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DDSD-DDW Numbered Memo 2018-06

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To: All DD Waiver Providers

From: Jim Copeland, DDSD Director



Subject: DDW Standards Chapter 22: Quality Improvement Key Performance Indicators

Based on 2017 Quality Management Bureau, Incident Management Bureau, Individual Quality Review data and the Centers for Medicare and Medicaid Services 2014 Final Settings Rule, the DOH/DDSD has identified three Key Performance Indicators (KPI) related to quality improvement. These identified service providers are required to include the following KPI's in their Quality Improvement Plans in 2018/2019.

This KPI applies to the following provider types: Living Supports service providers (Supported Living, Family Living and Intensive Medical Living), Customized In-Home Supports, Community Inclusion service providers and Case Management agencies.

1. % of Individuals whose Individual Support Plans (ISP) are implemented as written.
 - Information to be considered for this KPI includes but is not limited to: outcome frequency tracking; providing services; implementation of action steps; teaching and support strategies; and Written Direct Support Instructions.
 - The denominator is the total amount of ISP's at an agency. The numerator is the total amount of ISP's that are implemented based on the data described in bullet number one.

This KPI applies to the following provider types: Living Supports service providers (Supported Living, Family Living and Intensive Medical Living), Customized In-Home Supports and Case Management agencies.

2. % of appointments attended as recommended by medical professionals (physician, nurse practitioner or specialist).
 - Recommended appointments may include but are not limited to follow up appointments and appointments with specialists.
 - If utilizing the Decision Consultation Process, include that in the annual report data related to the reporting of total appointments indicated below. Please identify which appointment(s) the Decision Consultation Process was used for.

- The denominator is the total number of appointments recommended by the healthcare provider. The Numerator is the total number of appointments attended.

This KPI applies to the following provider types: Customized Community Supports and Case Management agencies.

3. % of people accessing Customized Community Supports in a non-disability specific setting.
 - Denominator is the total amount of people in these services at a provider agency. Numerator is the total amount of people in the non-disability specific setting.

As required in DDW Service Standards, these KPI are required to be included in the annual report submitted to DDSD. For more details, please refer to DDW Standards Chapter 22.

If you have any questions, please contact Chris Futey (505) 841-5507.