




PBH QUALITY MANAGEMENT

PBH PROVIDER PERFORMANCE PROFILE REVIEW PROCESS



Information provided in this presentation pertains only to the counties in the PBH Region. This information is specific to the PBH region and may not apply to Local Management Entities (LMEs), providers, stakeholders or individuals outside the PBH catchment area.

Presentation slides are brief, bullet-points of information and should not be used out of context.

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POLICY/PROCEDURE REVIEW PROCESS

- New Provider Policy/Procedure Review
- Additional Services Policy/Procedure
- Health/Safety Review Process

Policy/Procedure Review

- Policy/Procedure Review Tools:
 - <http://www.pbhsolutions.org/providers/newproviders/docs/Agency/Full%20Policy%20and%20Procedure%20Review%20-%20Agency%20Full%20Applications%2001-09-08.xls>
 - http://www.pbhsolutions.org/providers/newproviders/Agency_forms.asp

SCHEDULING OF REVIEWS

- 4-6 weeks prior to review
- Confirmation of main contact and location
- Electronic Records
- Direct Support Employee (Relative as Provider)
- AFL/Unlicensed AFL sites

Scheduling of Reviews

- Direct Support Employee checklist

PBH Provider Performance Profile Grid

Profile Level	Duration of service provision:	Achieve a review score of:	Frequency of review:
Routine	6 months	75%-100%	Annually
Preferred	1 year	80%-100%	Every two years
Exceptional	2 years	90%-100%	Every three years
Gold Star	3 years	95%-100%	Every three years

IMPLEMENTATION REVEIW

- Health and Safety Review- as applicable
- Funds Review
- Medication Review
- Personnel Review
- Record Review
- Rights Notification Review

IMPLEMENTATION REVIEW

- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20Record%20ReviewTool.xls>
- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20%20Funds%20Management%20Review%20tool.xls>
- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20Health%20and%20Safety%20Review%20Tool.xls>
- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20Medications%20Review%20Tool.xls>
- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20Personnel%20Review%20Tool.xls>
- <http://www.pbhsolutions.org/pubdocs/upload/documents/Initial%20Rights%20Notification%20Review%20Tool.xls>

ROUTINE REVIEW

- Report and Safety Review
- Funds Review
- Medications Review
- Personnel Review
- Record Review
- Rights Notification Review

ROUTINE REVIEW

- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20Consumer%20Record%20Review%20Tool.xls>
- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20Funds%20ReviewTool.xls>
- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20Medications%20Review%20Tool.xls>
- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20Personnel%20Review%20Tool.xls>
- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20Rights%20Notification%20Review%20Tool.xls>
- <http://www.pbhcare.org/pubdocs/upload/documents/Routine%20REPORT%20SAFETY%20REVIEW.xls>

PREFERRED, EXCEPTIONAL, GOLD STAR REVIEW

- Self-Monitoring quality management systems
- Person-centered planning
- Personnel
- Agency functions

Performance Profile Review

- http://www.pbhsolutions.org/QM/qm_forms.asp

Advanced Placement on Profile

- Letter of Intent:
Routine/Preferred/Exceptional/Gold Star
- Provider self-assessment is completed and submitted with letter of Intent
- QM verifies through a desk and onsite review that the Provider has met all requirements for level requested

DOMAIN REVIEW

- Incident Reporting and Monitoring
- Status/Compliance with Regulatory Entities
- Provider Grievance Responsiveness
- Quality Performance Activities

DOMAIN REVIEW

- <http://www.pbhcare.org/pubdocs/upload/documents/Domain%20Review%20Tool%20%20Increase%20Level.xls>

Unlicensed Alternative Family Living (AFL)

- Home environment
- Personnel
- Staff training
- Medication storage
- Fire inspection-pbh monitors for compliance
- Sanitation/health inspection (as required)

Unlicensed AFL Review

- <http://www.pbhcare.org/pubdocs/upload/documents/AFL%20HS%20Review%20Tool%20unlicensed.xls>

Cultural Competence Initiative

- Part of the PBH quality initiative is to conduct Cultural Competence reviews for providers.
- Cultural Competence reviews are completed as part of the quality assurance monitoring activities to ensure compliance.
- Reviews are completed during the Performance Profile Review Process.
- Cultural Competence reviews are not completed during the implementation review process.

Cultural Competency Categories

- Category 1. Licensed Independent Practitioners, non-group practices
- Category 2. AFL provider
- Category 3. 14 or less FTE's and infrastructure does not separate roles of administrative and service
- Category 4. 15 or more FTE 's and infrastructure separates the roles of administrative and service

Cultural Competence Review Elements

- Agency Infrastructure
- Policies/procedures/practices
- Personnel practices
- Skills and trainings
- Organizational composition
- Programs and Services
- Community communications

Cultural Competence Review Process

- Prior to the on-site review, a Cultural Competence self assessment form will be sent to each agency to complete and return to PBH at least 2 weeks prior to the on-site review (this information is included on the profile review scheduling form).
- The packet returned to QM from each provider must contain the completed self assessment and documentation to support elements.
- Documentation can include the agency Cultural Competence plan, policies, brochures, etc.
- PBH QM Staff completes a desk review of the information submitted, followed by an on-site review of the agency environment during the profile review.

QM Cultural Competence Forms

- http://www.pbhcare.org/pubdocs/upload/documents/Cultural_Competency_Self_Assessment_Category_1_LIP_20110328164853.pdf
- http://www.pbhcare.org/pubdocs/upload/documents/Cultural_Competency_Self_Assessment_Category_2_20110328164854.pdf
- http://www.pbhcare.org/pubdocs/upload/documents/Cultural_Competency_Self_Assessment_Category_3_20110328164854.pdf
- http://www.pbhcare.org/pubdocs/upload/documents/Cultural_Competency_Self_Assessment_Category_4.pdf

Investigations

- Quality Management could potentially conduct an onsite investigation based on potential or reported concerns of:
 - Abuse/Neglect/Exploitation
 - Health & Safety/Consumer care issues
 - Inadequate staffing ratio
 - HIPAA violation
 - Fraud/financial abuse
 - Facility licensing issues

Investigations

- An announced or unannounced on-site investigation
- Face-to-face interviews with applicable parties and other individuals involved who may possess pertinent information, using a standardized list of questions.
- Documents reviewed may include, but not limited to: incident reports, medical records, personnel records, service documentation, health/safety review reports (as applicable).
- Opening/Exit Conference to ensure a verbal review of issues to be addressed and the preliminary findings with the Provider.
- Written summary of investigation findings to be provided.

Concerns/Grievances

- For concerns, requests, suggestions for better services or grievances contact:

Anonymous concern line:

1-888-213-9687