DEPARTMENT OF DEVELOPMENTAL SERVICES OFFICE OF QUALITY MANAGEMENT SCORING INSTRUCTIONS

SCORING:

All indicators are scored based on evidence noting a justification for the rating.

- MET Evidence demonstrates that standards are achieved.
- NOT MET Evidence demonstrates that standards are not achieved.
- NOT RATED The indicator does not apply to the location or individual.
- NOT MET, NOT INCLUDED in scoring Evidence demonstrates that issues are beyond the providers' control.

ADMINISTRATIVE/ORGANIZATIONAL INDICATORS: REVIEW AND SCORING

Licensure indicators: There are eleven indicators that are rated exclusively based on an administrative review of organizational systems. These include such items as Human Rights Committee effectiveness, and ensuring that employees have the necessary licenses and qualifications. Rate these items on the Administrative score sheet.

- Two of these licensure indicators are rated based on information gathered from the organization and from locations. (L2 and L65)
- One of these (L 92) is only rated for Employment/Day Supports when the provider owns/operates social enterprise/business from a physical location (e.g., farm, thrift store, café, etc.).

Certification indicators: There are six indicators that are rated exclusively based on information obtained at the organizational level. These include such items as planning and systems to review program quality. Rate these items on the Administrative score sheet

	Licensure Organizational Indicators	Where/ how many rated
L2: Þ	Abuse/neglect reporting	Combination of each location's M or NM and anything derived from organizational review (surveys report info from field at consensus with admin info added in)
L3	Immediate Action (IA)	Number of successful IA over number of Complaints with Immediate Actions reviewed (review a sample of Complaints from the past 13 mos. Not to exceed 15) (validation in the field when indicated)
L4	Action taken	Number of successful Actions Plans over number of completed investigations with Action Plans reviewed (review a sample of Action Plans from past 13 mos. Not to exceed 15) (validation in the field when indicated)
L48	HRC	Number of successful HRC over number of Provider HRCs (review all HRCs)
L65	Restraint report submit	Number of timely restraint reports over number of restraints which occurred over past 13 months
L66	HRC restraint review	Number of restraints reviewed by the HRC 120 Days from event date over number of restraints which occurred over past 13 months
L74	Screen employees	Number of new employees successfully screened over the number of new employees sampled/reviewed (10%)
L75	Qualified staff	Number of employees qualified over the number of employees sampled/ reviewed for qualifications/ licenses (eg Nursing; SW)
L76	Track trainings	Number of employees trained in all matters over the number of employees sampled/ reviewed
L83	HR training	Number of employees trained in human rights over the number of employees sampled/

			reviewed				
E/D	service	certified and inspected as					
Cer	tification	Organizational Indicator	s	Where/ how many rated			
		data regarding program quations, restraints, and medica	One score for provider based on criteria for met/ not met				
C2	Analyzes	information gathered from	One score for provider based on criteria for met/ not met				
C3	Actively with serv	•		One score for provider based on criteria for met/ not met			
		and utilizes input received nent efforts.		One score for provider based on criteria for met/ not met			
C5	Has a pro	cess to measure progress to	One score for provider based on criteria for met/ not met				
		nanisms to plan for future di to actualize these plans.	• •	One score for provider based on criteria for met/ not met			

LOCATION AND INDIVIDUAL SCORING:

The licensure and certification indicators are based on information pertaining to either the location or to an individual. For example:

- Location (L): The smoke/carbon monoxide detection system is operational.
- **Individual (I):** The individual has received an annual physical.

How Evaluated:

- 1. Staff will be interviewed based upon who is working at the time of the survey to gather evidence **on-site**. Please note that on-site reviews can occur virtually and surveyors can collect evidence as denoted in the tool (interviews, observations, environmental review, documentation review) through Webex and other mechanisms.
 - a. For Residential services, at least one direct service professional per site must be interviewed. This must be a person regularly scheduled to work with the individuals in the home, not a relief staff person. It may also include supervisory staff.
 - b. For Day Services, at least one direct service professional that supports the person should be interviewed. This must be a person regularly scheduled to work with the individual not a relief staff person. It may also include supervisory staff.
- 2. Review of documentation and observations are **on-site** methods used to gather evidence to determine ratings/scores.
- 3. There are indicators that may be evaluated based on initial data/ documentation available prior to going to the location(s) and then confirmed **on-site** to determine the rating.
 - For instance, L 91 incident reporting. A HCSIS report of incidents that were filed for a location within the past 13 months is generated. A review of the provider's compliance with meeting timeline expectations is conducted (off-site). If the submission or finalization of any incident report does not meet required timelines, a not met will be assigned to the location indicator L 91.
 - An additional review of documentation will be conducted at the location **on-site** to determine that all events that should have been reported had been. If an event that should have been reported was not, a not met will be assigned to the location indicator L 91.

How Rated:

Location-based indicators are rated once for the location being audited.

Individual based indicators are rated once for each individual audit.

- Please refer to Appendix C for business rules on auditing and sampling, including rules for replacement individuals on specialty indicators.
- When more than one audit is conducted at a location; a rating is assigned to the indicator based on the number of audits at that location.
 - 1. Example: 2 audits @ 123 Main Street L46 Medication Administration
 - Individual (JS) Met
 - Individual (SS) Met

LICENSE: DETERMINING THE OVERALL RATING FOR AN INDICATOR RATING BY SERVICE GROUP:

Service Groupings:

- Residential and Individual Home Supports: All Residential service codes subject to licensure
 - o IHS, Placement, ABI/MFP Res are examples of service types
- Employment/Day Supports: All Employment/Day: all day/employment service codes subject to licensure
 - o CBDS is an example of a service type
- 1. Each service type within the service grouping has certain applicable licensure indicators. For example, fire drills are not rated within Placement services as this is not a requirement of that service. Please refer to the applicability charts for indicator applicability by service type.
- 2. Scores are summated for each indicator by Service type based on the total number met/total number rated. Please note that the total rated could be total locations rated or total individuals rated.
- 3. Please note that by scrolling down the service type columns you can see how each service type performed (e.g. Residential as compared with ABI residential).
- 4. All scores for the service group are then added together to determine the overall score for that indicator.
- 5. For each indicator with a percentage of 80% or greater a standard met (M) will be noted on the Master Score Sheet, and for each indicator with a percentage of less than 80%, standard not met (NM) will be noted.
 - a. When the **overall denominator for the service group** for an indicator is **only 4**, there is a 3 out of $4 (\frac{3}{4} = 75\%)$ rule that provides an exception to the 80% threshold and a rating of met will be given.

Indicator no.	Indicator topic:		<u>res</u>	Abi res	<u>plcmt</u>	<u>IHS</u>	total	rating
<u>L1</u>	Abuse/neglect training	<u>I</u>	<u>11/11</u>	<u>2/2</u>	<u>2/2</u>	<u>3/3</u>	<u>18/18</u>	<u>Met</u>
<u>L5</u>	Safety Plan	<u>L</u>	11/11	<u>1/1</u>	<u>2/2</u>	<u>1/1</u>	<u>15/15</u>	Met

MASTER SCORE SHEET (SAMPLE); INTERPRETING THE MASTER SCORE SHEET

- Please note that critical indicators are highlighted both in color and with a flag \square .
- Each number and indicator topic is listed.
- Some indicators are rated once for the location (L). Other indicators are rated on an individual basis (I)
- Organizational indicators are rated based on the number reviewed as referenced above. If there are
 no applicable items to rate, the organizational indicator will be NOT RATED. For example, if there
 are no restraints which occurred during the 13-month review period, L65 and L66 would be not
 rated.

			Met,NotRated)
<u> L2</u>	Abuse/neglect reporting	<u>19/19</u>	<u>Met</u>
<u>L3</u>	Immediate Action	<u>9/9</u>	<u>Met</u>
<u>L4</u>	Action taken	<u>8/8</u>	<u>Met</u>
<u>L48</u>	<u>HRC</u>	<u>2/2</u>	<u>Met</u>
<u>L65</u>	Restraint report submit	<u>74/117</u>	Not Met(63.25 %)
<u>L66</u>	HRC restraint review	<u>69/81</u>	Met(85.19 %)
<u>L74</u>	Screen employees	<u>18/18</u>	<u>Met</u>
<u>L75</u>	Qualified staff	<u>4/4</u>	<u>Met</u>
<u>L76</u>	Track trainings	20/20	<u>Met</u>
<u>L83</u>	HR training	20/20	<u>Met</u>
L92 (for E/D service grouping)	Sub-locations are licensed, certified and inspected as required	<u>3/4</u>	Met (75%)
<u>Total</u>			10 indicators met/11 indicators rated

Residential and Individual Home Supports:

	<u>Ind. #</u>	<u>Ind.</u>	<u>Loc.</u> <u>or</u> Indiv.	Res. Sup.	Ind. Home Sup.	Place.	Resp.	ABI- MFP Res. Sup.	ABI- MFP Place.	Total Met/Rated	Rating
	<u>L1</u>	Abuse/neglect training	<u>l</u>	11/11	<u>2/2</u>	<u>2/2</u>		<u>3/3</u>		<u>18/18</u>	<u>Met</u>
	<u>L5</u>	Safety Plan	ᆈ	<u>11/11</u>	<u>1/1</u>	<u>2/2</u>		<u>1/1</u>		<u>15/15</u>	<u>Met</u>
b	<u>L6</u>	<u>Evacuation</u>	ᆈ	<u>11/11</u>	<u>1/1</u>	<u>1/1</u>		<u>1/1</u>		<u>14/14</u>	<u>Met</u>
	<u>L10</u>	Reduce risk interventions	<u>l</u>	<u>6/6</u>	<u>1/1</u>	<u>2/2</u>				<u>9/9</u>	Met
	#Std. Met/# 79 Indicator		total r	numbe		et indic licators ouping				<u>71/79</u>	
	Total Score		t Individual/Location indicators ors/ total number rated						<u>81/90</u>		
										<u>90%</u>	

DETERMINING THE LICENSURE LEVEL AND SCOPE OF FOLLOW-UP SCOPE FOR:

- A. Residential and Individual Home Supports all program codes
- B. Employment and Day services all program codes
 - The applicable organizational indicators are added with the total number of indicators evaluated for the service group to determine the licensure level. The Licensure levels for Residential/ Individual Home Supports, Employment/Day services are determined separately.
 - o (See Manual's Licensure and Certification chart for further details).
 - o <u>Two Year License</u> "standard met" for at least 80% of the licensure indicators in its residential/home supports and day/employment supports (rated separately)and a rating of

- "standard met" for all 8 critical indicators (refer to flagged indicators in the licensure tool for designation of 8 critical indicators).
- o <u>Two Year License with Mid Cycle Review</u> "standard met" for 60-79% of the licensure indicators in either or both of its residential/home supports and day/employment services (rated separately) and a "standard met" for all 8 critical indicators.
- o <u>Deferred License</u>- applies when one or more of the 8 critical indicators receive a "standard not met." In this situation the provider is given the opportunity to make corrections within 60 days. If corrected, the provider receives a Two Year License with a Mid Cycle Review. If not corrected, a recommendation for non-licensure is made.
- o **Recommendation for de-licensure-** applies when "standard met" for 59% of the licensure indicators in either or both residential/ home supports and day/ employment services (rated separately)
- Regardless of the percentage, failure to meet one or more critical indicator will result in the Service Grouping's licensure level being deferred, pending follow-up.
- Follow up is conducted by Service Grouping:
 - o **Provider completes** when the overall percentage of indicators which are met is 90-99%.
 - o **OQE completes** when the overall percentage of indicators which are met is 89% or below and/or when the Provider fails to meet one or more critical indicators.

DETERMINING THE CERTIFICATION LEVEL:

Residential and Individual Home Supports – all program codes - except Respite

• 23 possible indicators (applicability depends on service type)

Employment and Day services – all program codes

- 30 possible indicators (applicability depends on service type)
- 1. Each service type within the service grouping has certain applicable certification indicators. For example, meaningful day activities are not rated within Placement services as this is not a requirement of that service. Please refer to the applicability charts for indicator applicability by service type.
- 2. The total number of certification indicators rated MET/total number rated is noted per service type. Certification scores are listed separately by service type on the Master Score sheet. Please see example of chart below.
- 3. Then the total number of indicators rated met/total number rated for all of the service types is added to the six planning and quality management indicators to determine an overall rating for the service group.
 - For example, a Provider being certified for 24-hour residential services and individual home supports may be rated in a total of 44 certification items and six quality management indicators. Overall, the provider MET 48/50 = 96% Certified
- 4. Certification levels are determined for the service groups as follows:
 - **Certified:** when the overall percentage of certification indicators which are met is 80% or more.
 - Certified with a Progress Report: when the percentage of certification indicators met is 79% or less.
- 5. Follow up is not conducted on Certification. Providers who receive a **Certified with Progress Report** will need to complete a progress report on all not met certification indicators at the one year mark.

SAMPLE CERTIFICATION MASTER SCORE SHEET (summary)

Organizational: Certification (C1 – C6)

C1	Provider data collection	1/1	Met (100%)
Total #Met/# 6			6/6
Indicators			

Service Types:

Residential and Individual Home Supports
1.1

Residential Services			
11 Location / 22 Individua	l Audit		
C7	Feedback on staff / care provider performance	11/11	Met (100%)
C8	Family/guardian communication	11/11	Met (100%)
C9	Personal relationships	10/11	Met (90.91%)
C54	Assistive technology	10/11	Met (90.91%)
#Met/# 22 Indicators			21/22
ABI-MFP Residential Se	rvices		
Location / 3 Individual A			
20000017 0 200001			
C7	Feedback on staff / care provider performance	3/3	Met (100%)
C9	Personal relationships	3/3	Met (100%)
C54	Assistive technology	2/3	Not Met (66.67%)
#Met/# 22 Indicators	-		19/22
Placement Services 2 Location / 2 Individual A C7	Feedback on staff / care provider performance	2/2	Met (100%)
C8	Family/guardian communication	2/2	Met (100%)
C54	Assistive technology	1/2	Not Met (50%)
#Met/# 22 Indicators			19/22
Individual Home Suppor	ts		
1 Location / 2 Individual A			
C7□	Feedback on staff / care provider performance	2/2	Met (100%)
C10□	Social skill development	1/1	Met (100%)
#Met/# 22 Indicators			20/22
Cotal Service Grouping 5/94	Sum of all of the service + 6 Organizational rating	• 1	Certification Score
6 Indicator Std.			Met 90%

After the scores are finalized, the Provider report and QE5 will reflect the licensure and certification levels for the Provider as demonstrated in the sample below:

Employment and	2 Year License	Certified	11/26/2019 -
Day Supports	60/63 Indicator Standard Met (95%)	20/20 Indicator Standard Met (100%)	11/26/2021
Community Based		14/14 Indicator Standard Met	
Day Services			
Residential and	2 Year License	Certified	11/26/2019 -
Individual Home	80/86 Indicator Standard Met (93%)	25/28 Indicator Standard Met (89%)	11/26/2021
Supports			
Residential		19/22 Indicator Standard Met	
Services			
Planning and Quality			

Management		
Planning and	6/6 Indicator Standard Met	
Quality Management		