Indiana Living Well Grant Using NCI for Quality Assurance

Presented by:

Shelly Thomas, Assistant Director, Bureau of Quality Improvement Services Allison Howland, The Indiana Institute on Disability and Community

NCI Annual Meeting July 31, 2019



Indiana NCI Surveys

- Staff Stability Survey
- Adult In-Person Survey
 - Adults over 18 (Average age= 38 yrs)
 - IDD receiving 1 service in addition to CM
 - FS or CIH waiver

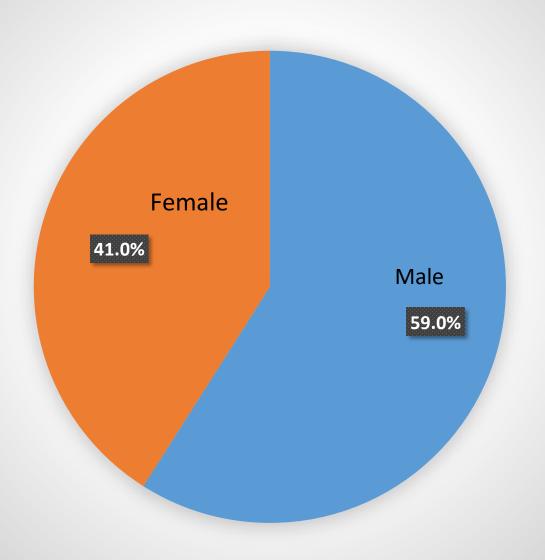


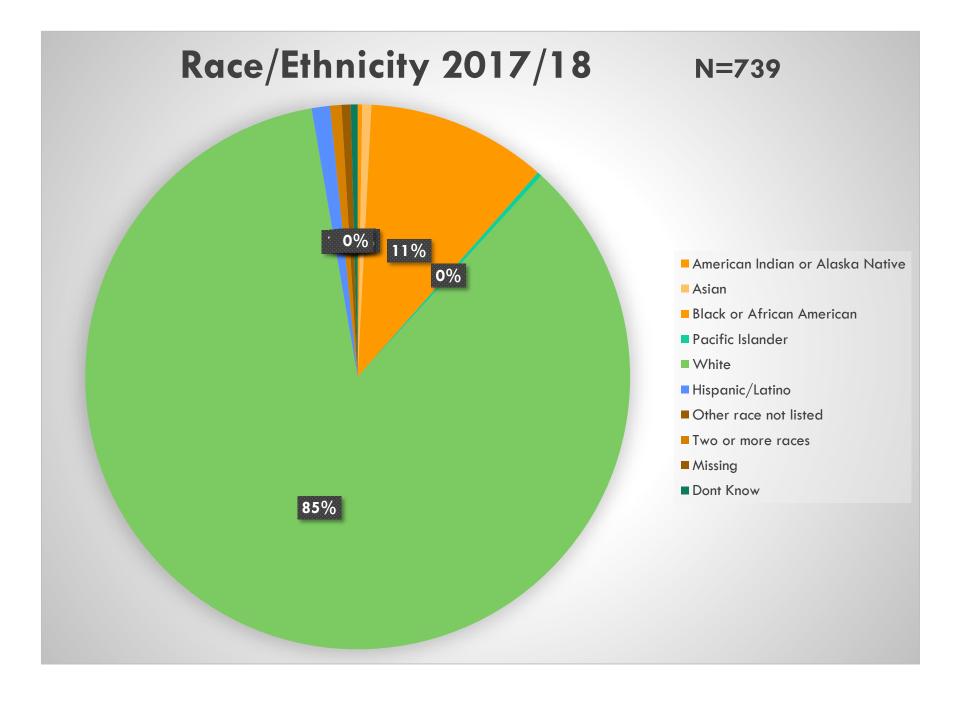












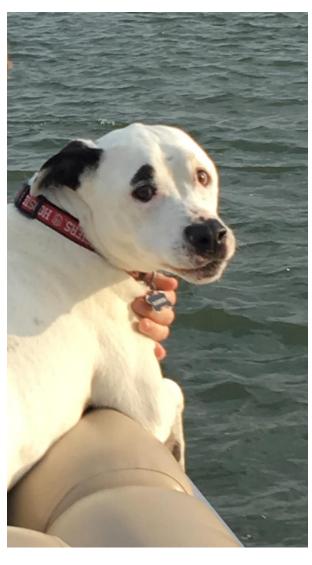
What Indiana Does Today: National Core Indicators

Use of NCI Annual Reports

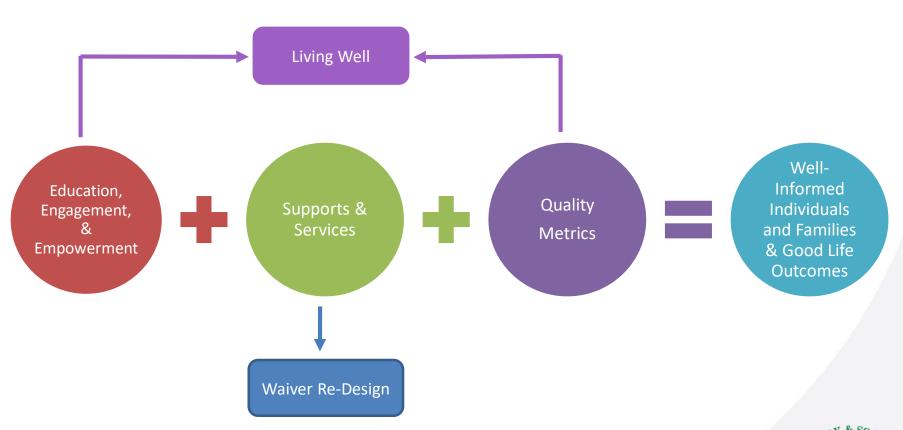
- CMS Waiver Requirements
- Quality Assurance/Improve Services
- Comparisons to National Average
- Annual Trends
- Reports to State Legislatures

INCORPORATING NCI WITH LIVING WELL GRANT





Aligning Living Well and Waiver Redesign





Alignment Approach

Charting the LifeCourse Principles

All people have the right to live, work, play, and love in their community

Policy Intentions

Promote personcentered thinking and practice, comply with setting rule, & promote efficiency

Collaborative Thought and Action

Collaboration with state staff throughout, but also with CMS, service recipients, their families, and providers Find balance between our best intentions to advance self-direction and community integration with the discipline needed to field an efficient, equitable, and effective system



Identifying Areas of Impact

Increase Person-Centered Planning

Improve Coordination of Care

Increase Community Engagement

Enhance Member Experience

Maintain Qualified Providers

Comply with HCBS Rule

Promote Efficiency



Sharpening Our Focus

A System that
Supports the
Individual as the
Primary Driver of
their Life and the
System as a Whole

- Comprehensive Compliance Oversight*
 - Preventative
 - IF
 - Complaint
- Quality Metrics / Outcomes of Services Defined
- Education of System to achieve "good life"
 - Choice
 - Active, Informed Decision Making
- Supporting Providers and Case Managers / Community Monitoring

- Purpose of Reporting
 - CMS Requirements
 - Research
 - How things are documented if not critical
- How it informs
 - Plan development
 - Risk needs
 - Supports



Sharpening Our Focus: Initial Action Steps

- Define Quality Metrics
 - What Indiana Currently Does Around Quality Metrics
 - CMS Quality Assurances
 - National Core Indicators
 - Based on Our Good Life Vision, What Are Three Outcome Areas We Would Want to See Impacted by Our Work
 - Within Those Outcome Areas, How Would We Define and Measure Progress?



Identifying Areas of Impact





Identified Areas of Impact

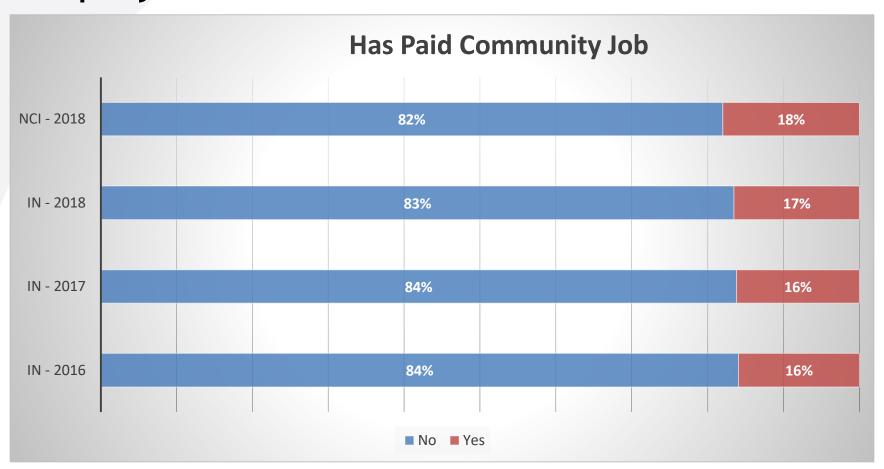
Informed Choice

Social Connectivity

Employment

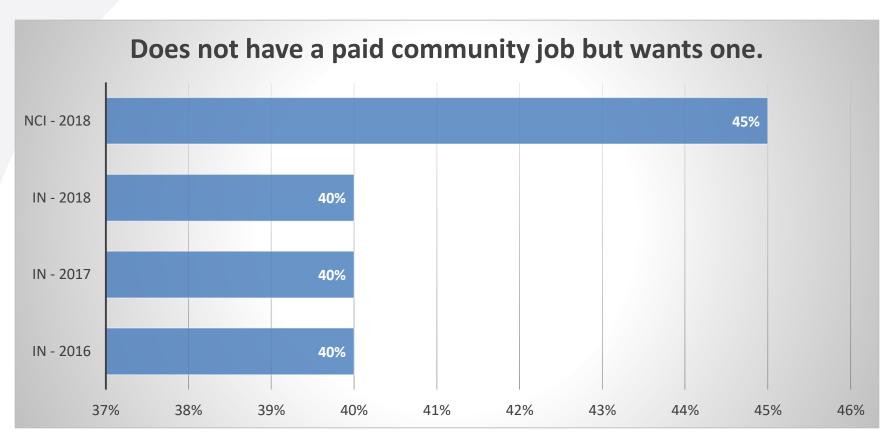


Employment Trends 2015/16 to 2017/18



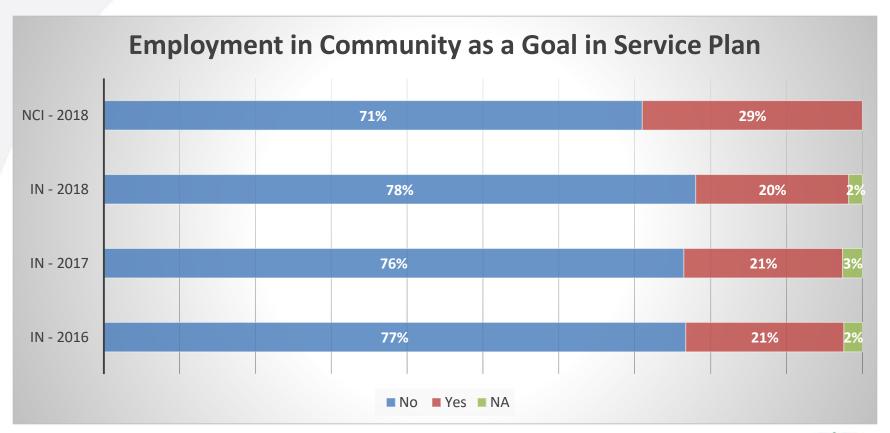


Employment Trends 2015/16 to 2017/18

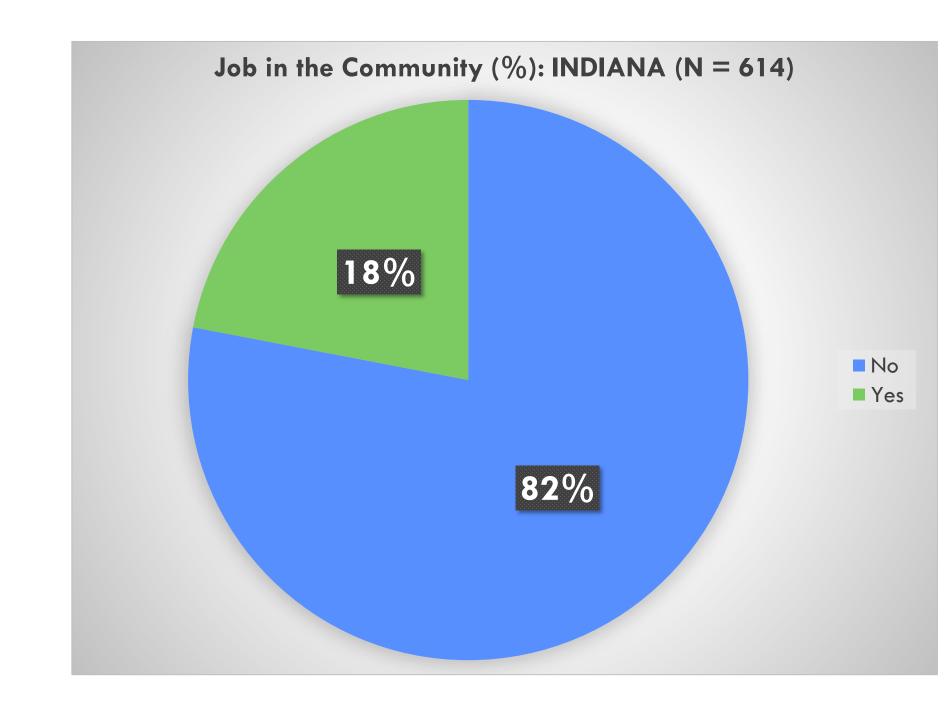


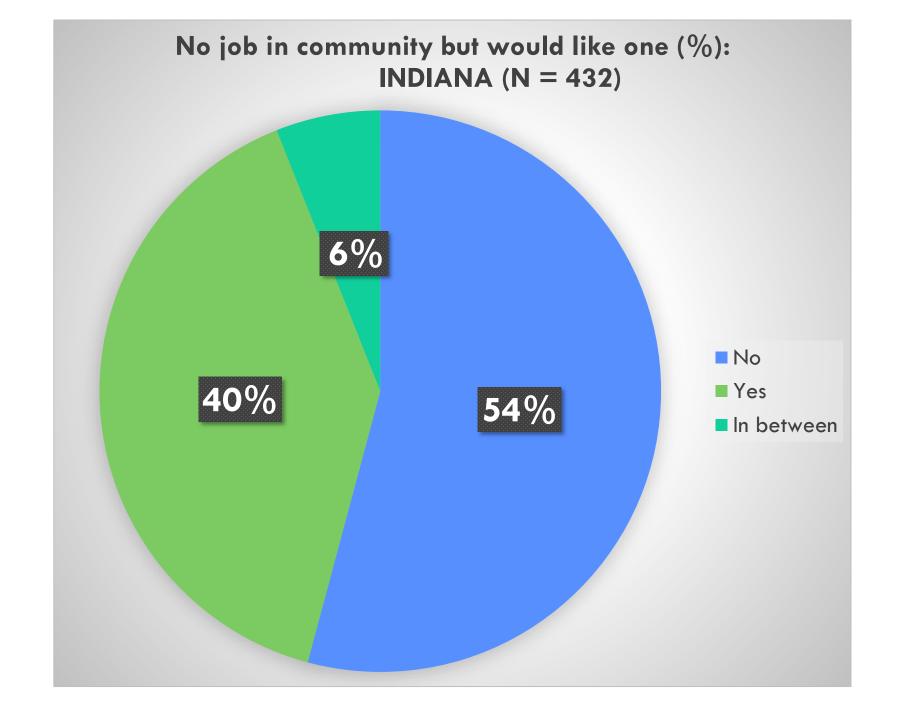


Employment Trends 2015/16 to 2017/18

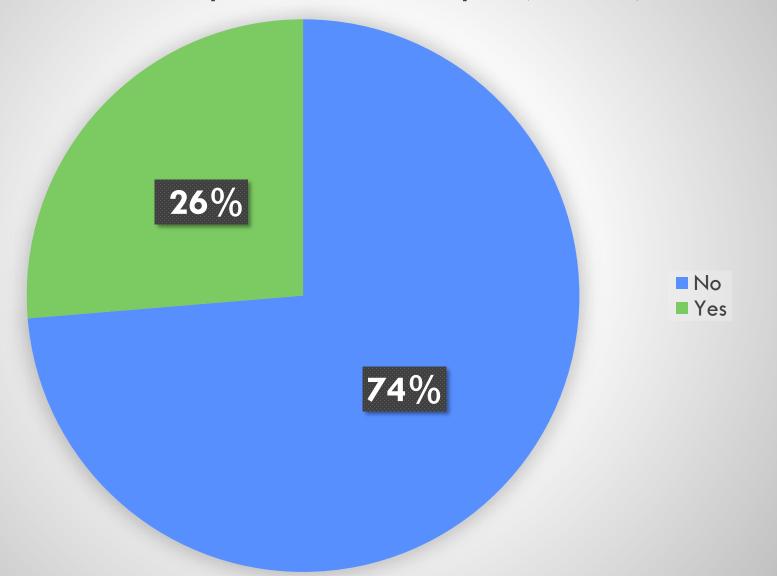












Potential Applications to Living Well

- Prioritize (not employed, want a job, no goal) population
- Investigate case manager practices related to goal setting and person-centered practices
- Consider exploration/education opportunities for the 54% that state they have no job and don't want one



Next Steps

Explore influence of demographic (and other risk factors) on outcomes

Integrate findings from NCI with other data

Day in Employment Services: Systems Outcomes

https://www.iidc.indiana.edu/styles/iidc/defiles/CCLC/DESOS/DESOS2017finalSeptember.pdf

BDDS data - PCISP and services

Incidence reporting
Risk and Protective Factors
Balancing Health/safety & Self-determination

Reporting that is accessible and consumable



For more information:

Indiana's Living Well Grant Coordinator Geena Lawrence Director of Provider Services Geena.Lawrence@fssa.in.gov

Indiana's NCI Coordinator
Shelly Thomas
Assistant Director
Bureau of Quality Improvement Services
Shelly.thoms@fssa.in.gov

