

Participant Outcomes:  
Quality of Life in Long Term Care

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Bureau of Long Term Support  
Division of Disability and Elder Services  
Wisconsin Department of Health Services

## **PARTICIPANT OUTCOMES FOR COP-W/CIP II:**

Within the COP Waiver and CIP II programs, the Bureau of Long Term Support (BLTS) has integrated a focus on participant outcomes. This includes:

- ✓ Incorporating participant outcomes into care planning and on-going care management.
- ✓ Integrating participant outcomes in quality assurance monitoring to provide counties with ideas for program improvement.
- ✓ Providing counties with tools to assess their own level of success in assisting participants in achieving what is important to them.

The following is a brief description of how participant outcomes have been integrated into the quality assurance monitoring process.

### ***Outcomes in the Quality Assurance Monitoring Review:***

Historically, the intent of the Quality Assurance Monitoring Review has been to check for technical compliance, check for participant health and safety, assuring participant needs are addressed, and receiving feedback from participants on their satisfaction with program services and workers. In recent years, we wanted a way to learn about the impact of the program and services on the participant's lives. This has been accomplished through participant interviews by focusing on achievement of participant outcomes.

During participant interviews, reviewers learn how participants in the program are doing in relation to a variety of Department identified outcomes. As part of the quality assurance monitoring review, BLTS assesses four specific outcome statements that reflect aspects of the RESPECT values.

The intent of the outcome interviews is to look at trends across a sample of the population. It is a method for providing counties with a "mirror" so to speak, to reflect on the participants' experience of being served in a community-based program. The results provide qualitative data, rather than hearsay, assumptions, or common knowledge about issues of quality. In addition, the outcome results are examined in relationship to how care plans support or facilitate the achievement of the outcomes. The results, both the outcome results and support trends, are merely a tool that counties can use to set their own benchmarks, promote areas of strength, and determine areas in which they want to focus on improvement.

### ***Outcomes Decision-making Guidelines:***

The attached materials describe the four outcome statements being monitored and outline the decision-making process for determining outcome achievement. The QAC reviewers will use this tool during their interviews with participants. In this process, the reviewers learn about what is important to individual participants in relation to the four broader outcome statements. Reviewers will then summarize the results across the entire sample and discuss the larger trends as viewed from the participants' perspective.

The outcome statements are written in the first person to reflect the participant-centered focus. Each statement is categorized under one of three target areas of the RESPECT values:

- ❑ Empowerment to Make Choices
- ❑ Physical and mental health (Health and Safety)
- ❑ Community and Family Participation

## PARTICIPANT OUTCOMES FOR COP-W: Decision-making

### EMPOWERMENT TO MAKE CHOICES

Feeling a sense of control over one's life and being able to make your own decisions is important to most people. However, some people may choose not to make decisions and rely on someone they trust to do this for them. The opportunity to make decisions that directly affect their lives can be on a small or large scale. It is also important to have reasonable options explored so that the participant (or other decision-maker) is making an informed choice.

#### Outcome #1

##### **I DECIDE WHERE AND WITH WHOM I LIVE.**

One of the most important and personally meaningful choices I can make is deciding where and with whom to live. This decision must acknowledge and support my individual needs and preferred lifestyle. My home environment has a significant effect on how I feel about myself and my sense of comfort and security.

**Decision-making considerations:** *These criteria must be present for the outcome to be achieved. If some of the criteria apply but not others, then the outcome is considered "in progress." If none of the criteria apply, then the outcome is not achieved.*

- Person is choosing to live in current arrangement OR chose current arrangement. *If person did not make the choice*, the participant feels satisfied with how the decision was made.
- Person is content with/pleased/satisfied with decision and feels it meets their needs and expectations.
- *If applicable*, person was provided information about available options and assisted to explore options they preferred. If not, did they want more options?
- *If applicable*, the person who made the decision regarding living situation (i.e. guardian or POA) based decisions on participant's preferences and needs.

Additional Information/Context to outcome achievement:

- ❑ What supports and/or services are involved to assist with this outcome? How effective are they?
- ❑ How important is the outcome for the person? Is it a high priority, not a priority, or somewhere in between?

**What to learn about:** *(Prompts for interview)*

- ✓ How does person feel about current living situation? How did they come to live in current situation (how was it determined and by whom)? What do they like or dislike?
- ✓ Does the place feel like home to the person? Are they comfortable? Does it meet their needs and expectations? Is this their preference?
- ✓ Does the person feel the need to change their current living arrangement? If so, why? Where else would they want to live, what have they looked into? Has anyone provided them with information or helped them explore alternatives?
- ✓ If applicable, how do they feel about the people they live with? Did they decide who they were sharing living space with? Is the situation working out for them?

## Outcome #2

### I MAKE DECISIONS REGARDING MY SUPPORTS AND SERVICES

Services and supports are provided to assist me in my daily life. Addressing my needs and preferences in regard to who is providing the services or supports and how and when they are delivered allows me to maintain dignity and control. To the extent that I desire and am able, I am informed and involved in the decision-making process about the services and supports I receive. I am aware that I have options and can make informed choices.

*Decision-making considerations: These criteria must be present for the outcome to be achieved. If some of the criteria apply but not others, then the outcome is considered “in progress.” If none of the criteria apply, then the outcome is not achieved.*

- Person is involved at the level desired, or extent possible, for making decisions about the services and supports that they receive.
- Person has been provided with a variety of (reasonable) options to effectively meet their needs.
- Person feels their requests and preferences about what, how, and when services are provided they are honored to the extent possible.
- Person knows how to make changes regarding services, supports, and their care plan.

Additional Information/Context to outcome achievement:

- ❑ What supports and/or services are involved to assist with this outcome? How effective are they?
- ❑ What level of priority is the outcome for the person?

**What to learn about:** (*Prompts for interview*)

- ✓ How involved is the person in the decision-making process regarding what services and supports will be part of the care plan? Is this satisfactory to the person or do they desire more or less involvement?
- ✓ If the person has someone else involved in the decision-making (i.e., guardian, POA, family member), does it appear that this other person is making the voice of the participant known or is there difference between the two?
- ✓ In the care planning process, does the person feel they were presented with a variety of options that will meet their needs? Was the participant or other team members able to offer some ideas for options or make requests? Or were the options very limited and/or did not seem to address the issue or concern they have?
- ✓ Does the participant feel their preferences and opinions are considered/incorporated when deciding what, how, and when services or supports are delivered? Is this done to a satisfactory or reasonable level for the person? Are there any significant conflicts?

## COMMUNITY AND FAMILY PARTICIPATION

Most people have some kind of connection to family, friends, and community. The kind of involvement they desire and in what capacity will depend on the person’s situation, preferences, and opportunities available. Some people may not have had the opportunity to experience participation in their community or in the workforce and will need exposure or education to help them decide. Supporting people to maintain or reach desired levels of connection is critical to outcome achievement.

### Outcome #3

#### **I AM INVOLVED IN MY COMMUNITY.**

Engaging in the community in ways that I enjoy provides me with a sense of belonging and connection to others. Having a presence in my community enhances my reputation as a contributing member. Being able to participate in community activities gives me opportunities for socialization and recreation.

*Decision-making considerations: These criteria must be present for the outcome to be achieved. If some of the criteria apply but not others, then the outcome is considered “in progress.” If none of the criteria apply, then the outcome is not achieved.*

- The person is involved in their community to the extent they desire.
- The person is involved in activities within the community that are important to them.
- The person is able to access their community to attend activities and go places they wish to go.

Additional Information/Context to outcome achievement:

- What supports and/or services are involved to assist with this outcome? How effective are they?
- What level of priority is the outcome for the person?

**What to learn about:** (*Prompts for interview*)

- ✓ What does the person consider to be their community (i.e., social group, neighborhood, residential setting, church, larger community)? Do they feel they are as involved in their community as they would like? If not, why?
- ✓ Where does the person like to go or what do they like to do in their community? What social, recreational and organization activities are important to the person? Is there anything else the person would like to be doing?
- ✓ Is the person able to access these important activities as much as he/she would like? Are they able to access their community? Does the person get out as much as he/she would like? If not, why? Is this by choice? What are the barriers? What has been tried in the past and present to overcome these barriers? Does the person have some other ideas?

### HEALTH AND SAFETY

Health and safety have been the primary tenets of human services. Because these areas often affect other areas of life (i.e., ability to be independent, to access community, make decisions, etc.) they continue to be vital areas of concern. Addressing a person’s health, level of functioning, and safety issues may influence the level of achievement of other desired outcomes. However, it is essential to take into account issues of risk and work toward a balance.

### Outcome #4

#### **I FEEL SAFE.**

I feel comfortable with the level of safety and security I experience where I live, work, and in my community. I am informed and have the opportunity to judge for myself what is safe. People understand what I consider to be an acceptable level of risk and respect my decisions. If I am unable to judge risk for myself due to my level of functioning, I have access to those that can support me in making those determinations.

**Decision-making considerations:** *These criteria must be present for the outcome to be achieved. If some of the criteria apply but not others, then the outcome is considered “in progress.” If none of the criteria apply, then the outcome is not achieved.*

- Person feels they can safely live in and move about their home, neighborhood, and community.
- Person feels safe with care providers. Personal cares and services are provided in a safe manner.
- Person feels prepared for emergencies.

Additional Information/Context to outcome achievement:

- What supports and/or services are involved to assist with this outcome? How effective are they?
- What level of priority is the outcome for the person?

**What to learn about:** *(Prompts for interview)*

- ✓ Does the person feel safe in their immediate environment? Are they safe outside when in the community, crossing the street, in the grocery store, etc.? Are there any times when the person does not feel safe? What is it that causes them to feel this way? What helps them to feel safe?
- ✓ Does person feel safe with care providers? Do they feel that caregivers provide personal cares in a safe manner? Does the person ever feel afraid? If so, when?
- ✓ Is the person able to safely access the areas of their home or living arrangement? Are there any potential dangers? If so, how have these been addressed? What equipment or supports are helping the person to be safe?
- ✓ Does the person feel it is important to have an emergency plan in the event of a fire, tornado, flood? Does the person have smoke detectors, carbon monoxide detectors and do they work? Is there anything the person can think of that would make them feel more safe?
- ✓ Does the person have any cognitive or physical limitations that limit their ability to understand the risks associated with their decisions? In carrying out an emergency plan?
- ✓ Has the person ever been abused in the past or in present situation? Are there any signs or symptoms? Is this an issue the person would like addressed if it's not already?