

Government of the District of Columbia
Department on Disability Services (DDS)
Quality Assurance and Performance Management Administration (QAPMA)

Restrictive Control Review Committee

Fiscal Year 2018 Annual Report



Introduction

The Department on Disability Services (DDS) Restrictive Control Review Committee (RCRC) is responsible for reviewing restrictive controls to ensure the rights of the people we support are protected and their behavior support plans (BSPs) comply with DDS' policies and procedures.

The RCRC reviews BSPs which include restrictive controls, including but not limited to, psychotropic medications that affect or alter thought processes, mood, sleep or behavior, individualized staffing due to behavioral health concerns, the use of non-crisis physical restraints, such as Crisis Prevention Interventions or MANDT, and initial requests to be exempted from having a BSP. A BSP may also include human rights restrictions such as, but not limited to, deviations from the Centers for Medicaid and Medicare Services (CMS) Home and Community Based Settings (HCBS) rules.

All BSPs must be submitted for RCRC review prior to the review of a new, increase or change in a restrictive control except for prescribed psychotropic medications.¹ Requests for reviews can also be made by the DDS Human Rights Advisory Committee (HRAC), Psychotropic Review Panel, the person, a member of their support team or their service coordinator.

Membership

The RCRC consists of three core members who fall into the following categories: allied health professional, behavioral health professional and advocates for people with disabilities. Other DDS employees can be appointed by the DDS Deputy Director for DDA. Members are appointed for a two-year term and may be reappointed for subsequent terms.

All members of the RCRC are trained on DDS policies and procedures regarding the RCRC process, behavior support plans and human rights.

Dr. Casey Nelson &	Behavioral health professional
--------------------	--------------------------------

¹ All psychotropic medications properly prescribed by a clinician must be implemented immediately. However, consent for the use of the medication must be obtained from the person, their substitute decision maker or Court-appointed guardian. In addition, the provider HRC review must also review the use of the medication before it is referred to RCRC for review.

Dr. Yolanda VanHorn (Rotating basis)	
H&W Nurses (Rotating basis)	Allied health professional
RCM of Washington (Rotating basis)	Advocate for people with disabilities

RCRC Responsibilities

The RCRC is responsible for ensuring that any proposed restrictive control is used as a last resort after lesser restrictive options have been considered or attempted and it is determined that these less restrictive options would not protect the person or others from harm. In reviewing each BSP the Committee is tasked with answering the following eight (8) questions to determine if a plan can be approved:

1. Does the BSP include targeted behaviors that are consistent with the person’s diagnosis?
2. Is there relevant data collection?
3. Does the BSP include demonstrated review of the data by the psychologist?
4. Does the BSP include procedures t address behavioral issues consistent with DDS policies?
5. Does the BSP include a functional analysis?
6. Are there proactive, positive strategies identified in the BSP?
7. Is there a rationale for using the restrictive interventions?
8. Are there benchmarks for reducing the restrictive interventions including a titration plan for medications (or a statement of lowest effective dose based on prior attempts to reduce)?

RCRC Reviews

	Approved	Approved - Exemption	Deferred	Deferred - Autism	Rejected	Rejected - Exemption	Grand Total
Non-Waiver	113	2	8	1		1	125
2-137	57		1			1	59

Evans	56	2	7	1			66
Waiver	483	40	30	6	12	1	572
2-137	416	33	29	6	12	1	497
Evans	67	7	1				75
Grand Total	596	42	38	7	12	2	697

During FY 18, the RCRC reviewed the BSPs for 697 individuals. Out of those, 572 were waiver recipients and 125 were non-waiver beneficiaries. 483 BSPs for waiver beneficiaries were approved, thirty (30) were deferred and only twelve (12) were rejected. We also approved forty (40) initial requests for a BSP exemption, which is permissible if the individual meets certain criteria, including but not limited to: the individual is on one psychotropic medication, their behavior(s) occur three (3) times or less per month and they have not had any behaviorally related serious reportable incidents (SRIs) within the past six (6) months.

During this fiscal year, we have also begun capturing the number of deferrals entered because an individual is prescribed psychotropic medications but only carries a diagnosis of Autism. Pursuant to DC Law, individuals prescribed psychotropic medications who are diagnosed with Autism must also be diagnosed with a co-occurring mental health diagnosis. Plans which do not include this mental health diagnosis are deferred until an additional diagnosis is provided by the psychiatrist. Thus, they are given a special deferred designation, “Deferred – Autism”. Typically, the psychiatrist will amend the psychiatric record to include a co-occurring mental health diagnosis, and a revision of the BSP will result in the plan being approved. However, we do have some clinicians who refuse to provide a secondary mental health diagnosis. For those individuals, the plan remains deferred; however, it can be implemented as it has not been proven to be unsafe.

Count of BSPs reviewed- By Clinician and Waiver Status

	Approved	Approved - Exemption	Deferred	Deferred - Autism	Rejected	Rejected - Exemption	Grand Total
Tonya Lockwood	82		7	1			90

Sheri Wilson	65		6	1	1		73
Stewart Zelman	46		1		1		48
Rebecca Yount	42		3				45
N/A	1	40	1			2	44
William Byrd	41		2				43
SJ Daniels	38		2		2		42
Teresa Villani	31		2		1		34
Eyvette Weaver-Pauling	19		4	1			24
Sal Campo	22				1		23
Maia McKinney	21		1				22
Cheryl Bailey	20				1		21
(blank)	20		1				21
Maria Kagin	17	1	2				20
Kachen Alsopp	14		2				16
William H. Byrd	15						15
Omobolanle Makinde	12				1		13
Michelle Chabbott	10			1			11
Patricia Dunston	9		1				10
V. Pettiquoi-Morgan	9						9
Brenda Terry-Leonard	8		1				9
Sharon Daniels	7		1				8
Karena Wilson-Plater	7						7
Tiffany Rice	5		1				6

Tina Whitfield Johnson	5						5
Jennifer Radigan	5						5
O. Makinde	2			1	1		4
Donna Moore				2	1		3
Tina Whitfield-Johnson	3						3
Victoria Pettiquoi-Morgan	2						2
Bruce Tisdale	2						2
Dorothy Walker	2						2
Stephen Townsend	2						2
Tina Whitfield-Johnson	1						1
Rashida Clegg					1		1
Jessica Morris	1						1
Muriel Kennedy	1						1
Michelle Chabbott	1						1
N/A		1					1
Sal Campo	1						1
Kelsey Key	1						1
Catherine Koi					1		1
Diane Hartjes	1						1
Richard Boesch	1						1
Richard L. Hite	1						1
E. Weaver	1						1

Pauling							
Sal A. Campo	1						1
Steward Zelman	1						1
Grand Total	596	42	38	7	12	2	697

DDS has done extensive training with providers, provider Human Rights Advisory Committees (HRCs) and BSP clinicians as well as individualized technical assistance to ensure all stakeholders are apprised of DDS policies and procedures, templates, transmittals, etc. That extensive focus has led to a marked decrease in the number of BSPs developed which are rejected by the RCRC.

The RCRC did have to reject the exemption requests for two (2) individuals who applied for an initial BSP exemption. The basis of which was the person did not meet the eligibility criteria due to the addition of a psychotropic medication.

Reviews by Provider and Waiver Status:

	Non-Waiver	Waiver	Grand Total
Natural Home	1	67	68
Approved	1	48	49
Approved - Exemption		12	12
Deferred		2	2
Deferred - Autism		2	2
Rejected		3	3
Wholistic	17	28	45
Approved	16	26	42
Deferred	1	1	2
Rejected		1	1
ILS	14	21	35
Approved	10	18	28

Approved - Exemption		1	1
Deferred	3	2	5
Deferred - Autism	1		1
Capital Care	1	32	33
Approved	1	27	28
Approved - Exemption		4	4
Deferred		1	1
Frontline	1	31	32
Approved	1	30	31
Deferred		1	1
Metro Homes	12	18	30
Approved	12	18	30
Total Care		26	26
Approved		23	23
Approved - Exemption		2	2
Rejected		1	1
NCC		26	26
Approved		21	21
Approved - Exemption		2	2
Deferred		3	3
DC Healthcare	12	13	25
Approved	11	13	24
Deferred	1		1
St. Johns	1	24	25
Approved		22	22
Approved - Exemption	1		1
Deferred		1	1
Rejected - Exemption		1	1
MTS	7	15	22
Approved	6	14	20
Approved - Exemption		1	1

Deferred	1		1
(blank)	5	16	21
Approved	4	16	20
Deferred	1		1
IAG		20	20
Approved		18	18
Deferred - Autism		1	1
Rejected		1	1
Ward and Ward	1	16	17
Approved		12	12
Approved - Exemption	1	3	4
Deferred		1	1
My Own Place		17	17
Approved		14	14
Deferred		3	3
CMS	10	5	15
Approved	10	3	13
Approved - Exemption		2	2
BRA	10	4	14
Approved	10	3	13
Deferred		1	1
RCM	6	7	13
Approved	6	5	11
Approved - Exemption		2	2
ICS		13	13
Approved		12	12
Deferred		1	1
ACS		13	13
Approved		11	11
Approved - Exemption		2	2
RCM of Washington	4	8	12

Approved	4	7	11
Deferred		1	1
MT&G		12	12
Approved		9	9
Approved - Exemption		2	2
Deferred		1	1
Symbral	5	6	11
Approved	4	6	10
Deferred	1		1
Lifeline		11	11
Approved		9	9
Deferred		2	2
Project Redirect		10	10
Approved		9	9
Approved - Exemption		1	1
Fescum		10	10
Approved		5	5
Approved - Exemption		2	2
Deferred		1	1
Rejected		2	2
Valentine		9	9
Approved		8	8
Approved - Exemption		1	1
VOA	3	6	9
Approved	3	4	7
Deferred		1	1
Deferred - Autism		1	1
Marjul Homes	6	3	9
Approved	6	2	8
Deferred		1	1
Finsby Care		7	7

Approved		5	5
Rejected		2	2
Azure		6	6
Approved		6	6
Blossom		6	6
Approved		6	6
Anna HealthCare		6	6
Approved		4	4
Approved - Exemption		1	1
Deferred		1	1
Vested Optimum		5	5
Approved		5	5
Arc of Tampa Bay		5	5
Approved		5	5
Integrated Community Services		5	5
Approved		3	3
Deferred		2	2
Woods Services	1	4	5
Deferred - Autism		2	2
Rejected		2	2
Rejected - Exemption	1		1
Hope Found		4	4
Approved		4	4
MBI		3	3
Approved		3	3
First Metropolitan		3	3
Approved		3	3
American Healthcare	1	2	3
Approved	1	2	3
ResCare		2	2

Approved		2	2
The Van Mar		2	2
Approved		2	2
Abundant Life		2	2
Approved		1	1
Deferred		1	1
Comprehensive Care II	2		2
Approved	2		2
Comprehensive Care	2		2
Approved	2		2
RCM		2	2
Approved		2	2
Agape		2	2
Approved		2	2
DC Residential		2	2
Approved		1	1
Deferred		1	1
DBH		1	1
Approved		1	1
DC Cares		1	1
Approved		1	1
Apex		1	1
Approved		1	1
Gentle Touch		1	1
Approved		1	1
Frontline		1	1
Approved		1	1
ICF	1		1
Approved	1		1
Supreme		1	1
Approved - Exemption		1	1

Center for Deafness	1		1
Approved	1		1
Symbral		1	1
Deferred		1	1
DC Care Center		1	1
Approved		1	1
First Metropolitan		1	1
Approved		1	1
Community Multi-Services		1	1
Approved		1	1
Jacqueline Littlejohn		1	1
Approved		1	1
Contemporary Family Services		1	1
Approved - Exemption		1	1
Gina Outreach		1	1
Approved		1	1
Behavior Research Associates	1		1
Approved	1		1
Eckington House		1	1
Approved		1	1
AWS Benchmark		1	1
Approved		1	1
Global		1	1
Approved		1	1
Grafton School		1	1
Approved		1	1
Grand Total	125	572	697

	Approved	Approved - Exemption	Deferred	Deferred - Autism	Rejected	Rejected - Exemption	Grand Total
October	60	3	5		1		69
November	34		3				37
December	49	8	12		2		71
January	46	3	3	1	4		57
Feb	41	1	3	3	2		50
March	53	2	6		1		62
April	41	3					44
May	46	3	2	1	1		53
June	67	4	1			1	73
July	43	7	1	1	1		53
August	65	5		1			71
September	51	3	2			1	57
Grand Total	596	42	38	7	12	2	697

The RCRC convenes every Friday of the month from 9:30am-12pm. Based on the calendar year some months have four (4) reviews others five (5). This is reflected in the fluctuation between the number of reviews scheduled each month. ORA scheduled approximately 13-16 reviews each week.

90 Day Approvals

	Count of Month
Jan	1
Feb	1
March	2

April	3
May	18
June	15
July	17
August	20
September	7
Grand Total	84

During FY 18, ORA was asked to provide temporary approval for individualized behavioral 1:1 or 2:1 supports. Typically, these requests occur when an individual is first entering the DDS system or transitioning from providers and needs additional supports. However, the majority of temporary requests stem from providers failing to upload all required documentation for the new ISP year, resulting in the expiration from the previous years prior authorization (PA) before RCRC can review and approve the BSP for the upcoming ISP year. The temporary approval provides a stop-gap to allow individuals to continue receiving the supports and services they need to reside safely in the community and oftentimes attend their day habilitation programs without a break in services. These temporary approvals serve a goal of ensuring person-centered continuity of services while the provider works to expeditiously upload the remaining supporting documents needed to commit the BSP for RCRC review. Temporary approvals are never given without at a minimum the BSP being uploaded into the BSP section of MCIS for the upcoming ISP year. All providers and service coordinators have been advised of these internal processes; although it is not yet codified in our current policies and procedures.

Trainings

Row Labels	Count of Type of Training	Sum of Number of Attendees
DDS	6	69
BSP pre-review process	1	1
RCRC, BSP, Human Rights	4	8
Sex, Drugs, Alcohol	1	60

Woods Services	2	3
Establishment of Provider HRC	1	1
Provider HRC Update	1	2
Frontline	2	28
Human Rights Training	1	15
Human Rights, in response to RCRC recommendation re a person supported by Frontline	1	13
VOAC	1	9
Human Rights, BSP, RCRC in response to QT report	1	9
Marjul Homes	1	2
Provider HRC Update	1	2
Fescum	1	25
Human Rights Training	1	25
Finsby Care	1	6
Provider HRC training, RCRC, BSP, Human Rights, Issues Resolution, Confidentiality/HIPAA, HRAC	1	6
Symbral	1	8
Human Rights Training	1	8
Amazing Grace	1	6
Provider HRC Update	1	6
Choices Unlimited	1	7
Human Rights in response to QT report	1	7
Global	1	4
Human Rights	1	4
ILS	1	23
Rights v. Responsibility	1	23
Grand Total	19	190

In addition to the daily responsibilities of pre-reviewing BSPs, responding to temporary requests for 90-day approval, facilitating the RCRC and attending case conferences, ORA strives to provide TA and trainings to providers, BSP clinicians and provider HRCs. These are done face-to-face at the provider site and are comprehensive to include not only DDS policies and procedures but also ORAs processes.

In addition ORA attends DDS' Provider Leadership Meetings on a minimum of a quarterly basis to further provide TA to providers and answer any questions they may have regarding general, specific or systemic issues which arise within their service delivery system.

Lastly, ORA is always available to provide TA via email and/or telephone to answer individual specific questions providers may have.

Acuity packages Approved

	May	June	July	August	September	Grand Total
CMS		1		2		3
BRA	1	1				2
Symbral		1				1
Comprehensive Care, II			1			1
VOAC		1				1
Wholistic					1	1
Marjul Homes		1				1
ILA			1			1
Grand Total	1	5	2	2	1	11

For individuals residing in Intermediate Care Facilities (ICFs), ORA is often asked to provide temporary 90 days approvals for the individualized behavioral 1:1 and 2:1 supports while awaiting the upload of the remaining supporting

documents for RCRC review. These approvals are kept separate from the requests from service coordination for temporary 90-day approvals because of the intricacies of the acuity process which requires an additional step of the Department of Health Care Finance (DHCF) reviewing and approving the request for these individualized supports following a comprehensive review by the DDS Health and Wellness (H&W) unit. ORA provides temporary 90-day approval, again as a stop-gap, to ensure continuity of services pending upload and committal of the supporting documents into MCIS for RCRC review. ORA in coordination with DHCF and H&W has developed a streamlined cross-agency internal process to ensure timely response to these requests.

Staffing Ratio Approval:

	Jan	Feb	Mar	Apr	May	June	July	Aug	Oct	Nov	Dec	Grand Total
Natural Home	1	1	1		1	1	1				1	7
1 To 1	1	1	1		1	1	1				1	7
RCM of Washington	1		1									2
1 To 1			1									1
Denied	1											1
American Healthcare	1											1
1 To 1	1											1
NCC								1				1
1 To 1								1				1
Global			1									1
1 To 1			1									1
DC Healthcare		1										1
1 To 1		1										1
My Own Place									1			1
Denied									1			1

IAG											1		1
1 To 1											1		1
Project Redirect					1								1
2 to 1					1								1
Lifeline					1								1
1 To 1				1									1
Total Quality Residential Services		1											1
1 To 1	1												1
MBI											1		1
2 to 1											1		1
MTS												1	1
1 To 1												1	1
Grand Total	4	2	3	1	2	1	1	1	1	1	2	2	20

ORA and the RCRC have continued our efforts to reduce the number of individuals receiving individualized behavioral 1:1 and/or 2:1 supports. We continue to use standard language for all BSPs which request this level of restriction to ensure the BSP clinician and provider provide detailed, aggregate data to support the continued need, specifically during overnight hours, especially when the individual does not have a diagnosis of insomnia. In addition, with the integration of Individual Day Supports 1:1 (IDS 1:1) and companion services into our current waiver, we have been able to recommend these options as an alternative to the use of day habilitation behavioral 1:1 supports.

For the most part, ORA and RCRCs efforts to take a deep dive into the justification for these individualized supports and referral to lesser restrictive options under the waiver have netted positive results in the reduction of the hours of individualized supports and/or the elimination of these supports in lieu of lesser restrictive options.

Summary

During FY 18 the RCRC has made great strides in attempting to reduce the level of restrictions placed on people's DDS supports by requesting 2nd opinions on the use/number of psychotropic medications being prescribed, referring individuals who appear eligible to apply for BSP exemptions, requiring detailed aggregate data to justify continued use of individualized behavioral supports and referrals for lesser restrictive person-centered waiver services. We will continue these efforts in the coming FY and continue our efforts of training and technical assistance to providers, clinicians, the people we support and provider HRCs.