

Appendix A: Waiver Quality Performance Measures 2013-2018

Responsible Unit	Description of Measure	Target Goal FY16
Intake	Eligibility for waiver services is assessed when there is a reasonable indication that services will be needed in the future.	86%
Intake	Eligibility for waiver services is determined by applying the appropriate process and instruments.	86%
Waiver Unit	Newly enrolled providers meet initial quality and business standards prior to service provision.	86%
PCR	Certified providers train staff according to DDS policies and procedures.	86%
IMEU	SRI's are reported by 5 pm the next business day after it occurred or when it was discovered.	86%
PCR	New providers pass initial certification within six months of initial delivery of service.	86%
Waiver Unit	Licensed clinicians continue to meet applicable licensure requirements.	86%
PCR	Providers continue to meet applicable certification standards.	86%
QE/QI/PAU	Providers correct identified deficiencies cited during certification reviews.	86%
Waiver Unit	Qualified providers of home and vehicle modifications and PERS maintain compliance with waiver standards.	86%
Waiver Unit	Individuals receiving Home and Vehicle modifications and PERS services report satisfaction with providers of Home and Vehicle modifications and PERS services.	86%
SPCD	The IDT completes the LON prior to the development of each person's ISP.	86%
SPCD	ISPs reflect personal goals and needs identified through the LON assessment process.	86%
SPCD/Waiver Unit	Annual ISPs are approved on time within 365 days of the prior ISP.	86%
SPCD	ISPs are revised in response to the person's request, change in needs and change in supports.	86%
SPCD	Individuals receive services described in their ISP in type, scope, amount, duration and frequency as specified in the ISP.	86%
SPCD	The ISP includes documentation that the person was given a choice of services and service providers.	86%

SPCD	The ISP contains documentation that the person was given a fact sheet on how to report abuse, neglect, mistreatment, exploitation and unexplained death.	86%
SPCD	The Service Coordinator follows up on any serious reportable incidents in accordance with established guidelines.	86%
SPCD	People receiving psychotropic medications have a quarterly medication review.	86%
SPCD	People receiving services receive a physical exam in accordance with state waiver policies.	86%
IMEU	IMEU investigators respond to allegations of abuse and neglect and serious physical injury according to incident management policies.	86%
IMEU	Incident investigations are completed/closed on time, according to incident management policy and procedure.	86%
IMEU	People are notified of the outcome of the incident investigation within 5 business days of the provider receiving the investigation report.	86%
IMEU	Recommendations resulting from investigation of SRIs are implemented in accordance with the incident management policy and procedure.	86%
IMEU	Unauthorized uses of restrictive interventions are appropriately reported according to incident management policies and procedures.	86%
PAU	Death investigations are completed within 45 business days from the submission of the complete record as outlined in the mortality reporting procedure.	86%
PAU	The provider submits a plan of correction within 15 business days of receiving the MRC recommendations, as outlined in the mortality reporting procedure.	86%
PAU	Death investigations are reviewed by the MRC within 45 days of receipt of the death investigation report.	86%
PAU	MRC recommendations are implemented within the assigned timeframe.	86%
PAU	FRC recommendations to DDS are implemented within the assigned timeframe.	86%
PAU	BSPs are approved by the DDS RCRC as outlined in the RCRC procedure.	86%
PAU	BSPs with restrictive controls are reviewed by the DDS RCRC.	86%
QE/QI	Issues are resolved within the assigned timeframes.	86%

PCR	Medications are administered by appropriately credentialed staff.	86%
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