The Goal Loop

From Assessment to Plan to Outcomes (and back again)

Goal Setting

It's important because it:

- Articulates a long-term vision.
- Provides short-term motivation in the form of achievable objectives.
- Focuses on acquisition of skills, support or knowledge.
- Helps to organize resources and set priorities.

The Goal Loop

Assessment:
Title XIX Level of Care
Goal Survey
Assessments and Evaluations
Person Centered Plan

Implementation:
Individual Support Plan
Service Agreements
Job Descriptions

Outcomes:
Invoices
Provider Progress Notes
Quarterly and annual reviews
Case notes

Quality Assurance:
Internal QA
External QA

Customer
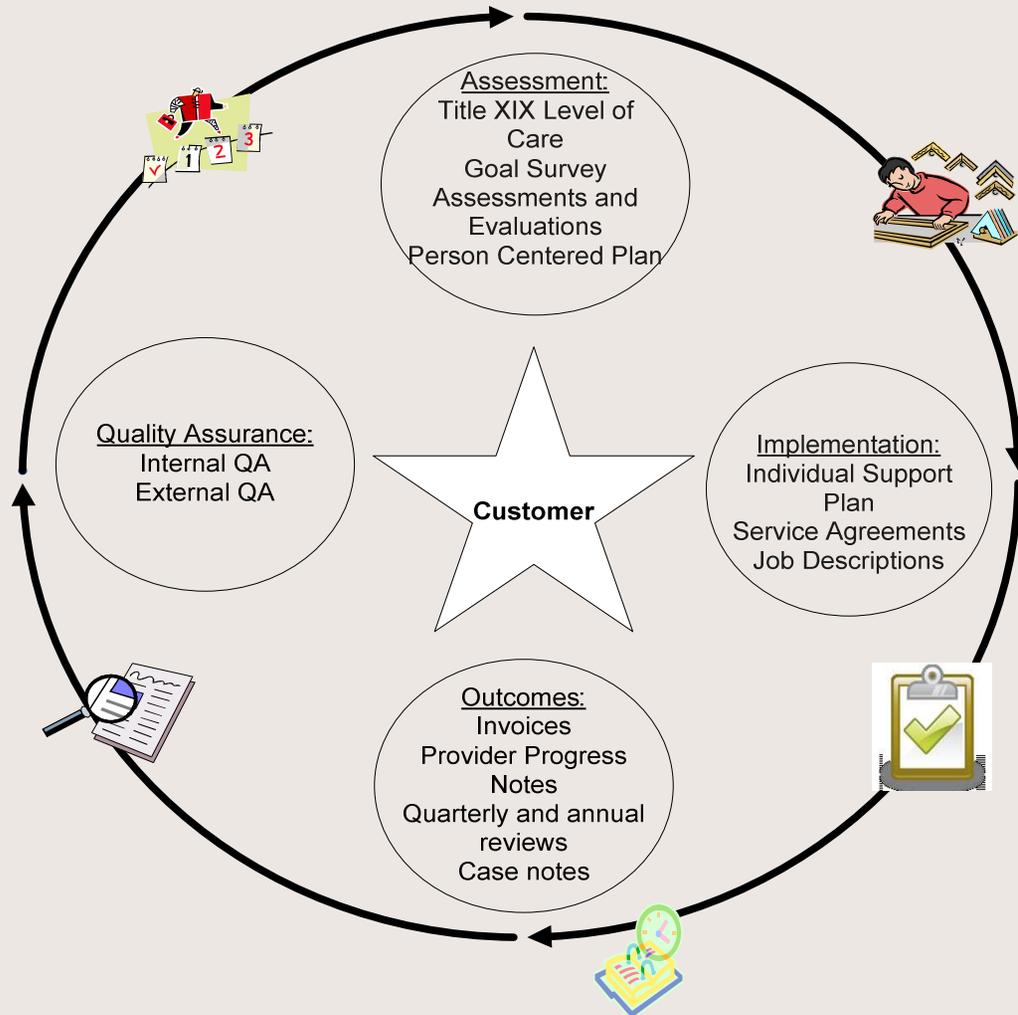
Functions of the Loop

- The Assessment identifies disability related support needs.

- The Implementation (the Plan and Service Agreements) defines strategies to meet those needs in ways that progress can be measured.

- Actual outcomes get compared to the established goals as the plan is implemented. The plan gets revised as needed.

The Assessment:
(The first step in articulating a goal)

- Should give a description/snapshot of where a customer is "right now". If you have an idea of where your customer is, you can help plan for where she wants to go.

- Looks at the disability's effect on each area of an individual's life.

- Should be consistent. The PA is not the only one doing assessments, but all assessments get filtered through the PA. Various assessments should match, if they do not, the PA finds out why and explains.

Assessment Tools

- Formal Person Centered Plan.
- Miscellaneous assessments and evaluations.
- Customer Goal survey.

Person Centered Plan

- A very important tool for getting the customer's vision, often in their own words.
- Especially useful for establishing the long term goals.
- Should be the primary guide to what ends up on the plan.
- Can function as a way to set priorities within the plan.
- There are many types (ELP, MAPS, etc.).

Person Centered Planning

- A quick note about Person Centered Planning. All Brokerage customers should be given the option of having a formal Person Centered Plan. Some will choose not to, but the work a PA does should still use Person Centered Planning as defined in OAR 411-340-0020 (51).
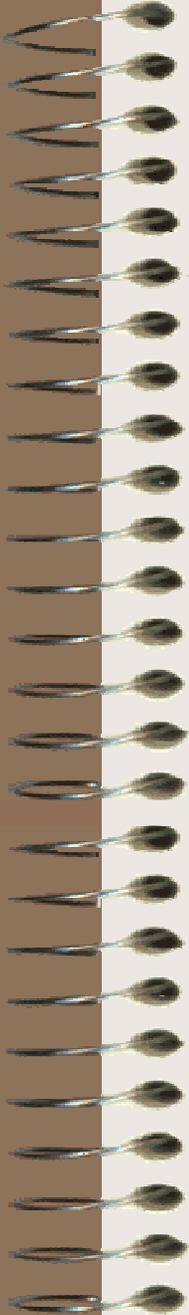
Other Assessments and Evaluations

- Base Plus (Basic Supplement Criteria Inventory or BSCI)

- Medical/Psychiatric Evaluations

- School Records

- Provider Reports

Goal Survey

- Examine health and safety in all areas
- Use information from multiple sources
- Identify met and unmet support needs
  - "Independent" is not the same as all needs being met. When all needs are being met, necessary supports (natural or paid) are in place. When "independent," no supports are necessary.
- Keep it updated
  - Annually before plan renewal
  - As major events happen, especially if tied to a plan revision

Goal Survey

- Get specific
  - Don't leave it at "…needs support in the community." Take it further. What kind of support, what does the support look like? What risk would be faced with out support?
- A good Goal Survey will give the reader a good picture of who the individual is, what the disability related needs are, and how they are being addressed.
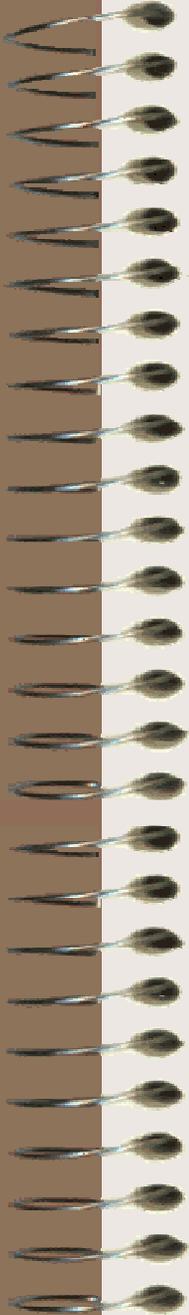
From Assessment to Implementation

- Before the assessment is over you should:
  - Know which support needs are met and how they are met.
  - Which support needs are not currently met.
  - Understand what is important to your customer.

From Assessment to Implementation

- Unmet support needs have to be addressed in the plan somehow
  - Support needs that are met without Support Funds are natural supports and cannot be supplanted
  - Unmet support needs must be addressed in a plan goal or otherwise explained
- No unmet support needs could result in a $0 plan. A $0 plan may simply mean all needs are being met with natural supports. Access to a PA is still a Medicaid service and very important.

From Assessment to Implementation

- Various assessments can help distinguish what will be an on-going need vs. an area for skill development.

- Needs identified in the BSCI that qualify a customer for additional funding must be addressed in the plan.
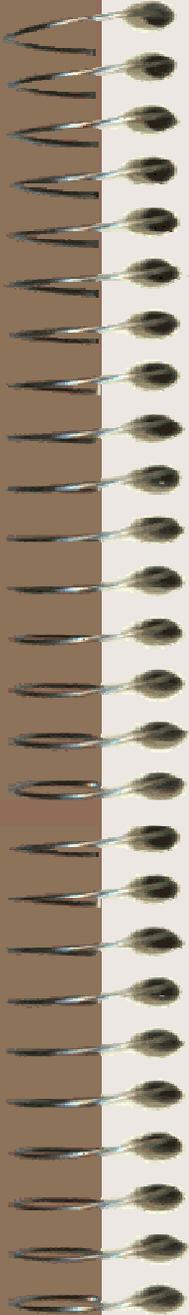
Implementation:
The plan for accomplishing a goal

- Individual Support Plan

- Service Agreements

- Job Descriptions

The Individual Support Plan

- The plan plus the Goal Survey is the ISP.
- The Goal Survey should be able to explain the elements of the plan; it ties the plan elements and expenses back to the disability. Tying a goal to a disability is crucial to establish that the support is a social benefit.

The ISP Has Many Audiences

- The Customer
- The Customer's family
- The Support Specialist (the CDDP/County)
- The State
- Medicaid
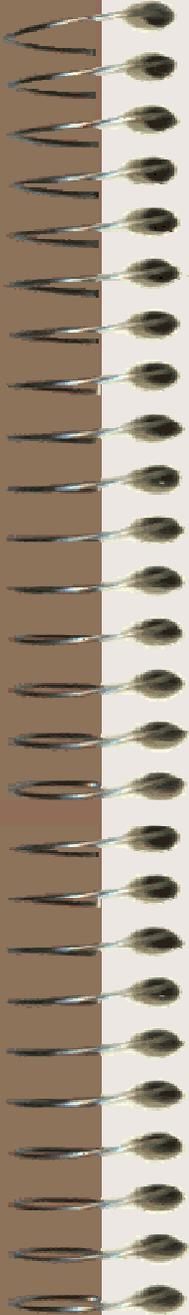
The Customer and Family Perspective

- Plans should be written using common terms, not clinical or technical terms.

- How will the goal make an individual's life better (or at least maintain what the customer likes about his life).

- This perspective accounts for what is important to the individual.

"The System" perspective

Plans have to:

- Follow the OARs
- Adhere to the expenditure and rate guidelines
- Address how health and safety is assured
- Be Medicaid compliant

It can take a lot of creativity to state an allowable expense in terms that are acceptable and understandable to customers.

Use of Medicaid Funding

– Medicaid compliance: customers get waiver funding because they would otherwise have to get services in an institution; plans are theoretically keeping the individual out of the institution. Goals that cannot be expressed in those terms may not be allowable.

– Sometimes a PA has to be "the bad guy"… not all customer goals are appropriate for funding with Support dollars.

Good Goals...

- Are meaningful and relevant
  - Related to disability
    - The only automatic service to all customers is access to a PA
  - Short term (objectives) vs. long-term (goals)… consider what can be done over the course of the current plan and what will take longer.
- Do not stop at general quality of life statements, such as "meaningful participation in community activities or social relationships." It is very difficult to measure success or to define services in those cases.

Good Goals...

- May address one or more of the following questions:
  - How will the customer's abilities change as a result of instruction?
  - When, where, how often and/or with whom will the customer do the activity?
  - What kind of help or support will the customer need?
  - What risks are lessened by getting the support?

Good Goals…

- Are measurable
  - think about how you will evaluate it's "success" in terms of the following criteria:
    - » Integration
    - » Independence
    - » Productivity

- Are easily translated to goals providers can act and report on.

Service Agreements

- Goals from the plan can be restated on the contract.

- Focus mostly on services that a provider is expected to deliver.

- Makes a provider accountable for services.

Service Agreements

- Activities are the context in which a service is provided, not the service itself.

- Be specific with reporting requirements and give the provider something to comment on.

Job Descriptions

- Restate the goals from the plan.
- Set clear expectations for services to be delivered.
- Give the employer standards to evaluate performance against.

Outcomes
Measuring the progress toward a goal

Outcomes may be described in the following places:

- Invoices and Timesheets
- Provider Progress Notes
- Quarterly and Annual Reviews
- PA Case notes

Goals and Outcomes

- A goal is what we **hope** will occur

- An outcome is what **actually** occurs

Invoices

- Should include:
  - Customer name
  - Provider Name and Address
  - Billing Period
  - Rate
  - Total cost for billing period

Invoices, continued

- Identifies Service Provided:
  - Title of service
  - Dates and location of service
  - Staff providing service
  - If used as progress report, must have outcome information

Customer Sign off

- Invoices must be authorized prior to payment by brokerage:
  - Sign off by the customer or their legal representative
  - PA call to verify services were provided

Provider Reports

- Identify the goal as described in the ISP and service agreement.

- Can be understood by all participants and 3rd parties not involved.

- Report on outcomes based on criteria established in service agreement.

- Report on challenges or issues identified in billing period.
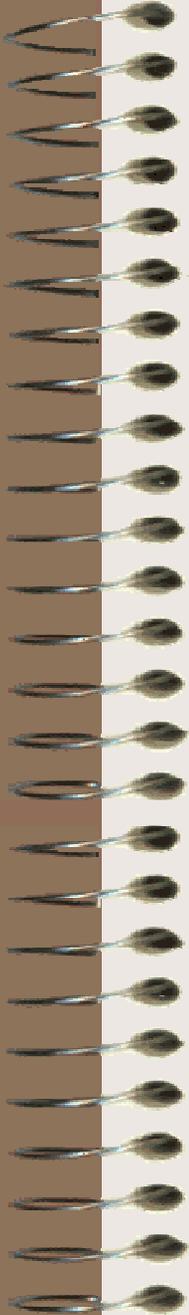
Provider Reports

- Report what services the Provider performed to advance the stated goal.
- Report how the service helped the Customer progress towards the goal .
- Identify barriers to progress towards the goal.
- Document other pertinent information as necessary.

Timesheets

- Identify service type, customer and employee name, billing period.
- Must be signed by customer or legal rep and employee.
- May include notes that report on services provided
  - Services provided must be those described in the employee job description

Quarterly Reviews

- Report on funds used to meet goals
- Identifies remaining funds
- Should prompt:
  - Assessment of whether remaining funds will meet needs for remainder of plan year
  - Communication with customer if original plan to utilize funds has changed
  - Plan revision if necessary
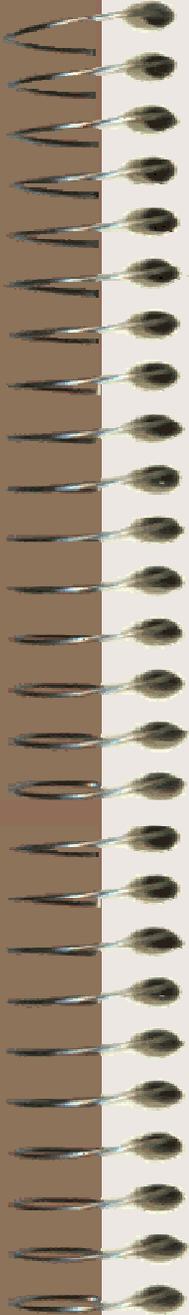
Annual Reviews

- Annually *and* as major purchases or activities are completed.
- Evaluate progress towards outcomes.
- Record Final costs by plan year.
- Record effectiveness based on PA observation.
- Record Customer satisfaction with supports.

Closing the Goal loop

- Annual Review should prompt:
  - Review of needs and available resources
  - Plan revision if goals are met
  - Plan revision if goals are not being met due to
    - Provider skill level
    - Goal not measurable or outcome based
    - Customer no longer interested in goal
    - Goal can be met without using Support Services funds

PA Case Notes

- Record PA actions and discussions with, or on behalf of, customer.
- Identify activity and provider issues:
  - Issues brought forth by providers
  - Issues brought forth by customer and family
- Note how issues were resolved
  - May be at a later date

Quality Assurance

- Internal QA

- External QA

Internal QA

- ISPs

- Customer Goal surveys

- Quarterly and Annual reviews

Internal QA

- Job descriptions and Service agreements
- Invoices
- Provider Progress notes
- PA Case notes

Internal QA

- Use your brokerage specific internal QA process
  - Peer review
  - Lead worker review
  - Director review

External QA

- Customer and family
- CDDP Plan authorization
- Providers
- SPD
  - Licensing
  - Field Reviews
  - Workgroups and meetings
- CMS
  - Audits

Customer and Family

- Informal feedback
- Formal feedback
- Word of mouth
- Complaints and grievances

SPD Field Reviews

- Annually
- A "look back"
- Best for identifying systemic issues
- Brokerages have done great work!

Closing the QA Loop

- Learn from QA activities
  - Make system changes when appropriate
  - Repeat the successes
  - Delete what didn't work
- Share what's been learned
  - Internally
  - Externally
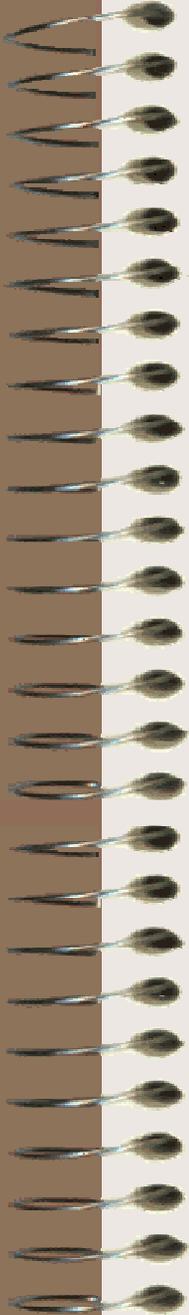
By Sharing What Has Been Learned We Will:

- Make our jobs easier.
- Create a more effective and responsive service system.
- Make people's lives better!