

**North Bay Regional Center
Home and Community-Based Services Waiver
Follow-up Review Report**

Conducted by:

Department of Developmental Services

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INTRODUCTION

The Department of Developmental Services (DDS) and the Department of Health Care Services (DHCS) conducted a federal compliance monitoring review of the Home and Community-Based Services (HCBS) Waiver from May 15–24, 2017, at North Bay Regional Center (NBRC). A final report including review findings and NBRC’s written responses to the findings was provided to NBRC on May 18, 2018.

DDS and DHCS conducted a follow-up review on May 30, 2018, to ensure that issues raised during the collaborative review had been addressed. The monitoring team selected 20 consumer records for the HCBS Waiver follow-up review for the period of March 1, 2017, through February 28, 2018. In addition, the team reviewed a supplemental sample of 10 records of consumers who had special incidents reported to DDS during this review period.

Purpose of the Follow-up Review

DDS contracts with 21 private, not-for-profit corporations to operate regional centers, which are responsible under state law for coordinating, providing, arranging or purchasing all services needed for eligible individuals with developmental disabilities in California. All HCBS Waiver services are provided through this system. It is the responsibility of DDS to ensure, with the oversight of DHCS, that the HCBS Waiver is implemented by regional centers in accordance with Medicaid statute and regulation. As stipulated in the HCBS Waiver application approved by the Centers for Medicare & Medicaid Services (CMS), the monitoring review process is a two-year cycle with a collaborative review in the first year, and a smaller, focused review in the second year addressing issues raised during the collaborative review.

Overview of the HCBS Waiver Federal Follow-up Review

The collaborative monitoring review protocol is composed of sections/components designed to determine if the consumer’s needs and program requirements are being met, and that services are being provided in accordance with the consumer’s individual program plan. Specific criteria have been developed that are derived from federal/state statutes and regulations and from CMS’ directives and guidelines relating to the provision of the HCBS Waiver services.

The DDS and DHCS monitoring report from the May 2017 collaborative review requested NBRC to provide clarification or follow-up to the report findings and recommendations. NBRC submitted a response to DDS on February 8, 2018, and based on the report recommendations and NBRC’s response, the monitoring team evaluated supporting documents to determine the degree and completeness of the implementation process. Specifically, the team reviewed, evaluated and made determinations based on the selected HCBS Waiver eligible consumers’ records and discussions with NBRC’s personnel.

Summary of Follow-up Review Findings

The May 2018 follow-up review indicated that further action is needed to ensure that consumer records contain a signed and dated Consumer Choice of Services/Living Arrangements form, that consumer Individual Program Plans address all qualifying conditions, and that quarterly face-to-face meetings and reports of progress are completed for consumers living in community out-of-home settings, i.e., Service Level 2, 3 or 4 community care facilities, family home agencies, or supported living and independent living settings. In addition, two vendors did not report a special incident to NBRC within the required timeframes, and NBRC did not report one special incident to DDS within the required timeframes.

SECTION I

REGIONAL CENTER CONSUMER RECORD REVIEW

Summary of the May 2017 Collaborative Monitoring Review Recommendations

The May 2017 monitoring review included findings related to the following: consumer records contain a signed and dated Consumer Choice of Services/Living Arrangements form; the consumers' IPPs address the qualifying conditions identified in the Client Development Evaluation Report (CDER) and Medicaid Waiver Eligibility Record (DS 3770); and quarterly face-to-face meetings and reports of progress are completed for consumers living in community out-of-home settings, i.e., Service Level 2, 3 or 4 community care facilities, family home agencies, or supported living and independent living settings.

Summary of the May 2018 Follow-up Review Findings

Sixteen of the twenty (80 percent) sample consumer records contained a signed and dated Consumer Choice of Services/Living Arrangements form. However, the records for consumers #9, #12, #14, and #20 did not contain a signed and dated form. Subsequent to the review period, a form was signed and dated for consumers #9, #12, #14, and #20.

Sixteen of the twenty (80 percent) sample consumer records contained an IPP that addressed the consumer's qualifying conditions. However, the IPPs for four consumers did not address supports for qualifying conditions identified in the record, as indicated below:

1. Consumer #1: Services and supports for the consumer's need for "assistance with medications." Subsequent to the review period, an addendum was completed that addressed services and supports for assistance with medications;
2. Consumer #9: Services and supports for the consumer's need for assistance with "auditory impairment";
3. Consumer #14: Services and supports for the consumer's need for assistance with "property destruction"; and,
4. Consumer #17: Services and supports for the consumer's need for assistance with "outbursts." Subsequent to the review period, an addendum was completed that addressed services and supports for outbursts.

Seventeen of the twenty (85 percent) sample consumer records contained documentation that all quarterly face-to-face meetings were completed for consumers living in out-of-home community settings. However, the records for consumers #15, #16, and #18 contained documentation of only three quarterly face-to-face meetings.

Seventeen of the twenty (85 percent) sample consumer records contained documentation that all quarterly reports of progress were completed for consumers living in out-of-home community settings. However, the records for consumers #15, #16, and #18 contained documentation of only three quarterly reports of progress.

Further Action Needed

NBRC should continue to ensure that consumer records contain a signed and dated Consumer Choice of Services/Living Arrangements form.

NBRC should continue to ensure that the consumer's IPPs address the qualifying conditions identified in the CDER and DS 3770.

NBRC should continue to ensure that face-to-face visits for consumers who live in community out-of-home settings are completed quarterly.

NBRC should continue to ensure that reports of progress for consumers who live in community out-of-home settings are completed quarterly.

SECTION II

SPECIAL INCIDENT REPORTING

Summary of the February 2017 Collaborative Monitoring Review Recommendations

North Bay Regional Center (NBRC) should ensure that all incidents are reported to the Department of Developmental Services (DDS).

NBRC should determine what actions are necessary to ensure that all special incidents are reported to DDS within the required timeframes.

Scope of the May 2018 Follow-up Review

1. Special incident reporting of deaths by NBRC was reviewed by comparing deaths entered into the Client Master File for the review period with special incident reports (SIR) of deaths received by DDS.
2. The records of the 10 consumers selected for the Home and Community-Based Services (HCBS) Waiver sample were reviewed to determine that NBRC's vendors reported all 10 special incidents within the required timeframes.
3. The records for the 10 consumers who had special incidents reported to DDS within the review period were assessed for timeliness of reporting and documentation of follow-up activities. The follow-up activities were assessed for being timely, appropriate to the situation, and resulting in an outcome that ensures the consumer is protected from adverse consequences, and that risks are either minimized or eliminated.

Results of the May 2018 Follow-up Review

1. NBRC reported all deaths during the review period to DDS.
2. NBRC reported all of the SIRs in the sample of 10 records selected for the HCBS Waiver review to DDS.
3. NBRC's vendors reported eight of the ten (80 percent) special incidents within the required timeframes.
4. NBRC reported nine of the ten (90 percent) special incidents to DDS within the required timeframes.
5. NBRC's follow-up activities on consumer incidents were appropriate for the severity of the situations for all 10 consumer incidents.

Findings

#SIR 1: The incident occurred on March 1, 2017. However, the vendor did not report the incident to NBRC until March 7, 2017.

#SIR 3: The vendor reported the incident to NBRC on June 1, 2017. However, NBRC did not report the incident to DDS until June 9, 2017.

#SIR 6: The incident occurred on February 8, 2018. However, the vendor did not report the incident to NBRC until February 16, 2018.

Further Action Needed

NBRC should ensure that all vendors report special incidents within the required timeframes, and that all special incidents are reported to DDS within the required timeframes.

SAMPLE CONSUMERS

HCBS Waiver Review Consumers

#	UCI	#	UCI
1	7099043	11	5506837
2	5033262	12	6160013
3	5981170	13	7120794
4	6119234	14	7120842
5	6506208	15	7133778
6	7012438	16	7173107
7	7175132	17	7176246
8	7176236	18	7178172
9	7179065	19	7182147
10	7180179	20	7190591

SIR Review Consumers

#	UCI	Vendor #
SIR 1	7172058	HN0356
SIR 2	7173401	HN0131
SIR 3	5030901	H07721
SIR 4	5574363	HN0365
SIR 5	7175166	PN1014
SIR 6	7100946	PN0911
SIR 7	8097699	H13299
SIR 8	7194141	PN1034
SIR 9	7178217	HN0426
SIR 10	7180243	HN0301