A Board Lens for Quality

LEADINGAGE FRAMEWORK

Jane Mack, MSOD
FSA, CEO

Background on Quality Framework

LEADINGAGE GOVERNANCE RESOURCES INITIATIVE

| Tools for visioning and strategy development included information about monitoring progress, outcomes, and a library of metrics | → | Resources about the roles and responsibilities of the Board | → | Questions about the Board's role in monitoring quality |

Jim Bettendorf
Barbara Klick
Mike Rambrose

Amanda Hitchner
Jane Mack
Kate Rolf

Corey Kallheim
Olivia Mastry
Katie Smith Sloan

Sean Kelly
Todd Murch

Model for Nonprofit Boards

Responsibilities of a Nonprofit Board

LEGAL

- DUTY OF CARE
- DUTY OF LOYALTY
- DUTY OF OBEDIENCE

PRACTICAL

- DETERMINE MISSION AND PURPOSE
- SELECT THE CHIEF EXECUTIVE
- SUPPORT AND EVALUATE CHIEF EXECUTIVE
- ENSURE EFFECTIVE PLANNING
- MONITOR AND STRENGTHEN PROGRAMS AND SERVICES
- ENSURE ADEQUATE FINANCIAL RESOURCES
- PROTECT ASSETS AND PROVIDE FINANCIAL OVERSIGHT
- BUILD AND SUSTAIN A COMPETENT BOARD
- ENSURE LEGAL AND ETHICAL INTEGRITY
- ENHANCE ORGANIZATION'S PUBLIC STANDING

Board Composition

☆ Skills and expertise
☆ Connection to sponsoring denomination
☆ Community connections
☆ Donor
☆ Service recipient
☆ Passion for mission

What preparation do they have to serve on your Board?

What preparation do they have to consider topics
like quality and compliance?

FSA

5

Poll

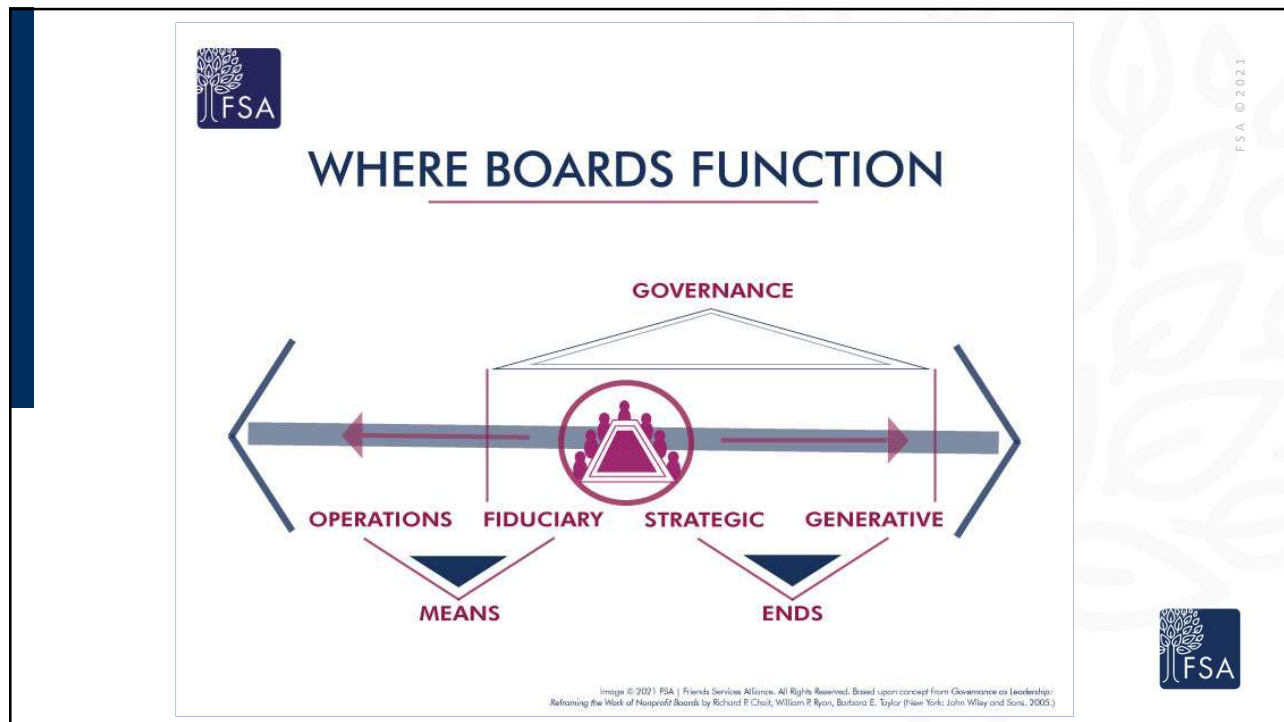**HAVE YOU SEEN A CHANGE IN YOUR BOARD COMPOSITION TO INCLUDE MORE EXPERTISE?**

FSA

Continuum of Board Member Reactions

Identification of strategic priorities and oversight through monitoring key metrics; acting in concert with staff leadership as needed

Duty of Care

☆ Acted in good faith

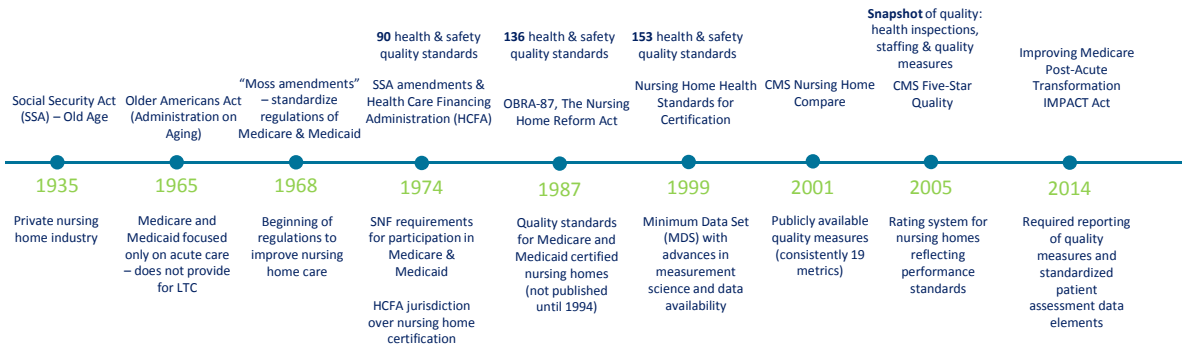☆ "Responsible inquiry"

☆ In the best interest of the organization

Board's Role in Quality

☆ Policy Setting: Identifying the framework and success metrics by which the organization will advance quality care and support

☆ Decision Making: Aligning organizational actions, investments, and budgets with the selected quality framework

☆ Monitoring: Tracking achievement of quality success metrics and working with staff leadership to make adjustments when needed

Current Quality Framework

HISTORICALLY AND NOW, QUALITY FRAMEWORKS IN OLDER ADULT SERVICES FOCUS ON COMPLIANCE WITH AN EVER-INCREASING SET OF STANDARDS UNDER A PUNITIVE REVIEW AND ACCOUNTABILITY SYSTEM

1935	1965	1968	1974	1987	1999	2001	2005	2014
Social Security Act (SSA) – Old Age	Older Americans Act (Administration on Aging)	"Moss amendments" – standardize regulations of Medicare & Medicaid	**90** health & safety quality standards SSA amendments & Health Care Financing Administration (HCFA)	**136** health & safety quality standards OBRA-87, The Nursing Home Reform Act	**153** health & safety quality standards Nursing Home Health Standards for Certification	CMS Nursing Home Compare	**Snapshot** of quality: health inspections, staffing & quality measures CMS Five-Star Quality	Improving Medicare Post-Acute Transformation IMPACT Act
Private nursing home industry	Medicare and Medicaid focused only on acute care – does not provide for LTC	Beginning of regulations to improve nursing home care	SNF requirements for participation in Medicare & Medicaid HCFA jurisdiction over nursing home certification	Quality standards for Medicare and Medicaid certified nursing homes (not published until 1994)	Minimum Data Set (MDS) with advances in measurement science and data availability	Publicly available quality measures (consistently 19 metrics)	Rating system for nursing homes reflecting performance standards	Required reporting of quality measures and standardized patient assessment data elements

https://www.kff.org/medicaid/timeline/long-term-care-in-the-united-states-a-timeline/
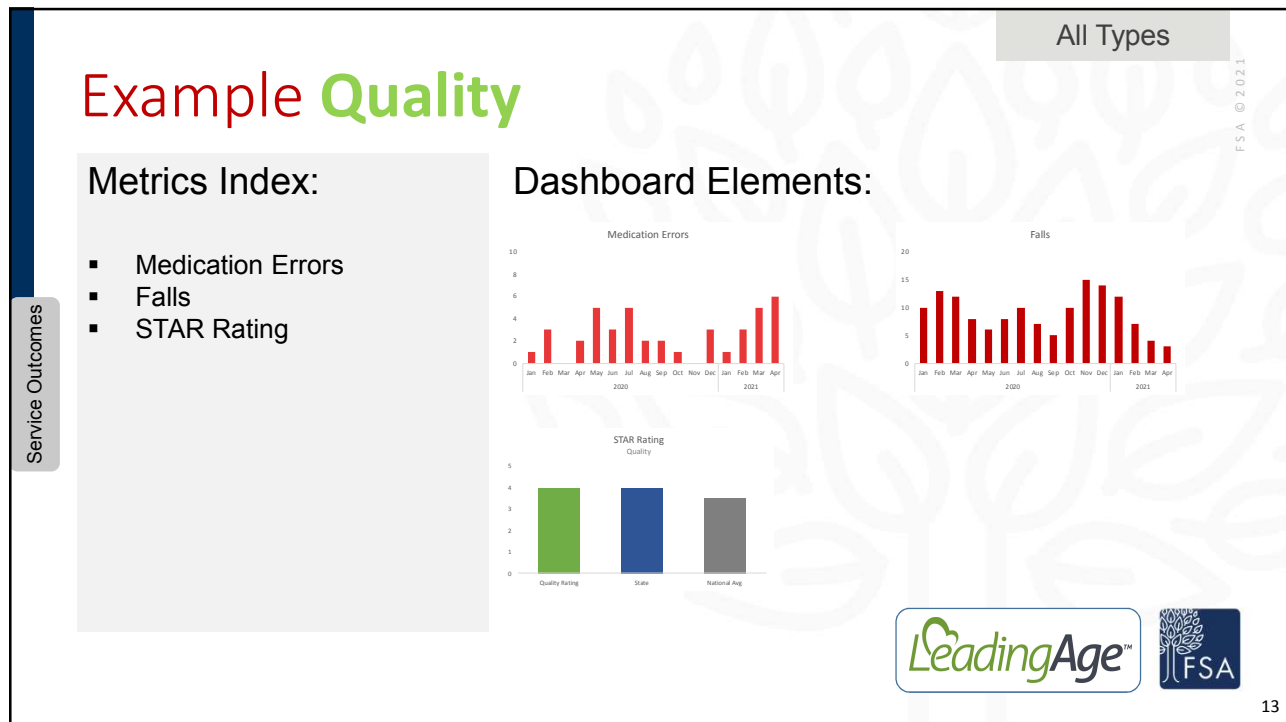https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2915498/
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/IMPACT-Act-of-2014/IMPACT-Act-of-2014-Data-Standardization-and-Cross-Setting-Measures

LeadingAge™ FSA

Current Quality Framework

▶ Increasing regulations increase required public reporting regarding performance deficiencies

▶ As a result, the public is conditioned to judge quality based on where organizations have deficiencies, yet ignores where they are making a positive impact on the lives of those they serve

▶ The current framework shifts focus away from the impact that care and support is having on people and stifles organizational learning/ improvement

LeadingAge™ FSA

12

Slide 13

All Types

Example Quality

Metrics Index:

- Medication Errors
- Falls
- STAR Rating

Service Outcomes

Dashboard Elements:

LeadingAge™ | FSA

13

Poll

HOW MANY OF YOUR BOARDS HAVE MECHANISMS FOR MONITORING QUALITY?

FSA

Quality Framework in Other Health-Related Fields

▶ Acute and primary care have shifted to a **quality of life framework,** created by the Institute of Medicine (IOM), and seen in accountable care and primary care medical homes

▶ Older adult services and supports has not yet adopted this approach to demonstrating quality

LeadingAge™ FSA

15

Current tools for assessing quality in senior care and housing

CURRENT TOOLS THAT THE PUBLIC CAN USE TO JUDGE QUALITY ARE NET PROMOTER SCORES, PROVIDER COMPARE TOOLS, AND MEDIA COVERAGE

Net Promoter Score

Favorable
Good
Not Favorable
Excellent
World Class
-100   100
52

Residents and family net promoter score

Overall rating
★★★★★
Much above average

The overall rating is based on a nursing home's performance on 3 sources: health inspections, staffing, and quality of resident care measures.
Learn how Medicare calculates this rating

Health inspections
★★★☆☆
Average

Staffing
★★★★★
Much above average

Quality of resident care
★★★★★
Much above average

View Rating Details   View Rating Details   View Rating Details

Medicare.gov provider compare

Media coverage

Social Media

NONE OF THOSE APPROACHES REFLECT THE ACTUAL QUALITY OF LIFE OF OLDER ADULT CUSTOMERS

LeadingAge™ FSA

16

Proposed Quality Framework: Quality of Life

UNDER THE BOARD'S ROLE OF SETTING POLICY FOR ORGANIZATIONAL QUALITY, THERE IS AN OPPORTUNITY TO ADVANCE A QUALITY OF LIFE FRAMEWORK, WHICH HAS 6 DOMAINS

FSA ©2021

QUALITY OF LIFE FRAMEWORK

Institute of Medicine (IOM) Quality Framework **Six Domains**[1]:

- **Safe**: Avoiding harm to people from the care that is intended to help them.
- **Effective**: Providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit (avoiding underuse and misuse, respectively).
- **Patient-centered**: Providing care that is respectful of and responsive to individual preferences, needs, and values and ensuring that person-centered values guide decisions.
- **Timely**: Reducing waits and sometimes harmful delays for both those who receive and those who give care.
- **Efficient**: Avoiding waste, including waste of equipment, supplies, ideas, and energy.
- **Equitable and Affordable**: Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.

[1] Six Domains of Health Care Quality. AHRQ Quality Framework. Agency for Healthcare Research and Quality.
Accessed from https://www.ahrq.gov/talkingquality/measures/six-domains.html

LeadingAge™   FSA

17

Adopting and Using a Quality of Life Framework

FSA ©2021

1 In the Board's role of governing organizational quality, adopt the **Quality of Life Framework** as the way in which the organization will define and demonstrate organizational quality (the organization will still need to comply with applicable quality standards, but the policy would advance a new framework and learning culture)

2 Prioritize key focus areas within the Framework in 2 or more of the key domains

3 Approve key questions that will help the Board in decision making and monitoring progress regarding quality

4 Identify key metrics that will indicate quality (see next slides)

5 Make decisions and monitor progress in alignment with the Quality of Life Framework and adjust as needed based on learnings

LeadingAge™   FSA

18

Key Questions for Boards Setting Policy on Quality

	Options for Demonstrating Quality	Responsive Measures of Quality for Each Option
Safe	• Customers feel safe	• Environment assessment and plan to address deficiencies • Safe care measures (e.g. hospitalizations/falls) • Reducing avoidable readmissions • Resident security concerns are addressed timely
Effective	• Programs/services/care look at whole-person (e.g., mental, financial, social, etc.) • Programs/services are not under/over utilized	• Evidence-based programs/services availability • Care plan implementation (and/or choice in care plan options) • Medication errors • Evidence-based programs/services outcomes
Patient-centered	• Customers believe they have choice and control • Customers are included in decisions	• Customer question: "do you feel like you are well taken care of?"[2] • CAHPS Survey questions (e.g., Family Survey)[3]
Timely	• Customers have access to timely programs/service/care • Navigation resources to programs/services are available to (used by) customers	• Care/service coordination and navigation utilization (availability) • Reliable/affordable transportation • Programs/services/care availability (same-day, telehealth, wait time)
Efficient	• Technology, process or system integrations to reduce barriers • Resources are stewarded wisely	• Technology/system integration • Coordination with supporting services (e.g., transportation, nutrition)
Equitable	• Programs/services/ environment is welcoming and fosters inclusion • Programming is culturally relevant and responsive	• Annual increase in staff and customer scores that report programs and/or services are welcoming and foster inclusion • Customers believe they are treated with dignity and respect • Annual increase in staff and customer scores indicating that programming is culturally relevant and responsive
Affordable*	• Reduce unnecessary costs • Contribution to total cost of care	• Costs are comparable for like programs/services (transparency) • Programs/services are relevant to needs and ability to pay

*Not a pillar of (IOM) Quality of Life framework, but tied to equity

[2]Key Questions When Choosing Health Care Quality Measures - Are the Measures Appropriate for Your Audience? Agency for Healthcare Research and Quality. Accessed from https://www.ahrq.gov/...measures/measure-questions.html
[3]Priority setting for Healthcare Performance Measurement: Addressing Performance Measure Gaps in Person-Centered Care and Outcomes. Final Report August 15, 2014. National Quality Forum. Accessed from https://www.qualityforum.org/...

LeadingAge | FSA

19

Poll

WHAT'S YOUR REACTION TO CONSIDERING INCLUSION OF A QUALITY OF LIFE FRAMEWORK IN THE BOARD'S MONITORING OF QUALITY?

FSA ©2021

LeadingAge | FSA
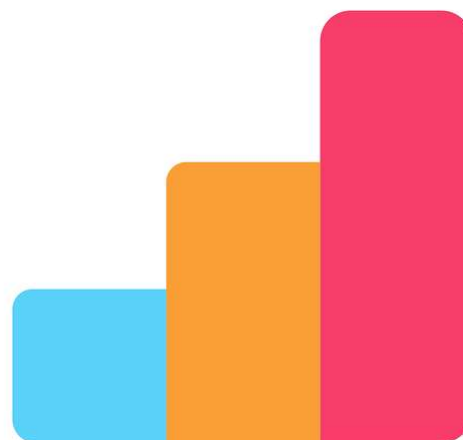
Please note any suggested indicators, suggestions or feedback about this framework in the chat function.

Thank you!