1. PURPOSE

The purpose of this procedure is establish guidelines and standards and delineate responsibilities for the Department on Disability Services (“DDS”), Developmental Disability Administration (“DDA”) to sanction providers by placing them on Enhanced Monitoring, when providers do not meet DDA’s requirements around providing consistent high-quality person-centered supports and services that enable District residents with intellectual and developmental disabilities to lead safe, healthy, secure, satisfied, meaningful and productive lives.

2. APPLICABILITY

This procedure applies to all DDS/DDA employees, contractors, providers and vendors that provide services and supports to people with intellectual and developmental disabilities who receive services as part of the DDA Service Delivery System, funded by DDA and/or the Department of Health Care Finance (“DHCF”).

3. PROCEDURES

Placement on Enhanced Monitoring status is a critical performance measurement of the DDA provider community. Enhanced Monitoring is a short term, intense intervention that leads to issue resolution and increased capacity to promote the health, safety and welfare of people supported by DDA.
A. Identification of Deficient Performance Leading to Provider Placement on Enhanced Monitoring

A provider may be placed on Enhanced Monitoring as a provider agency in its entirety, as a provider of a specific waiver service, or for a specific service location. The following criteria may be used by DDS Quality Management Division (“QMD”) to place a provider on Enhanced Monitoring:

1. Identification by DDA or the Department of Health, Health Regulation and Licensing Administration (“DOH/HRLA”) of an immediate jeopardy or imminent danger to one or more people who receive services and supports from a DDA provider, which is not resolved immediately and cannot be resolved permanently within 24 hours.

2. Other enforcement action as evidenced by a report from DOH/HRLA.

3. A pattern of repeated Serious Reportable Incidents (“SRIs”) or a recurring series of reportable incidents that have not been adequately addressed and that poses an imminent risk to the health, safety, and well-being of the people being supported.

4. Repeated entry of a specific service location(s) or service onto the Watch List.

5. A score of “Unsatisfactory” on the DDA Provider Certification Review (“PCR”).

6. Recommendation from the Immediate Response Committee or the Quality Improvement Committee based on a pattern of SRIs.

7. Patterns or trends in issues identified through Service Coordination, Incident Management and Enforcement Unit, Health and Wellness Unit, QMD, Home and Community-Based Services Waiver Utilization reviews, the Office of Contracting and Procurement, or by DHCF.

8. Recommendation from the Mortality Review Committee (“MRC”) Coordinator based on death investigation/data and MRC recommendations.


10. A provider who has performance issues related to adaptive equipment, that are deficient or that pose a threat to the health, safety, and well-being of the people receiving services, may be placed on the Enhanced Monitoring in accordance with the DDA Imposition of Adaptive Equipment Sanctions Procedures.
11. The QMD Director shall review, at least monthly, all reports related to PCR, Provider Performance Reviews (“PPR”), Service Coordination and Planning Monitoring, Health and Wellness Monitoring, Contractor Performance Evaluations, Enhanced Monitoring, the DDA provider Watch List, and reports from the Evans Court Monitor, DOH/HRLA, and the Quality Trust for Individuals with Disabilities. Based on those reviews, the QMD Director may implement interventions and corrective action when indicated, including, but not limited to, placement on the Enhanced Monitoring.

B. Notification

1. The QMD Director, or her designee, shall notify the provider in writing when they are placed on and removed from the Enhanced Monitoring List.

2. The Service Planning and Coordination Division shall notify the person, his or her family, if appropriate, and substitute decision maker when the provider who supports the person is placed on the Enhanced Monitoring and shall offer to convene a support team meeting to discuss whether the person wishes to remain with the provider or would like to explore other options.

C. Enhanced Monitoring Plan

1. The QE/QI Unit will coordinate the Enhanced Monitoring effort across DDA divisions. Monitoring will be initiated immediately in cases of significant concerns related to health and welfare. Enhanced monitoring for reasons other than urgent health and welfare concerns will be initiated within 5 business days.

2. Within five (5) business days of the determination to initiate the enhanced monitoring, the Enhanced Monitoring Team will develop a single integrated monitoring tool. This tool incorporates all outstanding issues from all DDS divisions. All requests, schedules and benchmarks will be developed, reviewed and assigned timelines for completion.

3. The Enhanced Monitoring Plan will include the frequency of visits; site(s), service(s), individual(s); sample size; and duration (expected time frame for resolution). It will also define the criteria for the Provider to meet in order to be removed from Enhanced Monitoring.

4. The Enhanced Monitoring Plan will be reviewed weekly by the QIS and QE/QI Manager and bi-weekly by the Team. It is the responsibility of the QIS to make revisions (adding additional indicators/issues as discovered) or modifying the frequency, sampling, duration or other aspects of the Plan.
D. Required Plan of Correction

1. Once QMD has placed a provider on Enhanced Monitoring, the Supervisor, Quality Improvement Specialist (“QIS”) will notify the provider in writing of the specific performance deficiencies, expected resolution(s), benchmark criteria to achieve resolution, and timelines for expected completion.

2. Within five (5) business days of receiving the letter, the provider must submit a Plan of Correction to the Supervisory, QIS, which details the actions to be taken, the person(s) responsible, the timeline, and the documentation that the plan of correction has been implemented and that it has successfully addressed the issue. The plan of correction must be timely and responsive to the concerns. The issue must be addressed within 90 calendar days or more quickly depending on the seriousness of the issue.

3. The Supervisory, QIS will notify the provider in writing within three (3) business days if the plan of correction is accepted. If not accepted, the provider has two (2) business days to correct and resubmit to the Supervisory, QIS. Within two (2) business days, the Supervisory, QIS will accept the new plan of correction or within five (5) business days, will convene a meeting (in person or by phone) to explain to the provider why the plan was not accepted and work with the provider to develop a directed plan of correction.

4. The provider shall implement the plan of correction and notify the Supervisory, QIS when they determine they have successfully resolved the issues which placed them on Enhanced Monitoring. QMD will verify resolution by site visit, record review and/or interview(s).

5. Each month, QMD shall evaluate the provider’s success in resolving the identified performance deficiencies, the provider’s capacity to identify and respond to issues, and the provider’s systems to prevent reoccurrence and make a recommendation to the QMD Director on whether to end or continue enhanced monitoring, and whether to consider additional sanctions.

6. When the QMD Director determines that the provider has implemented the corrective action plan and successfully developed durable systems, the provider will be exited from Enhanced Monitoring, and QMD shall notify the DDS Deputy Director for DDA and the Executive/President of the provider.

7. The provider shall have a goal related to the cause(s) that triggered enhanced monitoring added to their Continuing Improvement Plan to be monitored as part of ongoing PPR.
E. QMD Reporting

1. Each month, the QIS will develop and distribute a monthly progress report for each provider on Enhanced Monitoring. Copies shall go to the QMD Director, DDS Deputy Director for DDA, and the Executive/President of the provider agency.

2. At the conclusion of each enhanced monitoring period, the QIS will develop and distribute a written summary of the Enhanced Monitoring, including quantitative and qualitative data from the Enhanced Monitoring Tools and recommendations for follow up to the QMD Director, DDS Deputy Director for DDA, and the Executive/President of the provider.

F. Additional Sanctions

A provider that is placed on Enhanced Monitoring may be subjected to escalating and/or additional sanctions based on the type or severity of the conditions or the duration or frequency of Enhanced Monitoring.

1. The immediate impact of Enhanced Monitoring will be, at a minimum:
   a. The provider will be required to have an accepted Plan of Correction, as described above.
   b. Placement on DDA’s Do Not Refer List for the service location, service or entire agency per the scope of the enhanced monitoring.
   c. Providers who undergo PCR while on Enhanced Monitoring may only achieve a provisional certification.
   d. DDA will require the provider to address all performance deficiencies during PPR, in accordance with DDA’s PPR policy and procedure.

2. For providers with Human Care Agreements, who have been placed by DDS on Enhanced Monitoring, after 30 days, DDS may take a pro rata share of the vacancy rate and administrative rate for the vacancy that cannot be filled due to the provider’s deficient performance.