

**County Department of Social Services** Wake County Human Services

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**Project Title**

**Category (Please select one)** Cost Savings Measures and/or Improvements in Efficiency

**Project Description and Summary**

**What did you do?**

**Describe your program or project. What did you do? What is the history behind the program/project? What did you hope to accomplish? What was your timeline? Your budget? How did you identify your objectives? How well did you use available resources?**

Project Description: Quality Assurance Targeted Monitoring Program

**Project Description and Summary**

The county identified the need to add a specialized Quality Assurance Team after the implementation of NCFAST in FNS, Medicaid and Work First. Prior to that time, Quality Assurance reviews were performed by trainers, supervisors and lead workers. Nine new positions were approved and a team was created within the Program and Staff Development (PSD) unit. This unit is now comprised of trainers, over the shoulder technical support staff and the QA team. There are two QA specialists for each of the major program areas: FNS, Adult Medicaid, Family & Children's Medicaid and Work First and a Supervisor.

The objectives for the Quality Assurance process are to improve accuracy, identify training needs, provide data for accountability purposes, and incorporate this information into our business analytics. Our workflow included:

Error Detection, Analysis, Communication, Error Identification

Communication (Discussion of Errors), Corrective Action, Training on Top 5 Errors

Over the Shoulder Support, Training Labs, Monitor Results

Our short term goal for FY 17 was to develop a tool that focused on the errors cited most frequently.

The targeted monitoring tool represents the following:

- errors cited by state, federal and/or outside monitor agencies,
- questions found on state, federal and outside monitoring agencies' case review tools
- tools and processes that are unique to the county

### **Project Success and Impact**

**What was the outcome?**

**Was your program/project a success? What was the impact? How did you measure the impact? How widespread is the impact of your program/project? How were you able to overcome obstacles and challenges? Did your program/project meet your established objectives?**

Project Success and Impact

Targeted monitoring tools were created for each program area (see attached for Family Medicaid tool) and training on use of the tools was held with supervisors prior to starting the QA process in September 2016. The goal was to monitor all eligibility staff with the targeted tools during FY 16–17. The QA process is a collaborative effort that involves both the QA team and the eligibility supervisors.

A tool was also created (see attachment) to track error trends by case manager and team throughout the year. This provides current data to

supervisors and managers to evaluate progress and trends for performance monitoring. Specific work objectives were put in place this fiscal year to measure accuracy in each of the economic services programs.

This model is a continuous quality improvement process in which we evaluate results, determine corrective action steps and monitor progress and adjust strategies as needed (illustrated in graphic attached). The Program and Staff Development unit is a support unit which consists of Quality Assurance, Staff Development, and Over the Shoulder Support staff. This is an ideal structure for communicating errors, analyzing root causes, developing and implementing corrective actions, and measuring and monitoring results.

The approach used to discuss and plan to correct the errors is a joint effort with all units in PSD and takes place on a monthly basis. The Quality Assurance team will identify and communicate the top five errors at the PSD Staff meeting to OSS and trainers who are assigned to the same program. The members of each program will spend 45 minutes to an hour discussing the errors, and coming up with corrective actions to execute and resolve the errors.

The trainers emphasize the top five errors for each program during training and develop tools to supplement the training that help to reduce the error rate. The over the shoulder support team continues to train people on the top 5 errors during labs, huddles, and when providing one on one assistance. Quality Assurance continues to collect data and report the statistics.

The QA team prepares communications to each program area detailing the most common errors found, recent policy clarifications and tips/hints to prevent errors.

This process has proved successful during the first year of implementation and has helped the agency focus on quality improvement.

