

February 2021

Preventive Care

Adults in community-based residential supports only

Physical Exams:

- 96% of providers adequately supported people to receive annual physical exams based on a sample of individuals in sampled homes (Lic & Cert data).
- 93% of people had a physical exam in the past year (Health Care Record Analysis). This is higher than the Massachusetts general population (79%) (BRFSS).



Dental Exams:

- 96% of providers supported people to receive annual dental exams based on a sample of individuals in sampled homes (Lic & Cert data).
- 88% of people had a dental exam in the past year (Health Care Record Analysis). This is higher than the MA general population (74%) (BRFSS).



Other Screenings	All DDS Settings (NCI Survey)	Residential Only (DDS Health Care Record Analysis)	MA General Population
Eye exam in the past year	41%	70%	N/A
Hearing test in the past 5yrs	42%	35%	N/A
Flu vaccine in the past year	56%	69%	46% ¹
Women: Pap test in the past 3 years:, ages 21-64	47%	38%	84%
Women: Mammogram in the past 2 years, ages 50-74	68%	56%	86%
Recent colorectal cancer ² , ages 50-74	60%	56%	76%

DDS Action: DDS is developing additional resources for providers, families and self-advocates including a webinar on Preventive Health Screenings to improve understanding of the data and to ensure that all providers are doing their best to care for those they serve.

Sources of Information: 2017-2018 DDS Licensure and Certification, 2017-2018 National Core Indicators (NCI), DDS Health Care Records, and CDC Massachusetts Behavioral Risk Factor Surveillance System (BRFSS) 2016 survey for the general population (full details on back page). ¹BRFSS 2017. ²Annual FOBT (Fecal Occult Blood Testing), Sigmoidoscopy every 5 years plus FOBT every 3 years, Colonoscopy every 10 years.

Questions and Answers

1) What are Quality Assurance (QA) Outcomes?

With the guidance of stakeholders, DDS established a set of outcomes that represent system expectations and form the basis for evaluating the quality of services and supports that DDS provides to individuals. Quality Assurance Outcomes help create a more “holistic” picture of the quality of supports within the DDS system and help identify areas that may become the focus for quality improvement initiatives and activities.

2) Where does the data come from?

DDS Health data are from the following sources:

Licensure and Certification: Data are collected through licensure and certification processes by which providers of community services are licensed and certified by DDS to provide supports. Data are collected on-site by a team of trained Quality Enhancement Specialists through interviews with staff, families, and service recipients as well as reviews of documentation and through observation. Data is collected from residential, day, and employment services. The goal is to ensure that providers meet an acceptable level of quality, that essential safeguards for service recipients are in place, and that outcomes for specific service types are achieved. Data are collected to inform whether the provider has met or not met each standard and ratings are restricted to these two categories only.

National Core Indicators (NCI): The National Core Indicators is a standard measure used across states to assess the outcomes of services provided to individuals by public developmental disabilities agencies. The Massachusetts DDS has been collecting National Core Indicators data every two years since 1999. Trained staff conduct face-to-face interviews with people who receive paid supports from the MA DDS. Interviews are conducted with a random, representative sample of all people who receive paid supports from the MA DDS, including people who live by themselves, in residential supports, and with family. +/- 5% margin of error with a 95% confidence level. Please note that, due to calculation differences, values reported in this brief may not align exactly with those reported by NCI. <https://www.nationalcoreindicators.org/states/MA/>

DDS Health Care Records (HCR): An analysis was conducted by the Center for Developmental Disabilities Evaluation and Research (CDDER) on DDS Health Care Records updated 1/1/18 or later for adults aged 18+ who are currently eligible for DDS community-based residential services.

MA state data for the general population: the Centers for Disease Control (CDC) Massachusetts Behavioral Risk Factor Surveillance System (BRFSS) 2016 and 2017 surveys: <https://www.mass.gov/behavioral-risk-factor-surveillance>

3) How often is data collected? Licensure and Certification data are collected each year. NCI data are collected every two years in MA.

4) Why is only one year of data shown? Data are consistent over the past 5 years. Only the most current cycle of data are shown here for simplicity.

5) Where can I learn more? DDS Licensure and Certification information: <https://www.mass.gov/lists/dds-licensure-and-certification>; DDS Quality Management: <https://www.mass.gov/dds-quality-management>