

Assisted Living Report Card Advisory Group Meeting

Date: 2/12/2024

Location: Zoom virtual meeting hosted by University of Minnesota

Attendance

Advisory Group Attendee	Organization
Jeff Bostic	LeadingAge Minnesota
Todd Bergstrom	Care Providers Minnesota
Kari Everson	LeadingAge Minnesota
Angie Kluempke	Medica
Naima Mohamed	RPAMN
Laura Orr	Minnesota Elder Justice Center
Michaun Shetler	Care Providers Minnesota
Carolyn Perron	Minnesota Board on Aging
Daphne Ponds	MN Department of Health
Kristine Sundberg	Elder Voice Family Advocates
Adam Suomala	Minnesota Leadership Council on Aging/Diverse Elders Coalition
Tom Rinkoski	AARP Minnesota

Staff and presenters	Organization
Lauren Glass	MN Department of Human Services
Jen Olson	MN Department of Human Services
Rachel Shands	MN Department of Human Services
Julie Angert	MN Department of Human Services
Tetyana Shippee	University of Minnesota
Tricia Skarphol	University of Minnesota
Observers	Organization
Curtis Buhman	MN Department of Human Services
Kiessa Webster	Ombudsman for Long Term Care
Toby Pearson	Care Providers

Agenda

- Welcome and brief introduction of new attendees

- DHS present:
 - Update on status of Assisted Living Report Card (ALRC) website launch
- MDH present:
 - Overview of licensure surveys
- UMN present:
 - Summary of Advisory Group feedback on proposed resident health outcomes, safety, and staffing tags and final recommendations

Updates on Assisted Living Report Card (ALRC) website launch

- The AL Report Card was publicly launched on January 29, 2024.
- DHS [news release](#):
 - Modeled after MN’s longstanding and successful Nursing Home Report Card, the AL Report Card is designed to deliver useful information to help consumers make decisions about assisted living.
 - Nearly four years in the making, the newly launched web tool is a work in progress.
- Media coverage:
 - [Assisted Living Report Card Launched in Minnesota](#) – FOX 9 Minneapolis-St. Paul

Advisory Group questions for DHS

Question: A group member asked if there is any metrics on the number of website visits.

Response: DHS is working with MN-IT and they will share this information at a future meeting.

Minnesota Department of Health (MDH) Assisted Living Surveys

- Information about the assisted living (AL) licensure survey process is available on MDH’s [website](#)
- The Health Regulation Division at MDH regulates 40 programs, assisted living is the biggest program with over 2,200 assisted living licenses issued.
- AL facilities are in operation and taking care of residents before they are surveyed for a license. MDH cannot evaluate whether or not they are meeting requirements and are compliant without residents, without staff conducting care, and without policies and procedures in place.
- [Types of assisted living surveys](#)

- Assisted Living Facility (ALF): These facilities were already licensed as comprehensive homecare prior to August 2021 and converted over to an AL license.
 - Assisted Living Facility with Dementia Care (ALF-DC)-has additional requirements to serve residents with dementia
 - Provisional Assisted Living Facility (PALF): These are facilities that were never licensed before August 2021.
 - Provisional Assisted Living Facility with Dementia Care (PALF-DC)
 - Change of Ownership (CHOW): Survey under the new provider's policies and procedures.
- Assisted living licensing is not slowing down
 - On 8/1/21, there were 1973 AL facilities, as of 10/1/23, there are now 2214 AL facilities. MDH has issued nearly 500 provisional licenses since 8/1/2.
 - Assisted living survey process
 - The goal is to survey all AL facilities every 2 years
 - To prepare for a licensure survey:
 - All survey forms are available on the MDH website.
 - The survey team visits a facility to look at a variety of items under 144G (AL statute). They look at what is compliant under 144G and identify items that are not compliant.
 - Survey teams include:
 - 1-2 nurse evaluators
 - Engineer- physical space and emergency planning
 - Sanitarian- focus on kitchen
 - What occurs during a survey visit:
 - The survey visit consists of documented observations, record reviews (medical records, employee records, and resident records), interviews with residents and staff, and required documentation (includes policies and procedures).
 - The nurse survey team reviews a sample of residents, usually the most vulnerable and those with the most complex care needs.
 - Engineers make sure there are no physical structure issues or unaddressed wear and tear in the facility, and review emergency preparedness and planning.

- The sanitarian will conduct a kitchen survey.
- Outcomes of a survey visit:
 - If a facility is not in compliance with 144G (assisted living statutes), MDH will write correction order(s) during the survey process.
 - If there is an immediate harm situation, a facility must take immediate corrective action.
 - If there is not an immediate concern, the department has 30 days to write correction orders and issue them to the AL provider.
 - Correction orders are legally enforceable orders that MDH has identified as areas of improvement and are not complaint with 144G. Facilities are expected to make corrections.
 - Severity of corrections are based on a tiered system of 1, 2, 3, and 4, where levels 3 and 4 have larger health and safety concerns. DHS is required to go back to make sure tag at a severity level of 3 and 4 are corrected in 90 days. For levels 1 and 2, generally more administrative or smaller errors, facilities are still expected to correct these in the timeframe listed on the correction order and keep documentation of corrections at the facility.
 - The facility has a right to request a reconsideration if they do not agree with the outcomes of the licensure survey visit. They also have the right to request a hearing if there is a fine attached to the correction order.
 - The reconsiderations unit is separate from the MDH survey unit who conduct licensure surveys. Reconsiderations staff conducts an independent review of all evidence collected.
 - Staff can rescind, change the outcome (change severity level), or uphold a correction order.

Updates on MDH licensure survey measure recommendations (UMN)

- Final list of tags selected for inclusion in the 3 domains (safety, resident health outcomes, and staff)

Review:

- **Identifying quality in Assisted Living (AL)**
- In 2019, the U of MN conducted a literature review identifying 9 AL quality domains:

1) Resident quality of life, 2) Resident and family satisfaction, 3) Safety, 4) Resident health outcomes, 5) Staff, 6) Physical and social environment, 7) Service availability, 8) Core values and philosophy, and 9) Care services and integration

- Minnesota stakeholders top 3 AL quality domains were:
 - Quality of life
 - Staff quality
 - Resident safety
- AL Report Card Advisory Group members ranked staff, resident health outcomes, and safety and physical/social environment (tie for 3rd) as their top 3 domains.
 - It should be noted that resident quality of life and family satisfaction are being measured by in-person surveys.

What other sources of available data can measure AL quality?

- The U of MN reviewed Minnesota Department of Health AL licensure survey letters to see how they can be used to support quality measure on the AL Report Card.
 - They were able to map AL statutes or tags to the 3 quality domains ranked highest by MN stakeholders (Staff, Safety, and Resident Health Outcomes).
- Advisory Group members, along with DHS and MDH, provided feedback on the U of MN's recommended tags:
 - Overview of reasons to including selected tags:
 - Ensures safety
 - Ensure communication and follow-through on medically-significant cares, such as medication
 - Care coordination important for resident health
 - Need to alert residents/families of policies prior to implementing policies
 - Standard practice
 - Overview of reasons for excluding selected tags
 - Out of the AL facility's control
 - Administrative burden
 - Doesn't pertain to all AL facilities
 - "Sub" regulation and there are other, more important tags
 - Standard practice
 - Based on feedback, three tags were removed from the safety domain.
- The final tag list for the 3 highest rated domains was sent to Advisory Group members (staff=38 tags, resident health outcomes=40 tags, and safety=36 tags).

Advisory Group questions and answers

Question: The tags have been decided, what happens next?

Response from DHS: At our next meeting in March, we plan to bring our updates for how the U of MN is recommending to score the tags related to the 3 domains (staff, safety, resident health outcomes) if and when a facility is cited for a listed tag. This score will be listed as a star rating on the report card.

Follow-up question: Is the assumption that all tags are created equal? Scope and severity is one thing, but we're assuming the whole list is the same?

Response from DHS: More information will be brought to the March meeting discussing thresholds and how those will translate into star ratings for the report card. We are also working to firm up the timeline for when this would be implemented. DHS is committed to providing advanced communication to providers and other stakeholders regarding the use of survey results in the report card. We will report dates for when survey results will be used to populate the report card ahead of time.

Question: DHS presented at our group and gave a fairly specific timeline plan that is a little different than what we've heard at the Advisory Group before. Can you comment about that in more detail?

Response from DHS: DHS has worked with the U of MN to firm up a timeline on when we would start using licensure surveys for the ratings. DHS has made the decision to start using the licensure surveys that are completed on or after July 1, 2024 for ratings. Moving forward, our plan is to communicate to providers at least one month ahead of that date through announcements, email communications, and other channels to inform providers ahead of time that their licensing survey findings will be used beginning July 1, 2024 for report card ratings and to provide information about what tags will be included and how ratings will be calculated.

Question: Will all facilities have their first survey under AL licensure by the time we start using survey results? I believe we are still doing surveys and I want a little more information on that.

Response from MDH: We are anticipating to have all first surveys completed by July 1, 2024. A few factors slowed down the process a bit: 1) in 2021, MDH worked to get our survey teams staffed and ready, while still building the survey process, and 2) there were not enough engineers to conduct surveys. More engineers have been hired and MDH is working towards filling 2 additional engineering positions. This will allow MDH to increase the number of surveys they can conduct each week.

Question: Will the report card include the initial survey and the corrections for providers or is it just going to be the initial survey and then get updated after we get surveyed every 2 years?

Response from DHS: The report card ratings will be published based on the initial findings from the surveys, however if a survey finding is overturned through an appeal, we would update the rating to change it based on how their score might change as a result of that appeal. Providers wouldn't have to wait a full 2 years until the next survey for that change to be made. We plan to update the report card on a quarterly basis. If there was a change to a provider's score as a result of an appeal, the longest it would remain on the report card is quarterly, then it would be updated, if not sooner.

Question: I have a follow-up on the July 1 effective date. What is your intention to take information and post it live?

Response from DHS: We plan to start publishing resident health outcomes, safety, and staffing ratings in early 2025.

Follow-up question: Is that because you are waiting to get enough information to base the ratings on? Are you going to use surveys prior to July 1 to inform the star ratings after July 1?

Response from DHS: Are you asking about establishing the threshold and the analysis to develop the ratings? Yes, ok. We do plan to use data from before July 1 to help inform the thresholds for star ratings. This is something that we will be able to provide more information at our next meeting, but this is something that we are working on.

Question: If a community is going to appeal anything that's on the survey, is there a demarcation that's going to be on the report card that says they are under appeal? While we might be able to update the scores pretty quickly, we're seeing that appeals are taking a very long time to get through and be taken care of. I'm wondering if there is anything that says a provider will be appealing something while they are waiting.

Response from DHS: These are questions we are continuing to work through with the University of Minnesota and we will bring you more updates at our next meeting in March.

Follow-up question: Why would you be using surveys if they are under appeal? It's like you are guilty until proven innocent.

Response from DHS: We are going to have a significant amount of time at our next meeting and we will have presentation materials to share with you to talk about how these survey results are going to translate into measures. The quick answer is that the number of items that get appealed and then overturned is relatively small. We are looking at getting results out sooner versus waiting for an appeal process to conclude before providing information that has a small chance of changing.

Follow-up comment: I would encourage you to think of it as guilty until proven innocent, which doesn't seem right, statistically significant or not. I think there is a fairness that can go into it especially if there aren't very many appeals in the first place and then a small number that are actually overturned- I would look at that calculation closely.

Comment: I think with reconsiderations, we're not talking about small windows of time, it is taking 6 months, and 9 months to 1 year for MDH to respond and in statute it says 60 days. If we were closer to that number, I would worry less, but we aren't. It is the only legal rights providers have and it seems unfair that they can't get a result within the required timeframe. There is a problem with the system and it seems providers just have to accept it.

Response from DHS: We can take that comment back as we prepare for our March discussion. Thank you.

Comment: It's hard to review information during a meeting and have feedback. If there is information that is deep and we need to have a little time with it, I would ask that it be sent prior to the meeting so we can be prepared.

Response from DHS: Thank you. We will work to get things out ahead of time so we can have good conversations during these meetings.

Question: Based on MDH surveys, will the U of MN take data from the MDH website or will providers have to give this information to the U of MN. How will that work?

Response from UMN: There should be no additional burden for providers. The U of MN receives this publically reported information from MDH.

Question: In thinking of the vast array of providers out there - all the way from 100% private pay to the 4-5 people that are a mix of EW, CADI, or whatever waiver they are on - is the report card going to show the different types of people that are being served in various settings?

Response from DHS: One thing that we did hear from the Advisory Group was the interest in having some information about the size capacity of the provider on the report card. This is something that we are working to add to a future release. In terms who is served at a setting and what is their pay source - that is something that is a lot harder to add, not to say it's impossible. This is not a stable source of data and this information can change all the time. We can put this on our list of enhancements to explore. The closest information we will be able to provide to help distinguish these setting is license capacity, and that is something we are working on.

Question: How are you designating folks who don't have a report card yet? There will be a small number to start with and then everyone else who hasn't been surveyed yet, won't have ratings listed. I don't want the people looking at the report card to infer something negative just because the facility doesn't have a report card yet. How is DHS going to mitigate that?

Response from DHS: We do plan to publish ratings in early 2025 based on roughly a quarter's worth of surveys (there will be quarterly updates). As you mentioned, this is a fraction of facilities in each update. The N/A indicator (data Not Available) on the report card is used for facilities who don't have ratings. We do provide information on the website, the FAQs document, and the Ratings Guide as to why a facility might not have ratings at that time. This can be because the survey hasn't been completed yet or because the ratings are so new, we haven't been able to update them yet. We do plan to provide users of the report card with some additional explanation as to why the N/A might be there.

This is similar to resident quality of life and family satisfaction ratings where we have only a fraction of ratings for facilities at this time. We are aware that it is going to take time to build and add ratings. In the interest of getting ratings and information out to consumers in a timely manner, we're opting to add ratings over time as data is made available.

Question: One clarifying question. If a provider has refused to participate in a survey process, how will this be reflected on the report card? I was just seeing X's and that could mean a few things.

Response from DHS: If a provider refuses to participate in the assisted living resident and family quality of life surveys, this is indicated on the report card with an X. If the ratings aren't available for any other reason, then we indicate that on the report card with an N/A.

Advisory Group Next Steps

- Today's meeting slides and notes will be posted to the project webpage: www.mn.gov/dhs/assisted-living-report-card
- Our next meeting is March 15, 2024. Topics will likely include:
 - UMN updates on licensing survey measure development
 - DHS updates on Assisted Living Report Card next steps
 - DHS/Vital Research updates on 2024 resident and family surveys