

WEST VIRGINIA  
MEDICAID MR/DD WAIVER  
QUALITY ASSURANCE & IMPROVEMENT  
ADVISORY COUNCIL  
PROCEDURES HANDBOOK

## Introduction

The West Virginia MR/DD Waiver Program provides services to individuals who require an ICF/MR level of care, and who are otherwise eligible for participation in the program. MR/DD Waiver recipients receive services in a home and/or community-based setting for the purpose of attaining independence, personal growth and community inclusion. West Virginia supports an individual's freedom of choice of providers for MR/DD Waiver program services.

## Council Purpose

The purpose of the MR/DD Waiver Quality Assurance & Improvement (QAI) Advisory Council is to provide guidance and feedback to Waiver staff in the development of an ongoing quality assurance and improvement system for the MR/DD Waiver Program. To this end, the Council's charge is to work with staff to develop and strengthen the Waiver's ability to:

1. Collect data and assess participant experiences in order to assess the ongoing implementation of the program, identifying strengths and opportunities for quality improvement
2. Act in a timely manner to remedy specific problems or concerns as they arise
3. Use data and quality information to engage in actions that lead to continuous improvement in the Waiver program

The Quality Assurance & Improvement Advisory Council will work with Waiver staff to ensure that the MR/DD Waiver supports the desired outcomes outlined in the seven (7) focus areas of the Quality Framework developed by the Centers for Medicare and Medicaid Services (CMS). These focus areas include:

1. **Participant Access** – Do recipients of Waiver services have access to home and community-based services and supports in their communities?

2. **Participant-Centered Service Planning and Delivery** – Are Waiver services and supports planned and effectively implemented in accordance with each participant’s unique needs, expressed preferences and decisions concerning his/her life in the community?
3. **Provider Capacity and Capabilities** – Are there sufficient providers and do they possess and demonstrate the capability to effectively serve participants?
4. **Participant Safeguards** – Are participants in the Waiver safe and secure in their homes and communities, taking into account their informed and expressed choices?
5. **Participant Rights and Responsibilities** – Do Waiver participants receive support to exercise their rights and in accepting personal responsibilities?
6. **Participant Outcomes and Satisfaction** – Are Waiver participants satisfied with their services and achieve desired outcomes?
7. **System Performance** – Does the Waiver support participants efficiently and effectively and constantly strive to improve quality?

## **The Advisory Role**

Advisory groups are formed, as the name implies, to give advice and council. Such groups can provide invaluable information, guidance, advice, and support to organizations as they develop and administer programs and services. While advisory groups are sometimes referred to as advisory boards, they are best referred to as councils or committees to avoid confusing their role with the activities and duties of governing boards or boards of trustees.

The role of the Quality Assurance & Improvement Advisory Council is advisory in nature and therefore, it has no authority in administering the MR/DD Waiver Program. Its function is to advise and assist the Waiver staff in program

planning, development, and evaluation consistent with its stated purpose. In this role, the Quality Assurance & Improvement Advisory Council shall:

1. Recommend policy changes
2. Recommend Program priorities and quality initiatives
3. Monitor and evaluate policy changes
4. Monitor and evaluate the implementation of Waiver priorities and quality initiatives
5. Serve as a liaison between the Waiver and its stakeholders
6. Establish committees and work groups consistent with its purpose and guidelines

### **Council Membership**

The MR/DD Waiver Quality Assurance & Improvement Advisory council will consist of fifteen (15) members. At Least five (5) will be current or former recipients (or their legal representatives) of MR/DD Waiver services, at least one (1) each of service provider and advocate, with the remaining members representing other “stakeholders” such as, direct care workers, family members, and other advocates and allies of people with developmental disabilities. To the extent possible, the Council will represent all regions of the state.

### **Appointments and Membership Terms**

Original members of the Council have been appointed by the Program Manager of the MR/DD Waiver and will serve three-year terms to coincide with the duration of the Quality Assurance & Improvement Project. These terms will expire at the end of June 2007.

The Council shall form a membership committee. This committee will be charged with the responsibility to develop procedures for:

1. Identifying and recruiting potential Council members
2. Nominating members for appointment
3. Appointing new members
4. Filling vacancies
5. Training and orienting new members

The Membership Committee will develop a process to ensure that membership terms are “staggered” so that there will always be experienced members serving on the Council.

## **Officers**

At the October meeting, Council officers will be elected to serve a one year term from October to September. The officers will be elected by a majority vote of members present. The officers will be Chairperson and Vice-Chairperson. The duties of these offices are:

**Chairperson**-Work with the Waiver staff to plan Council meetings; act as Chairperson for the meetings, and; appoint ad hoc and standing committee chairs.

**Vice-Chairperson**: Chair meetings when the Chairperson is unavailable; fill the Chairperson position should that individual leave the Council in mid term, and; complete the term until elections.

## **Meetings**

The MR/DD Waiver Quality Assurance & Improvement Advisory Council will meet four times each year in October, January, April, and July. At least one meeting each year will be held somewhere other than Charleston. Meetings will typically be scheduled for 10:00 a.m. – 3:00 p.m. Council members representing current or former Waiver recipients (or their legal representatives) will be eligible for a stipend and travel reimbursement for meeting attendance.

At least one meeting each year will feature an open forum to solicit feedback from consumers and their advocates and allies on the performance of MR/DD Waiver services. All meetings will be open to the public.

Waiver staff will maintain minutes of all Council meetings. Minutes will be distributed to Council members within one month following the meeting. At a minimum, the minutes of Council meetings shall include:

1. Council members present/absent
2. Any decisions or recommendations made by the Council
3. Responses to any questions or recommendations made at previous Council meetings
4. Specific assignments to be carried out following the meeting including what is to be done, who is in charge and date of completion
5. Items to be addressed at the next Council meeting

## **Decision-Making Process**

A minimum of eight members must be present at Council meetings in order to conduct business. A simple majority vote of those present is required to approve any item.

## **Responsibilities and Expectations**

It will be the responsibility of Waiver staff and the Council Chairperson to plan and conduct all meetings. Staff will provide Council members with the information they need in accessible and appropriate formats. Staff of the Quality Assurance & Improvement Project will assist and support Waiver staff in all aspects of planning, preparing for, and conducting Council meetings.

It will be the responsibility of all Council members to

1. Become familiar with the MR/DD Waiver program and the services it provides
2. Become familiar with the Waiver's Quality management system and initiatives
3. Study any problems or issues brought to the Council
4. Prepare for, attend, and fully participate in Council meetings

Failure of a member to participate in two consecutive regularly scheduled meetings may result in removal from the Council by Waiver staff.

This document is a product of the West Virginia Quality Assurance and Improvement Project. The publication was made possible by a grant from the Center for Medicare and Medicaid Services. The lead agency is the West Virginia Bureau for Medical Services. The project is managed by the Center for Excellence in Disabilities at West Virginia University.

April, 2005