

Indiana Division of Disability and Rehabilitative Services
Bureau of Quality Improvement Services (BQIS)

Re-Approval Assessment

Provider Name: 38T
Data Assessed For The Period Of: 38T
Assessment Due Date: 38T

Provider Street Address: 38T
City, State, Zip: 38T
Provider Mailing Address: 38T
City, State, Zip: 38T

Date Submitted to BQIS: 38T
Completed by (name): 38T
Title: 38T
Telephone Number: 38T
Email Address: 38T
Name of Chief Executive Officer: 38T
Email Address: 38T

Please indicate any changes to the above listed provider name and/or addresses

Provider Name: 38T
Provider Street Address: 38T
City, State, Zip: 38T
Provider Mailing Address: 38T
City, State, Zip: 38T

BQIS Provider Re-Approval Process Contact:

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PROVIDER RE-APPROVAL

The provider re-approval process is designed to validate that a provider maintains policies, procedures and systems that ensure the needs of consumers are met according to Individualized Support Plans, Behavioral Support Plans and service plans. Providers must substantiate that their systems (i.e., policies, procedures, protocols, staff training, etc.), are designed to address quality improvement and all processes are aligned to offer programs with health, safety and welfare at their core. The Bureau of Quality Improvement Services (BQIS) will utilize Provider Review Profile data, completed Re-Approval Assessment, and addendums to develop a recommendation for a Provider Relations re-approval period of 6, 12, or 36 months.

DOCUMENTS

To perform a thorough fact based review, a provider specific report has been developed. This report is titled the **Provider Review Profile (PRP)**. Once the provider has reviewed and analyzed its PRP, the provider then completes the **Re-Approval Assessment** document.

PROVIDER REVIEW PROFILE (PRP)

The PRP is a data driven report that allows the provider to assess its organization's data, as measured against a benchmark of relatively similar (e.g. client count and Algo levels) providers. Analyzing this data is pivotal in reviewing the provider's performance.

The PRP is structured to provide data in multiple categories (risk areas). For each of the risk areas, the provider assesses the reason for being out of expected range (above or below), analyzes how successes can be replicated and what can be done to address a policy, procedure or training when they have proven to be ineffective or inadequate. The results of this analysis are documented on the Re-Approval Assessment form. For the re-approval process, providers should consider how their respective PRP data is reflective of quantitative and qualitative data: quantitative numbers are indicative of measureable facts, but the qualitative data is suggestive of what methods your agency uses, and whether or not they are working to deliver outcomes your organization expects.

Tips: When documenting the reasons for the variation from the norm, being above or below the expected range, consider issues such as individual-specific data that may be affecting your rates (e.g., repeat incidents attributed to a few consumers). Detail if there is evidence to suggest data is trending in the right direction (i.e., showing improvement).

RE-APPROVAL ASSESSMENT

The Re-Approval Assessment is formatted to identify areas of improvement and encourage data analysis. There are six sections. The first four sections are directly tied to the PRP data. Once the data has been analyzed, the provider is asked a series of questions, by category, to assess how performance in these categories is monitored and how service level improvements are made based on the data. The fifth and sixth sections of the Re-Approval Assessment are focused on the broader subject of providing quality care and services. Documenting how the organization will implement change and what cultural shifts are required are important components in these final two sections.

DOCUMENT SUBMISSION

The Re-Approval Assessment, with all sections completed by the provider, is due on or before the date noted on the cover page of this document. The completed Re-Approval Assessment must be submitted to BQIS at BQISReporting@fssa.in.gov. When submitting this document, the provider may also attach to the email (as separate documents) copies of training programs, forms or any other documents that will aid in the review of the provider's systems and processes. Once this assessment has been reviewed by the BQIS team, BQIS may request a telephone conference or in-person meeting for the purpose of clarifying information the provider submitted and/or for discussion on improvement plans. *Note: Failure to submit a written Re-Approval Assessment plan may result in the provider receiving a shorter re-approval term.*

[%] % of the Risk Categories in the Expected Range

Client Count = [Client Count] Algo = [Algo] Behavioral Factor = [BF] Health Factor = [HF]

Data Analysis

Section I - PRP Complaints and Incidents Data*

Category	Below the expected range	Above the expected range
Risk Area - low/mod/high/critical risk		
Risk Area - low/mod/high/critical risk		
Risk Area - low/mod/high/critical risk		

[Provider's new to the re-approval process will have CERT data indicated in this section]*

Provider Analysis - Complaints and Incidents Data (Note: behavioral and medical are detailed in a separate section)

For the risk areas shown, confirm the data is accurate and describe why the data indicates your organization was above or below the expected range compared to your peer organizations. If necessary, provide specific details to explain the rates. 38T

Provide information regarding the activities your organization has implemented to prevent incidents from occurring. 38T

Detail how services are being provided according to the consumers' support, behavior and risk plans. 38T

Detail the training that is provided to staff regarding incidents and complaints. How are new employees trained and what programs exist for re-training and refresher training. How are training records maintained? 38T

Who in your organization is directly responsible for collecting data on complaints and incidents (name a title) and how is information regarding incidents disseminated to the staff. 38T

What is the policy and procedure that is followed when investigating incident reports and what is the protocol for follow-up on reports of incidents? 38T

What are your policies, procedures and training protocol when a concern is expressed regarding an individual enrolled in your services? 38T

If this Re-Approval Assessment includes CERT* data [providers new to the re-approval process], describe your process for ensuring the procedures implemented to correct the identified issues in the CERT continue to be effective. Type N/A if not applicable to your assessment. 38T

Section II - PRP Incident Processing and Abuse/Neglect/Exploitation Data

Category	Below the expected range	Above the expected range
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		

Provider Analysis - Incident Processing and Abuse/Neglect/Exploitation Data (Note: behavioral and medical are detailed in a separate section)

Review your incident report processing. For the risk areas shown, confirm the data is accurate and describe why the data indicates your organization was above or below the expected range as compared to your peer organizations. 38T

Provide details of how your incident reporting processes have been improved to reduce the frequency of late reports. 38T

How do your staff members know what is a reportable incident? How are staff members trained regarding incident reporting? 38T

Review your rate of Abuse/Neglect/Exploitation by staff. Confirm the data is accurate and describe why the data indicates your organization had above or below the expected range than your peer organizations. 38T

Detail how staff allegations of Abuse/Neglect/Exploitation are addressed, including the specific procedures that are followed. 38T

Detail the training that is provided to staff regarding abuse, neglect and exploitation. Include specifics on frequency of training and how training records are maintained. 38T

Section III - PRP Behavioral Data

Category	Below the expected range	Above the expected range
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		

Provider Analysis - Behavioral Data

For the risk areas shown, confirm the data is accurate and describe why the data indicates your organization had above or below the expected range as compared to your peer organizations. 38T

Provide specific details of the activities your organization uses to prevent and/or address behavioral risks. 38T

In addition to the training that is provided by the Behavioral Clinician, what training is offered to the staff on behavior management? What training is required? 38T

Describe the behavior management staff training schedule, including new hire training, annual training and behavior specific educational sessions. 38T

Explain your organization’s protocols for ensuring prohibited interventions are not utilized. If your data indicates the use of a prohibited intervention, describe the process failure and the steps that have been taken to eliminate future occurrences. 38T

Provide a narrative of a successful outcome following a behavior intervention. 38T

Section IV - PRP Medication and Medical Data

Category	Below the expected range	Above the expected range
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		
Risk Area – low/mod/high/critical risk		

Provider Analysis - Medication and Medical Incidents

For risk areas shown, confirm the data is accurate and describe why the data indicates your organization was above or below the expected range as compared to your peer organizations. 38T

Provide specific details of the activities your organization uses to analyze medication errors. 38T

How are recommendations developed to reduce the risk of future medication errors? 38T

What is the process for reviewing the recommendations and gauging their effectiveness in reducing medication errors? 38T

How is staff trained on the administration of medication? 38T

How is the staff competency measured in the administration of medication? How is staff competency and skill level monitored on a consistent basis? 38T

Describe how risk plans are developed, implemented and revised to ensure risk is minimized. Include how staff is trained to limit risks for consumers. 38T

Quality Assurance / Quality Improvement Review

The provider data analysis and question section is completed. The following two sections, *Service Delivery and Consumer Support* and *Remediation Plans/Plans for Improvement* are focused on detailing the organizations response to the consumer needs and how services are assessed and improved.

Section V - Service Delivery & Consumer Supports

How does your organization capture data, track compliance and monitor internal corrective actions? Provide specifics on systems, programs and guidelines that are established to ensure the proper level of service delivery and consumer support. 38T

How does your organization know if specific processes and/or policies are effective and are working as needed? If a policy, protocol or process is identified as not working properly, what steps are taken to correct the problem? 38T

Detail specifics on the steps your organization takes to ensure Individual Service Plans and Behavioral Support Plans are implemented and followed as designed. 38T

Describe your organization's current protocol to address and respond to changes in a consumer's needs. Include details on change identification, plan changes, training, risk mitigation, management oversight. 38T

Although training has been addressed in each data analysis section, please provide specifics on new employee orientation, training schedules and subjects covered. (Note: attach a copy of the training program if available). 38T

Quality Assurance / Quality Improvement Review (cont.)

Section VI – Improvement Plan

What new policies, procedures, protocols and systems have been implemented to support better quality and consumer outcomes? 38T

How does your agency assess the effectiveness of new policies, procedures, protocols, and systems that have been introduced and how are outcomes for the consumer measured? 38T

Based on your analysis of the data used in the re-approval process, what changes will be made within the next 6-months to facilitate improvement in the organization's systems, policies and procedures? Please detail who in your organization will implement the change(s), the timetable of the change(s) and how the changes will be evaluated for effectiveness? 38T