

Assisted Living Facility Quality Measures Work Group Meeting Minutes

January 17, 2019

On January 17, 2019, the Department of Social and Health Services convened the fourth 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), Carolyn Ham (Department of Health), Betty Schwieterman (Developmental Disabilities Ombuds), Sandra Miles (Sea-Mar Community Health Centers), Alyssa Schnitzius (LeadingAge Washington), Morei Lingle (Merrill Gardens/Argentum), Erica Farrell (Alzheimer's Association), Cathy MacCaul (AARP Washington), Brad Forbes (NAMI Washington), Candy Goehring (DSHS-Residential Care Services), and Patricia Hunter (LTC Ombuds)

Work Group attendees on the phone or webinar: Katie Jacoby (Community Health of Central Washington), Don Tivolacci (CRH Northwest), George Dicks (Harborview Medical Center), Linda Moran (resident representative), David Haack (Living Care Lifestyles), and Ian Davros (consumer representative)

Guest attendees: Amy Freeman (LTC Ombuds)

Department of Social and Health Services staff attendees:

Amy Abbott, Trish Harmon, Jeanette Childress, Roger Gantz, Beverly Court, Cathy McAvoy, Tracey Rollins, Jim Sherman, and Jessica Dingwall-Salquist (facilitator)

Logistics and introductions

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

Review of December minutes

The members of the work group voted to approve the minutes from the December meeting. Patricia Hunter commented that only members present at the meeting should cast votes for any items up for a vote.

The vote was unanimous for members in the room and on the phone. Cathy McAvoy will email Linda Moran to confirm her vote as she was present but unable to communicate due to technical issues. The minutes were approved by a majority of voting members and will be posted on the work group's [website](#).

Summary of November brainstorming activity

Beverly Court, Senior Research Manager from Research and Data Analysis (RDA), reviewed the document created as a result of the brainstorming activity that took place during the November 8th meeting. The comments were grouped by common themes. She reviewed the comments submitted for the four broad categories:

- to report to consumers,
- to promote quality of care,
- to monitor performance, and
- to track performance over time.

Jim Sherman remarked he was surprised staffing was not included in the list as the question 'how many nurses work at a facility?' is the question he receives most frequently.

Candy Goehring gave background on the purpose of the brainstorming activity, and added that a number of work group members were not present at this meeting. The document reflects the thoughts compiled by the members who were present during the brainstorming session and may be missing some items.

Sandra Miles stated it almost looks like we are describing a Skilled Nursing Facility and we need to be careful about that.

Robin Dale stated that he was comforted by this discussion, stating that some of this sounds simple. However, once you start discussing how to achieve this, it becomes complex. He commented that it was not clear what the purpose of the document was and he didn't want to see this treated as a menu to select our metrics or it could consume all of our time.

Patricia Hunter commented the document is a starting point.

Candy Goehring suggested that we "put a bow on it" and wrap this up to have closure on the document.

Don Tivolacci added that the section on behavioral health needs more edits and volunteered to assist with this.

George Dicks requested to be included on any subcommittee that will be addressing behavioral health.

Beverly Court stated that this list is not exhaustive and behavioral health may be something this group will want to address.

Robin Dale commented with regard to monitoring performance, that these metrics should not be included in the statute as regulation.

Patricia Hunter responded that the intent was not for DSHS to regulate to these metrics. It was for consumers to see the data and monitor the performance of a provider.

Robin Dale agreed that consumers should be able to see if there is a decline in performance by a provider.

George Dicks commented on laws related to the LGBTQ community and staff attitudes behind closed doors should be included. Karen Fredriksen Goldsen at the U.W. has developed a checklist to assess the degree of nondiscrimination practices within facilities.

Betty Schwieterman commented that the document is a very “medicalized” list and encouraged the group to consider quality of life and quality of care because attention to this is important.

Proposed process for defining the quality metrics

Beverly Court stated that we can have a random process for designing a system to inform consumers, but proposed a four step process to develop our performance measures:

- Step 1: Determine purpose: the purpose can affect what you focus on downstream.
- Step 2: Based on our primary purpose, determine domains/categories of interest.
- Step 3: Develop potential measures for the given domains/categories even though they may not be practical at this time.
- Step 4: Given the desired measures determine what is available through current public sources. What would it take to create measures that are not publicly available? What could be done if there were no constraints on resources?

Beverly stated that David Mancuso, RDA Director, will join us for our February meeting to discuss what makes a good quality metrics system.

A discussion about how to measure the different metrics took place. For example, there is a survey that measures hope. The World Health Organization has a tool with holistic scales.

Morei Lingle spoke about a survey that is being used by some corporations to survey residents.

Robin Dale asked if the quality of life inquiry was with the patient, the family, or the facility.

Morei Lingle responded with residents, families and employees using a satisfaction survey developed by a third party vendor. Since the survey is proprietary, we could not

adapt it without permission. Larger corporations hire third parties to administer their customer surveys which is a large expense that smaller providers cannot afford.

Beverly Court commented that one of the challenges is that we cannot use other licensed surveys.

Sandra Miles commented that her facility is tracking follow-up on health care as one of their metrics, but it can be hard to measure since the residents have the right to refuse to go to medical appointments which impacts the rate of re-hospitalizations.

Robin Dale commented that falls could be considered. It would be difficult to measure if falls are being reduced, but we could look at markers for whether the facility has a good falls mitigation program.

Patricia Hunter commented that ALFs do not have the same skill set as nursing homes. She stated that David Lord proposed that the work group establish guiding principles in order to have values to remind and guide us as we develop our metrics.

Robin Dale stated that as he reads the statute, the primary purpose of the performance metrics system is to inform consumers.

Patricia Hunter stated that the bill was about a consumer push to drive the market as to what is important to consumers.

Morei Lingle talked about the challenge facilities face in serving lower and higher acuity populations. The consumer does not know the difference and how it affects the type of care they provide and their ratings.

Carolyn Ham commented on the need to let consumers know which facility would be a good fit. Families often do not look at placement that does not provide the level of care that is high enough to meet the true care needs of their loved ones.

Erica Farrell commented most people want to know what the facility feels like, what kind of food is offered, and what types of activities they have.

Patricia Hunter recommended that we add guiding principles to the charter.

Maggie Lohnes shared that CMS has three domains or three prongs they look at for their programs: better care, smarter spending, and healthier people. Perhaps the work group should ask the providers which measures we should use.

Beverly Court asked the group to consider the guiding star as to what is important for consumers and raised a few questions. What would be our guiding principles? Could domains could be developed so that the measures are responsive to our purpose to inform consumers? How does the group feel about brainstorming ideas that would not require action by the Legislature?

Candy Goehring commented that brainstorming without limitations is important and that while not everything is practical, it might inspire other ideas. Candy also wanted to make sure that any decision from brainstorming activities is brought back to the purpose.

Robin Dale commented he wanted to identify and work through the process. He questioned where it starts and how are we going to get to measuring performance. For example, Medicare Compare exists only because there are hundreds of millions of dollars spent for this system.

George Dicks agreed and said that whatever is developed should harken back to the purpose.

Robin Dale suggested that the group accept the proposed process. He also suggested that the group identify one domain and move all of the way through that domain and its measures rather than considering all of the domains and measures simultaneously given the time we have.

Beverly Court commented we are well on the way to defining our purpose. We then can determine our domains and measures and discuss how we might measure them. We can share with the public the domains that we were able to address and the domains that were considered but not addressed.

Morei Lingle asked for a 30K foot overview, as she felt lost about the current path we are on. How do we know what might already exist?

Patricia Hunter recommended that we use subgroups to approach some of this work. A discussion of subgroups ensued. Linda Moran stated that it is important that we take advantage of subgroups and that anyone can participate if they choose. The subgroups can submit proposals for the full group to consider and vote on.

Jessica Dingwall-Salquist queried the group about their thoughts about extending the length of the meetings in order to have more time for discussion. No comments were offered by work group members.

In response to Morei Lingle's comment about what already exists, Candy Goehring offered that RCS could put together what we are doing and report on other things that are going on such as what is happening with licensing and rulemaking.

Patricia Hunter requested that members be able to delegate a representative to serve on subgroups due to other demands on her time.

Robin Dale stated he did not have a problem with substitutions for the subgroups. He would like to work through one metric at a time, as it would be too scattered to approach all metrics at the same time.

Candy Goehring stated Cathy McAvoy could put together the subgroups and keep track of the work they have completed.

Robin Dale commented that as we work through the measures he is comfortable using the large group for discussions and vetting. We have lots of time before September 2020 to finish our work. He would like to continue the discussion and get it right. He agrees that the guiding star is to inform consumers.

Candy Goehring supported the idea of using subgroups for some of the work and using the full group for discussions and decisions.

Jessica Dingwall-Salquist asked the group if they should vote. Robin Dale agreed with the caveat that the group includes some flexibility. Patricia Hunter added that the group should consider one metric at a time, with Beverly Court adding that the group consider one domain at a time also.

A vote was taken to adopt Beverly Court's proposed four step process. The vote was unanimous and the proposal passed.

Discussion then returned to the purpose of the performance metrics with Ian Davros asking the group how we will report this to the public. How do we measure diversity and share that with the public?

Candy Goehring stated this may become a domain later on.

Discussion concluded with a vote to adopt the purpose or guiding star to be consumer driven (i.e. to inform the public). A vote was taken and passed unanimously by all voting members. Carolyn Ham had to leave the meeting early and was not present for the vote.

Study of the states

Roger Gantz reported that he met with the research staff at RDA to develop a Survey Monkey to send to the top ten states listed in the AARP Scorecard report. He is working to finalize the survey tool, which was edited during a subgroup meeting on January 16th. He will share the final tool when he gets it back from RDA research staff.

Cathy MacCaul, of AARP, cautioned the group about using the top ten states because it doesn't tell the whole story. There were other dimensions and indicators used to determine the rankings. Some of these dimensions may relate more to what we are considering and may be a better guide for selecting the states rather than just selecting the top ten based on overall ratings.

Cathy McAvoy stated that our purpose for using AARP Scorecard is to avoid reinventing the wheel. She included the AARP 2017 Scorecard report in the binders. It does not include the appendices. The full report with the appendices containing the dimensions and indicators is posted on the work group's [website](#).

Candy Goehring warned that a lot of the ratings in the report were based on nursing homes and Medicaid Home and Community Based Services.

Cathy MacCaul knows the person who worked on the report and will contact him to get more information.

Betty Schwieterman would like to look at the interview tool with the guiding star in mind, adding that we may want to focus on states that have been doing something more related to consumers.

Alyssa Schnitzius offered to reach out to other state chapters of LeadingAge to find out if they are doing anything around performance metrics.

Robin Dale will reach out to other state executives to see what they have.

Morei Lingle expressed concern about waiting until the February 21st meeting to select the states.

Roger Gantz asked the group if they wanted to begin with the first ten states on the AARP report or wait to discuss selection in February.

Alyssa Schnitzius proposed contacting the two states (Wisconsin and Oregon) that had already been contacted by DSHS staff.

Roger Gantz proposed that we could start the process by contacting these two states to pretest the interview instrument.

Betty Schwieterman recommended that we go back to our survey and ask questions related to consumers as this is our guiding star.

Maggie Lohnes offered to Google other states to determine if they have a public facing system to inform consumers.

Jessica Dingwall-Salquist concluded the discussion by summarizing that DSHS will contact Oregon and Wisconsin as a pretest. The full group will determine which states to add at the February 21st meeting. Maggie can report her findings about other state systems at that meeting.

Review of charter

The group reviewed the edits that were made to the charter during the December meeting.

Patricia Hunter stated that she has identified a consumer serving on a resident council who lives in a rural area who may be able to serve. She could recommend this person and asked if the group is firm on limiting the group to its current 22 members.

Candy Goehring stated that with the current composition of the group we have balanced representation.

A motion was made to add another consumer and to cap the group at 23 members unless directed by the sponsor of the bill.

A vote was taken to add a consumer and include David Haack as a voting member bringing the work group to 23 members. The motion passed by a majority to cap membership to 23 members unless otherwise directed by the sponsor of the bill. George Dicks abstained from voting and Don Tavalacci voted no on the motion.

There was discussion about adding the purpose of informing consumers to the first section of the charter. There would be no changes to the bullet points and the sentence stating the purpose would be added directly above. It was also suggested to include a section on guiding principle, following the section on Scope and Boundaries. The guiding principles will be discussed at the February meeting.

Jessica Dingwall-Salquist concluded the review stating that the sentence about the purpose will be added to the first section and a discussion about guiding principles will be added to the February meeting agenda.

Public comments

Linda Moran shared that she enjoyed the discussion and thought that the group made amazing progress. She commented that it is nice to see we are coming to a consensus.

Jim Sherman offered a comment on the diversity within our state and hopes that our survey may reveal if another state is as diverse as ours. He also provided an update about a change that is happening this month with the licensing of group training homes for residents with developmental disabilities. Some providers may pursue this licensure and drop their ALF license as a result of the change.

David Haack stated that he was glad to be able to serve on the work group. He shared that one challenge for residents with dementia is that they cannot report for themselves so we should include language for families to have a voice for residents who cannot communicate on their own behalf.

Next steps

Jessica Dingwall-Salquist reviewed the next steps for the work group:

- Guiding principles – discuss at the next meeting and add to the charter
- Performance Measures: David Mancuso to join us in February to present on what makes a good quality metrics system
- Study of States: vote on which states will be interviewed based on the AARP Scorecard
- Timelines – exact determination of the study of the states
- Categories or domains: select and focus on one to start with
- Research and reports: Roger will provide information from the AARP Scorecard for the full group to discuss to determine which states to contact. Maggie will also do a Google search to find out if states may have performance measures already in existence.

Next meeting

The work group's next meeting is Thursday, February 21, 2019, 1:30 p.m. to 4:30 p.m. at DSHS Blake East Office Park Building located at 4500 10th Avenue SE Lacey WA 98503. The meeting will be held in the same room as the January meeting which is the Hood Room on the second floor.