



# **DRAFT Community-Based Adult Services (CBAS) Quality Assurance and Improvement Strategy**

**XX, 2016**



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**I. Overview**

*This section may include discussion regarding:*

- Waiver requirements for developing quality strategy (Medi-Cal 2020 STC 49)
- Purpose/Background – summary of quality activities and why we selected them
- Stakeholders involved in drafting strategy (CBAS Quality & IPC Revision Workgroups)
- What we want to accomplish with our efforts. What questions we want to answer with our data. Who needs or will use this information

**II. Focus Areas**

*This section may include discussion regarding:*

- CBAS priorities/domains
  - Waiver requirements for quality and monitoring:
    - Provider adherence to licensure and certification requirements
    - Quality and implementation of CBAS participants' person-centered IPCs
  - Existing activities to meet state and federal requirements
  - Additional activities to meet state and federal requirements
- Domains:
  - Oversight and Compliance*
  - Reporting*
  - Training*
  - Staffing*
  - Person-Centered Care*
  - Participant/Caregiver Satisfaction*
  - Best Practices*
- Relationship of CBAS priorities/domains to other quality activities



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- CMS (MLTSS regulations related to quality, Other?)
- National Committee for Quality Assurance (NCQA),
- National Quality Forum (NQF)
- Agency for Healthcare Research and Quality (AHRQ)
- National Adult Day Services Association (NADSA)
- DHCS Quality Strategy
- Managed Care Plan Quality Activities and Reporting Requirements (Health Risk Assessment)
- California Association for Adult Day Services (CAADS) Quality Activities

**III. New Goals, Objectives, and Strategies for Assuring and Improving Quality**

*This section may include narrative summary and tables reflecting:*

- Goals and objectives
- Activities:
  - Oversight/Monitoring Activities
  - Promotion of Evidenced-Based/Best Practices
  - Training
  - Transparency
- Role of Quality Advisory Committee

**IV. Activities, Measures, and Timelines**

*This section may include a table such as the following:*

**CBAS Quality Strategy**  
**Draft Quality Assurance and Improvement Activities and Measures – April 2016**

Domain	Activity	Measure(s)	Timeline*	Comments
<b>Oversight and Compliance</b>	Post survey reports and summary data post-survey	Certification Survey Results	MT – 2-4 years	Measure is one of many to be added to CDA website to increase transparency.
	Formalize communications and collaboration with MCPs around identified center problems	Telephone case reviews and joint onsite	ST – 1-2 years	
	Provide center-based orientation for new CDA staff	Protocol developed CBAS provider partners identified	ST	Partnering with CBAS providers to assist with staff development.
	Reform ADHC statutes and regulations to conform with current CBAS requirements	Revised laws and regulations enacted	LT – 4+ years	
	Revise and implement CBAS IPC	IPC and Medi-Cal Manual revised  Training provided to CBAS providers and MCPs	ST	IPC Revision Workgroup activities conclude June 2016. Projected implementation date: January 1, 2017

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Domain	Activity	Measure(s)	Timeline*	Comments
	Develop uniform history and physical and update forms per WIC 14526.1		ST	Work on this began as part of SB 1755 implementation eight years ago. H&P drafts can be revisited, modified, and implemented statewide.
	Develop standard Participation Agreement Form that meets regulatory and 1115 Waiver requirements for person-centered planning		ST	§54217, T-22 CCR, and Medi-Cal 2020, STC 45(c)
	Modify Participant Characteristics Report (PCR)(CDA CBAS 293) to incorporate new IPC fields		MT	
	Increase transparency by posting more center demographic and performance data on CDA website		MT	Examples: center hours, populations served, languages spoken, numerous statistics identified in CBAS Quality Strategy
<b>Reporting</b>	Track and post center adherence to CDA reporting requirements	Percentage of reports submitted on time annually +	ST	Examples of CDA reports: MSSR and PCR

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**Draft Quality Assurance and Improvement Activities and Measures – April 2016**

<b>Domain</b>	<b>Activity</b>	<b>Measure(s)</b>	<b>Timeline*</b>	<b>Comments</b>
<b>Training</b>	Validate all required training of center staff	Timely completion of minimum training requirements for all center staff as specified in law, regulation, and waiver	MT	Centers report and CDA validates.
	Develop and adopt standardized curricula for specialized training of center staff for voluntary completion	Number of center staff who have completed	LT	Examples: administrator/program director leadership training; person-centered care; cultural and specialty population competency  For posting on CDA website
<b>Staffing</b>	Track and post centers' professional therapy services provided	Professional therapy staff hours provided as a percentage of required monthly hours	MT	
<b>Person-Centered Care</b>	Establish core person-centered care practices and identify centers that implement	Center implements core person-centered care practices	MT	Centers report and CDA validates
<b>Participant / Caregiver Satisfaction</b>	Develop/adopt standard CBAS participant/caregiver satisfaction survey	Number of surveys conducted annually  Process for quality improvement based on feedback?	MT	Center reports and CDA validates

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**Draft Quality Assurance and Improvement Activities and Measures – April 2016**

Domain	Activity	Measure(s)	Timeline*	Comments
<b>Best Practices</b>	Establish sanctioned screening tools for CBAS disciplines and populations served for centers to voluntarily adopt	Number of screening instruments used by center	MT	Examples of conditions for screening: cognitive impairment, depression, fall risk, suicide, anxiety, alcohol/substance use, etc.  Centers report and CDA validates.
	Develop user-friendly program requirement checklists/job aids for centers	Center uses job aids	MT	Something that translates/distills laws and regulations into easily accessible format for centers to use in training new staff and assuring compliance with program requirements.  Centers report and CDA validates.
	Identify centers that inform and assist participants with completing Advanced Directives		Not scheduled at this time	Center reports and CDA validates
<b>Participant Outcomes</b>	Identify centers with quality improvement systems in place		Not scheduled at this time	Beyond UR regs. CAADS quality team?  Centers report and CDA validates
	Placeholder for participant outcome measures related to HEDIS data reporting, NQF, and/or CAADS developed measures		Not scheduled at this time	Examples: Falls, ED visits, BMI, Hospital Admission