

ODP Quality Assessment & Improvement FY 20-21 Interim Review Process

August 27, 2020



QA&I Interim Review Process

- As a result of the COVID-19 pandemic, ODP received CMS approval in the 2nd amendment of Appendix K to develop an interim process set to begin Sept. 1, 2020
- Modifications were made to the QA&I process for FY 19/20 including all reviews will be conducted virtually.
- QA&I Cycle 2, Year 1 will begin July 1, 2021

The Office of Developmental Programs' Quality Assurance and Improvement (QA&I) process is being modified to account for the impact of the COVID-19 pandemic on the statewide service delivery system.

QA&I

An interim QA&I process for FY 20/21 will be implemented based on a random sample of waiver participants. The interim process will include a desk review to collect CMS performance measure data, telephone/remote individual interviews to ensure health and safety, and COVID-19 specific questions. ODP plans to implement the full QA&I process beginning July 1, 2021.

Purpose of the QA&I Interim Review

The QA&I interim review process will be used to demonstrate outcomes in the following areas:

- Individual experience of system support through the pandemic
- ISAC Recommendations
- CMS Performance Measures
- Health and Welfare
- ODP Priorities
- Validation of an entity's adherence with federal and state requirements.

QA&I Interim Review Process: Core Sample

- ODP pulled a core samples of individuals receiving services and supports using the proportionate random representative sampling methodology as described in the Intellectual Disability/Autism (ID/A) Waivers and Adult Autism Waiver (AAW).
- AEs, SCOs and Providers selected to be reviewed are based on the individuals selected in the core sample.
- There will not be a separate LOC sample
- There will not be a separate Base or SC Services only sample (only for individual interviews)
- AEs will not pull their own individual sample based off their Provider sample

QA&I Interim Review Process: Sampling Con't

- For Providers shared across ID/A and AAW services, the Assigned AE will complete the review and include ID/A individual records only.
 - ODP BSASP will complete the review for Providers who are only approved to render services in the AAW.
- Reminder for Providers authorized for services with multiple AEs, the Provider will be contacted by the different AEs requesting information pertinent to individuals in the sample selected.
- For SCOs shared across ID/A and AAW, ODP will conduct a review for both BCS and BSASP programs.

AEs, SCOs and Providers will not complete a self-assessment.

- Self-assessments will resume next year during FY 21-22, Cycle 2, Year 1.

QA&I Interim Review Process: Desk Review

- ODP and/or AEs will conduct a desk review for each individual selected to collect information that informs key performance metrics and quality outcomes
 - ODP conducts desk reviews of AEs, ID/A and AAW SCOs, and AAW-Only Providers
 - AEs conduct desk reviews of ID/A Providers and shared providers
- The questions being used for the desk review have been aligned between the ID/A and AAW waivers so there will be one tool for SCOs and one tool for Providers.
- For each question, the review period will be **July 1, 2019 through February 29, 2020** unless otherwise specified.

QA&I Interim Review Process: Desk Review continued...

- The desk review will use all available data sources, which may include but are not limited to:
 - HCSIS – service notes, monitoring tools, Individual Support Plans (ISPs) Prioritization of Urgency of Need of Services (PUNS), Supports Intensity Scale (SIS), Scales of Independent Behavior Revised (SIB-R), Periodic Risk Assessment (PRE), Quality of Life assessment, Independent Monitoring for Quality (IM4Q) considerations
 - Enterprise Incident Management (EIM) – incident reports
 - Documentation – progress notes, policies and procedures, and training records
- **Each entity being reviewed during the interim review will receive a notification that will include details about the individuals included in the sample and a list of documentation that must be organized and submitted electronically to the QA&I team prior to the desk review.**

Changes to ID/A SCO and Provider Training Questions

- Guidance has been aligned between the two tools
- 25% of staff for all questions
- Remediation options for SC Orientation/ and CPS training requirements:
 - Removed voiding of claims
 - Below 86% threshold
 - Referred to ODP to determine further actions
- Training Tracker – *new for Providers
 - Ensure efficiency of reviewing staff training

During the interim review, all QA&I reviews will occur virtually. No face-to-face meetings will be conducted.

- The onsite review will resume FY 21-22, Cycle 2, Year 1.

- At the conclusion of the desk review, a virtual conference of the QA&I team and entity leadership will occur to discuss findings and recommendations from the interim review as well as the entity's quality improvement priorities, successes and challenges.
- The virtual conference replaces the entrance and exit conferences typically scheduled during the QA&I review process.
- After the virtual conference, entities will be sent a link to complete a COVID-19 Supplement

QA&I Interim Review Process: Individual Interviews

In order to fully evaluate the individual's experience with services and supports, individual interviews are considered a critical component of the QA&I process.

- Individual Interviews will be conducted remotely by the IM4Q local programs.
 - Includes all individuals in the Core Samples (ID/A and AAW) as well as a separate sample of individual's enrolled in Base and SC Services only
- Interview questions will focus on the experience of support through the pandemic

What Happens After the Desk Review?

ODP expects all entities to engage in quality improvement as a result of lessons learned from the QA&I process. This includes the following corrective action activities:

- Remediation
- Plans to Prevent Recurrence (PPR)
- Validation
- Directed Corrective Action Plan (DCAP)

Remediation

- Required for instances in which an entity has not met the standard of a particular QA&I question or series of questions
- These instances must be corrected within 30 days of receipt of the QA&I Spreadsheet unless there are concerns for health and safety where remediation must occur immediately
- The instances for remediation will be documented on the QA&I Spreadsheet and include proof of remediation already completed

Plans to Prevent Recurrence (PPR)

- Required when the compliance score for the requirement is less than 86%
- Outlines actions that will be taken to ensure future instances of non-compliance do not occur.
 - For any activity requiring longer than 3 months to implement, the entity is responsible to provide an update on the progress of such activity(s) within 30 days of the CAP to ODP.

Validation

- Entities are responsible for submitting evidence of remediation and PPRs to the QA&I Lead. Documents submitted should support the remediation option chosen on the QA&I spreadsheet and the PPR described in the CAP. This may include documents such as staff training records, updated policies, etc.
- If necessary, follow-up virtual meetings or site visits may also be conducted to adequately assure that all remediation and PPR actions have been completed and for ODP or the AE, as appropriate, to provide technical assistance.

Directed Corrective Action Plan (DCAP)

- A Directed Corrective Action Plan (DCAP) will be issued when an entity fails to respond to the CAP from ODP or the AE, as appropriate.
- In addition, a DCAP will be issued if the revisions to the CAP are not approved.
- The QA&I Lead will require a DCAP to be developed under mandatory technical assistance within 45 calendar days from the date the initial response to the CAP was submitted by the entity.
- The AE must collaborate with the ODP QA&I Lead when issuance of a DCAP is required for a Provider.

QA&I Interim Review Process: Comprehensive Report

- For the QA&I Interim Review process, reviewed entities will **not** receive a Comprehensive Report; however, a copy of the completed QA&I spreadsheet along with the CAP (if applicable) will be sent electronically to the entity reviewed.
- The summary of results from the interim review will be included in the Statewide QA&I Report. The development and distribution of the Comprehensive Report will resume with the QA&I activities in Cycle 2, Year 1.
- Reminder, a copy of the completed QA&I spreadsheet along with the CAP (if applicable) will be sent electronically to the entity reviewed. Receipt of this information indicates that the interim review for the entity is complete.

QA&I Interim Review Process: Statewide QA&I Report

ODP will compile all data collected from the QA&I Interim Review process into a report that represents statewide performance of reviewed AEs, SCO's and Providers and the overall system as it relates to quality of services and supports and promising person-centered practices.

QA&I Interim Review Process: Timeline

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| 8/3/20 | <ul style="list-style-type: none"> • ODP provides a listing of all entities selected for the Interim Review |
| 8/15/20 | <ul style="list-style-type: none"> • ODP notifies AEs of the Providers and individual sample records |
| 9/1/20 | <ul style="list-style-type: none"> • ODP and AEs begin contacting entities included in the Interim Review to request required documentation |
| 9/15/20 | <ul style="list-style-type: none"> • Individual Interviews & Desk Reviews begin |
| 10/1/20 | <ul style="list-style-type: none"> • QuestionPro links available for data entry |
| 12/31/20 | <ul style="list-style-type: none"> • Deadline for ODP to complete all Individual Interviews • Deadline for ODP and AEs to complete all Desk Reviews and virtual conference |
| 1/31/21 | <ul style="list-style-type: none"> • Deadline for ODP and AEs reviewers to issue remediation and PPR activities for review and completion |
| 2/28/21 | <ul style="list-style-type: none"> • Deadline for all entities to complete remediation & respond to CAP detailing remediation actions taken & PPRs |
| 3/31/21 | <ul style="list-style-type: none"> • Deadline for ODP to enter all Individual Interview data into QuestionPro • Deadline for ODP and AEs to enter all Desk Review data into QuestionPro |
| 4/15/21 | <ul style="list-style-type: none"> • ODP begins development of Statewide QA&I report |

Quality Assessment & Improvement Interim Review Process Resources on MYODP:

<https://www.myodp.org/course/view.php?id=976>

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- Next Steps
- Closing Thoughts
- Questions

