporate Square located at 635 Andover Park West, Tukwila, WA 98188. The work shop will be held in the First Floor Conference Room. The building is accessible.

The next monthly meeting will be held on November 22nd from 9:00 – noon at the DDA Office on Capital Hill in Seattle. Staff from Oregon's Department of Human Services will join us to discuss the evolution of their new program and reporting system.