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Quality Beyond Compliance:
Taking Charge of Your CIL's True Potential

Presenter:

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Framework—Why actions around quality?

- Our dreams for our center – and our community – can lead us into exciting and sometimes unexpected places.

- For centers to excel we must radically rethink quality.

- Others will monitor, review and evaluate the center periodically.

- Those external requirements must be met, but they do not define us.

Our purpose for looking at quality is to assure we are…

- Doing the work of the center well
- Doing the work of the center efficiently—using resources well
- Doing the right things—"There is nothing so useless as doing efficiently that which should not be done at all."
- Doing what's important to consumers
- Doing what is truly transformational

Today we will tie pieces together…

- Focusing on quality is a little like a puzzle.
- You need to decide how you will take your Center to that next level.
- What outcomes are important to you and your stakeholders?
- How will you measure them?
- We hope to give you some tips today so you can implement quality initiatives at home.

What is the difference between quality and compliance?

A Definition of Quality:

Quality is _exceeding_ the customer expectations.

- Quality is the extent to which the customers or users believe the product or service _surpasses_ their needs and expectations.

- Quality is _delighting_ the customer.

This is much bigger than meeting a set of compliance indicators.

We can be intentional about quality

Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives.

-- WILLIAM A. FOSTER,
quoted in *Igniting the Spirit at Work: Daily Reflections*

We *must* be intentional about quality.

- Think about it. We are a *movement*. A movement seeks to change the world.

- We must define and demonstrate quality to change our world.

- CILs can and should be a dynamic force in the community.

- Mediocre centers will not facilitate change in their communities.

- Weak, ineffectual or dishonest centers contribute to society's negative perceptions about people with disabilities.

How are your foundations?

If you have built castles in the air, your work need not be lost: that is where they should be. Now put the foundations under them."

– Henry David Thoreau

Desired Outcomes

- Can outcomes or indicators of outcomes measure quality? Absolutely, once we define quality for our centers.

You can set the standard…

For your community, your state, your region –

"Be a yardstick of quality. Some people aren't used to an environment where excellence is expected." ~Steve Jobs

Hallmarks and Features of High-Quality Community-Based Services*

- Hallmark One: High Quality Services Meet the Service Needs of the Persons Served

- Hallmark Two: High-Quality Services Are Based on Sound Theories and Practices

- Hallmark Three: High-Quality Services Are Administered Competently and Efficiently

- Hallmark Four: High-Quality Services Support Integration and Inclusion

- Hallmark Five: High-Quality Services Acknowledge and Support Diversity

* A 2005 ILRU Paper by M. Kendrick, L. Bezanson, R. Petty, and D. Jones

Hallmark One: High Quality Services Meet the Service Needs of the Persons Served

- Start with identifying the five core services, then any other services that your organization provides.

- With each one, determine what needs you intend to meet.

- Find out from the persons served whether those needs were met through the services you provided.

Hallmark Two: High-Quality Services Are Based on Sound Theories and Practices

- Examine some of the best practices around each service model.

- Talk to your peers here, at NCIL, and back home within your state or territory.

- If you are doing something great, share it.

- Go to our website at http://www.ilru.org/home and take advantage of the training and sample documents for each core service.

Hallmark Three: High-Quality Services Are Administered Competently and Efficiently

- Is your administration – Executive Director, Program Director, etc. – current in knowledge of competent administration.

- Do you regularly examine the costs and benefits of each service to assure it is operated efficiently?

- Efficiency = time and money

- Does your board understand and act on the results you provide to them?

Hallmark Four: High-Quality Services Support Integration and Inclusion

- Equal access – internally and in the community – is an indicator of Independent Living Philosophy.

- Some activities, such as peer support groups, are naturally segregated to only people with a disability. Does that group support the individual's integration and inclusion in life?

- Do advocacy and self-advocacy efforts impact this area?

Hallmark Five: High-Quality Services Acknowledge and Support Diversity

- Is there diverse representation on your board?

- Are there underserved populations in your communities?

- Do staff mirror the diversity in the community ethnically?

- Do staff show diversity of disabilities?

- Do you serve people with a wide range of disabilities and a range of ethnicity?

In comparison, what is compliance?

From whatis.com

Compliance is either a state of being in accordance with established guidelines, specifications, or legislation, or the process of becoming so.
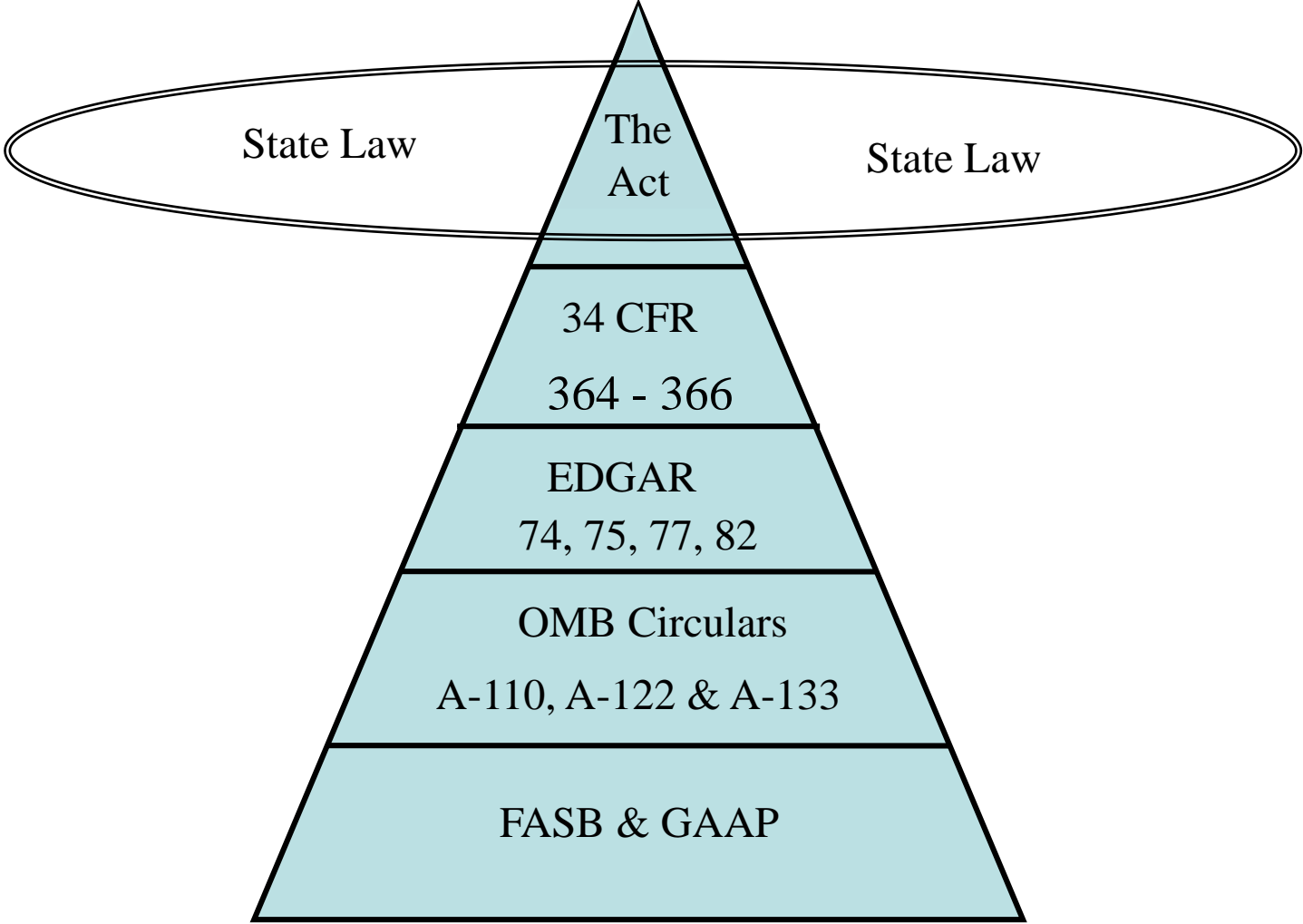
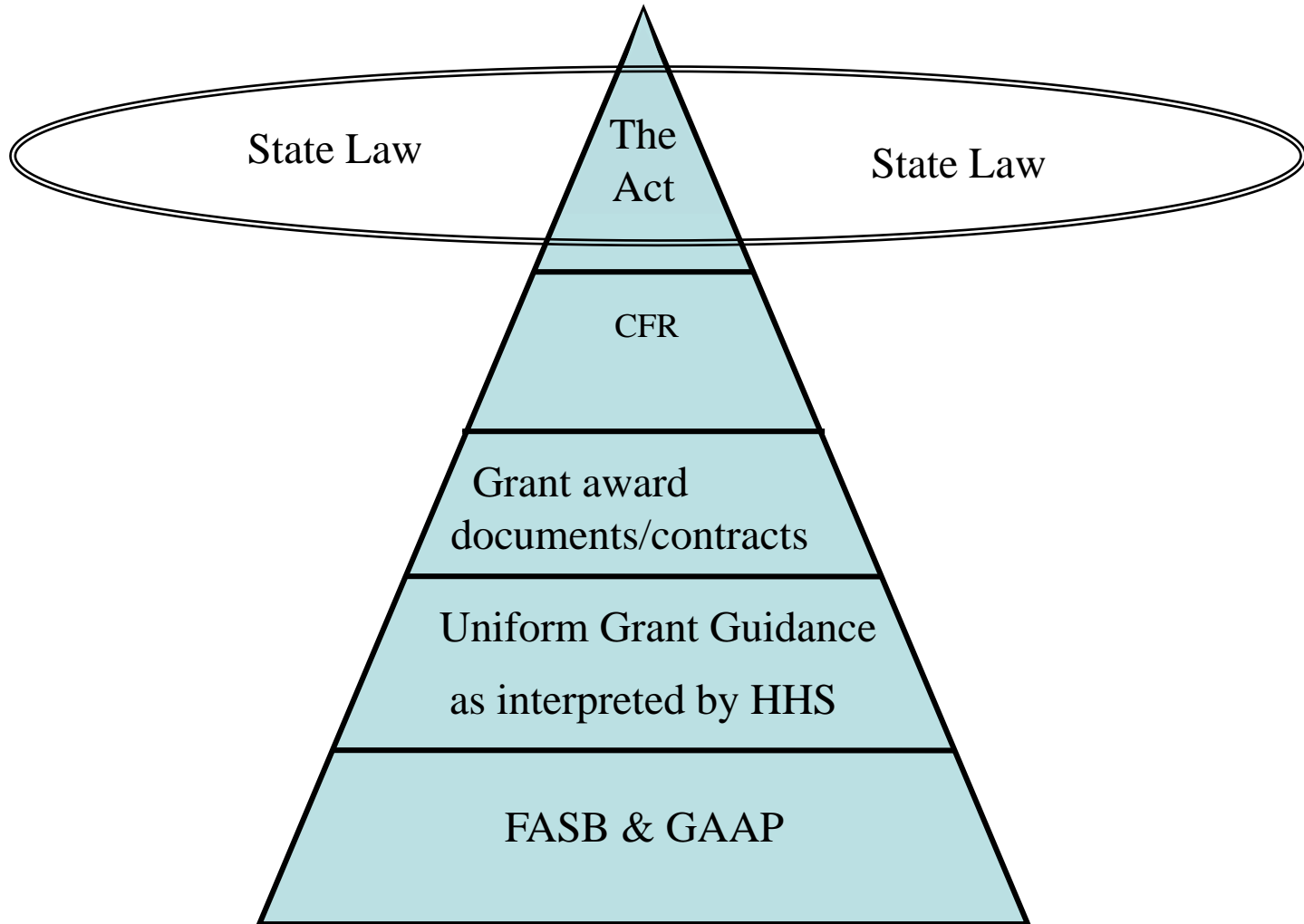# What do we need to do to be in compliance?

Meet the regulations

- OMB Circulars A-110, A-122, A-133 will no longer apply to grants issued after December 26, 2014.

- The new Uniform Grant Guidance as expanded in EDGAR, which is part of the Code of Federal Regulations, will apply until services are moved to HHS.

- HHS will have its own Uniform Grant Guidance in federal regulation or other guidance after that move.

Conform with your contracts

Regulatory Agencies Plus – through end of grant contracts issued prior to Dec. 26

State Law

The Act

State Law

34 CFR
364 - 366

EDGAR
74, 75, 77, 82

OMB Circulars
A-110, A-122 & A-133

FASB & GAAP

Regulatory Agencies Plus – the future

State Law

The Act

State Law

CFR

Grant award documents/contracts

Uniform Grant Guidance as interpreted by HHS

FASB & GAAP

Use RSA's Review Checklist for Self-Assessment

While the location of our administration is changing, this document mirrors the standards and indicators from the Rehab Act which will still apply until the new regulations are in place.

The purpose is not to *meet* the compliance requirements, but to think about how we can *exceed* them.

Compliance and *beyond...*

- Know/meet legal and contractual requirements.

- Use actual RSA On-Site Checklist to check your center's readiness and compliance. For the time being this is still the tool used by RSA for its site reviews.

- Compliance is the foundation – a first or early step -- for building and measuring quality.

- Download most current in PDF or Word from http://rsa.ed.gov/display.cfm?pageid=394

- Two webinars on meeting these requirements are found on our website. The links are at the end of this presentation.

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Independent Living Research Utilization

Think about building on compliance...

- As you go through the checklist, first confirm compliance...

- ... then ask what outcomes or activities can take your center to a new level.

- You may identify specific goals that should go into your work plan or strategic plan.

- You may identify outcomes that you will report to the Board of Directors.

Tie into NCIL's work on outcomes?

- In each area of measuring our own quality we can see potential outcomes.

- The field has been examining outcomes and how to measure them for some time.

- The past work of the Rehab Act committee has developed and discussed possible national outcomes.

- Watch for new regulations, standards and indicators as they emerge.

- Of course each CIL can and should measure the outcomes determined to be important locally.

IL Community Interest in Outcomes

- In 2003, the federal Office of Management and Budget (OMB) applied its Program Assessment Review Tool (PART) to the Center program within RSA, and OMB concluded that the program suffered from "Results not demonstrated." This OMB finding was explicitly not a statement that the Center program was being ineffective, but simply that the program was not yet identifying its desired outcomes, measuring them, and using that information to continually improve effectiveness.

- Some states and Centers had begun their own, early efforts to focus more on outcomes, and those results were promising enough to encourage a more standardized, national effort.

Why Might Your CIL be Interested in Outcome Measures?

- Outcome measures are a tool that can help you improve your own effectiveness
    - Help you know if you're offering the right service mix
    - Help you know if you're really helping
    - Help you know if your advocacy is effective
- Your findings will help you share your success story with your constituents, your community, funders and others
- Outcome management will help you in continuous quality improvement

Background – NCIL Task Force on Outcome Measures

- Formed in 2006

- Chaired by experienced, respected leader Bob Michaels

- Comprised of ten members—CILs, SILCs, NCIL, ILRU and academia

- Funded by NCIL, ILRU, and the University of Kansas RTC/IL

- Recruited Mike Hendricks, a national expert in program outcomes as its independent consultant

- Representatives of OMB and RSA were invited and participated in initial meetings and contributed

Background – NCIL Task Force on Outcome Measures, cont'd.

- Philosophically, the Task Force agreed from the beginning that Centers should aim to practice outcomes management, not just outcomes measurement.

- A research activity simply *measures* outcomes and reports them to various audiences (outcomes measurement)

- The Task Force desired to *manage* the information gained from measuring outcomes.

Background – Field Test of Outcomes and Measures

- Two tests were conducted
- The first test was initiated in 2009; 21 centers completed the field test.
- In a second test, 32 centers collected outcome and outcome measures information; 12 of these had participated in the first study.
- Some of you may have participated in this.

What Centers Learned

- First, and very importantly, **it is possible to measure the outcomes of Center programs**.

- The Centers' second message was that **focusing on Center outcomes is not simple**. Not all Centers were able to complete the study; 21 of 32 volunteering Centers (66%) were able to provide a full set of outcome information. Those that completed the study indicated doing so required **significant commitment of time and effort**.

- The majority of Centers who completed the study, however, also felt the results were **worth the time and effort invested**. Sixty percent (60%) of respondents said that participating in the field test had been valuable or very valuable, & 72% were interested or very interested in participating in another field test.

Outcomes Are Concepts

- "Nobody has ever measured an outcome"
- We do not measure outcomes
- We measure indicators of outcomes

Three "Streams" with Desired Outcomes and Measurable Indicators

1. IL Services – 2 Outcomes / 2 Indicators

2. Information and Referral – 2 Outcomes / 4 Indicators

3. Systems Advocacy – 4 Outcomes / 5 Indicators

IL Services Stream

Outcome: Persons with disabilities have skills/knowledge/resources to support their choices

- Indicator: "# and % of consumers served by the CIL *within the last nine (9) months of the past federal fiscal year* who can list at least one (1) specific skill, type of knowledge, or resource they have now that they didn't have before approaching the CIL"

IL Services Stream, cont'd.

Outcome: Persons with disabilities are more independent

- Indicator: "# and % of consumers served by the CIL within the last nine (9) months of the past federal fiscal year who can list at least one (1) specific way in which they are more independent than when they approached the CIL"

Information and Referral Stream

Outcome: Persons with disabilities get the information they need

- Indicator: "# and % of persons with disabilities contacting the CIL during the last nine (9) months of the past federal fiscal year who report they have the information they requested from the CIL"

- Indicator: "# and % of persons with disabilities contacting the CIL during the last nine (9) months of the past federal fiscal year who used a new resource they learned about from the CIL's I&R efforts"

Information and Referral Stream, cont'd.

Outcome: Persons with disabilities advocate for increased community supports

- Indicator: # and % of consumers served by the CIL within the last nine (9) months of the past federal fiscal year who can list at least one (1) specific <u>personal</u> advocacy activity they engaged in

- Indicator: # and % of consumers served by the CIL within the last nine (9) months of the past federal fiscal year who can list at least one (1) specific <u>systems</u> advocacy activity they engaged in

Notice that these outcomes are measured based on input from consumers.

- Individual or over-all satisfaction surveys are the basis for the questions that are asked by these indicators.

- Many centers find that surveys at the time the individual finishes their goals or plan have a much higher rate of return than annual surveys (anecdotal).

- These do not have to be paper and pencil surveys. Electronic surveys, phone follow-up, exit interviews and focus groups can also provide this information.

Systems Advocacy Stream

Outcome: Barriers, problems identified

- Indicator: "# of activities conducted (such as surveys, public meetings, focus groups, polls) during the past calendar year to identify or confirm the primary barriers/problems in the community that prevent persons with disabilities from leading more independent lives"

Systems Advocacy Stream, cont'd.

Outcome: A consumer agenda for change exists

- Indicator: "Presence within the CIL's annual plan of a separate section containing an explicit systems advocacy work plan"

Systems Advocacy Stream, cont'd. 2

Outcome: Decision-makers act on our agenda

- Indicator: "# positive changes achieved or negative changes prevented during the past calendar year in legislation, policies, practices, or services at the local, state, or federal level that address the barriers/problems identified by the center's consumers"

Systems Advocacy Stream, cont'd. 3

Outcome: Methods and practices promote independence

- Indicator: "# and % of consumers served by the CIL within the past calendar year who moved out of an institution and into a self-directed, community-based setting"

- Indicator: "# and % of consumers served by the CIL within the past calendar year who remained in a self-directed, community-based setting on December 31 despite having been at risk of moving into an institution"

Summary—How Outcome Measures Can Benefit your CIL

- Outcome measures are a tool that can help you improve your own effectiveness
  - Help you know if you're offering the right service mix
  - Help you know if you're really helping
  - Help you know if your advocacy is effective
- Your findings will help you share your success story with your constituents, your community, funders and others
- Outcome management will help you in continuous quality improvement

Are you using your software to its fullest?

- Most centers use CIL software for data collection necessary for the completion of 704 or other reports.

- Are you using the information in your database to look at outcomes?

- Check with your provider – there are reports built into most of the systems that may be useful in measuring quality.

Are the pieces coming together?

- It is a little like a puzzle, isn't it?
- You need to decide how you will take your Center to that next level.
- What outcomes are important to you?
- How will you measure them?
- How will you report to your stakeholders?
- Questions?

A real life example –Mountain State Centers for Independent Living

- Established the Foundation for Independent Living as a separate 501(c)(3) to serve as the fund raising arm of the centers (1992)

- MTSTCIL considers service area to be predominately rural. Huntington's population is 49,160 and Beckley's is 17,606.

- Other areas served are very rural

- You can view the video of Anne Weeks' full presentation at http://www.ilru.org/training/quality-beyond-compliance-taking-charge-your-cils-true-potential

Gathering Data: Consumer Request / Outcome Feedback Form (Immediate)

Questions included on Request/Outcome Feedback Form:

- You requested to attend: (class or event/activity)

- Did you accomplish what you wanted to today?
  Yes   No

- Tell us about it.

- What other classes, activities, or programs would you like to see at our center?

- Consumer Signature:

Gathering Data: Consumer Request / Outcome Feedback Form

- Form for completion by consumers after all classes and events – real time, immediate feedback

- Allows staff to know what consumers thought of class/event they just attended

- Gives consumers an opportunity to provide additional information about classes/events/ activities/training and/or concerns to staff with an open-ended question.

Gathering Data: Comment Cards and Staff Access

- Comment cards available
  - at the centers
  - in the vans
- Consumers may complete at any time
- CEO reviews and shares with staff and board
- Staff Access: Consumers have access to all staff and are encouraged to feel comfortable sharing suggestions or concerns.

Data Gathering: Consumer Forums

- Easy to do
- Advertise via email blasts, consumer calendars, website, Facebook, flyers, email
- Take comments from those who show up
- Write down everything said
- Compile as raw data

Gathering Data: "Open Space"

- More work, all day meeting
- Advertise the event through the same methods as Consumer Forums
- Stakeholders drive the meeting based on the theme for the day, there is no agenda
- The most important concerns of stakeholders will be addressed in breakout sessions
- All data gathered in sessions will be compiled as raw data

Strategic Planning

- Review Data

- Analyze Data

- Identify goals for improvement

MTSTCIL Annual Work Plan

- Integrate strategic plan goals into work plan
  - The 6 goals developed in the 10 year strategic plan never change in the annual work plan
- Develop outcomes & indicators for each goal
  - The outcomes never change from the 10 year strategic plan, but the indicators can change based on accomplishments, or annual review meriting change or deletion
- Outcomes and indicators drive strategic plan activities
  - Activities are fluid and can change every year based on accomplishments and/or evaluation of pertinent issues
  - Activities can also change during the year based on quarterly evaluation of pertinent issues

MTSTCIL Annual Work Plan, cont'd.

- The Annual Work Plan is included in the 704 Report

- Quarterly Review:
  - The annual work plan is reviewed on a quarterly basis to check progress on activities, evaluate validity of all elements of the activities, make changes, deletions based on time frame realities

What will you do when you get home?

- Do you have a handle on how to take your center from compliance to quality?

- Are you taking charge of your CIL's true potential?

For more information

Contact:

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www.mtstcil.org for more about our center example

For latest West Virginia Consumer Satisfaction Survey:

http://www.wvsilc.org/MENU.htm

For webinars on applying the RSA compliance tool go to http://www.ilru.org/training/assessing-health-your-cil-part-1 and http://www.ilru.org/training/assessing-health-your-cil-part-2

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