Assisted Living Report Card Advisory Group Meeting

Date: 12/05/2022
Location: Zoom virtual meeting hosted by University of Minnesota

Attendance

Advisory Group Attendee	Organization
Sam Smith	Alzheimer's Association
Patti Cullen	Care Providers of Minnesota
Todd Bergstrom	Care Providers of Minnesota
Kris Sundberg	Elder Voice Family Advocates
Jeff Bostic	LeadingAge Minnesota
Angie Kluempke	Managed Care Organizations (Medica)
Lindsey Krueger	Minnesota Department of Health
Adam Suomala	Minnesota Leadership Council on Aging & Diverse Elders Coalition
Genevieve Gaboriault	Ombudsman for Long Term Care
Jane Pederson	Stratis Health

Staff and presenters	Organization
Valerie Cooke	Department of Human Services
Lauren Glass	Department of Human Services
Peter Spuit	Department of Human Services
Rachel Shands	Department of Human Services
Tetyana Shippee	University of Minnesota
Tricia Skarphol	University of Minnesota

Observers	Organization
Becky Walsh	PrimeWest
Jean Peters	Elder Voice Family Advocates
Steve Sauerbry	Family caregiver
Parichay Rudina	Ombudsman for Long Term Care
Not named	Public observer

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Not named	Public observer

Agenda

- Welcome, roll call, introduction of new attendees, and overview of agenda
- University of Minnesota present:
  - findings from the 2021-22 resident and family survey data analysis and recommendations for report card ratings development
- Minnesota IT (information technology) present:
  - Assisted Living Report Card demo
- Department of Human Services (DHS) present:
  - Project updates

Summary of August 3rd, 2022 meeting

- Vital Research presented findings from the 2021-2022 Resident Quality of Life and Family Satisfaction Survey data
- The University of Minnesota presented final findings from their review of assisted living licensure survey data

University of Minnesota's analysis of resident and family survey data and recommendations for report card ratings development

- The University of Minnesota (U of MN) conducted data analysis on resident and family survey data. Today's meeting focuses on their analyses around risk adjustment, item weighting and an example of how to construct facility scores for resident survey results. The data they used comes from the 2021-22 resident and family surveys.

Risk adjustment: Risk adjustment is a statistical method that aims to account for differences in person-level risk factors that can affect quality outcomes, regardless of the care provided. The goal of risk adjustment is to enable more accurate comparisons across providers who care for people with varying levels of clinical complexity. Case mix adjustment aims to remove differences in factors that impact measured outcomes but are not under an assisted living facility's control. One such example is location. CMS uses risk adjustment for its Consumer Assessment of Health Providers and Systems (CAHPS) and other measures. Here are more

details: https://www.pqrscahps.org/globalassets/pqrs-cahps/quality-assurance-guidelines/cahps-for-pqrs-survey-qag-v2-manual.pdf

It is common to do some form of risk adjustment for satisfaction surveys and the Nursing Home Report Card uses risk adjustment, as well. The literature on assisted living is small, but did identify differences in scores based on geography, memory care, size and ownership.

- The U of MN presented results from resident and family surveys where they adjusted for: 1) geography; 2) ownership type; 3) license type; 4) memory care by survey domains; and 5) size by survey domains.
  - For resident surveys, there are some considerable differences in quality of life scores by geography (largest difference), and ownership type.
  - For family surveys, there are small differences across most facility characteristics, more so for geography.
  - There are some differences in how memory care residents rated facilities, but they were not large and not what we would expect to see.
  - Looking at facility size specifically, resident surveys show differences in staffing and overall satisfaction domains, whereas the family surveys show some differences in all but one domain.

Example of how to format numeric scores (resident survey)

- The U of MN presented an example graph showing an approach of how to construct a facility score using resident survey data. Key points are:
  - We want to create numeric scores on a 0-100 scale because it is easier to understand and it can be meaningfully translated into stars (use a 5 star system)
  - Our data are tightly clustered and we are looking for justified ways to break it up. One approach is to use 1 standard deviation from the mean for the 2 and 4 star ratings and 1.5 standard deviation from the mean for the 1 and 5 star ratings.
    - Satisfaction scores tend to be highly skewed, meaning you don't see a good distribution across the full range of scores – they tend to cluster, and often cluster towards the highest scores (positively biased). This data distribution occurs across only 33 points (clustering from 70%-100%).

Item weighting:

- Should all items in a domain be treated equally or do weights need to be developed? Some items might have more influence than other items in a domain score. If a domain has 4 items, do we think one item is more important than others? Instead of giving it 1 point, it should get 1.5 points. This approach is used if you see that one particular item really gets at the domain and should get more attention.
- We will be running a methodological analysis called factor analysis. It is used in psychometrics work where we assess how much each item adds to a particular score. So if a domain has 4 items, maybe 1 item explains 80% of the differences in that score. After we do this, we will be prepared to bring recommendations on item weighing.

Domain construction:

- The goal is to have valid and reliable domains that best capture what we are trying to measure (e.g., engagement)
- We will use factor analysis to assess the reliability of each domain
- We will determine if we may need to remove certain survey items or domains (e.g. finances domain)

- The U of MN presented data related to risk adjustment, item weighting and an example of how to construct facility scores to get feedback from Advisory Group members. They are conducting further analysis to help them make decisions if there needs to be risk adjustment and for what and if some survey items require weighting. Their findings and final recommendations will be discussed at a future Advisory Group meeting.

Advisory Group questions and comments for the U of MN presentation

Question: For the slides that are labeled memory care, are you referencing facilities that have the distinctive license of AL with memory care? Memory care also happens in assisted living facilities that don't have that special designation.

Response: Yes, these slides only use data from the license type that is assisted living facility with memory care.

Question: As a consumer looking for ratings on facilities, will this report provide data for one home vs another or one group of homes vs another?

Response: All ratings are on the assisted living community level with some exceptions on size (we are not able to show ratings for very small assisted living facilities). It will show ratings for each facility and consumers can compare across facilities.

Comment: It seems strange that we are trying to weight questions. If we didn't like these questions going in, why did we ask them? It seems like we would be projecting our thoughts on what is important and that can change the scores for good or bad.

Response: These are valid points. Currently, we don't have enough information to make decisions around weighting. The goal today was to listen to feedback around the possibility of weighting from various stakeholders. We will run the factor analysis we discussed and share those results at a future Advisory Group meeting to continue the discussion on weighting.

Question: When talking about risk adjustment, looking at each factor makes sense, but we also know that they interact with each other, so a for-profit facility might be interacting with urban geography. Have you done analysis that can determine if one is influencing the other?

Response: We haven't done the interactive analysis yet, that would be our next step. It is important to see how an item like geography interacts with other factors.

Breakout group discussions:

- Groups were asked the following 2 questions:
  - What are your reactions to weighting certain survey items? Pros and cons?
  - What are your reactions to risk adjustment? Pros and cons?
  - Responses are located in appendix A

Assisted Living Report Card demo

- Minnesota IT presented a demonstration of the Assisted Living Report Card website. This website is currently in demo mode
- The design for the AL report card was based off the design used for the NH report card website

Items that can be found on the home page include:

  - Link to a description of what assisted living is and a link to a help screen

- Links to MinnesotaHelp.info website, Senior Linkage Line website, Minnesota Department of Health website and Ombudsman for Long Term Care website

Searching for assisted living facilities:

- Users can search for a facility by location or by facility name
- As an option, users can add up to 3 quality search filters (Resident Quality of Life survey results, Family Satisfaction survey results or state inspection results).

Facility search results

- The user can choose up to 8 facilities to view at once
- Whatever the user chooses, these results will show:
    - Results show in stars (1 star is the lowest rating and 5 stars is the highest rating). Users can click on the star to see it in number form from 0-100.
    - The average of all providers is always shown
    - If a user clicks on a provider, it will show the report card history, current date, when each measure is updated (quarterly, yearly, etc.) and most recent timeframe the measure was collected.
    - A user can get more information by domain scores for resident an family surveys (facility score, state score and facility rank)
    - A user can view state inspection results by clicking on the link to the MDH website to view state inspections reports

Advisory Group questions for the Assisted Living Report Card demo presentation

Question: When is the website going live?

Response: The website is planning to launch sometime in the last quarter of 2023.

DHS general project updates

- Resident surveys are only being provided through in-person interviews this round.
- Question 34 (respectful of culture) was reworded for clarity, question 8 (medications) was removed from the resident survey and added to the family survey
- Resident interviews began in October, 2022.

Advisory Group questions for DHS

Question: (two questions are combined because the answer pertains to both questions) **1)** Small assisted living facilities are not going to be included in survey results. If I'm running a small AL, I'm not going to have results, would my facility name still be included and what would be listed under my facility name? and; **2)** If a facility has 8 or more residents and some residents decline to be interviewed, the facility would not reach the threshold of being included in the report. Would there be a different indicator on this scenario?

> Response: Facilities that have the capacity to serve 20 or more residents will be included in this round of survey results.

> There are a few different reasons why a facility might not have a score, whether it be for the inspections measures or for the resident and family surveys. If a facility does not have enough survey responses to be able to get a score or if they are a small facility, we want to make it clear that this is why they don't have ratings. We are in the process of deciding how to best display this. However, if a facility chooses not to participate in resident and family surveys, this will be clear to consumers that this facility chose not to participate and that is why they do not have a score.

Question: Are all 3 measures (resident surveys, family surveys, and state licensure surveys) going to be reported in 2022? For the resident and family surveys, will these ratings be based on the 2021 survey results?

> Response: At launch (last quarter of 2023), only the resident and family survey ratings will be included using data from the 2022-23 survey results. Ratings for the licensure survey data will show up on the report card sometime later in 2024. We hope to have 3 topic areas related to these inspections (staffing, safety, and resident health outcomes) which will likely use 4th quarter 2023 inspection results, but there will be a lag in publishing these ratings. We will then update inspection results quarterly.

Comment: I would strongly suggest not ranking facilities (ranked from 1-2000 or total number of facilities) on the report card. It is hard to know if someone is last or first when looking at a sample of the population and if it's based on standard deviation. Even if someone is improving or if everyone is improving, there is always someone who is last. This seems to be counterproductive if you are trying to get providers to go along.

> Response: This is good feedback and we will consider this when designing the website.

Upcoming Advisory Group work

- Meeting notes and materials will be posted on the project website: www.mn.gov/dhs/assisted-living-report-card
- Next Advisory Group meeting: First quarter of calendar year 2023

Appendix A: Advisory Group member breakout discussion notes

U of MN breakout group questions and Advisory Group responses

Breakout questions:

1. **What are your reactions to weighting certain survey items? Pros and cons?**
    a. Group 1:
        i. Weighting could be helpful because something is more important or explains more of the variance
        ii. Positive support for weights, especially for items like staffing
        iii. Food may be one example of weighting because it's so important for residents but may not show as much differentiation across the community
        iv. Give more weights to items that clearly indicate quality of care (e.g. staffing to resident ratio)
        v. "What grade would you give this place?"- weight this question higher
        vi. "Would you recommend this community to friends and family?"- add more weight to this question
    b. Group 3:
        i. It seems premature to weight questions
        ii. Different topics are important to different people, so weighting might not align with a person's personal preferences about what matters most to them
        iii. Weighting could make sense, especially if it aligns with the priorities stakeholders have expressed about different aspects of quality
        iv. As the Ombudsman office, we have areas of quality that are priority (person-centeredness, right, neglect0, but not sure how this would impact potential weighting
        v. We already weight domains, in a sense, by having more or fewer questions in each domain

2. **What are your reactions to risk adjustment? Pros and cons?**
    a. Group 1:
        i. How do you address residents whose responses are biased as a results of individual/respondent characteristics?
        ii. As a group, we should have more discussion around how a facility graduates to a higher star rating

iii. Make sure we don't risk adjust for things that shouldn't be explained away (facilities should still be held accountable for their differences in quality scores with minimal exceptions)

iv. How do facilities get from 3 to 4 stars? It seems that if all the facilities do better on the survey, or most, it would be impossible to get another star.

v. Be cautious about risk adjustment for mental health- don't want to minimize their experience of quality