Attachment 2
Internal Quality Improvement
Quarterly Report
January 1 – March 31, 2004
The following provides a report of internal quality assurance activities that occurred during the January - March 2004 period.

**Orientation and training**

**New Staff**
Claudia Kassack was promoted to the position of Program Manager for Training and Education. While Ms. Kassack had been trained by the Joint Commission as a Provider Performance Reviewer, she completed an orientation training program through Delmarva. Nilda Barreto and Susan deBeaugrine were hired by the Joint Commission to conduct Provider Performance Reviews. Ms. Barreto and Ms. deBeaugrine were trained on the PPR procedures, tools, and general contract information. They observed reviews conducted by experienced reviewers, and conducted reviews in coordination with experienced reviewers. Anna Quintyne and Marion Olivier-Ruelas coordinated these training activities. Ms. Barreto is employed as a full-time PPR reviewer while Ms. DeBeaugrine is employed as a part-time reviewer for JCR (and continuing to work on a PRN basis for Delmarva conducting PCR’s and developing stakeholder educational materials).

**General Staff Training**
All Quality Assurance Reviewers and other Florida staff participated in a four-day joint training session in January 2004 (January 26 – 29, 2004) that included large group presentations; work group sessions, and specific training for reviewer type.

**Person-centered Reviews**

**POM Monitoring and Annual Reliability**
The Council provides on-site monitoring of 5% of all POM’s conducted annually. Council representatives accompany Reviewers on interviews and observe the administration of the POM’s. Monitoring is designed to ensure that reliability in conducting the POM interviews is maintained as well as to provide ongoing technical assistance as needed. The Council monitored 22 interviews with existing staff this quarter. Additional coaching was provided for 1 reviewer and 7 reliability assessments were completed. Of the 7 reliability assessments, 5 were for Children and Youth interviews.

**Annual Gold Standard Reviews**
100% of the person-centered review reports continued to be reviewed by the Regional Managers through the 3rd quarter and has replaced the use of scenarios until a sampling
of reviews is implemented. Regional Manager review and approval of all reports continues to ensure accuracy and consistency in the identification and development of recommendations. The process of report review and approval includes individual follow up and consultation with the reviewer as well as periodic checks with selected waiver support coordinators to verify information and recommendations.

**Consumer and Family Feedback**
The AHCA Recipient Survey continues to be distributed to individuals participating in the Personal Outcome Measures interview portion of the PCR process. AHCA staff maintains a report on this feedback and a summary of comments provided at the March IQC meeting reflected favorable comments.

**Provider Performance Reviews**

**Q & A document and protocol update**
Biweekly conference calls were continued this quarter, with an education focus on element interpretation and questions surrounding the behavioral supplement. Minutes of these meetings were provided to all review staff and include Q&A’s.

**Scoring and documentation analysis**
For the 2nd quarter, Regional Managers reviewed and approved 100% of the Provider Performance Reviews. Ongoing feedback was provided as necessary. Ongoing review by the Regional Managers provided a mechanism to ensure that reviewers were consistently interpreting elements and documenting justifications in an efficient and appropriate manner.

**Rater reliability**
Rater-reliability evaluations were conducted on 10 Quality Assurance Reviewers (QAR) who conduct Provider Performance Reviews during March 2004. There were three new Reviewers evaluated since the last Reliability Evaluation – two of whom were hired within the past three months. The Reliability Evaluation tool that was used last year was again used during this review period as the monitoring tools and protocols had not changed. The primary focus of the rater-reliability evaluation is to determine the Reviewers’ implementation of the review process as designed and to offer a comparative study of the last year monitoring results. Areas being evaluated included:

- Pre-review activity
- Active listening skills
- Interviewing skills
- Observation skills
- Communication skills
- Implementation of the review agenda
- Level of interaction between the Reviewer and provider/staff
- Sample selection process for consumer records
- Documentation and record review approach
• Opening and exit conference content and approach
• Ability to review all applicable elements of performance in the allotted time
• Use of protocols
• Interpretation of elements of performance
• Observation of joint commissions corporate values
• Appropriate designation selection and rationale based on investigation results

Quality Assurance Reviewer performance overall significantly fell within the range of meeting or exceeding expectations. All Reviewers demonstrated a high degree of professionalism and were courteous throughout the review. The majority of the Reviewers met expectations for completing district contacts, reviewing the PCR reports, and reviewing claims information for the provider. The information was used in discussions with the provider either directly or indirectly. Over 50% of the Reviewers exceeded expectations on active listening, observation of the JCAHO corporate values during review, and appropriate designation selection and rationale based on investigation results. Reviewers were pleasant, friendly, punctual and professional, and respected the provider’s opinion throughout the review. There was good interaction between the Reviewer and the provider/staff. Providers were familiar and comfortable with the review process and the Reviewers. Most Reviewers were able to review all elements of performance within the allotted time. They were also open/receptive to the provider’s request for reconsideration and used good judgment and rationale to score the elements of performance.

Areas where needed improvement was noted included the opening conference, and documentation and record review process. Providers are not being encouraged to participate in the document and record review. Reviewers are comfortable going through the records to locate information. Three Reviewers, two of whom were new, did not conduct an opening conference.

Quality Assurance Reviewers were provided with feedback on their performance after the review. The Reviewers received information on the review process and interpretation of the elements of performance. The Quality Assurance Coordinator discussed the new CORE review process and requested the Reviewers’ feedback on the process.

Medical Peer Review
The Medical Director completed 39 quality assurance reviews of completed medical peer reviews. No issues or recommendations were noted.

Reconsiderations
Twenty-four reconsideration requests were processed during this quarter. One Regional Manager has assumed primary responsibility for this activity, though the PPR Coordinator completes some of the less involved reconsiderations.
**Evaluation of Provider/consumer education**

One formal education program was provided during the 3rd quarter. Two sessions on Implementation Plan development were conducted in District 4 for over 100 participants that included an array of providers. The overall average evaluation score for the training was 3.5 on a 4-point scale.

**Timeliness and Submission of Deliverables**

Delmarva and its program partners are continuing to develop internal management systems to ensure that required timelines for conducting reviews are being met and that review data are being gathered in a format that can be analyzed at the aggregate level.