

Guidelines for Summary Ratings

Support Coordination Reviews For Primary Services

Community Residential Alternative (CRA)

Community CLS Registered Nurse

CLS Licensed Practical Nurse

CRA Registered Nurse

CRA Licensed Practical Nurse

Community Living Support (CLS)

Community Access Group (CAG)

Community Access Individual (CAI)

Pre-vocational Services

Supported Employment Group (SEG)

Supported Employment Individual (SEI)

The summary rating system for support coordination reviews is designed to reflect a point-in-time status of an individual's services related to health, safety and service issues. The primary focus is on health and safety issues but the support coordinator must also evaluate the appropriateness and adequacy of services. To some extent, deficiencies should be considered relative to an individual's strengths and needs.

While it is recognized that the absence of deficiencies does not equate to quality in services, protection of individuals' health and safety is an essential component of program quality. The state's first responsibility is to assure the health and safety of individuals receiving state services. The process of conducting routine individual reviews is of prime importance in assuring health and safety through the identification and correction of problems in health, safety and services for any individual.

The provider of the services where the individual is visited is the provider listed on the review form. Issues identified that are not within the funded services of this provider will not contribute to the summary rating of services for the individual. If health and safety problems are identified that are not related to the provider where the individual is visited, the support coordinator should document the problem on the review form and refer it to the regional office for follow up even though the rating is "1" or "2" for services provided". The provider, support coordinator and regional office have joint responsibility for assuring that all problems are identified and addressed.

The ISP dictates number of visits beyond the minimum. Visits are increased if there are identified health and safety risks and/or identified issues. At minimum individuals who receive CRA or COMP CLS services are seen monthly. At minimum; Individuals receiving community access group or individual, or supported employment group or individual should be seen in one of these settings on a monthly basis.

Summary Rating - 1: Services are person centered and there are no health, safety or service deficiencies.

It would be hard for the reviewer to identify a home and/or service more appropriate for this individual. In other words, the service site and services are person centered and appear to be appropriate for the individual's needs, and there are no deficiencies. The review form shows this rating to mean "excellent." In this context, "excellent" means that services are person centered and there are no health, safety or service deficiencies.

Summary Rating - 2: Deficiencies are evident within any of the identified services. Services are not fully person centered nor do they cause or have the potential to cause actual harm to the individual. Deficiencies may be addressed informally.

Examples include but are not limited to:

- Personal choice not evident in some respect but not a pervasive problem (e.g., menu decision, community/work choices, self advocacy, social opportunities)
- Lack of person centered activities that are meaningful to the individual (becomes a “3” if ongoing or pervasive)
- Lack of age/skill appropriate activities and/or materials (i.e., assistive technology, assisting with meal preparation, shopping, learning about medication and taking medication, getting to lifelong learning settings, participating I choice of leisure activity in and out of home)
- Lack of appropriate documentation (ie: checking in by phone, talking to customer, employer and co-workers, task cueing, Action Plans implemented and progress documented, maladaptive behavior(s), fire and weather drills, fire extinguishers not tagged or expired, HRST tracking). Related to medications, a "2" rating may be assigned when there are isolated instances of missed documentation but the individual did receive medication as prescribed.
- Minor/minimal home/facility repairs or home/facility needs cleaning (i.e., accessible accommodations, bathrooms, eating areas, broken furniture etc.)
- Type and amount of services is inconsistent with the individual's assessed need
- Staff or caregivers need additional training on implementation of the individual's behavior support plan, behavior protocol or crisis/safety plan (not noted as problem in previous months)
- An individual behavior support plan exists but based on current evidence needs revision; or support coordinator identifies a need for the individual to be assessed for development of a behavior support plan
- If an individual's access to money is controlled by staff but documentation (e.g. method is established in ISP, log of the individual's receipt of funds) is missing, a "2" rating may be assigned if it is evident that the individual does have access to the appropriate amount of funds. Controlled access to funds is OK and not a deficiency if appropriate documentation is kept.
- Food supply is meager, expired date of use, or there are few fresh foods available for the individual (not noted as a problem in previous months)
- Inadequate opportunity for hydration, snack, and/or lunch breaks.
- Lack of communication with families, other agencies, and support coordinators.
- Job coach is unaware of issues individual is facing at work, because contact is infrequent.
- Lack of assistance to locate or create a job in past four weeks
- Provider has not purchased and/or delivered products and/or services needed by the individual (ie. New mattress, wheelchair).
- Lack of person centered, individualized community-based activities (can become a “3” if ongoing or pervasive,)
- Integrated activities lack creativity, individualism, and/or are repetitive or the environment is questionable in terms of it being integrated or not.
- Lack of training to participant that supplements employers training and guidance
- Lack of transportation when transportation is part of the service delivery.
- Lack of monthly visit (oversight and support) to Host Home setting
- Lack of documentation related to services based on any exceptional rate (ie. Are individualized accommodations in place; are appropriate staff in place; are nursing, behavior specialist and/or other professional services occurring at approved frequency; and is any required professional oversight occurring?)
- For self-directed services the individual and/or the representative is not submitting the required information to the FSS correctly or timely thus causing a disruption in service (not reported as an in issue in previous reviews)
- For self-directed services there is no emergency back-up plan or it is ineffective.

Summary Rating - 3: Deficiencies are serious; and/or uncorrected issues remain from previous reviews. One or more identified deficiencies pose physical, emotional and/or safety threat(s) to the individual, but do not put the individual in immediate jeopardy. This includes issues related to a person's personal choices and dignity and to appropriateness of services. These health, safety, service, choice and/or dignity issues should be addressed as soon as possible. A formal Corrective Action Plan is necessary with specified time frames.

Examples include but are not limited to:

- Lack of personal choice, is a pervasive problem.
- Lack of person centered activities that are meaningful to the individual (becomes a “3” if ongoing or pervasive)

- Lack of age/skill appropriate activities and/or materials (i.e., assistive technology, assisting with meal preparation, shopping, learning about medication and taking medication, getting to lifelong learning settings, participating I choice of leisure activity in and out of home) Becomes a "3" if ongoing or pervasive
- Lack of documentation of medical concerns. (If a person needs medical tracking and it is not present. Examples: person receives psychotropic medication, is Aims testing present? Date of last testing noted? If person has seizures is there a seizure log, is it up to date? Is annual blood test for seizure medications completed? If person has diabetes is sugar tested daily? Is the agency reviewing results and getting medical attention when the results are not in range? If person has high blood pressure is BP being tested daily? Is Input and output present if person has skin breakdown or constipation issues per ISP? Are issues addressed around individuals who have seizures around choking? If a person is now falling frequently and takes medication has he /she been to the doctor's? If any of these are issues this scores a 3.)
- Laboratory work not conducted as ordered; no documentation that ordered lab work was done
- Failure to meet appointments for all medical or dental needs including physical examinations
- Routine health and medical procedures needed for the individual are not followed. Re-positioning every 2 hours, tracking fluid/food intake or bowel movements, aspiration or choking protocols, AIMS testing, checking blood pressure for individuals receiving medication for blood pressure, checking insulin levels of individuals who are diabetic, tracking seizures for individuals who have seizures, and following special diets are examples of routine health/medical procedures that are appropriate related to the needs of some individuals.
- Special medical supplies or equipment absent, inadequate or in poor condition to include dentures, eyeglasses, hearing aids etc. (has been noted as a problem in previous months). *Note: a "2 " rating could be assigned if there is documentation of work in process to obtain/repair equipment or supplies.*
- Home including bathrooms are not handicap accessible for individuals who use wheelchairs or need a handicap accessible living situation
- Food supply is meager, expired date of use, or there are few fresh foods available for the individual (has been noted as a problem in previous months)
- Repeated incident reports involving the individual that indicate that the individual's or others' health or safety is at risk; no documentation of provider follow up to reduce incidents or address the individual's issues related to incidents.
- Environmental issues: Cleanup, home/facility repairs (including repairs for out of date or missing/broken safety equipment) or pest control are needed in order to provide a safe environment. Doorways, passageways or exits are blocked (i.e. boxes, furniture, debris). There are reported or blatantly observable vehicle safety issues. Chemicals are unsecured but should be secured per applicable regulation. *Note: Related to unsecured chemicals, it is acknowledged that many individuals have the skills to work with household chemicals. In these cases, there should be documentation on file stating the individual has these skills.*
- ***Water temperature over 120 degrees (121 degrees - 129 degrees). At least a "3" rating is given for all cases of water temperature over 120 degrees in any setting. If possible, water temperature higher than 120 degrees should be lowered while the reviewer is on site.
- Insufficient number of staff to assure the individual's safety in case of fire or other emergency; insufficient number of staff to implement ISP.
- Staff on duty demonstrate incompetence in providing support to the individual.
- Any violation of a person's dignity or civil rights.
- The individual's home or facility placement does not meet applicable regulations.
- The individual's services are inadequate related to services the individual is supposed to be receiving per ISP and authorized services (i.e. the individual wants and/or has goals related to employment but sits at home)
- Medication errors - *Note: It is understood that medication errors will occur. In cases where errors were documented per state policy and documentation of corrective action (including quality improvement activities for any systemic problems identified) is available for review, it is not considered a deficiency. Also, a "2 " rating may be assigned when there are isolated instances of missed documentation but the individual did receive medication as prescribed. Medication errors that have not been identified and corrected by the provider are assigned a "3 " rating. Any violation of the "5 rights" (right person, right dose, right route, right medication, right time) is a medication error and would warrant a "3" rating unless already identified by the provider with documentation of corrections made. Specific examples include: Staff unfamiliar with how to access information about the risks and benefits of medication(s) for individuals; unlocked/unsecured medication box (does not apply to homes where an individual lives without 24/7 support and has a corresponding physician's note that says the individual can administer his/her*

own medications); emergency medication and medical information not accessible; medication count does not match prescribed usage; loose pills; medications are received by the individual more than one hour before or after prescribed time; documentation of medications received by the individual **is** prior to the time the individual actually received the medications; out of date or discontinued medications are present; and evidence that medication administration records do not accurately reflect current prescribed medications.

- Pattern of medication errors (even though they were documented and corrected) with no evidence of quality improvement activities by the provider.
- The individual does not have access to his/her money, or receives less money than he/she should receive
- A behavior support plan, behavior protocol or safety/crisis plan is recommended per ISPs or other reports but a behavior support plan, behavior protocol or safety/crisis plan has not been developed or implemented.
- Staff or caregivers need additional training on implementation of the individual's behavior support plan, behavior protocol, or safety/crisis plan (has been noted as a problem in previous months).
- Lack of assistance to locate or create a job in past eight weeks
- Ratios should meet the needs of the individuals. At minimum, Pre-Vocational facility services ratio cannot exceed 1:10 individuals or for mobile crew exceed 1:6 individuals. If it does a 3 rating is given.
- Repeated lack of documentation related to services based on any exceptional rate (ie. Are individualized accommodations in place; are appropriate staff in place; are nursing, behavior specialist, and/or other professional services occurring at approved frequency; is any required professional oversight occurring?)
- For self-directed services the individual and/or the representative is not submitting the required information to the FSS correctly or timely thus causing a disruption in service (has been reported as an issue in previous reviews)
- Payment is made directly or indirectly to members of the individual's immediate family, without written approval from DCH or DHR (whichever is applicable)
- Provider did not update the HRST 90 days prior to ISP expiration (which is the birthday).
- Person previously received day support services and days of service have decreased from what they were. Example: If person had been receiving 5 days of services they should still receive this many days.
- Individual receives day services, Community Access Group or Pre-vocational Services, and provider has been billing family for transportation to Center.
- Person is receiving CRA services and is moved from one site to another without the input of the Support Coordinator and approval from Regional Office.
- **Failure to address less serious concerns noted in past visits; previous concerns have not been followed up and corrected. In other words, a deficiency identified in March may have resulted in a "2" rating. If the same problem is identified in April, a "3" rating may be assigned if warranted. If there is documentation that providers are working with landlords on minor repairs, a "2" rating may be assigned repeatedly.**

*** For CLAs and PCHs and/or homes/programs with site specific provider numbers

Summary Rating - 4: Deficiencies place the individual in immediate jeopardy concerning his/her health and safety. Immediate corrective action is necessary. If clear evidence of abuse, neglect or exploitation is evident and the person is not *immediately* safe, a "4" rating is assigned and immediate action is taken. The individual may need to be moved to another site and/or with another provider on the day of the review or on the next day if corrections cannot be made immediately.

Examples include but are not limited to:

- The individual needs immediate medical attention and is not receiving that attention from the provider.
- Repeated medication errors, especially errors related to wrong medications, wrong dosages or wrong persons.
- Environmental hazards that create immediate risk of falls, fires, burns, poisoning, suffocation or other serious accidents and which cannot be immediately rectified (e.g. electrical hazards, the individual is exposed directly to poisonous chemicals, unstable decking or stairs).
- *** Water temperature 130 degrees and higher.
- Unexplained bruises of recent origin; fractures (provider has not responded promptly and adequately to determine the cause).
- Significant & unexplained weight loss (provider has not responded promptly and adequately to determine the

cause).

*** For CLAs and PCHs and/or homes/programs with site specific provider numbers