LEANOhio

Department of Developmental Disabilities
Compliance Review Process
April 14 – 18, 2014
Team Members

- Kelly Miller
- Lisa Burt
- Vanessa Prather
- Kristi Williams
- Ann Weisent
- Heidi Davidson
- Theresa Ryan
- Beth Chambers
- Peggy Strong
- Melissa Hacker
- Wayne Ellyson
- Amy Thomas
- Mary Bartlett
- John Wodicka
- Connie Wodicka
- Michael Hill
- Vivian Burks
- Hannah Miller
- Erica Morrison
- Tracy Bryniarski
Stakeholders

- Ohio Individuals and Families
- Providers
- County Boards
- Other Divisions in the Department of Developmental Disabilities
- Federal Government
- The Ohio Department of Medicaid
Background

– Doing things because we have always done them
– Review Set-up Process
– Better utilization of software
– Development of quality indicators to be used in all settings
– Remove redundancy and inefficiency

Work Smarter, Not Harder
Scope of Event

First Step in the Process:
Identifying providers for review schedule

Final Step in the Process:
Verification of implementation of the plan of correction or Suspension and Revocation (or if successful completion of the review with no citations, the approval letter)
Out of Scope

- No additional staff
- No additional money
- No IT solutions until the process is improved
- No changes to laws or labor contracts
- No one loses their job because of the Kaizen event, although duties may be modified
To Break for the Better

- Customer focused
- Work level team
- Tight focus on time (one week)
- Quick and simple, action first
- Necessary resources available
- Immediate results
  (new process functioning by end of week)
Kaizen Event Approach

Day 1
- Introductions
- Scope
- Current State

Day 2
- Waste
- Training
- Brainstorming
- Analysis

Day 3
- Clean Sheet Redesigns
- Future State

Day 4
- Commitment
- Implementation Planning

Day 5
- Results
- CELEBRATION
- Report Out
Baseline Data

### Incoming Items (per Month)

<table>
<thead>
<tr>
<th>Item</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARF Reports</td>
<td>10</td>
</tr>
<tr>
<td>Invoices for Payment from Hotels</td>
<td>16</td>
</tr>
<tr>
<td>Complaints</td>
<td>20</td>
</tr>
<tr>
<td>Rule Waivers</td>
<td>16</td>
</tr>
<tr>
<td>Development Requests</td>
<td>7.25</td>
</tr>
<tr>
<td>Licensure Inspections</td>
<td>110</td>
</tr>
</tbody>
</table>

### Customers

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>TDD Providers</td>
<td>2,900</td>
</tr>
<tr>
<td>Licensed Facilities</td>
<td>1,177</td>
</tr>
<tr>
<td>Actively Billing Providers</td>
<td>Approx. 5,000</td>
</tr>
</tbody>
</table>
High Level Process - SIPOC

**Suppliers**
- ITS
- Support staff providers
- County boards employees at DoDD
- Legal
- Medicaid policy
- Field
- Fiscal
- Legislators
- Individuals
- IT
- Feds

**Inputs**
- Accurate data reports from IT
- Cagnos
- MBS
- PCW/LOW
- UDS
- MITS
- IDS
- ITS
- People!
- Forms/It's rules/flow
- Communication

**Process**
- Pre-review set up
- Ongoing review report
- Plan, control

**Outputs**
- Compliance reports improved providers
- Knowledge
- Transparency
- Information
- Trends & patterns
- Training needs
- Certificates
- Verifying use of funds
- Quality of care
- Increased
- Health
- Providers

**Customers**
- Individuals
- County boards
- Providers
- Families
- Employees at DoDD
- Medicaid
- Feds
- The field (professional)
- Trade associations
- Community
- Stakeholders

Event Goals

1. Develop consistent metrics in review process and reduce non-value added steps by 50%.
2. Develop communication resource to discuss quality and sub-par care.
3. Develop performance metrics of staff and utilize training.
Current State
Current State Process Map

- Too Many Decisions
- Too Many Handoffs
- Too Many Loop Backs
- Lack of Standardization
- TIMUWOOD
Standardization
Brainstorm – 139 Ideas!
Team Analyzed and Evaluated All of the Ideas

- More information on the website for Providers
- Error proof forms
- Develop training webinar for providers
- Standardized process
- No more spreadsheets
Clean Sheet Redesign

Team One

Team Two

Team Three
Future State
Future State Improvements

• Remove multiple handoffs
• 777 process-through out the process and reduced time
• All review processes combined into one process
• License and awards moved to the end of the process (after POCV)
• Initial contact with reviewers
• Utilizing a schedule team
• One and Three year model
## Scorecard

<table>
<thead>
<tr>
<th>Measure</th>
<th>Current Level</th>
<th>NEW</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Process Steps*</td>
<td>394</td>
<td>81</td>
<td>79%</td>
</tr>
<tr>
<td>Decision Points</td>
<td>50</td>
<td>21</td>
<td>58%</td>
</tr>
<tr>
<td>Handoffs</td>
<td>18</td>
<td>12</td>
<td>33%</td>
</tr>
<tr>
<td>Loopbacks</td>
<td>4</td>
<td>2</td>
<td>50%</td>
</tr>
<tr>
<td>Process Lead Time</td>
<td>219 Days</td>
<td>142 Days</td>
<td>77 Days</td>
</tr>
<tr>
<td>*Maximum Time</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Accreditation Review and Suspension and Revocation Process Only*
Event Savings

**Current Cost Savings**
- **Customers**
  - $100 current license fee
  - Less back & forth
  - Current: 17 Provider "Touches"
  - New: 9 Provider "Touches"

**Current Time**
- Desk reviews save time, gas, travel

**Future**
- No license fee $100
- Desk review save time, gas, travel

**Agency**
- Review Prep (8): Avg. 32 hrs/mo
- New process (8): 12 hrs/mo savings
- Current report/ROC/ROCv: 40
- New report/ROC/ROCv: 20
- 20 hrs/mo savings

**Future**
- Save 42 days support staff (travel-sched)
- Desk reviews save time, gas, travel
- Group reviews - mean time vehicles, schedule

**Agency Days**
- Current: 219 Max Review w/ no appeals/delays
- Future: 142 Max Review w/ no appeals/delays

**Future Plans w/ Savings**
- More reviews & providers
- More training 4 providers
- More training & staff
- More DESR team training
- More special reviews etc.
Results

• Increased utilization of technology
• More effective utilization of staff
• Review staff spends more time on the actual reviews
• Focus on influencing system changes
• Empowers internal and external customers
• Increased job satisfaction
Improvement Summary

Current Issues

- Creation of “automagical” systems
- Standardized review process
- Quality enhancement and expansion

How We Improved

- New software will be utilized to complete review prep work (schedules, demographics, automatic emails), data management, and the plan of correction process.
- All review types will follow the same process. Staff and customers will use standardized forms and have access to new training (webinars, manuals, and tool kit).
- The process will allow for enhanced staff competencies, group reviews focusing on outcomes for individuals, and prioritization on areas of focus.
Implementation Plans

- Information Technology
- Communication
- Training
- Policies and Procedures
- Forms and Process Documents
- Suspension and Revocation Process Changes
Information Technology Plan

Automagically Helping Improve the Process!

Reviewer Tool
- Web access on mobile device
- Dynamic based on review type
- Easily add/remove questions
- Accessibility
- Quick

WHO: Lisa, Kristi
WHEN: April 21

E-mail Notification of 90-day, etc.
- Build it in CRM (capable)
- Verify Security concerns with functionality in CRM
- No additional software cost
- Business Requirements
  - Notifications (timeframes)
  - Content (specific to notification required, eg. notifications for review)

WHO: Wayne
WHEN: May 19, 2014

Quarterly Report
- Requirements (Business)
  - Provider due in specified quarter...
  - etc.
- Requirements (IT)
  - Validation process
  - Formats desired
  - Self Service Report

Test ready - no less than 30 days
Production - within 30 days of successful test in Prod.

WHO: Melissa
WHEN: April 28

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Communication Plan

What

- Kaizen Summit - roll out - internal Ops team
- FAQs on website for providers
- Utilizing technology i.e. teleconference/google talk for internal meetings are off site, etc.

Who

- John W. & Lisa B.
- Michael JH & Heidi Davidson
- Lisa B & Mary Jo
- Vanessa F

Who

- Monday 04.21.14
- by 05.01.14
- 45 day

Who

- Theresa K. & Lisa B w/ a group of vendors
- every 3 in person, Kelly Lisa

Who

- John W. & Lisa

Who

- Heidi D.

Who

- Vanessa

Who

- Beth & Kristi

Why

- get feedback from field on our friendships
- 30 days w/ minimal info.

- 45 days
- 90-120 days

- 90-120 days

Training Plan

- What
  - Guidance to review tools, maintain, update, & communicate - get input @ June all-staff
  - Provide training support to providers for system usage: updating demographics - basically updating
    ECMI
  - Consultant of certification department (Angel)
  - Develop webinar for all providers & CB reviewers - see communication
  - Increase training/on-going tech assistance for front line staff to empower decision making, competency
    based training
  - Cross-training support functions

- Who
  - Lisa & Kristi
  - Vanessa & Angel
  - Heidi
  - John & Connie

- When
  - July 01, 2014
  - Jan July 2014
  - July 2014
Policies and Procedures Plan

What
- develop scheduling reports/criteria
- continuous improvement
- training on use of the data, workshops for everyone.
- develop scheduling point of a support staff & consumer gp
  - evaluation @end
  - outcome criteria for expectations
- several evaluations: does it take away from restraining or is it can stays a support function.
- develop and provider gp, review process
  - 2-day process: overview, updates, reference, etc.
  - look at SSA info and have SSA be part of review
- 5-6 June all-staff work on individual interviews
- on-site revitalization @ MCC, agencies, etc.
- new-system initiatives
- person-centered planning
- changing, flexible reviews
- positive feedback
- advocacy
- what’s working/not working
- procedures, attachment
- how to make what needs to be included
- efforts to finish
- post new future process
- competency-based training in core areas for meaningful understanding
- state requirements
- can changes occur as the future plan
- defining details among future state process
- support staff
- support for specific task in current state

Who
- Lisa & Connie
- Lisa & Mark
- Kristi
- Viren
- Beth & Kelly
- Ann & Beth
- Kelly, Ann & Scott & Amy T.

When
- 04.21.14
- 06.01.14
- 06.21.14
- 8 June 2014
- 08.21.14
- February 2014
- August 2014
- June 2014
- October 2014
- January 2015
- June 2014
- July 2014
## Forms & Process Document Plan

<table>
<thead>
<tr>
<th>Action</th>
<th>Who</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delete duplicate/unnecessary forms. (Some will happen after new FOC application)</td>
<td>Kristi/Heidi</td>
<td>June 1, 2014</td>
</tr>
<tr>
<td>Standardize format of forms</td>
<td>Mary/Peggy/Enia</td>
<td>July 4, 2014</td>
</tr>
<tr>
<td>Look at current forms for revisions that can be made. (New FOC application)</td>
<td>Kristi/Heidi</td>
<td>June 1, 2014</td>
</tr>
<tr>
<td>Develop new forms (a form bank) in order to obtain questionnaires that currently provide online, web-based filing, -SSA &amp; self-provider &amp;</td>
<td>Vanessa</td>
<td>July 1, 2014</td>
</tr>
<tr>
<td>Change system to utilize auto-fill in for demographics and review specific info needed.</td>
<td>Lisa</td>
<td>Sept 1, 2014</td>
</tr>
<tr>
<td>Fully automate 30-day notice in the web-based system as opposed to letter/mail.</td>
<td>Lisa</td>
<td>Sept 1, 2014</td>
</tr>
<tr>
<td>Review all forms for content and make changes to help answer (FAQ)</td>
<td>Mrs.</td>
<td>June 1, 2014</td>
</tr>
<tr>
<td>Revise Required Fax list</td>
<td>Kristi/Kristi</td>
<td>June 1, 2014</td>
</tr>
</tbody>
</table>
Suspension and Revocation Process Changes

WHAT GOES TO REV.
- Consistency
- Severity
- Repeat (same/similar citations)
- Guidelines for reviewers for referral (con process change)
  → referral packet (what/when)

POC App (could flag)
  → NHQ App.
Metrics

1. Poised
2. OK
3. Good

*DRILL DOWN DATA

3. Incomplete
4. Completed

4. Uplifted Trend
5. Trend Down
What Begins Monday?

- Communication to entire team on process changes
- Developing criteria for scheduling and travel teams
- Scheduling IT process changes
- Development of provider training
- Updating current forms and review tools
Special Thanks To...

**Senior Leadership:** John Martin, Director and Kate Haller, Deputy Director

**Sponsor:** Kelly Miller, Assistant Deputy Director

**Team Leader:** Lisa Burt, IT Liaison Manager

**Subject Matter Experts:** Angel Morgan (Provider Certification), Jason Lawless (IT), Connie McLaughlin (MUI), Kathy Phillips (Provider), Tracey Crawford (Franklin County Board), Karin Crabbe (Franklin County Board), Marilyn Weber (Ohio Healthcare Association/Consultant), and Brad Singer (Legal)

Thanks to the entire team for their time, contributions and continued support to this Kaizen Event.