

Assisted Living Communities: States Embrace Unique Collaborative Quality Efforts

The National Center for Assisted Living describes three case studies of innovative, collaborative efforts that leverage new quality initiatives to support assisted living compliance with state requirements. After reviewing these models, this policy brief concludes with a call to action for all stakeholders, who mutually benefit from these programs. Policymakers and regulators partner with providers to improve outcomes for vulnerable citizens while simultaneously targeting limited state oversight resources more efficiently. Assisted living communities receive technical assistance to improve care delivery. Researchers can explore newly generated data and how to adapt these models to fit each state's unique long term care environments. Most importantly, assisted living residents may ultimately have better experiences living in assisted living communities.

Background

Assisted living is a long term care option preferred by many individuals and their families because of its emphasis on resident choice, dignity, and privacy. Driven by consumer preference, assisted living has grown and evolved over the past 30 years to offer a wide range of services to diverse populations.¹ As the sector has developed, states have strengthened licensing and certification requirements for assisted living communities to reflect the residents' more complex care needs.²

While effective oversight is critical, state partnership with assisted living providers and quality experts to improve care is paramount to achieving the triple aim—improving patient experience, improving population health, and reducing per capita costs. A proactive provider culture that embraces quality is critical to sustained success. A culture focused on quality improvement cannot be created through regulation alone, rather it must also be encouraged through partnership and education.

As such, states and providers continue to explore innovative programs to embrace quality improvement for assisted living. **This policy brief highlights three states' efforts to embrace quality measurement and improvement through collaboration, and emphasizes how quality programs can be integral to effectively targeting limited state resources for oversight.** These programs are tailored to each state's unique long term care environment. The intent of this policy brief is for stakeholders to learn about these programs to identify opportunities for adapting them to their state's circumstances.

¹ Stevenson, D. and Grabowski, D., "Sizing up the Market for Assisted Living." Health Affairs, Vol. 29, No. 1.

² Brown Wilson, K. "Historical Evolution of Assisted Living in the United States, 1979 to the Present." The Gerontologist, Vol. 47, Issue Supplement_11, Dec 2007 pp 8-22.

Wisconsin Coalition Collaborating to Improve Quality in Assisted Living

The Wisconsin Coalition for Collaborative Excellence in Assisted Living (WCCEAL) was created in 2009 to improve outcomes in assisted living by bringing together providers, regulators, and researchers. It is an expansive collaboration among:

- The state's assisted living provider associations
- Wisconsin Department of Health Services (DHS)
- Wisconsin ombudsman program
- Center for Health Systems Research and Analysis

WCCEAL incentivizes quality improvement for assisted living by measuring performance and developing support systems.³ This program benefits all stakeholders by improving quality across a variety of domains for more than 400 assisted living communities currently participating. It helps providers achieve and sustain regulatory compliance with a goal of decreased complaints and deficiencies, while enabling the state to target resources to areas that need more intensive oversight. It has received various awards, including the Pioneer Institute's Better Government Competition and the Association of Health Facility Survey Agencies' Promising Practice Award in the category of Quality Improvement in the Regulatory Process.

The model is designed around assisted living communities implementing a quality assurance, quality improvement (QA/QI) program. The assisted living communities must use one of the programs developed by the four state provider associations and approved by DHS. **Between a central data repository and targeted association support, assisted living communities receive robust support to successfully implement QA/QI programs.**

Participating assisted living providers can access a central data repository that includes:

- An annual resident satisfaction survey
- An instrument to collect information about quality improvement structure, processes, and outcomes
- Webpages to monitor data benchmarked against other participating assisted living providers
- Quality improvement tools and resources

The provider associations offer assisted living members with support, such as:

- Quality improvement tools
- Leadership development
- Networking opportunities
- Mentoring
- Educational programs
- Consultation

WCCEAL participants each contribute to support success of the QA/QI programs. When the QA/QI process reveals areas for improvement, the assisted living provider must address the issues. The provider's association gives technical assistance and holds the provider responsible for implementing its QA/QI program. In turn, the Center for Health Systems Research and Analysis supports the associations to identify strategies for their members' quality improvement.

³ Wisconsin Coalition for Collaborative Excellence in Assisted Living. <https://wccceal.chsra.wisc.edu/>

In addition to QA/QI, participating providers must complete a self-attestation of substantial compliance with all requirements. Qualified providers may then be subject to less frequent surveys, contributing to the state's ability to better target its resources.

New Jersey Program Targets State and Provider Resources to Ensure Compliance and Meet Quality Benchmarks

In 2012, New Jersey debuted a model collaboration called “Advanced Standing” between the state and assisted living providers, which was created by the New Jersey Department of Health (DOH) and the Health Care Association of New Jersey Foundation (HCANJF). Providers voluntarily pay to participate in the program, which has a unique emphasis on both achieving compliance and improving quality. To receive Advanced Standing designation, providers must demonstrate to DOH they have met both compliance requirements and quality measure benchmarks. Currently over 40 percent of licensed assisted living communities in New Jersey have opted into the program.

The program began because both the assisted living profession and DOH were concerned that state resource constraints could lead to a reduction in quality care. Advanced Standing enables a focus on quality because it ensures a continual flow of data to analyze quality and compliance trends and timely corrective action. Additionally, state resources are freed up to enable state surveys to focus on non-participating assisted living providers.

Participants must comply with applicable requirements. Assisted living providers attest that they in compliance and consultants conduct an annual review of all participants. In addition, the visits are consultative to identify areas for improvement. Providers must correct issues that are identified, though the consultants do not issue deficiency reports or fines. Rather, this is a collaborative effort to achieve sustained compliance. Successful participation in the program supplants health department inspections, though the state conducts randomized unannounced surveys to validate the consultants' review and follows up on complaints.

Participants must also meet quality benchmarks to earn the Advanced Standing designation. A peer review panel that determines these benchmarks includes five provider members, the New Jersey DOH, and the state Ombudsman for the Institutionalized Elderly. The quality measures include:

1. A formal on-going training program for all employees
2. Resident and family satisfaction
3. Use of advanced care planning to determine individual preferences for end-of-life care
4. Hospital admission and readmission
5. Off-label use of antipsychotics
6. Community action upon feedback provided at Resident Council

Any community that does not meet specified targets receives technical assistance to improve outcomes.

Oregon Champions Quality Measures for Assisted Living

Working closely with the Department of Human Services (DHS), advocates, and long term care leaders, in 2017 the Oregon legislature passed a bill that will advance quality measures for assisted living, residential care, and memory care communities. **Specifically, it establishes a Residential Care Quality Measurement Program and Quality Measurement Council.** The law further requires DHS to make available an annual report to each community. Data compilation, illustration and narratives are used to report quality measures and compliance information and to describe statewide patterns and trends. These annual reports will allow communities and the public to compare performance and other key factors to evaluate quality.

The **Residential Care Quality Measurement Program** will develop a uniform quality metrics reporting system to measure and compare performance of residential care and assisted living communities across the state. Starting in January 2020 for the 2019 calendar year, residential care and assisted living communities must annually report quality metrics to the state.

Key quality measures include:

1. The incidence of falls with injury
2. Staff retention
3. Compliance with staff training requirements
4. The use of antipsychotic medications for nonstandard purposes
5. Quality of life indicator
6. The satisfaction of the resident's experience

DHS will publish a summary of the measures and related analysis for the public, and then develop online training modules to address the top two statewide issues identified by surveys or community reviews during the previous year.

The newly-appointed **Quality Measurement Council** will be a collaboration of multiple disciplines, including direct provider, patient safety, geriatrics, dementia, data in quality reporting, advocacy and regulatory compliance. This Council will direct the implementation process and will establish a uniform system for communities to report the quality metrics.

The quality measure data are subject to protections consistent with patient safety reporting practices. The data from the program will be used as benchmarks to inform an enhanced oversight and supervision program for residential care facilities that are consistently out of compliance with state licensing standards and perform substantially below statewide averages on quality metrics.

Call to Action

In an era of increased transparency and accountability—coupled with shrinking state resources—states, providers and other stakeholders must work together to develop innovative programs that build a provider culture of quality improvement for residents to obtain the best possible care. The states highlighted in this brief are leaders in this area, having created models that support quality improvement and enable states to target resources more effectively. Policymakers can learn from these creative case studies to implement programs that combine an emphasis on both quality and compliance.

These partnerships also suggest opportunities for stakeholders such as the Administration for Community Living to consider grant programs that encourage collaboration among states, providers and researchers. The collaboration could begin by examining the work already accomplished in Wisconsin and New Jersey to explore how to adapt successful program elements for other states. It could also identify new ways to improve outcomes through quality initiatives that dovetail with efforts to ensure compliance.