Data Quarterly

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CQL's *Quality Measures 2005*®

The first 100 organizations
October 2006 – December 2008

Basic Assurances®

Which fundamental assurances are most often present for people with disabilities?

Which systems are best aligned with actual practice?

How well are organizational practices being applied at the individual level?

Is compliance with minimal requirements enough?

CQL reports on the findings for *Quality Measures 2005*®.

Basic Assurances® provide a unique and practical approach that addresses federal and state requirements for reporting and analyzing compliance measures. At the same time, with CQL's emphasis on demonstrated **responsiveness at the individual level**, these measures provide accountability to people receiving services and supports, their families and the community as a whole. We believe that both components are essential in any quality system.

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Basic Assurances® — Fundamental, Essential and Personal

CQL's Basic Assurances® require more than compliance with licensing and certification standards. Basic Assurances® looks at the provision of safeguards from the person's perspective. While the Basic Assurances® contain requirements for certain systems and policies and procedures, they go well beyond that. The effectiveness of the system or the policy is determined in practice, *person by person*.

Basic Assurances® are essential, fundamental and non-negotiable requirements for all service and support providers. Basic Assurances® are demonstrations of successful operations in the areas of health, safety and human security. Basic Assurances® form the bedrock of social stability. We look for these assurances in our everyday lives – whether we're at the airport, in our homes, at the hospital, or at the restaurant or nightclub. Injury and death because of mistakes and negligence in hospitals, nursing homes, night clubs, air and ground transportation, or human services are not acceptable.

Meeting Basic Assurances® is a prerequisite for being in business in our field. These assurances are not statements of intent; rather, **they are statements of results.** They define the essential, fundamental and non-negotiable requirements for all service and support providers, whether public or private, large or small.

Published in 2005, CQL's Basic Assurances® contain ten (10) factors and 46 indicators. These Basic Assurances® are a balance between concerns for individual Health, Safety and Security and the necessity of social constructs such as Respect, Natural Supports and Social Networks to ensure sustainable outcomes for people.

Basic Assurances® Factors

One	Rights Protection and Promotion
Two	Dignity and Respect
Three	Natural Support Networks
Four	Protection from Abuse, Neglect, Mistreatment and Exploitation
Five	Best Possible Health
Six	Safe Environments
Seven	Staff Resources and Supports
Eight	Positive Services and Supports
Nine	Continuity and Personal Security
Ten	Basic Assurances® System

Each indicator is evaluated on two dimensions – *System* and *Practice* – and both must be present for the overall indicator to be considered present.

- **Systems** are typically described in organizational policy and procedure and supported through staff training and other approaches. Organizational systems must be sustainable over time and flexible enough to be individually applied.
- **Practice** is what we find happening in people's lives as a result of these systems. Organizational practice demonstrates how an organization's supports are put into action for each person.

CQL expects that organizations will demonstrate their accountability by meeting 100% of the indicators.

In our reviews with the first 100 organizations between October 2006 and December 2008:

- 34% met all 46 indicators at the initial review
- 50% met between 34 and 45 indicators (most were able to address and remedy issues within 6 to 9 months)
- 16% met fewer than 34 indicators overall on the initial visit

On the following page, we present a data summary of the findings for *Basic Assurances®*.

Basic Assurances®– Summary of Findings
(n = 100 organizations)

Percentage of Indicators Present by Factor				
Factor		**System Level**	**Practice Level**	**Overall Indicator**
One	Rights Protection and Promotion	77%	71%	68%
Two	Dignity and Respect	95%	94%	94%
Three	Natural Supports Networks	89%	94%	89%
Four	Protection from Abuse, Neglect, Mistreatment and Exploitation	87%	89%	85%
Five	Best Possible Health	93%	94%	91%
Six	Safe Environments	88%	87%	85%
Seven	Staff Resources and Supports	96%	95%	95%
Eight	Positive Services and Supports	88%	87%	84%
Nine	Continuity and Personal Security	94%	94%	93%
Ten	Basic Assurances® System	61%	58%	54%
	OVERALL AVERAGE	**87%**	**86%**	**84%**

Factors with the highest average rating (top 3 out of 10):

Staff Resources and Supports

Dignity and Respect

Continuity and Personal Security

Factors with the lowest average rating (bottom 3):

Basic Assurances® System

Rights Protection and Promotion

Positive Services and Supports

Basic Assurances® Indicators present at the highest levels (top 5 out of 46) include:

- Supports and services enhance dignity and respect.
- People are treated as people first.
- Staff immediately recognize and respond to medical emergencies.
- The organization respects people's concerns and responds accordingly.
- Communication occurs among people, their support staff and their families.

Basic Assurances® Indicators least often present (bottom 5) include:

- The organization upholds due process requirements.
- A comprehensive plan describes the methods and procedures for monitoring Basic Assurances®.
- The organization monitors Basic Assurances®.
- The organization supports people to exercise their rights and responsibilities.
- The organization provides individualized safety supports.

Within this group of organizations, we see encouraging results with regard to areas of dignity, respect, and staff responsiveness. These findings also provide further evidence of previously reported concerns about assurances for individual rights and due process (Data Quarterly #4, April 2008). Organizations have a vast array of tools and resources available to them to address these concerns at the systems level. Implementation at the individual level will require ongoing, concerted attention to respecting and responding to each person.

These Basic Assurances® also provide a unique and practical approach that addresses federal and state requirements for reporting and analyzing compliance measures. At the same time, with CQL's emphasis on demonstrated responsiveness at the individual level, these measures provide accountability to people receiving services and supports, their families and the community as a whole. We believe that both components are essential in any quality system – one that goes beyond compliance with minimal requirements toward measurement of the impact of services on quality of life.

CQL – The Database on *Quality Measures 2005*®

Inspired by a vision of a world of dignity, opportunity, and community inclusion for all people, The Council on Quality and Leadership (CQL) is an international leader in the definition, measurement, and improvement of quality of life for people with disabilities. CQL has demonstrated that valid and reliable quality of life measurement can be incorporated in community-based human services.

In the 1990s, CQL redefined quality as responsiveness to people rather than compliance with standards. After conducting focus groups throughout North America, CQL published the *Personal Outcome Measures*® offering people with disabilities an opportunity to define their own quality of life outcomes and exert choice and self-determination. In 1993, CQL published the *Personal Outcome Measures*® as an alternative to both its traditional quality indicators and assessment methodology. CQL signaled a new era in quality measurement with a re-definition of quality from organizational compliance to responsiveness to people.

At the start of the new century, and after ten years of data gathering and analysis, CQL recognized that personal outcomes are most likely to be realized when people are part of communities of concerned and supporting people. CQL once again shifted its definitions of quality by focusing on the social or community context for the attainment of personal quality of life. The individual focus of person-directed outcomes, self-determination and individual choice requires a social context. The challenge for organizations and support groups is not only to engage in person-directed processes; rather, it is to use the person-directed orientation to build social capital and community connections.

In 2005, CQL published the Quality Measures 2005® as the next evolution in progressive indicators of quality of life and quality in services to people with disabilities.

CQL's *Quality Measures 2005*® is a comprehensive resource on multiple dimensions of quality assessment and enhancement. It builds on the foundations of past standards and moves human service providers forward into the current environment. *Quality Measures 2005*® contains five sections including: Shared Values, Basic Assurances®, Responsive Services®, Personal Outcome Measures®, and Community Life®.

This is one of a series that reports key findings from the CQL *Quality Measures 2005*® Database. We encourage readers to consider the lessons learned from our data in the movement toward a meaningful quality of life for people with disabilities in community.

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