

Virginia Quality Service Reviews Year 2 Annual Report Data

July 2016 - June 2017

The logo for Qlarant features the word "Qlarant" in a bold, blue, sans-serif font. To the right of the text is a graphic consisting of four small yellow squares arranged in a 2x2 grid, with the top-right square missing, creating a stylized 'Q' shape.

Virginia Quality Service Reviews

Quality Service Reviews (QSR) Purpose

Evaluate quality of services at an individual, provider and system level to determine if:

- Individuals' needs are met, including health and safety
- Person centered thinking is applied
- Individuals are given choices and supported in self-direction, including managing health and safety
- Services and supports are provided in the most appropriate integrated settings
- Individuals are provided opportunities for community engagement and inclusion in all aspects of their lives

QSR Review Processes

Person Centered Review (PCR)

- Assess support delivery systems and quality of life from the perspective of the person receiving services.

Provider Quality Review (PQR)

- Assess extent to which providers use person centered planning and practices, provide services in integrated settings, and promote opportunities for community integration.

Person Centered Reviews



Overview/Tools

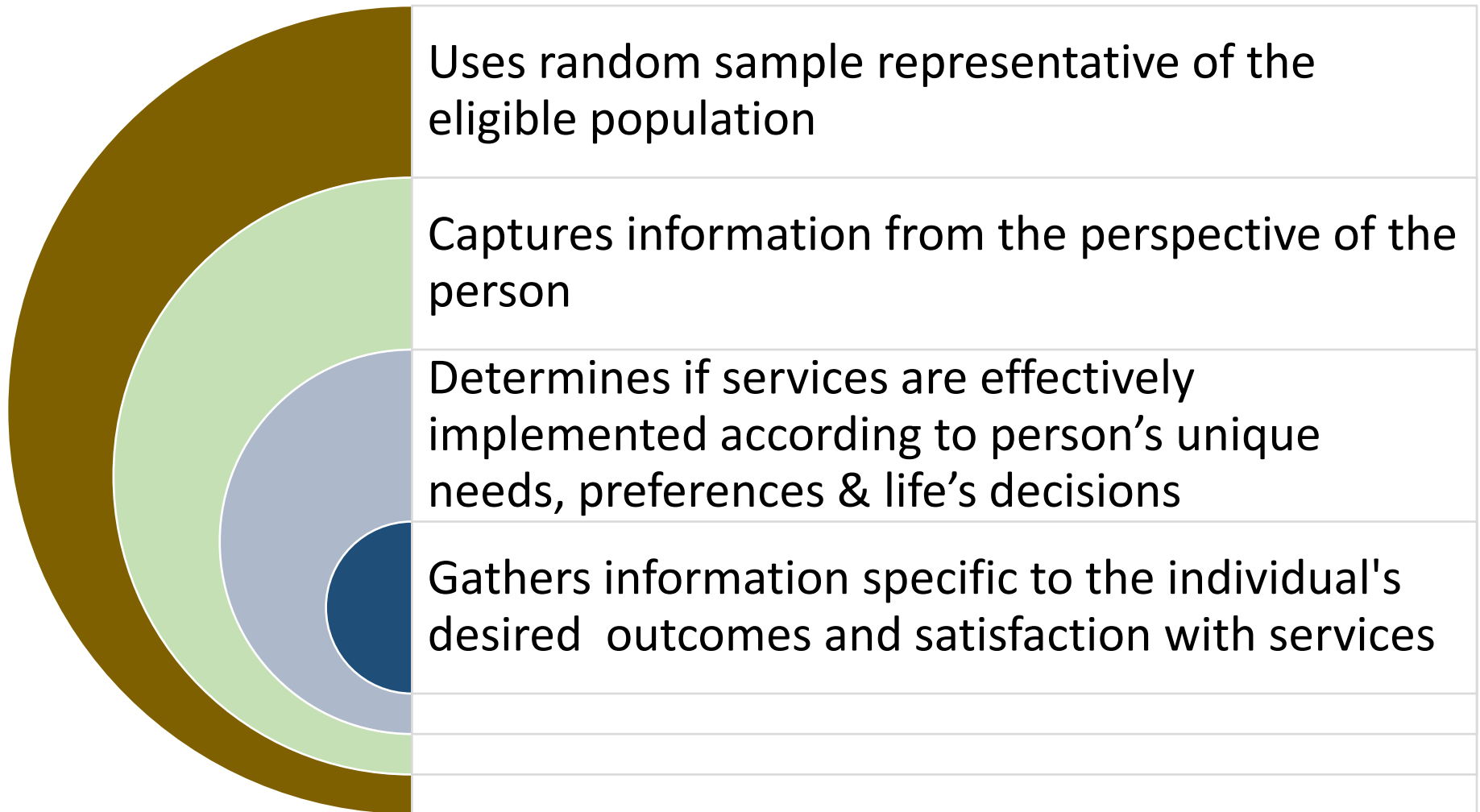
Demographics

Key Performance Areas (KPA)

Strengths and Challenges

KPAs by Residential Status

Person Centered Review

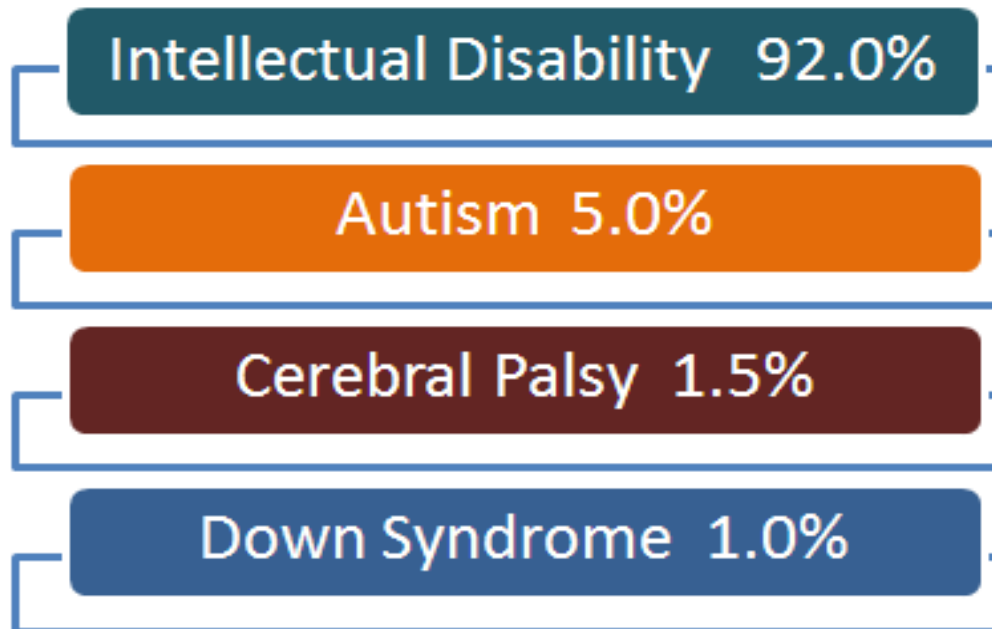
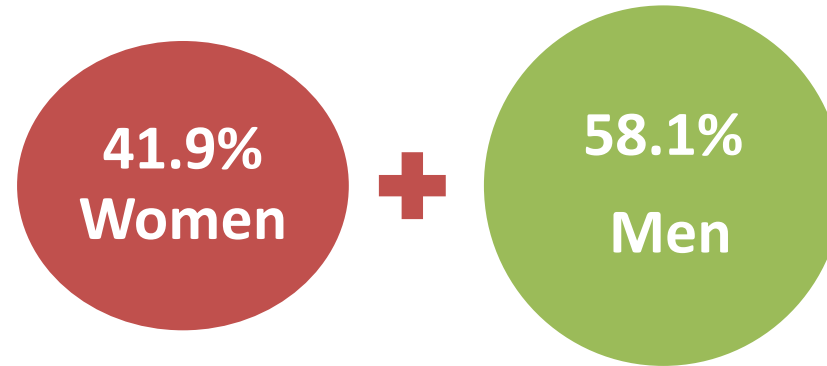


PCR Regional Distribution July 2016– June 2017

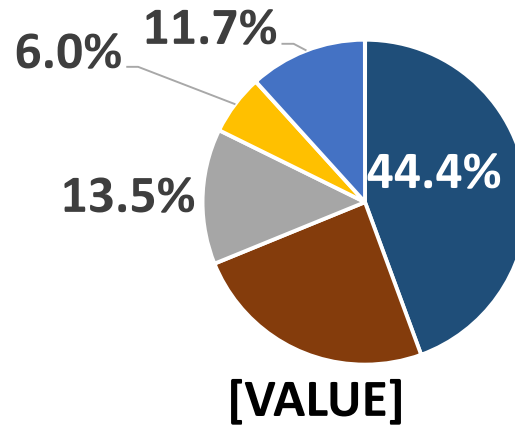
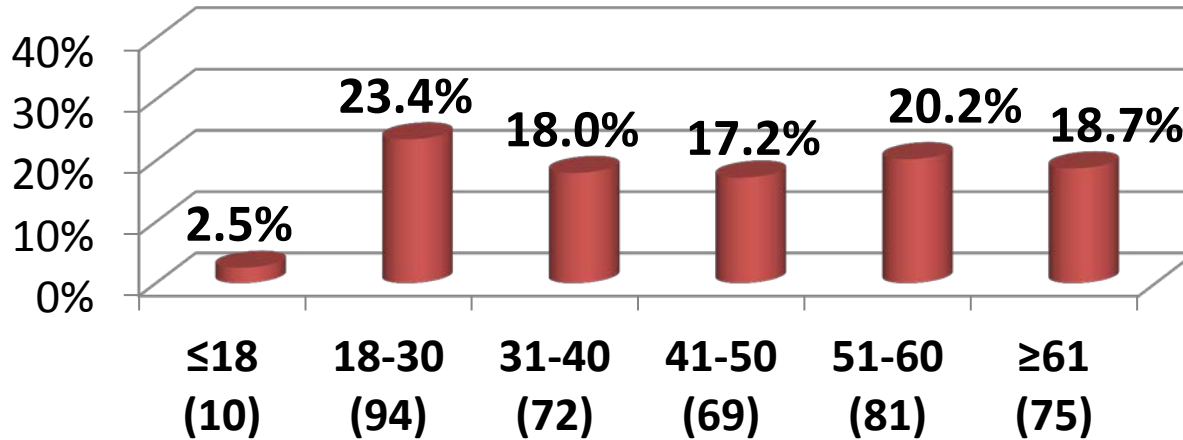
DBHDS Region	PCR Sample	Eligible Population
1	22.9%	22.9%
2	15.7%	14.0%
3	19.5%	19.9%
4	19.5%	19.6%
5	22.4%	23.6%
Total N	401	11,956

The regional distribution of the completed PCRs closely resembles the regional distribution of the eligible population.

PCR Sample by Gender and Primary Diagnosis July 2016 – June 2017

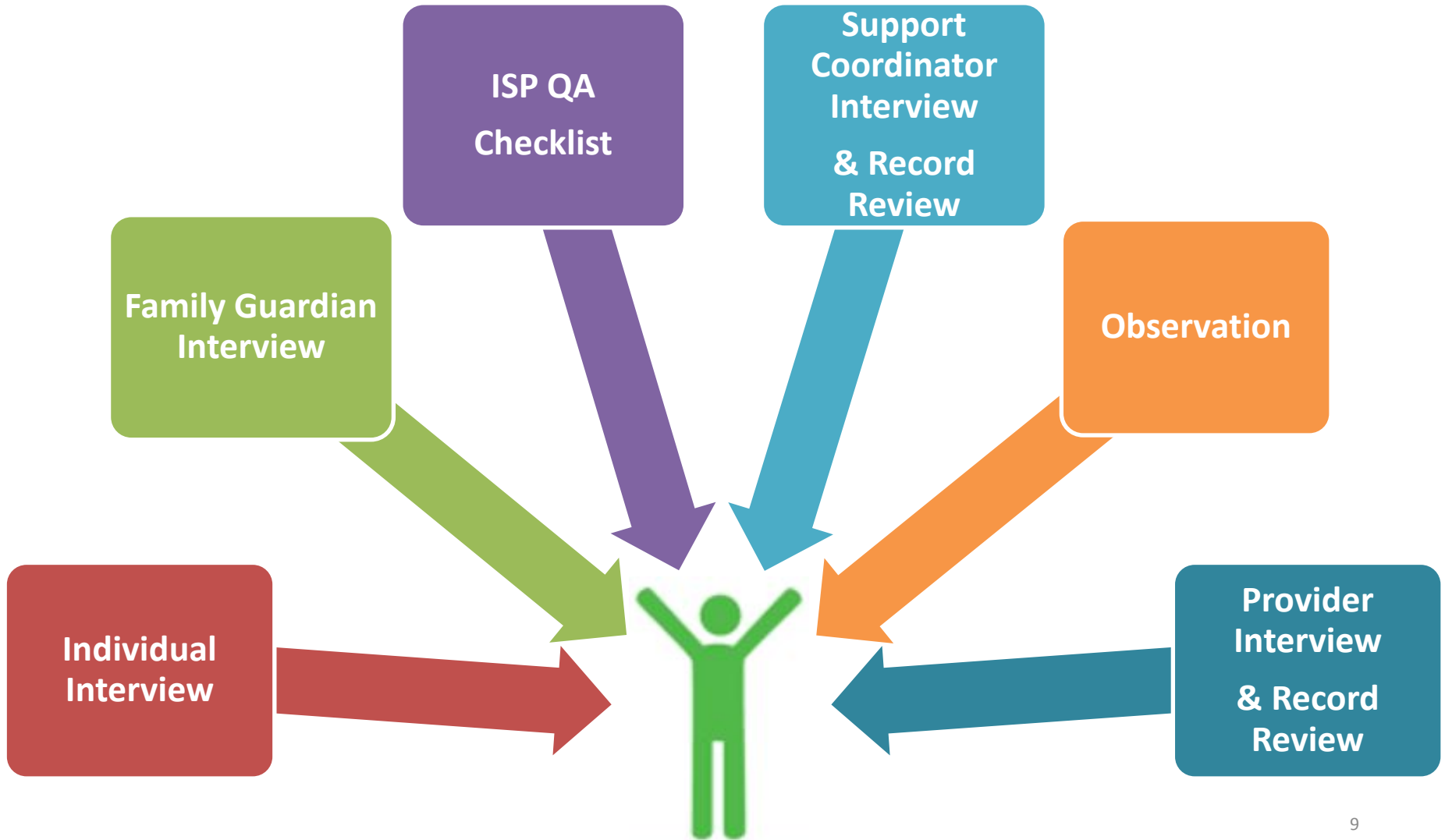


PCR Sample by Age Group and Residence

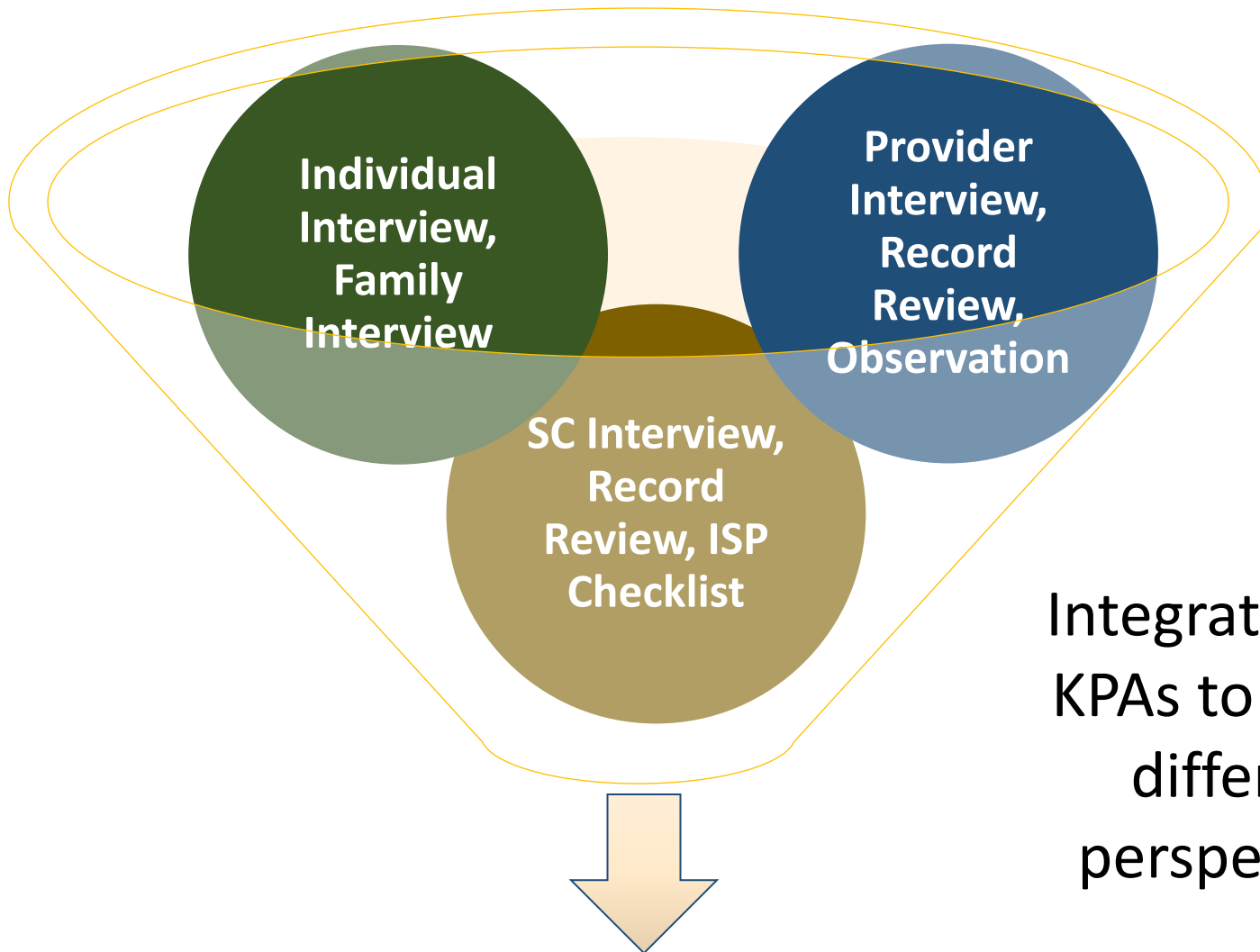


- Group Home
- Family Home
- Sponsored/Supported Residential
- Own Home/Supported Living
- Other

PCR Tools



Data Collected from Various Tools



Key Performance Areas (KPA)

Needs Are Met

- **Person's needs are met, including health and safety.**

Person Centered

- **Person centered practices are applied. People are given choices. They are supported to take ownership of their healthcare and safety.**

Integrated Setting

- **Services and supports are provided in the most integrated setting appropriate to people's needs and consistent with their choice.**

Community

- **Individuals are provided opportunities for community engagement and inclusion in all aspects of their lives.**

KPA Measurement Levels

- Each KPA consists of driver indicators, selected from each of the tools – deemed important to ensure the KPA is present in a person's life.

- Results from these driver indicators are aggregated into a score and converted into a final rating for each KPA:

Developing: $\leq 50\%$

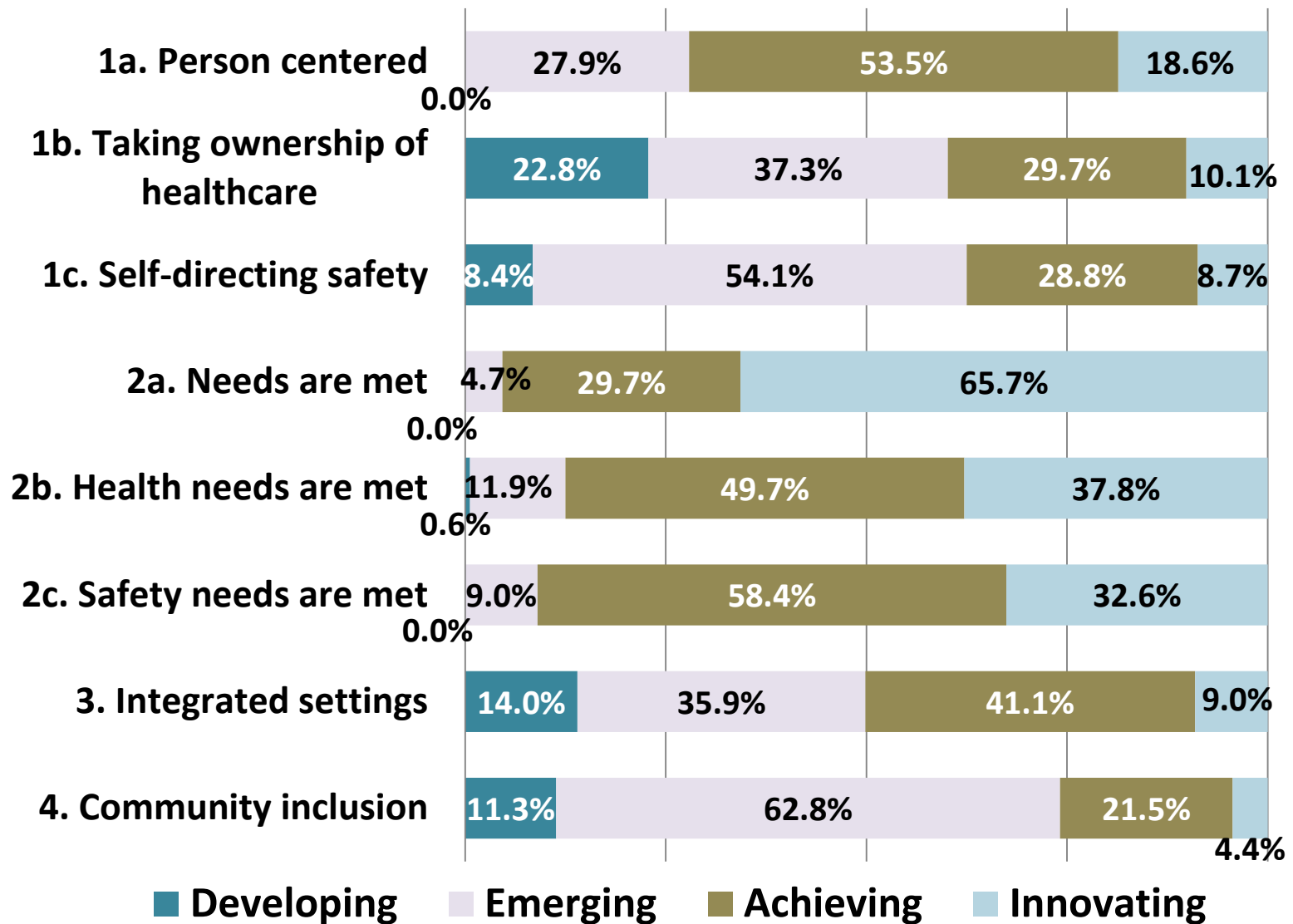
Emerging: $>50\% - \leq 75\%$

Achieving: $>75\% - \leq 90\%$

Innovating: $>90\% - 100\%$

PCR Results by KPA

July 2016 – June 2017



Person Centered

Top Strengths

- ISP describes person's communication and sensory support needs (ISP QA) and preferred communication methods are solicited/respected (II, PI, SCI)
- The individual is respected and staff supports the person's choices (OBS)
- Support Coordinator conducts an assessment of personal strengths, interests, preferences and abilities (SCI, SCRR)

Challenges

- Support Coordinator provides person with education about choice and person centered planning (SCRR)
- There is evidence of informed choice of providers (ISP QA)

Needs Met (General)

Top Strengths

- Support plan review is requested and completed annually or with a change in person's status (SCI, SCRR, II, PI)
- Staff responds to the express needs of the person (OBS)
- Person is supported to access transportation and other services in the community (SCRR)

Challenges

- Person is moving toward desired outcomes/dreams (II)
- Family member (AR/Guardian) is satisfied with supports and services (FGI)

Health: Self Directed and Needs Met

Top Strengths

- Person's health concerns/untreated pain are addressed (II, PI, PRR)
- Person shows signs of good personal hygiene and staff is aware of person's risk triggers (OBS)
- Provider follows up on person's medical needs (PI) and assists person to see a doctor when needed (PRR)

Challenges

- Person is provided with education on personal and preventative health, and medications (what, why, side effects) (II, SCI, SCRR, PI, PRR)
- Provider advocates to ensure person receives routine preventative screenings/healthcare and referrals as needed (SCI, SCRR, PRR)

Safety: Self Directed and Needs Met

Top Strengths

- The family (AR/G) knows what to do if abuse, neglect or exploitation (ANE) is suspected (FGI)
- Person is free from ANE and the use of unauthorized restraints (FGI, II, OBS) and SC reports/addresses ANE and unauthorized restraints (SCI)
- Person has equipment needed to eat safely (OBS) and is observed for changes in status for potential safety risks (PI)

Challenges

- Providers ensure the person understands the meaning of /has education on the use of restraints, seclusion, restrictions and ANE (SCRR, SCI, PRR)
- Providers ensure person receives education on restraints, seclusion, restrictions, ANE and other types of emergencies (SCI, SCRR, PI, PRR)

Community Inclusion

Top Strengths

- Person actively participates in the community based on choice and preference (OBS)
- Support Coordinator discusses community engagement options during development of the ISP and develops goals for these as indicated (SCI)

Challenges

- Ensure person receives education about social roles (PRR) and is supported to develop desired social roles or new friendships (PRR, SCI, SCRR)
- Support Coordinator ensures outcomes related to involvement in community/civic groups are pursued (SCRR)
- Ensure the person is offered opportunities to be involved in and contribute to the community as desired (PRR, PI, SCRR, and SCI)
- Person is active participant/member of community groups, such as a church, community clubs, YMCA, neighborhood association (II)

Integrated Setting

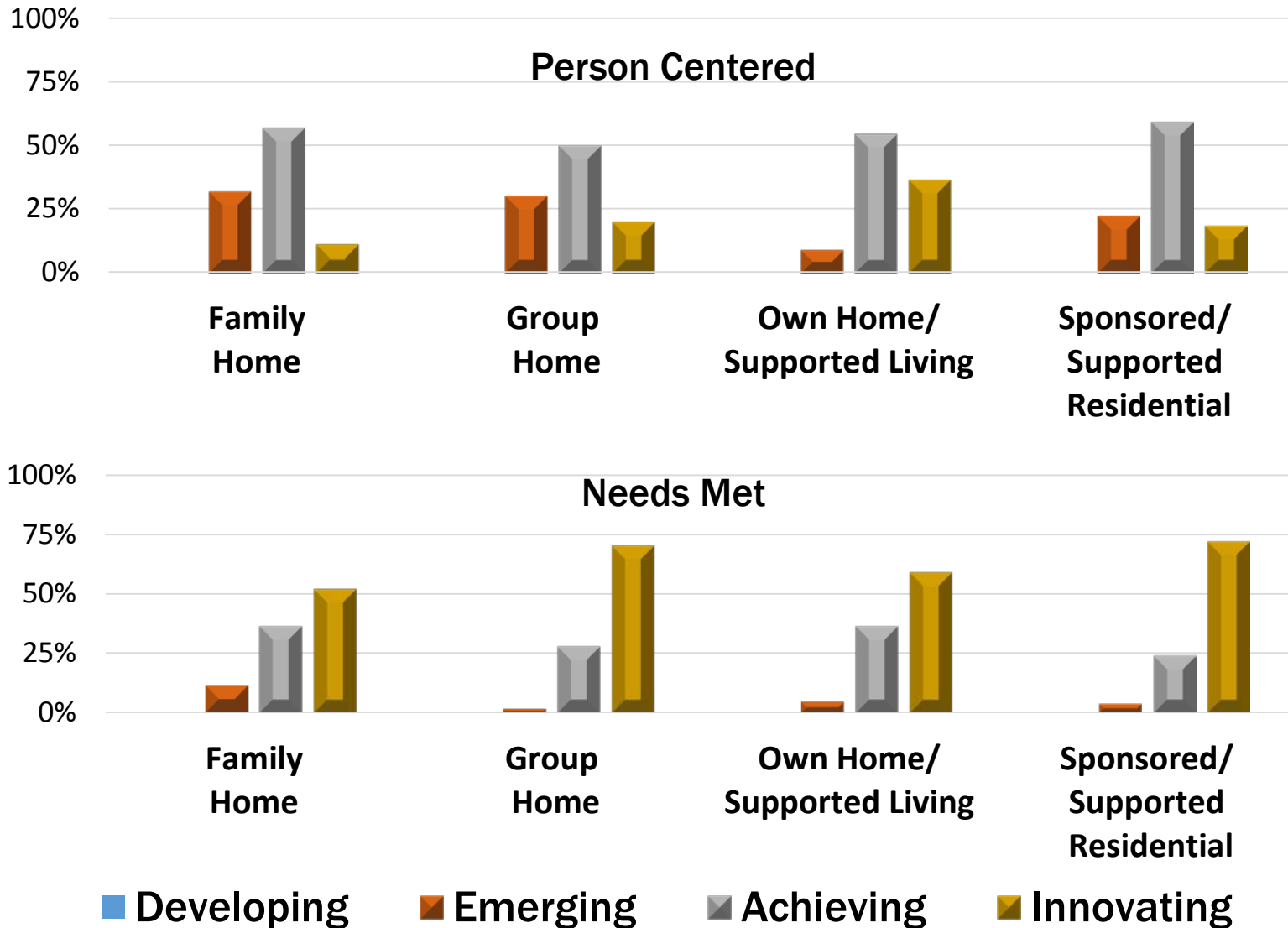
Top Strengths

- Support Coordinator and provider supports person to explore more integrated living and work/day settings (SCI, SCRR, PI, PRR).
- The ISP contains a review of most integrated settings, addressing both living and employment/day settings (ISP QA)

Challenges

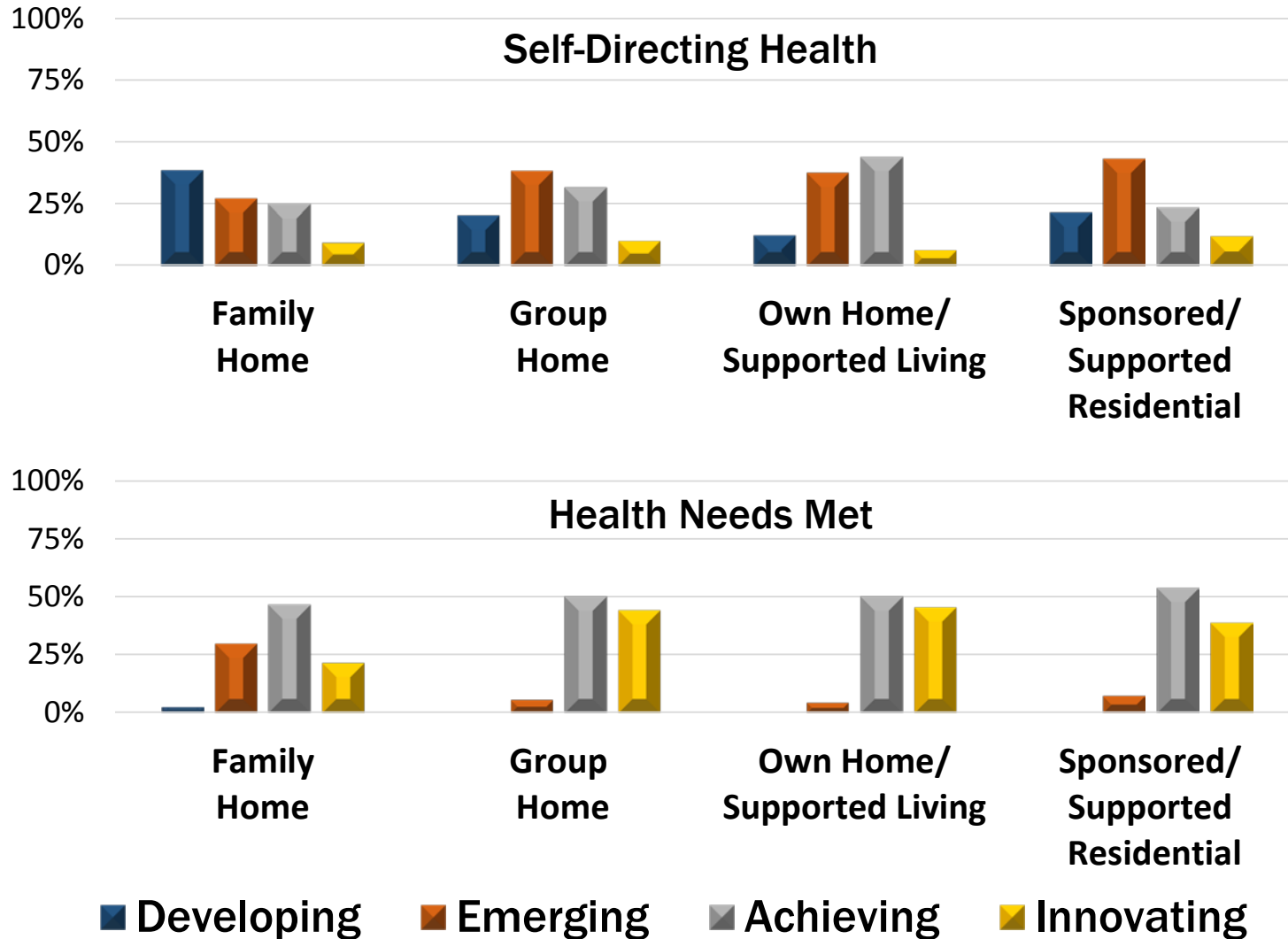
- Assess and/or address barriers to integrated educational opportunities, school settings, supported employment, or supported living (PI, PRR, SCI)
- Person works in an integrated community setting (II)
- Person receives Supported Employment with evidence of career advancement opportunities (ISP QA)

PCR KPA Results by Home Type July 2016 – June 2017

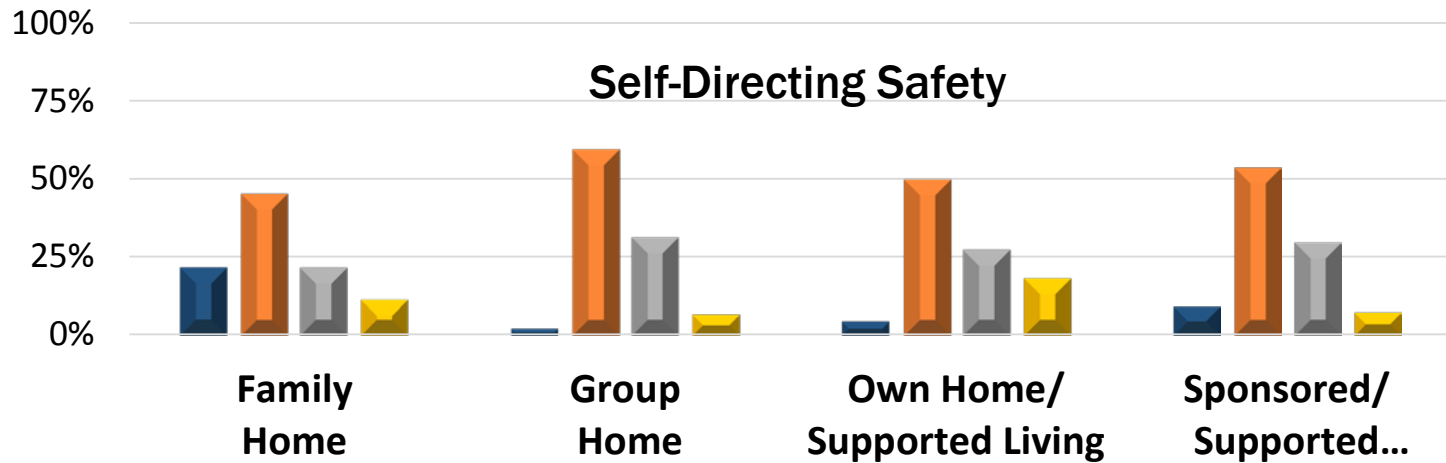


PCR KPA Results by Home Type

July 2016 – June 2017

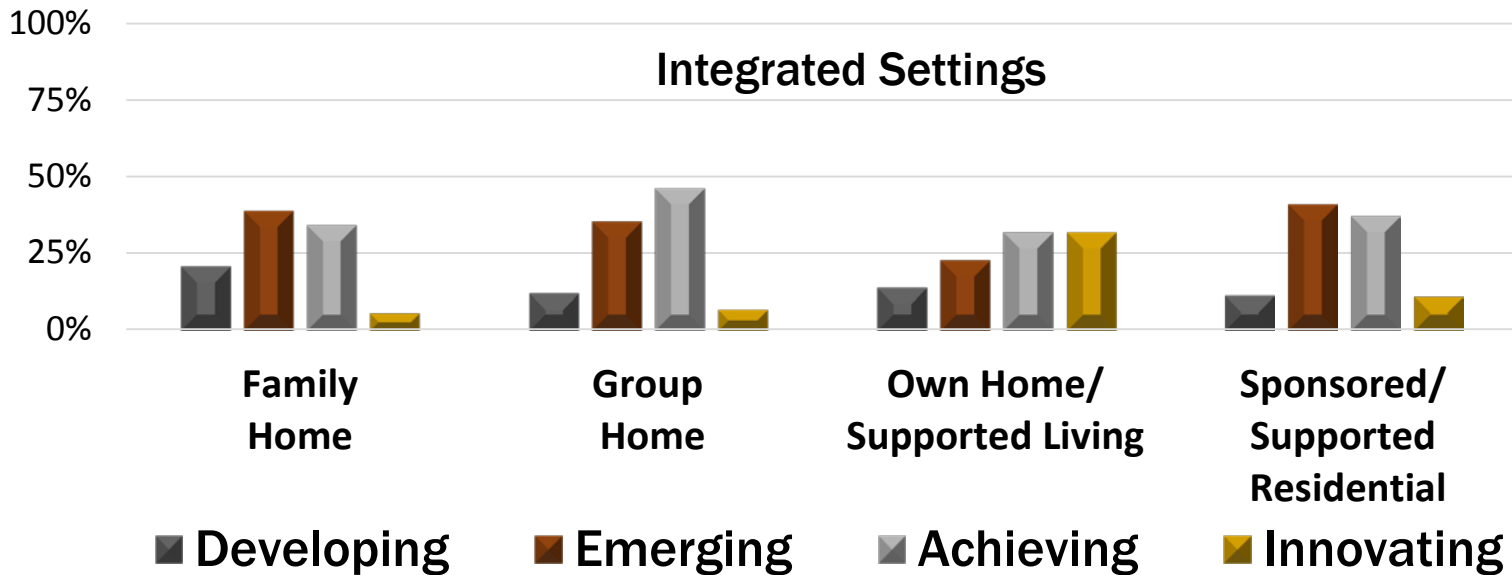
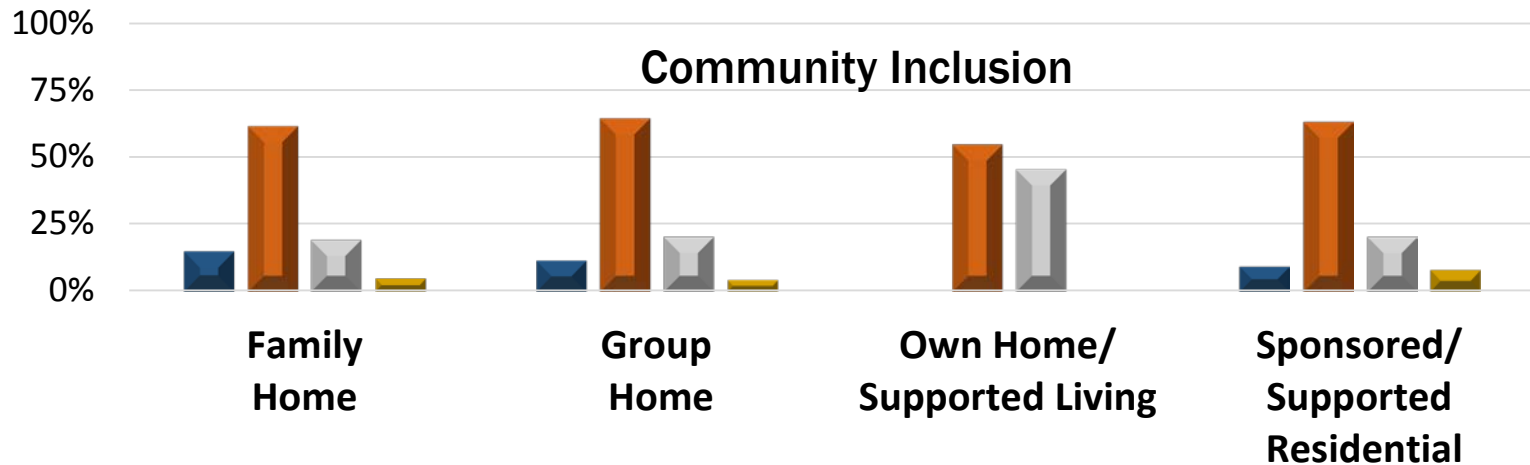


PCR KPA Results by Home Type July 2016 – June 2017



■ Developing
 ■ Emerging
 ■ Achieving
 ■ Innovating

PCR KPA Results by Home Type July 2016 – June 2017

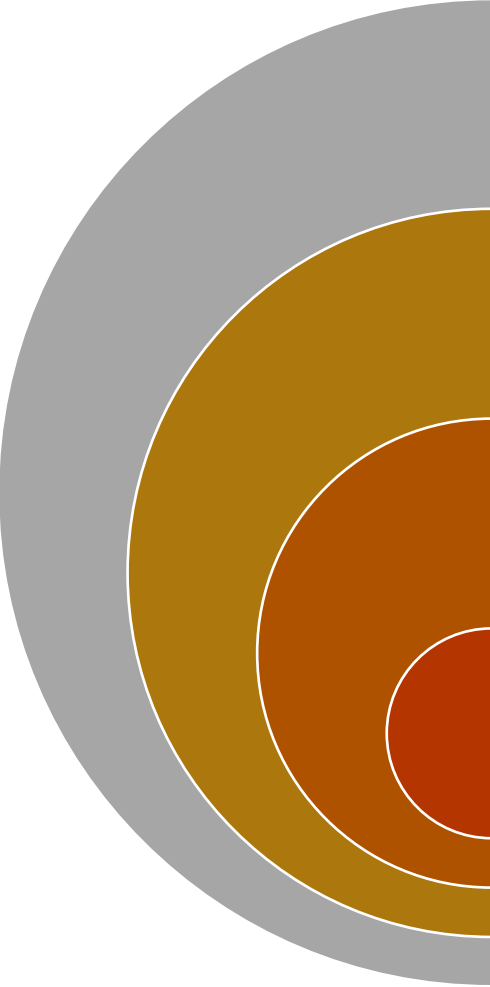


Provider Quality Reviews (PQR)

Overview
KPA Results
Administrative Review
Strengths and Barriers
Recommendations



Provider Quality Review



Random sample of 50 providers of Day Services, who provided services to individuals selected for the PCR sample

Focuses on the provider's service delivery system including compliance with qualifications and training requirements

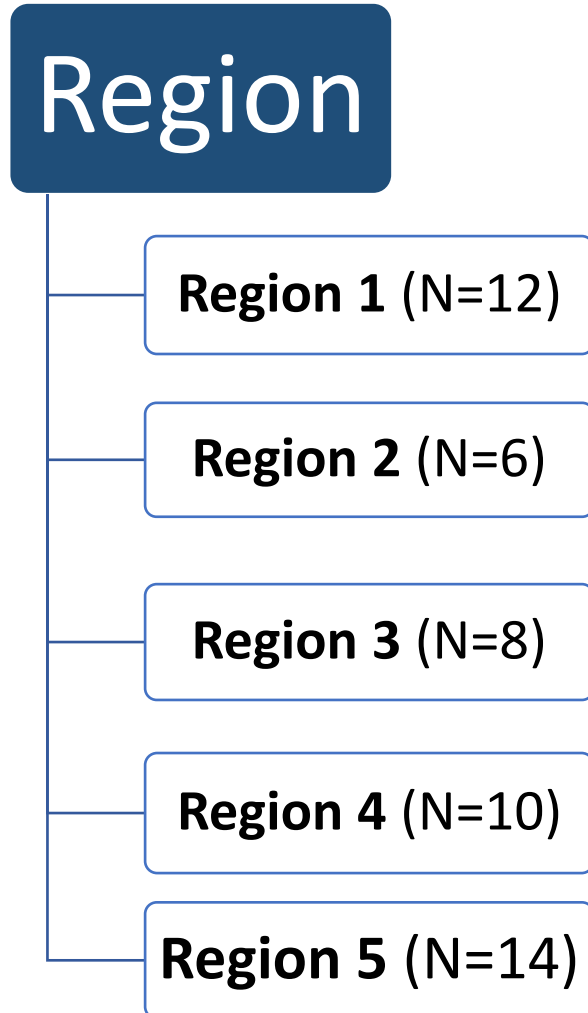
Evaluates performance in delivering appropriate services and supports to assist the person in achieving personal outcomes and addressing identified needs

Assesses quality and compliance with Virginia Medicaid provider manuals and other state requirements, rules and policy

PQR Tools



Provider Quality Reviews (N=50)



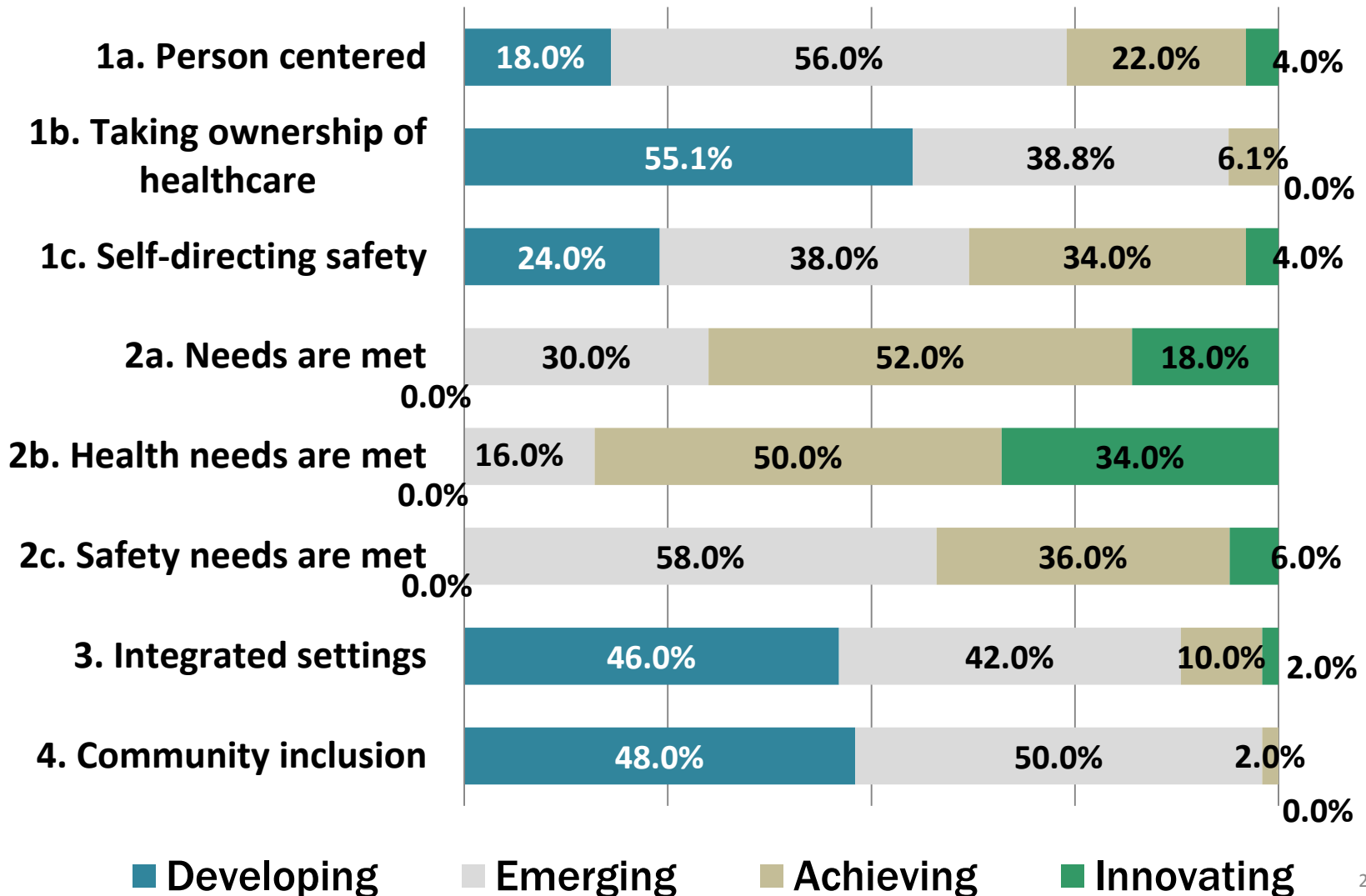
**All Day Services
Includes 11 CSBs
3 to 66 staff
5 to 155 individuals**

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PQR Results by KPA

July 2016 – June 2017

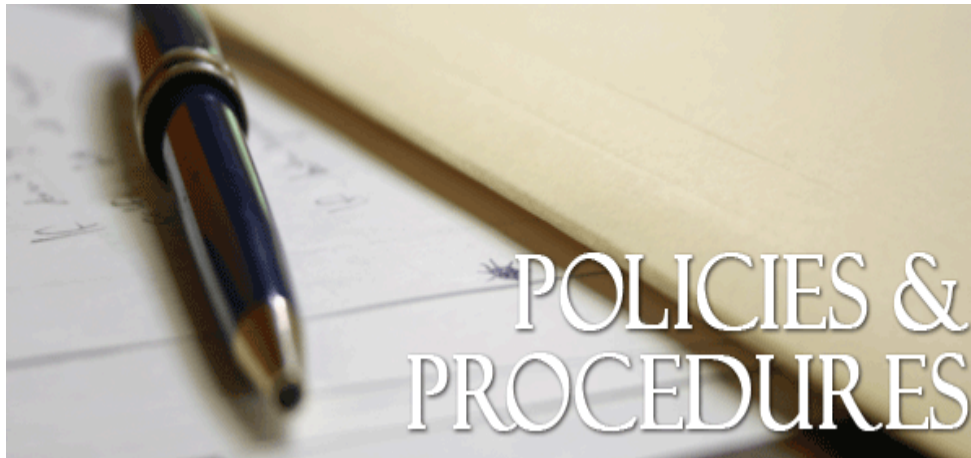
N = 50



Administrative Review

Policies and Procedures

Qualifications and Training



Policies and Procedures 74.2%

Strengths: Most providers have policy to ensure:

- Strengths, preferences, needs and outcomes are identified
- Employees are competent and adequately trained
- Emergency medical information is current and readily available
- Injuries are evaluated and addressed immediately

Challenges: Most providers do not have policies to ensure:

- Person receives education on and understands the meaning of ANE, restraints, seclusion and restrictions
- The Quality Improvement Plan is updated at least every 4 years

Qualifications and Training

(Based on Sample of Employee Records)

88.6%

Strengths: Most staff have received:

- Orientation training on Human Rights and Personnel Policies
- Training on the characteristics of MR/ID, appropriate interventions and training strategies
- Emergency medical/first aid and CPR training

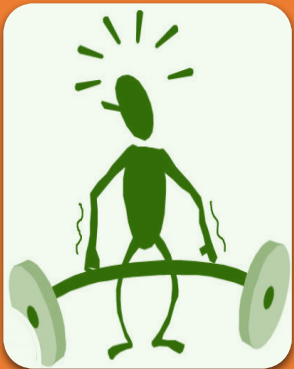
Challenges: Lowest scoring area (75%) indicates

- Orientation training on person centeredness is often not completed within 15 days of hire

Provider Strengths and Barriers



- ◆ Staff is knowledgeable of individuals' health needs
- ◆ Staff treats individual as unique person
- ◆ Staff is observed treating individuals with respect and dignity
- ◆ Staff knows person's preferences and acts on them



- ◆ Lack of funding for needed services
- ◆ Difficulty hiring qualified staff
- ◆ Difficulty maintaining qualified staff
- ◆ Lack of funding to accommodate 1:3 Community Integration Ratio

Most Frequently Cited Recommendations

PCR and PQR

Safety

- Provide education to the person according to his/her learning style on the different types of abuse, neglect, exploitation, and what to do in those situations
- Safety education should be on going

Choice

- Consistently document efforts related to choice
- Support the person in making informed choices

Most Frequently Cited Recommendations

PCR and PQR

Access to Services

- Assist the person to understand how to make changes to services or staff
- Connect the person to resources that will help develop more natural and unpaid supports in communities

Community Inclusion

- Support person to establish social roles in the community
- Consistently solicit person's interest in activities including competitive employment and advocacy group participation

Thank You!

Questions?

Ideas for Future Analysis or Studies?

LaDonna Walters: waltersl@qlarant.com

Sue Kelly: kellys@qlarant.com

Yani Su: suyani@qlarant.com

Marion Olivier: olivierm@qlarant.com