Extracting Data for Quality Improvement Strategy for Case Managers

Christina Hill, DD Waiver Manager
Chris Futey, Bureau of Systems Improvement
Objectives

At the end of this training, participants will be able to:

1. Understand how data collection and analysis can promote quality improvement at an individual and statewide level
2. Export, filter, and organize data gathered from the CM Site Visit forms
3. Understand expectations for KPI reporting to DDSD
4. Generate ideas from data exports to assist with agency QIS as described in the DD Waiver Service Standards
Quality is not an act, it is a habit!

Aristotle
How do we get to quality?

What not to do...

1. Make standard decisions or policy based on weak or limited anecdotal information
2. Make decisions based on emotion
3. Let “good enough” be enough
4. Look for blame
5. Avoid the use of data
How do we get to quality?

Build a strong culture in your agency to set expectations:

- Expect quality
- Expect desire to always improve
- Use data (How can we tell if there is improvement if there is not measure?)
How do we get to quality?

• Make approach about prevention of future errors
• Foundational belief—human error is a fact of life
• Ask why and learn from mistakes, focusing on changing the system
• Compliance more automatic if continuous quality improvement is present
Where’s the Data?

• Use Therap Individual Profile for status/snapshot of individual caseload
• Use Therap Supervisor Profile for status/snapshot of caseload you supervise
• Use Admin Profile for Aggregating data from agency and KPI reporting
Where’s the Data?

Therap Agency Report Library contains two related reports:

<table>
<thead>
<tr>
<th>Report Name</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case Note Detailed Report</strong></td>
</tr>
<tr>
<td>This report will show Case Note details similar to regular Case Note search with two additional columns for Activity Type and Location. Further two columns have been added, known as Time Duration (Hour) and Billed. The Note will be displayed once the report is exported to Excel.</td>
</tr>
<tr>
<td><strong>Case Note Report :: Case Note with Questionnaire info</strong></td>
</tr>
<tr>
<td>This report includes all case notes that have questionnaires included. Questions and answers from the questionnaire will be displayed. Prior to running the report, a user can enter service dates (up to one year date range) and filter results by the questionnaire name or the template name. The questionnaire or template name can be a partial match, meaning it contains a keyword from the title but does not need to include the whole title. They can also be left blank, which would return questionnaire details from all templates/questionnaires.</td>
</tr>
</tbody>
</table>
Where’s the Data?

- Export *Case Note with Questionnaire Detail* to Excel
- Paste data into DDSD Monthly Site Visit Report Template containing filtered worksheets

For 2013-2016 versions of Excel

For earlier versions of Excel
Where’s the Data?

- KPI #1 - ISP Implementation - Measures for Question 34
- KPI #2 - Completed Medical Appointments - Measures for Questions 17 and 18
- KPI #3 – CCS in Non-Disability Specific Settings – Measures for Question 28
- Actions – Table provides snapshot of answers to Questions 43 and 44 about actions needed by individual case manager
- All Question filter – pivot table set up to organize and filter all questions by individual, case manager, service date, and response
- Data Source- worksheet that houses the data exported and pasted from Therap
- Instructions- Provides tips and instructions for copying and pasting large data sets, connecting to the data source, and printing
KPI Reporting

- Resource: CM QI Technical Assistance Guide

- Remember your percentages represent the best information you can determine at a point in time which is the site visit

- Look for trends and analyze over time, each month
DD Waiver Service Standards –

Quality Improvement Strategy includes:
• Developing a QI Plan
• Using data (CM now have site visit data)
• Implementing QI Committee
• Preparing an annual report addressing QA and QI
Plan Do Study Act

If you can’t measure it, how do you know if a change is an improvement?
What can the site visit data help with?

Content Categories
1. Preparation
2. Rights
3. Individual Satisfaction
4. Environment
5. Equipment
6. Health (including related KPI-Medical Appointments)
7. Behavior
8. Service Delivery, including related KPI- CCS in non-disability specific setting
9. Individual Service Plan (ISP), including related KPI- ISP Implementation
10. Abuse, neglect, and exploitation (ANE)
11. Actions

Sample issues: Closing the loop, Informed Choice, Rights, Individual Satisfaction
Culture of Quality is a Process

• First attempt with accessible data for case managers (“If at first you don’t succeed,...)
• Provide feedback as we go
• Expect changes to questions and measures to get more meaningful data
• Need to find a balance (Too much data can be just as bad as not enough data)

Remember we are also documenting a site visit thoroughly and raising expectations for monitoring new areas, e.g., Rights and Individual Satisfaction
Resources

• DD Waiver Service Standards (Ch. 22)
  https://nmhealth.org/about/ddsd/pgsv/ddw/sas/

• Promoting and Sustaining Quality Improvement in IDD Service Systems