

CCCW QUALITY COMMITTEE

Meeting Minutes

DATE: November 24, 2010

PLACE: Community Care of Central Wisconsin-Stevens Point, Meeting Room 319

TIME: 1:00 –2:20 p.m.

PRESENT: Laura Goetz, Crystal Feine, Judy Varney, Penny Bartelt, Dana Cyra, David Thewes, Darlene Gering, Jason Taylor, Carrie Schreiner

1. The meeting was called to order at 1:15 by Dana Cyra.
2. The CCCW Membership Report from August to October 2010 was distributed. CCCW is serving 2,704 members by October 31, 2010. This is a total increase of 10 members in September and October. The second page of the report shows target groups by age levels. A large number of members with physical disabilities are 60 or older. Penny noted that in order to be included in the elderly target group, an individual must be 65 or older. There was a decrease in membership due to a large number of disenrollments. Most disenrollments are due to death among older CCCW members. There is a time lag in getting people off of the waiting list. In regard to the waiting lists and impending entitlement dates for Marathon and Wood Counties, CCCW has been informed that they will need to be ready to serve all people still on the waiting list on the date of entitlement. Having sufficient providers may be a challenge unless people on waiting list are already receiving services on a private pay basis, meaning there are already service providers available. Otherwise, CCCW will need to increase the number of providers as quickly as possible.
3. CCCW's Quarterly Indicator Report for July-September 2010 was distributed. There were a total of 17 members that transferred to IRIS. Again, the number of deaths is higher in the 3rd quarter. The number of members who experienced a fall and number of falls that resulted in injury

were also higher in the 3rd quarter. Numbers were relatively stable from the 4th quarter of 2009 through the 2nd quarter of 2010. The number of falls reported increased significantly during the 3rd quarter 2010. This may have resulted from staff training provided in the 2nd quarter of 2010 which prompted better reporting. Quality Management completed research to identify a benchmark to compare the number of falls among CCCW members to. There is data available about the number of fall-related emergency room visits among people age 65+ in the service region. In addition, the state is able to provide reports of fall-related emergency room visits among CCCW members. The aim statement for the project will likely be modified to focus specifically on members age 65+ because there is no comparable data for other adults with disabilities.

The flu season is still in progress so information about vaccinations is not available yet. Service Coordination staff consistently meets the percentage of members you had face to face contact. Time spent on member-specific activities was considerably higher for the 3rd quarter. Numbers were slightly higher for members who fully or partially use self-directed supports for their services. SDS services were highest in the Physical/Sensory Disability group. No Service Coordination staff terminated employment with CCCW during the quarter but there was some movement of IDT staff into other management positions which is not reflected on the report.

4. Family Care and IRIS Ombudsman Program annual report for July 1, 2009 – June 30, 2010 was distributed. Only people this program has contact with are people who have had problems with Family Care and given the total number of people receiving services, the number of cases involving either of the Ombudsman programs is relatively small.
5. The Board on Aging and Long Term Care report was distributed. There were 215 cases opened for reporting from October 2009 – September 2010 verses 30,000 of people enrolled in Family Care. For July 2010 thru September 2010 there were 52 cases. CCCW is in line with what is being

seen with other Family Care organizations. The numbers seem to indicate that most members are fairly satisfied with services they are receiving.

6. Quality Management is currently working on a Service Coordinator handbook. The project has involved collaboration with all divisions within CCCW who have involvement with member care and services. In previous years, Metastar encouraged CCCW to implement a process for consistent review of member records to ensure that contractual expectations are being met and members are getting what they need. IDT supervisors worked with Quality Management to develop and get a process in place. As part of that project, the need for a full resource manual for Service Coordinators was identified. The handbook is expected to be complete and available to staff in January 2011. Committee member received an on-line preview of the new handbook.
7. A timetable of quality management activities for 2010 was presented and discussed. On an annual basis, Quality Management must develop a quality plan that identifies measures CCCW will use for quality assurance and improvement activities that target members, staff, providers and internal process. For example, there are measures directly from the member satisfaction survey that assist CCCW to determine changes in member satisfaction from year to year. Last year the member satisfaction survey was done by phone. This year, the member satisfaction survey was distributed by functional screens specialists during the annual review of functional eligibility. Total numbers are not compiled as of yet. Overall, it appears to be just as good as last year (47% response rate).

Jessica Schmidt made a comment that the quality indicator report should have what is our goal not just what we are reporting. Quality Management will work on a modification for 2011 that includes goals. If people have additional thoughts, please email Dana with what you want to see.

In 2011, Quality management hopes to evaluate Best Practice Guidelines for Diabetes (1.F), Chronic Heart Failure (1.G), and Dementia Screening(1.H.) to see whether or not to continue current processes or levels of monitoring. These practice guidelines all carried over from previous performance improvement projects and have not been modified much since. There are very specific steps included in each practice guideline which become very difficult to monitor. Dana wants to look at whether these truly need to be monitored on a member by member basis or not. On the horizon (at the state level) are project related to medication reconciliation and perhaps, obesity among PD or DD members.

CCCW did very well on immunizations for flu and pneumonia on the 2009 statewide report. Data collection for 2010 will not end until December 31st.

Provider Network is working to set up a policy to verify that providers have submitted all information needed. They will also have a process to verify the contracted rates are correctly entered on a rate sheet available for IDT staff use. Provider network will begin to implement a process for monitoring the completion of caregiver background policy checks among CCCW Providers. This involves the random selection of 30 providers per quarter who will be asked to submit evidence that background checks were completed for their most recently hired employees. The Provider survey will be completed during the 1st quarter of 2011 and will include at least one additional question related to interaction with CCCW screeners. CCCW is continuing to monitor its residential placement process (4.C.). A retrospective review of placements between July and September, 2010 did not show significant delays due to the current residential placement process. However, CCCW will continue to monitor and perhaps, make revisions to the process that ensure ongoing timely access to residential services that may be needed to support a member.(4.C). CCCW also plans to monitor the impact strength-based planning on business sustainability and member outcomes. Maintaining financial stability and meeting

member outcomes are both critical goals and CCCW will need to ensure that strength-based planning is accomplished in a manner that sustains positive outcomes for members (4.G).

8. Updates from Provider/Member Quality Council Meeting. Some items that were addressed were State having standardized rates for providers. Not everyone happy about this. Not a very positive impact for our providers. Many will get an 11% decrease. One group may not lose as much but no one will gain. Julie Strenn did advocate for MCO at State level. Provider Directory is live on Intranet. Providers/members can go online to access. Email Emmy with changes. The next meeting of the Councils is scheduled for December 8, 2010. The Provider Quality Council will meet in the morning and the Member Quality Council will meet in the afternoon.
9. Future Agenda Items will be the expansion, Metastar's annual review from March 14-18, Internal Quality review and the Member satisfaction survey completed.
10. Next meeting of the CCCW Quality Committee is January 26, 2011.

Respectfully submitted by Michelle Osowski, Quality Management Specialist