

Date: January 6, 2016

To: LeShelle Harvey, Assistant Director

Provider: Expressions Unlimited, Co.
Address: 955 San Pedro NE
State/Zip: Albuquerque, New Mexico 87108

E-mail Address: Luvshell22@gmail.com
Chrishen1390@gmail.com
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CC: Jessie Waddles, Board Member
Address: 11912 Leah Court
State/Zip: Albuquerque, New Mexico 87221

Board Chair: Bill Dorn, Board Member
Address: 7611 Rio Penasco NW
State/Zip: Albuquerque, New Mexico 87120

Region: Metro
Routine Survey: March 2 - 4, 2015
Verification Survey: December 10 - 24, 2015

Program Surveyed: Developmental Disabilities Waiver

Service Surveyed: **2012:** *Living Supports* (Supported Living) *Inclusion Supports* (Customized Community Supports)

Survey Type: **2007:** *Community Living* (Supported Living) and *Community Inclusion* (Adult Habilitation)
Routine

Team Leader: Erica Nilsen, BA, Healthcare Surveyor, Division of Health Improvement/Quality Management Bureau

Dear Ms. Harvey;

The Division of Health Improvement/Quality Management Bureau has completed a Verification survey of the services identified above. The purpose of the survey was to determine compliance with your Plan of Correction submitted to DHI regarding the *Routine Survey on March 2 – 4, 2015*.

Determination of Compliance:

The Division of Health Improvement, Quality Management Bureau has determined your agency is in:

Compliance with Conditions of Participation

This concludes your Survey process. Please call the Plan of Correction Coordinator at 575-373-5716, if you have questions about the survey or the report. Thank you for your cooperation and for the work you perform.

DIVISION OF HEALTH IMPROVEMENT

5301 Central Avenue NE, Suite 400 • Albuquerque, New Mexico • 87108
(505) 222-8623 • FAX: (505) 222-8661 • <http://www.dhi.health.state.nm.us>

QMB Report of Findings – Expressions Unlimited, Co. – Metro Region – December 10 - 24, 2015

Sincerely,

Erica Nilsen

Erica Nilsen, BA
Team Lead/Healthcare Surveyor
Division of Health Improvement
Quality Management Bureau

Survey Process Employed:

| | |
|---|---|
| Entrance Conference Date: | December 10, 2015 |
| Present: | <u>Expressions Unlimited, Co.</u> LaShelle Harvey, Assistant Director |
| | <u>DOH/DHI/QMB</u> Erica Nilsen, BA, Team Lead/Healthcare Surveyor |
| Exit Conference Date: | December 24, 2015 |
| Present: | <u>Expressions Unlimited, Co.</u> LaShelle Harvey, Assistant Director |
| | <u>DOH/DHI/QMB</u> Erica Nilsen, BA, Team Lead/Healthcare Surveyor |
| Total Sample Size | Number: 9 |
| | 2 - <i>Jackson</i> Class Members 7 - Non- <i>Jackson</i> Class Members |
| | 7 - Supported Living 2 - Adult Habilitation 6 - Customized Community Supports |
| Persons Served Records Reviewed | Number: 9 |
| Direct Support Personnel Records Reviewed | Number: 22 |
| Service Coordinator Records Reviewed | Number: 1 |

Administrative Processes and Records Reviewed:

- Medicaid Billing/Reimbursement Records for all Services Provided
- Accreditation Records
- Oversight of Individual Funds
- Individual Medical and Program Case Files, including, but not limited to:
 - Individual Service Plans
 - Progress on Identified Outcomes
 - Healthcare Plans
 - Medication Administration Records
 - Medical Emergency Response Plans
 - Therapy Evaluations and Plans
 - Healthcare Documentation Regarding Appointments and Required Follow-Up
 - Other Required Health Information
- Internal Incident Management Reports and System Process / General Events Reports
- Personnel Files, including nursing and subcontracted staff
- Staff Training Records, Including Competency Interviews with Staff
- Agency Policy and Procedure Manual
- Caregiver Criminal History Screening Records
- Consolidated Online Registry/Employee Abuse Registry
- Human Rights Committee Notes and Meeting Minutes
- Evacuation Drills of Residences and Service Locations

QMB Report of Findings – Expressions Unlimited, Co. – Metro Region – December 10 - 24, 2015

- Quality Assurance / Improvement Plan

CC: Distribution List: DOH - Division of Health Improvement
DOH - Developmental Disabilities Supports Division
DOH - Office of Internal Audit
HSD - Medical Assistance Division

Attachment B

Department of Health, Division of Health Improvement QMB Determination of Compliance Process

The Division of Health Improvement, Quality Management Bureau (QMB) surveys compliance of the Developmental Disabilities Waiver (DDW) standards and state and federal regulations. QMB has grouped the CMS assurances into five Service Domains: Level of Care; Plan of Care; Qualified Providers; Health, Welfare and Safety; and Administrative Oversight (note that Administrative Oversight listed in this document is not the same as the CMS assurance of Administrative Authority. Used in this context it is related to the agency's operational policies and procedures, Quality Management system and Medicaid billing and reimbursement processes.)

The QMB Determination of Compliance process is based on provider compliance or non-compliance with standards and regulations identified in the QMB Report of Findings. All deficiencies (non-compliance with standards and regulations) are identified and cited as either a Standard level deficiency or a Condition of Participation level deficiency in the QMB Reports of Findings. All deficiencies require corrective action when non-compliance is identified.

Within the QMB Service Domains there are fundamental regulations, standards, or policies with which a provider must be in essential compliance in order to ensure the health and welfare of individuals served known as Conditions of Participation (CoPs).

The Determination of Compliance for each service type is based on a provider's compliance with CoPs in three (3) Service Domains.

Case Management Services:

- Level of Care
- Plan of Care
- Qualified Providers

Community Inclusion Supports/ Living Supports:

- Qualified Provider
- Plan of Care
- Health, Welfare and Safety

Conditions of Participation (CoPs)

A CoP is an identified fundamental regulation, standard, or policy with which a provider must be in compliance in order to ensure the health and welfare of individuals served. CoPs are based on the Centers for Medicare and Medicaid Services, Home and Community-Based Waiver required assurances. A provider must be in compliance with CoPs to participate as a waiver provider.

QMB surveyors use professional judgment when reviewing the critical elements of each standard and regulation to determine when non-compliance with a standard level deficiency rises to the level of a CoP out of compliance. Only some deficiencies can rise to the level of a CoP (See the next section for a list of CoPs). The QMB survey team analyzes the relevant finding in terms of scope, actual harm or potential for harm, unique situations, patterns of performance, and other factors to determine if there is the potential for a negative outcome which would rise to the level of a CoP. A Standard level deficiency becomes a CoP out of compliance when the team's analysis establishes that there is an identified potential for significant harm or actual harm. It is then cited as a CoP out of compliance. If the deficiency does not rise to the level of a CoP out of compliance, it is cited as a Standard Level Deficiency.

The Division of Health Improvement (DHI) and the Developmental Disabilities Supports Division (DDSD) collaborated to revise the current Conditions of Participation (CoPs). There are seven Conditions of Participation in which providers must be in compliance.

CoPs and Service Domains for Case Management Supports are as follows:

Service Domain: Level of Care

Condition of Participation:

1. **Level of Care:** The Case Manager shall complete all required elements of the Long Term Care Assessment Abstract (LTCAA) to ensure ongoing eligibility for waiver services.

Service Domain: Plan of Care

Condition of Participation:

2. **Individual Service Plan (ISP) Creation and Development:** Each individual shall have an ISP. The ISP shall be developed in accordance with DDSD regulations and standards and is updated at least annually or when warranted by changes in the individual's needs.

Condition of Participation:

3. **ISP Monitoring and Evaluation:** The Case Manager shall ensure the health and welfare of the individual through monitoring the implementation of ISP desired outcomes.

CoPs and Service Domain for ALL Service Providers is as follows:

Service Domain: Qualified Providers

Condition of Participation:

4. **Qualified Providers:** Agencies shall ensure support staff has completed criminal background screening and all mandated trainings as required by the DDSD.

CoPs and Service Domains for Living Supports and Inclusion Supports are as follows:

Service Domain: Plan of Care

Condition of Participation:

5. **ISP Implementation:** Services provided shall be consistent with the components of the ISP and implemented to achieve desired outcomes.

Service Domain: Health, Welfare and Safety

Condition of Participation:

6. **Individual Health, Safety and Welfare: (Safety)** Individuals have the right to live and work in a safe environment.

Condition of Participation:

7. **Individual Health, Safety and Welfare (Healthcare Oversight):** The provider shall support individuals to access needed healthcare services in a timely manner. Nursing, healthcare services and healthcare oversight shall be available and provided as needed to address individuals' health, safety and welfare.

QMB Determinations of Compliance

Compliance with Conditions of Participation

The QMB determination of *Compliance with Conditions of Participation* indicates that a provider is in compliance with all Conditions of Participation, (CoP). The agency has obtained a level of compliance such that there is a minimal potential for harm to individuals' health and safety. To qualify for a determination of Compliance with Conditions of Participation, the provider must be in compliance with all Conditions of Participation in all relevant Service Domains. The agency may also have Standard level deficiencies (deficiencies which are not at the condition level) out of compliance in any of the Service Domains.

Partial-Compliance with Conditions of Participation

The QMB determination of *Partial-Compliance with Conditions of Participation* indicates that a provider is out of compliance with Conditions of Participation in one (1) to two (2) Service Domains. The agency may have one or more Condition level tags within a Service Domain. This partial-compliance, if not corrected, may result in a serious negative outcome or the potential for more than minimal harm to individuals' health and safety. The agency may also have Standard level deficiencies (deficiencies which are not at the condition level) in any of the Service Domains.

Providers receiving a repeat determination of Partial-Compliance for repeat deficiencies at the level of a Condition in any Service Domain may be referred by the Quality Management Bureau to the Internal Review Committee (IRC) for consideration of remedies and possible actions or sanctions.

Non-Compliance with Conditions of Participation

The QMB determination of *Non-Compliance with Conditions of Participation* indicates a provider is significantly out of compliance with Conditions of Participation in multiple Service Domains. The agency may have one or more Condition level tags in each of 3 relevant Service Domains. This non-compliance, if not corrected, may result in a serious negative outcome or the potential for more than minimal harm to individuals' health and safety. The agency may also have Standard level deficiencies (deficiencies which are not at the condition level) in any of the Service Domains

Providers receiving a repeat determination of Non-Compliance will be referred by Quality Management Bureau to the Internal Review Committee (IRC) for consideration of remedies and possible actions or sanctions.

Agency: Expressions Unlimited, Co. – Metro Region
Program: Developmental Disabilities Waiver
Service: 2012: *Living Supports* (Supported Living); *Inclusion Supports* (Customized Community Supports)
 2007: *Community Living* (Supported Living) and *Community Inclusion* (Adult Habilitation)
Monitoring Type: Verification Survey
Routine Survey: March 2 - 4, 2015
Verification Survey: December 10 - 24, 2015

| Standard of Care | Routine Survey Deficiencies March 2 – 4, 2015 | Verification Survey New and Repeat Deficiencies December 10 - 24, 2015 |
|--|--|---|
| Service Domain: Service Plans: ISP Implementation – Services are delivered in accordance with the service plan, including type, scope, amount, duration and frequency specified in the service plan. | | |
| Tag # 1A08 Agency Case File | Standard Level Deficiency | COMPLETED |
| Tag # 1A08.1 Agency Case File - Progress Notes | Standard Level Deficiency | COMPLETED |
| Tag # 1A32 and LS14 / 6L14 Individual Service Plan Implementation | Condition of Participation Level Deficiency | COMPLETED |
| Tag # IS11 / 5I11 Reporting Requirements Inclusion Reports | Standard Level Deficiency | COMPLETED |
| Tag # LS14 / 6L14 Residential Case File | Standard Level Deficiency | COMPLETED |
| Tag # LS17 / 6L17 Reporting Requirements (Community Living Reports) | Standard Level Deficiency | COMPLETED |
| Service Domain: Qualified Providers – The State monitors non-licensed/non-certified providers to assure adherence to waiver requirements. The State implements its policies and procedures for verifying that provider training is conducted in accordance with State requirements and the approved waiver. | | |
| Tag # 1A11.1 Transportation Training | Standard Level Deficiency | COMPLETED |
| Tag # 1A20 Direct Support Personnel Training | Standard Level Deficiency | COMPLETED |
| Tag # 1A22 Agency Personnel Competency | Condition of Participation Level Deficiency | COMPLETED |

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|---|---|-----------|
| Tag # 1A25 Criminal Caregiver History Screening | Standard Level Deficiency | COMPLETED |
| Tag # 1A26 Consolidated On-line Registry Employee Abuse Registry | Condition of Participation Level Deficiency | COMPLETED |
| Tag # 1A28.1 Incident Mgt. System - Personnel Training | Standard Level Deficiency | COMPLETED |
| Tag # 1A36 Service Coordination Requirements | Standard Level Deficiency | COMPLETED |
| Tag # 1A37 Individual Specific Training | Condition of Participation Level Deficiency | COMPLETED |
| Service Domain: Health and Welfare – <i>The state, on an ongoing basis, identifies, addresses and seeks to prevent occurrences of abuse, neglect and exploitation. Individuals shall be afforded their basic human rights. The provider supports individuals to access needed healthcare services in a timely manner</i> | | |
| Tag # 1A03 CQI System | Standard Level Deficiency | COMPLETED |
| Tag # 1A07 Social Security Income (SSI) Payments | Standard Level Deficiency | COMPLETED |
| Tag # 1A09 Medication Delivery Routine Medication Administration | Condition of Participation Level Deficiency | COMPLETED |
| Tag # 1A09.1 Medication Delivery PRN Medication Administration | Standard Level Deficiency | COMPLETED |
| Tag # 1A11 Transportation Policy and Procedure | Standard Level Deficiency | COMPLETED |
| Tag # 1A15.2 and IS09 / 5I09 Healthcare Documentation | Condition of Participation Level Deficiency | COMPLETED |
| Tag # 1A27 Incident Mgt. Late and Failure to Report | Standard Level Deficiency | COMPLETED |
| Tag # 1A27.2 Duty to Report IRs Filed During On-Site and/or IRs Not Reported by Provider | Standard Level Deficiency | COMPLETED |
| Tag # 1A28 Incident Mgt. System - Policy/Procedure | Standard Level Deficiency | COMPLETED |
| Tag # 1A28.2 Incident Mgt. System - Parent/Guardian Training | Condition of Participation Level Deficiency | COMPLETED |
| Tag # 1A29 Complaints / Grievances Acknowledgement | Standard Level Deficiency | COMPLETED |
| Tag # LS13 / 6L13 Community Living Healthcare Reqts. | Condition of Participation Level Deficiency | COMPLETED |
| Tag # LS25 / 6L25 Residential Health and Safety (SL/FL) | Condition of Participation Level Deficiency | COMPLETED |

Service Domain: Medicaid Billing/Reimbursement – State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.

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|--|---------------------------|-----------|
| Tag # 5I44 Adult Habilitation Reimbursement | Standard Level Deficiency | COMPLETED |
| Tag # IS30 Customized Community Supports Reimbursement | Standard Level Deficiency | COMPLETED |
| Tag # LS26 / 6L26 Supported Living Reimbursement | Standard Level Deficiency | COMPLETED |