

District of Columbia Provider Certification Reviews

Marion Olivier, Project Director

Mike Marshall, Program Manager

Jaleesa Myles, Regional Manager

Katrina Tirao, Regional Manager

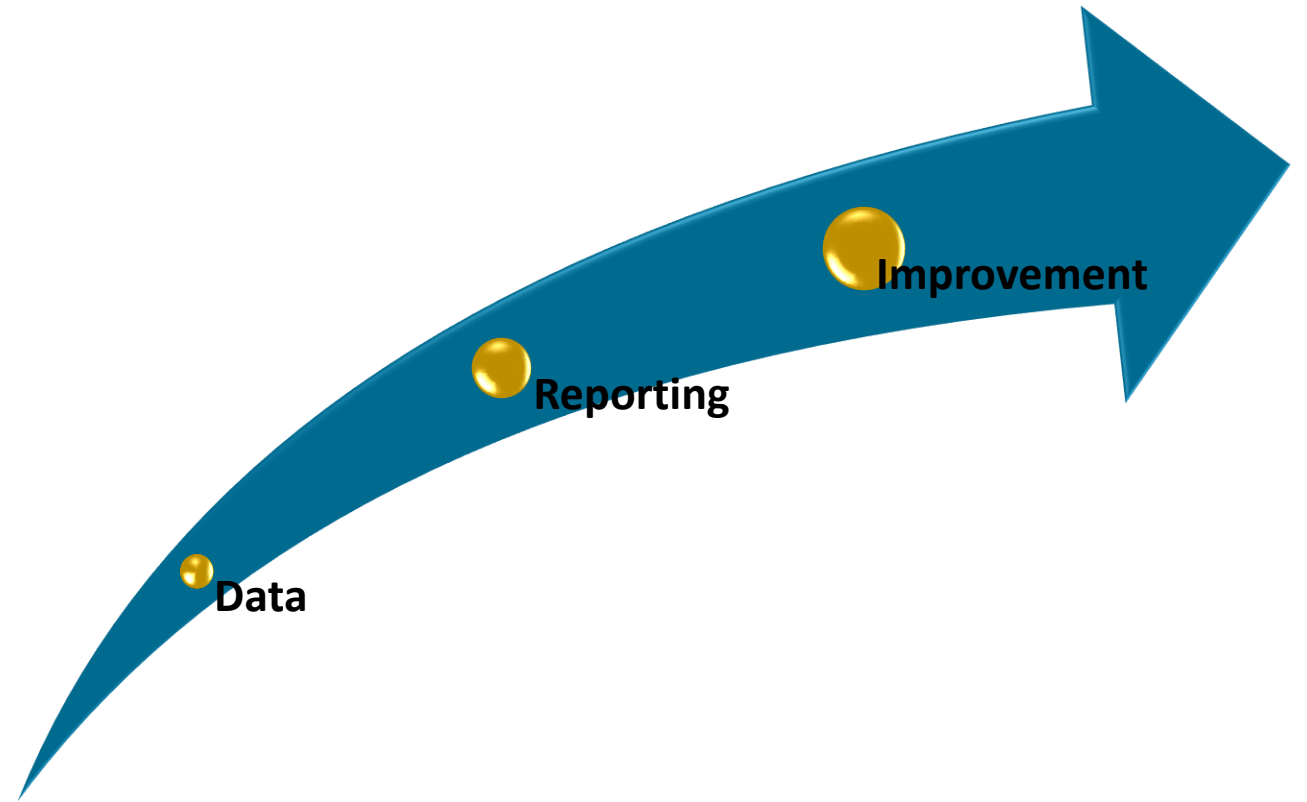


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Data Collection Updates

Qlarant's Approach

Working collaboratively with DDS and providers to help ensure people receive quality supports and services.



Data Collection Changes

- For each indicator, we have identified the specific requirements based on DDS policies and regulations and waiver procedures. Examples:
 - If the person has an identified need to use adaptive equipment or durable medical supplies, is the adaptive equipment or durable medical supplies in good repair?
 - If the person's adaptive equipment was not in good repair, documentation reflected actions taken.
 - If the person's durable medical equipment was not in good repair, documentation reflected actions taken.
 - Documentation showing how MCIS is used to verify the working condition of the adaptive equipment on a monthly basis.
 - Are services being provided in accordance with the waiver prior authorization agreement and in accordance with the ISP?
 - Services are provided in accordance with the waiver prior authorization agreement.
 - Services are provided in accordance with the ISP.

This change ensures:

- Consistency in what is being reviewed by the Quality Surveyors
- All rules and regulations associated with the indicator are being evaluated for compliance
- Better understanding of what the specific rules and regulations are
- More specific data are collected to better identify areas/trends needing improvement at provider and District level
- Specific reason(s) why the indicator is scored no is identified so the provider knows what specifically needs to be addressed



Report Changes

Report Changes: CAP

Provider Certification Review		
Corrective Action Plan for Not Met Indicators		
Please complete this form and submit to the Lead Surveyor within 5 business days of receipt of this form.		
Provider: Best Provider Ever!		
Review Date: 05/01/2023		
Service: Supported Living		
Identifier	Indicator	
H.RES.36	Is there a lease or written residency agreement that provides the same responsibilities and protections from evictions and addresses appeals comparable to relevant landlord/tenant law in the jurisdiction?	
Evidence	Person 4: The Residential Lease Agreement dated 9/21/20 presented did not include responsibilities and protections from evictions or address appeals in accordance with waiver rule 1938.2 HCBS Setting Requirements and DC Tenant Rights. There was no documentaion of the circumstances the person could be evicted, the process of how the person could be evicted following the judicial process, or how the person could appeal an eviction. In conversations with the person, it was stated that the lease had been reviewed, but were not aware of the eviction process or how it could be appealed.	
Provider Responsible Party	Provider Completion Date	PCR CAP Response (Approved/Denied)
Corrective Action Plan		
How will the identified issue be addressed?		
How will the organization prevent reoccurrence of the issue?		



Report Changes: Detailed Report

No Changes to Identifying information

Report: PCR Indicator Response Detail Report								
Provider Name: Best Provider Ever!					PCR ID#: 1351			
Total Number Sampled: 4								
Person Centered Outcomes								
Rights and Dignity 96% ←								
Identifier	Indicator	# Yes	# No	Total Records Scored	% Yes	# NA	Reason(s) Scored No	Key #
CQ.1	Do the staff and the organization promote an environment that respects the person and treats them in a dignified manner?	3	1	4	75%	0	Staff did not use person centered language when referencing the person.	3
Evidence: Documentation referred to the person as "patient" and "non-verbal." Therefore, it was recommended the provider ensure staff are trained on using person centered language in their documentation.								
CQ. 2	Is the person's right to privacy acknowledged and practiced?	4	0	4	100%	0	NA	NA

Report Changes: Detailed Report

Risk 61%			
Identifier	Indicator	Scored	Reason(s) Scored No
OO.CQ.17	Does the provider have a system in place to ensure individuals are safe during emergencies and unusual circumstance?	No	The provider did not have a system in place to ensure individuals are safe during emergencies.
Evidence: The provider submitted a procedure that captured emergency procedures, but failed to demonstrate knowledge of people's needs and/or abilities during emergency situations, and did not show evidence that staff were trained on emergency preparedness. It was recommended the provider develop better tracking systems to ensure staff are trained on emergency procedures and people's specific needs related to emergency situations. The "Safety Needs Assessment" form was shared with the provider as a resource to document each person's specific needs during emergency situations. This can be used to train staff on each person's specific needs.			
OO.CQ.18	Does the provider ensure that the health of staff does not place individuals served at risk from a communicable disease?	No	Documentation did not demonstrate staff had the required vaccinations.
Evidence: Staff 1 – The date on the COVID vaccination card was not legible. Staff 7 – There was no evidence of a Hepatitis B vaccination or COVID vaccination. Recommended the provider develop a checklist of required information on the personnel record to document that all required information is maintained in the record.			
Quality Improvement 100%			
Identifier	Indicator	Scored	Reason(s) Scored No
OO.MAN.10	Is there a current written QA Plan? Does the QA Plan include goals and/or criteria to measure applicable waiver service and DDS requirements?	Yes	NA

Process Changes

PCR Process Changes

Entrance

- Conducted Remotely
- Samples emailed
- Travel onsite

Record Submission

- Deadline is 2:00 for offsite records

Exit

- If score at Excellent or Satisfactory, can be conducted remotely

Questions

*Thank
you*

Marion Olivier: olivierm@Qlarant.com
Mike Marshall: marshallm@Qlarant.com

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