

# Meeting Notes

## Resident Quality of Care Outcomes and Improvements Task Force

Date: Monday, August 30, 2021

Time: 1:00 p.m. – 3:00 p.m.

### Attendees

**Task Force Members:** Oluwatosin Adejuwon (Ms. T), Julie Apold, Patricia Cullen, Aisha Elmquist, Rachel Jokela, Beth McMullen, Jane Pederson, Pamela Peters, Kristine Sundberg, Penelope Viggiano,

**MDH:** Lindsey Krueger, Catherine Lloyd

**Public:** Many attendees via WebEx

### Agenda

- Welcome
- Goals for Meeting
- Recommendations Development – Continuation from Previous Meeting
- Discuss and Determine Path Forward
- Discuss and Agree on Next Steps

### Welcome

Lindsey Krueger began the meeting by welcoming everyone. Thanked members of the task force.

Roll call was conducted.

Catherine Lloyd was introduced but did not speak. She will be taking an active role going forward.

### Meeting Logistics

Task Force members were promoted to co-hosts on WebEx and could unmute themselves and were asked to speak freely.

All others (public attendees) remained muted but were encouraged to submit any comments or questions via the Chat Feature on WebEx. Questions were responded to via the chat or during the meeting.

## Goals for Meeting

Lindsey wanted the group to consider the best path moving forward for the Task Force. She pointed out the Secretary of State website stated that the Task Force ended 7/31/2021. Also, that the Task Force had no funding. She also wondered how the Task Force could possibly tie in with the Assisted Living Report Card and the Home Care Advisory Council.

## Pre-Recommendations Discussion

Patti Cullen brought up the Assisted Living Report Card and wondered when that data would be available. Report Card data should be compared surveys for Assisted Living. The new survey window begins 8/1 and the cycle is every 2 years so there won't be data on EVERY provider until two years from now (or until all surveys are done). Rachel Jokela stated that recommendations would be premature without data. Jane Pederson called it putting the "chicken before the egg".

Resident "Quality of Life" surveys start in September. Research comes from conducting interviews, and is separate from the report card, which could be useful for this group. Another to consider is that we lost 1.5 years of data due to Covid-19 and that we can't ask for more of our front-line health workers. They don't have any more time to give to more surveys asking for more data.

## Recommendations Development – Continuation

Toni Malanaphy-Sorg picked up where the task force left off in the last meeting and continued discussing and debating the remaining recommendations. Notes can be viewed on the worksheet. The group discussed what information was needed to form recommendations.

## Discussion

Lindsey: Dr. Jeff Brady suggested the need for data collection, for example, quality measures. Sharing data is important.

Rachel: Somewhat premature to develop recommendations without data. We may need a full year before useful data.

Julie: How to make data we do have useful?

Jane: Think about how to keep a product people want to buy? What do they find as valuable? If we only look at data, we may end up focusing on just the problems.

Beth: Identify what they what want to increase? Decrease?

Jane: Long Term Care is a very expensive product no one wants. Health Plan has been working on value-based data which can inform this work. There has been a pause on data collection, we have lost 1.5 years of data to the pandemic and may need to start over.

Patti: Until we can do more than 18 surveys, we do not have much to go on.

This group needs to be a strong voice for addressing fundamental needs; something that will need to change.

Patti: Not all things are going to need data to know whether to recommend.

We need to identify a problem-solving path; maybe use a pilot project. Not all paths have to be done through legislation.

Lindsey: Recommendations must go to commissioner and legislature. Would we do a pilot project prior to bringing forward to legislation?

Patti: I think it could be done both ways. Somethings riper for a pilot to prove something. Asking for legislation for something that hasn't been tried before.

Aisha: Home Care Advisory Committee has funding available. Should look longer term how this committee might combine with the council.

Pennie: If we wanted to do a QIPP or PIPP, can we do that without legislative approval?

Lindsey: For the Home Care Advisory Council can make recommendations to the commissioner on how to use funds. Do the members of this task force want to see if we can develop legislative language to connect this task force more closely to the HC Advisory Council? We could recommend to the Council/Commissioner to intertwine the two, in terms of use of fines revenue?

Patti: Our task force is time limited; the council is not. Giving ideas to that council would be good. My concern is putting forth anything legislatively that highlights unspent money. Prefer to provide HC Adv. Council with a strong case to use funds- informally. Better to work informally now.

Aisha: I think we need to technically clean up the language around the council and the task force. Maybe not this year due to election year. Seems like funds are there, maybe get those recommendations.

## Determine Path Forward

- Recommendations that don't require data gathering
- Apply for grants with topics the group sets as targets?
  - Could be improvement goals
  - Identify ways to improve quality of life
- Discussion with Home Care Advisory Council
  - What are they looking for?
  - Top areas for potential improvement that could be moved forward quickly
  - Recommendations for RFPs for specific targets

Kris S. suggested that since there was a focused LTC Consumer department with MDH already, the task force should not spend time on this issue. To explain further, she stated the MN has a fragmented approach to aging, long-term care, etc. where many states have a Department on Aging. This suggestion was just to begin thinking about this issue. The Ombudsman is just one aspect of elder care.

## Next Steps

- Develop Legislative Language
- Speak with Home Care Advisory Council

## Next Meeting Goals/Timing

- Agree on items to move forward to the Home Care Advisory Committee (potential early action items)
- Agree on items that are clearly top areas of interest and what data might be needed to build strength of recommendation
- Task Force to review notes and send back top picks (no more than 3 in each category)
- Doodle Poll for next meeting (3 months)

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