

**New Mexico Department of Health / Division of Health Improvement
Administrative Field Tool
Case Management Services**

Agency/Region:			
Surveyor:		Date/Time:	
Administrative Personnel Interviewed:			
Date/Time of Interview:			
Interview Format: <input type="checkbox"/> Telephone <input type="checkbox"/> In-Person			
Surveyor: <i>This is also used as your roll-up tool for the exit to identify deficiencies.</i>		Met	NOT Met
** DDSD DDW Service Std. - Does the Agency have a complete primary client records for each individual served by the agency (<i>Per DDSD file Matrix</i>) – (<i>all applicable plans according to the ISP must be current and present in file to be considered complete</i>)		1A08	n/a
Surveyor: <i>Note that the agency file is broken down into several tags, please refer to your tag list.</i>			
**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements: C. Programmatic Requirements: H. Training / (DDSD) Policy - Policy Title: Training Requirements for Case Management Agency Staff Policy		4C17 CoP	n/a
<ul style="list-style-type: none"> • Have Case Managers completed all required trainings as required by DDSD? 			
<ul style="list-style-type: none"> • Do Case Managers exhibit competencies for the individuals, which they serve? • Do they have the awareness skills identified in the IST section of the ISP for each Individual they serve on the sample (Case Mgr interview survey tool)? 		1A22 / 4C02 CoP	n/a
**NMAC 7.1.9 Caregiver Criminal History Screening		1A25 CoP	n/a
Letters from DOH/CCHS on file showing no disqualifying convictions is present in each employee's file			
**Surveyor: <i>CCHS letter must be addressed to Agency, not Individual staff member. Additionally, if Agency Personnel has documentation indicating CCHS Application has been submitted, verify with CCHS. If verified it is not a deficiency.</i>			
**NMAC 7.1.12 Employee Abuse Registry		1A26 CoP	n/a
Consolidated Online Registry check has been completed and proof is in each employee's file. (<i>Eff. 1/2006</i>)			
**Surveyor: <i>Verify Agency Personnel cited with COR/EAR deficiencies were not cited in previous surveys. This is a one-time deficiency if personnel were cited in a previous survey.</i>			
NMAC 26.6.14 Accreditation – Has the Agency acquired accreditation with 18 months of the signing of the original contract with DDSD		1A40	n/a
<input type="checkbox"/> CARF <input type="checkbox"/> The Council <input type="checkbox"/> Other <input type="checkbox"/> DDSD waiver of requirement (<i>Agency must show verification of this</i>)			
Does the agency have a Policy / Procedure for the following?		1A05 / 1A06	n/a
<ul style="list-style-type: none"> • Procedure for 24-hour local telephone answering system <input type="checkbox"/> Yes <input type="checkbox"/> No • Policy and procedure for Agency's Complaint / Grievance <input type="checkbox"/> Yes <input type="checkbox"/> No • Policy and procedure for training, supervision and corrective action <input type="checkbox"/> Yes <input type="checkbox"/> No 			

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<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements: M. Quality Assurance/Quality Improvement (QA/QI) Activities:</p> <p>1) Agency shall have an Internal Quality Assurance and Improvement Plan with annual updates. At a minimum does the Agency's Internal Quality Assurance & Improvement Plan address the following:</p> <ul style="list-style-type: none"> ▪ Implementation of the ISP, including the extent to which services are delivered in accordance with the ISP including the type, scope, amount, duration and frequency specified in the ISP, as well as the effectiveness of such implementation as indicated by achievement of outcomes; ▪ Timeliness of document submission, including the LOC, ISP, and Allocation Reporting Forms; ▪ Analysis of General Events Reporting data; ▪ Compliance with Caregivers Criminal History Screening requirements; ▪ Compliance with Employee Abuse Registry requirements; ▪ Compliance with DDSD training requirements; ▪ Patterns in reportable incidents; and ▪ Results of improvement actions taken in previous quarters. <p>2) Does the QA/QI committee shall convene on at least a quarterly?</p> <p>3) Is there documentation showing meeting covered service reports, to identify any deficiencies, trends, patterns or concerns as well as opportunities for quality improvement?</p> <p>Surveyors: You must ask to see examples, as well as see documented evidence of annual plan and quarterly meeting?</p>	1A03		
<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements C. Programmatic Requirements:</p> <ul style="list-style-type: none"> • Does the Case Management Agency have an established system for tracking key steps and timelines in establishing eligibility, service planning, budget approval and distribution of records to IDT Members? <i>(any exception by DDSD must be presented in writing)</i> 	4C14		
<ul style="list-style-type: none"> • A 24-hour local telephone answering system. The Case Management Provider Agency must return all calls not later than 5:00 p.m. the following business day; the answering system must indicate regular office hours and expected response time by the end of the following business day; • If case managers use their home office or cell number as primary contact for the individuals on their caseload, their voicemail must indicate that they return calls by 5 p.m. the next business day, as well as the main number for the case management agency; 	4C14		
<p>C. Does the Case Management Agency maintain at least one (1) office that meets Americans with Disabilities Act (ADA) accessibility requirements in <u>each geographic region served by the Provider Agency that includes:</u> <i>(Ask this during interview & note observations)</i></p> <ul style="list-style-type: none"> a. An operational fax machine; b. Internet and e-mail access, including use of a secure email systems (Scomm) for client identifying information, for every Case Manager employed or subcontracted; <i>(get copy)</i> 	4C14		

**New Mexico Department of Health / Division of Health Improvement
Administrative Field Tool
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<p>c. Client records for each individual served by the Provider Agency consistent with DDSD Consumer Record Requirements and that are stored on site, in compliance with HIPAA requirements;</p> <p>d. A meeting room that can accommodate IDT Members meetings comfortably;</p> <p>e. An area where a Case Manager may meet privately with an individual;</p> <p>f. A separate physical space and entrance, if the office is connected to a residence</p> <p><i>Surveyors: There may be an exceptions based on size or not having an office. Please ask for clarification if anything is unclear.</i></p>			
<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements: L. Primary Record Documentation: Distribution of ISP</p> <p>Did Case Managers provide copies of the ISP to the respective DDSD Regional Offices?</p> <p>Did Case Managers provide copies of the ISP to the Provider Agencies listed in the budget, and the individual and guardian (if applicable) within 14 days of the new ISP effective date?</p>	4C16 CoP		
<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements: J. Case Management Staffing Ratio: Are case manager's in compliance with caseloads:</p> <p>The Case Management Provider Agency shall ensure that caseloads are assigned in such a way as not to exceed thirty (30) cases per Case Manager on average:</p> <p>a. Case Management services for children may be weighted to the caseload proportionally, based upon the number of months of service provided per year (e.g., 4 months of Case Management service = 1/3 case; 6 months of Case Management service = 1/2 case); and</p> <p><i>Surveyors: Temporary exceptions to the maximum caseload average are allowed if a Case Manager is on approved leave, and the Case Management Provider Agency ensures a colleague or supervisor will perform essential duties during the Case Manager's absence, including mandated face-to-face visits.</i></p>	4C19		
<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) 2. Service Requirements: E. Monitoring and Evaluation of Service Delivery:</p> <p>Is the case manager meeting the required face-to-face visits with non-Jackson adult DDW participants at least twelve (12) times annually (1 per month) as described in the ISP?</p> <p>Is the case manager meeting the required face- to-face visits with Jackson Class members (2 times per month), one (1) of which must occur at a location in which the individual spends the majority of the day (i.e., place of employment, habilitation program); and one must occur at the individual's residence?</p>	4C15.1		
<p>**DDSD DDW Service Std. CHAPTER 4 (CMgt) I. Case Management Services:</p> <ul style="list-style-type: none"> Are all Individuals utilizing the services within their budget? <p><i>Surveyor: This is only deficient if case mgr. does not have justification to why there is no usage or low usage.</i></p>	4C01.1		

**New Mexico Department of Health / Division of Health Improvement
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NMAC 7.1.14 Incident Management System: <ul style="list-style-type: none"> Policy and procedure for training and reporting A, N&E; <i>(get copy and ensure it is current)</i> <i>Is it current to July 2014 changes?</i> 	1A28 CoP		
<ul style="list-style-type: none"> While on-site did Surveyors have to file State incident reports related to any suspected Abuse, Neglect, Exploitation or any other reportable incidents, which were found during the survey process and not reported by the Agency? 	1A27.2		
<ul style="list-style-type: none"> Does Agency have doc. proving Individual, parents or guardians have rec'd training in A, N&E reporting procedures <i>(i.e. orientation packets, statement with signature acknowledging receipt, etc.)</i> <i>Is it current to July 2014 changes?</i> 	1A28.2 CoP		
<ul style="list-style-type: none"> Did Agency documentation verify Agency Personnel received IMS training (Abuse, Neglect & Exploitation) on an annual basis? 	1A28.1 CoP		
<ul style="list-style-type: none"> Is the Agency completing General Events Reporting as required by standard? 	1A43		
<ul style="list-style-type: none"> Is the Agency completing General Events Reporting analysis for items reported? 	1A43		
**DDSD DDW Service Std. CHAPTER 4 (CMgt) 3. Agency Requirements: 4. Reimbursement: A. Record Maintenance: All services and supports within the Case Management Scope of Services...	4C21		

Administrator Interview

Interviewee & title:

Surveyor:

Date/Time:

1. Describe your Agency's Internal Quality Assurance & Improvement Plan: At a minimum does the Agency's Internal Quality Assurance & Improvement Plan address the following: 1A03 – **Surveyor: walk through the plan ask to see examples.**

- Implementation of the ISP, including the extent to which services are delivered in accordance with the ISP including the type, scope, amount, duration and frequency specified in the ISP, as well as the effectiveness of such implementation as indicated by achievement of outcomes;
- Timeliness of document submission, including the LOC, ISP, and Allocation Reporting Forms;
- Analysis of General Events Reporting data;
- Compliance with Caregivers Criminal History Screening requirements;
- Compliance with Employee Abuse Registry requirements;
- Compliance with DDSD training requirements;
- Patterns in reportable incidents; and
- Results of improvement actions taken in previous quarters.

****Does the QA/QI committee shall convene on at least a quarterly?**

**New Mexico Department of Health / Division of Health Improvement
Administrative Field Tool
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<p>2. Explain how your Agency monitors and oversees the eligibility process for new allocations and for re-determinations? (4C20)</p>
<p>3. Describe your Agency's system for tracking the key steps and timelines for establishing:</p> <ul style="list-style-type: none">• Assessment Activities / Eligibility: (4C04 - CoP) • Service planning: (4C07) • Budget approval: (4C10 - CoP) • Distribution of records to team members: (4C16 - CoP)
<p>4. Who oversees the quality of the ISPs? Please describe this process? How is this documented & where? <i>Surveyor: Agency must be able to show documentation that it is done, feedback, comments.</i> (4C20)</p>
<p>5. How does your Agency evaluate the quality of monitoring conducted by the Case Manager, including ISP implementation and the health and safety of the individual served? (4C20)</p>
<p>6. How does your Agency ensure follow through with healthcare needs, i.e. exams, follow-up to appointments, healthcare recommendations? <i>Surveyor: The CM should discuss items such as, Decision Justification form, ISP, monitor. Agency must be able to show evidence this is being done</i> (4C20)</p>
<p>7. How does your Agency ensure coverage to Individual's Served when a Case Manager is on Leave (<i>i.e. Illness, vacation, etc.</i>) (4C19)</p>
<p>8. Based on the questions already asked, are there any other systems you have in place to ensure the quality of case management services, that you would like us to be aware of? (4C20)</p>
<p>9. Describe how your Agency/Case Managers ensures:</p> <ul style="list-style-type: none">• The "Employment First Principle" for each individual served (4C08 - CoP): • A "Meaningful Day" for each individual served (4C08. - CoP) • The IDT explores the least restrictive Community Living Setting appropriate for the Individual. (4C07)

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Additional Notes: