1. PURPOSE

The purpose of this procedure is to establish a system for electronically tracking through to completion recommendations for a person receiving services from the Developmental Disabilities Administration (DDA). These procedures outline the requirements for tracking a clinical or therapeutic assessment as well as any recommendations that follow from that assessment that must take place within ninety (90) days or less and are not a part of the annual Individual Support Plan (ISP).

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

A. All clinician recommendations for a person that must take place within ninety (90) days or less to receive clinical or therapeutic assessments must be entered into the Assessment Recommendation section of MCIS, or its successor, along with a due date for completion that may not exceed 90 days.
1. Clinical or therapeutic assessments include assessments related to physical therapy, speech therapy, occupational therapy, nutrition, psychological, and psychiatric services.

2. The person’s residential provider, if she or he has one, is responsible for entering the recommendation(s) into MCIS within five business days of receipt of the recommendation for a clinical assessment. If the person does not have a residential provider, then the person’s service coordinator is responsible for entering the recommendation(s) within five days of learning of the recommendation.

B. Once the person receives the recommended assessment, the person’s residential provider (or service coordination, if he or she does not have one) must enter the date this was completed in MCIS in the box marked “implementation date”. This shall be entered by the recommendation due date, or within five (5) business days of when the person got the assessment – whichever is earlier.

C. At the time the person’s residential provider or service coordination enters the implementation date, he or she must also enter into the MCIS Assessment Recommendation section any findings from the completed assessment that need further action, along with a due date for each within 90 days.

D. The residential provider (or the service coordinator if the person does not have a provider) is responsible for ensuring that the clinical recommendations are met prior to the deadline and entering this into MCIS in the box marked “implementation date”. This shall be entered by the recommendation due date, or within five (5) business days of when the person had the follow up from the assessment – whichever is earlier.

E. If a provider or service coordinator does not enter an implementation date for a clinical assessment or associated recommendation prior to the recommendation due date, then MCIS will automatically generate an issue for that provider or service coordinator.

F. The residential provider (or service coordinator as the case may be) will be responsible for closing the issue. Issues will be tracked and completed in accordance with the DDS Immediate Response Committee Policy and Procedure.

G. DDS may sanction providers who do not comply with this procedure in accordance with the DDS Imposition of Sanctions Policy and Procedure.