UNIVERSITY OF ILLINOIS CHICAGO

Division of Specialized Care for Children

DSCC Quality Activity Guide

DSCC Quality Improvement Culture (from the DSCC Quality Improvement Policy): Promoting a culture of quality within the University of Illinois Chicago's Division of Specialized Care for Children (DSCC) is a top priority and highly valued. This quality culture includes an organization-wide philosophy of continuous quality improvement and utilizing evidence-informed practices in our work and service delivery at all levels. DSCC will objectively, systematically and continuously evaluate, monitor and improve the quality of internal processes, activities, programs and care coordination services provided to families and participants.

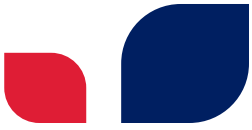
DSCC has developed the following Quality Improvement Culture to facilitate an environment in which quality activities and initiatives can be successfully achieved:

- Create an atmosphere of learning, understanding and accountability.
- Identify, celebrate and build upon our strengths.
- Value the creative and analytic input of all staff members.
- Use research to guide our practices serving children with special healthcare needs.
- Empower those who know best to lead quality improvement activities.
- Be transparent and approachable.
- Utilize data to drive decisions.
- Meet teams where they are.
- Value the protected time to focus, analyze and improve our work.
- Share ideas across the organization for improvement.
- Establish goals that challenge us to grow.
- Believe that there is always room for improvement.
- Recognize each step towards achievement.

DSCC will continue to review and assess our quality improvement initiatives in order to continually learn and grow as an organization. This assessment will measure our progress toward established goals and collect feedback from internal and external stakeholders.

Quality Improvement Activities

DSCC Quality Activity	Description
Internal Record Reviews	Record Review is a component of a solid, continuous quality improvement plan. During the record review, internal reviewers examine the quality and appropriateness of care coordination services provided to participants by reviewing written documentation and the quality of services against DSCC policy and procedures. On a triannual or quarterly basis, a random sample of participant records will be reviewed utilizing a standard Care Coordination Review tool. The review tool is also accompanied by a Care Coordination Review guide, defining each item within the tool. The Quality Improvement Team reviews the records and provides feedback to the care coordination teams through a post-record review discussion.
Quality Improvement Champions	A Quality Champion is a person who enjoys using information to celebrate success and help inspire change through focusing on solutions. The Quality Champion is a team member (not a manager) who would like to have an opportunity to utilize their leadership skills in a new way. Each regional office has a Quality Champion (or two) who will take the lead in facilitating the Quality Improvement Huddles each quarter. They will help the team understand the quality measures, celebrate the team's successes and support the team in developing an improvement plan.
Quality Improvement Huddles	DSCC values quality improvement and making informed decisions based upon data. The Quality Improvement (QI) Huddles will be one way to engage staff in the process of using information to analyze data and make plans to reach our performance targets. Each regional office will participate in a Quality Improvement Huddle quarterly to review the identified quality measures and develop action plans together.
Improvement Plans	Improvement plans, or corrective action plans, are developed for both the record review process and Quality Improvement Huddles. For internal record reviews, corrective action plans are developed for any record in which there are deficiencies noted. The corrective action plan is due to the quality improvement team within 30 or 45 days of the review. The quality improvement team then reviews a sample of the corrective action plans to ensure the action has been completed. During Quality Improvement Huddles, the Quality Improvement Plan is developed with the team for specific measures they wish to improve upon. We encourage the team to utilize the Plan Do Study Act methodology as they test out their creative ideas for improvement.



DSCC Quality Activity	Description
Incident Reports	An "incident" is any occurrence or alleged occurrence that affects or has the potential to affect the safety and well-being of the participant. Incidents include care provided by caregivers and professional entities. Incident reports are a mechanism by which Care Coordinators report any concerns that affect the safety and well-being of the participant. DSCC has procedures that outline the different types of incidents that staff must report and record. The purpose of incident reporting is to have an internal mechanism that: 1. Promptly communicates situations that present risks to participants and advises of follow-up activities 2. Informs others as to the actions taken by DSCC employees or other entities to mitigate the risk associated with the incident 3. Tracks incidents for trend analysis and to determine whether programmatic or other changes are needed to avoid future occurrences
Family Surveys	It is important to include the family voice in quality improvement initiatives. DSCC has developed family surveys for initial enrollment, annual, transition, and when the family dis-enrolls from the program. We are currently implementing these surveys with families. In the future, we will implement a home visit survey to a randomly selected sample of families who had a home visit the previous month.
Education/ Training for staff	Staff education is essential for continually improving services to families. Staff training begins through a comprehensive orientation and onboarding experience. On an annual basis, staff members are provided with the opportunity for 20 hours of care coordination training. Care coordination training includes, but is not limited to, the following topics: Comprehensive Assessment, Person-Centered Planning, Motivational Interviewing, Social Determinants of Health, Critical Incident Reporting and Cultural Competency. DSCC is able to provide staff with continuing education units (CEUs) relevant to training.
Reporting, Analysis and Improvement	Reporting and analysis occurs on a regular basis for the quality improvement activities reported above, e.g., internal record reviews, incident reports, quality measures, and family surveys. DSCC staff use the quality reports to make improvements through Quality Improvement Huddles, regional teams or the Connect Care Compliance and Quality Committee.
External Audits/ Reviews/ Investigations	DSCC will participate in all external audits/reviews/investigations with contractual partners and regulatory authorities. Information will be shared as a part of the review/audit/investigation, such as policies, procedures, processes, etc. Action plans will be developed by DSCC based upon the results of the external audits/ reviews/investigations. DSCC participates in an annual audit with each of the Managed Care Organizations, along with monthly record audits as needed.

DSCC Quality Activity	Description
Scorecard	In accordance with the organization's strategic plan, DSCC has developed a Scorecard, which will provide staff with data regarding performance on established process measures, outcome goals, and targets. The measures captured are grouped within the following goal areas: Quality Care Coordination, It Takes a Team, and Partner/Help/Connect. The Scorecard will be a transparent process and one that will depend on staff involvement for improvement. The goals around sharing data will be to celebrate our strengths, share what is working and create plans to improve where necessary. These measures will be presented for DSCC overall, by care coordination program (Core, Connect Care and Home Care) and then by region/office. Performance data is available only to the regional office level for each program. Access to performance measures at a more granular level is restricted. This approach supports a teamwork philosophy regarding our performance, successes, and areas of needed improvement. The Scorecard will be utilized by Quality Champions, care coordination teams, management, and administration to review regional/office performance and develop improvement plans where necessary. **Program Success Metrics** While all identified measures are important in helping us understand our work with families, DSCC has identified the following program success metrics for care Coordination: • Improved quality of life • Creation of a comprehensive signed person-centered plan • Progress and/or achievement of goals on person-centered plan • Overall satisfaction with DSCC care coordination services. DSCC also measures the following participation rates in our care coordination programs: • Initial Participation Rate • Ongoing Participation Rate
Grievances	A grievance is an expression of dissatisfaction with any aspect of the operations, activities, or behavior of DSCC or its employees that is not resolved to the individual's satisfaction or that the individual wants escalated to administration. Grievances do not include dissatisfaction regarding denied, reduced, or terminated services or supports; appeals processes exist for these purposes. Grievances may be expressed verbally, electronically through the DSCC website or in writing. DSCC will collect information related to grievances to identify any trends over time for quality.