

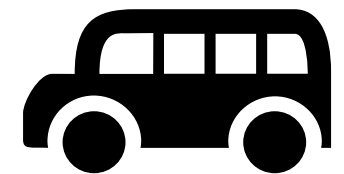
DDS Quality Outcomes

Safety and Protection: Allegations of Abuse/Neglect

NCI



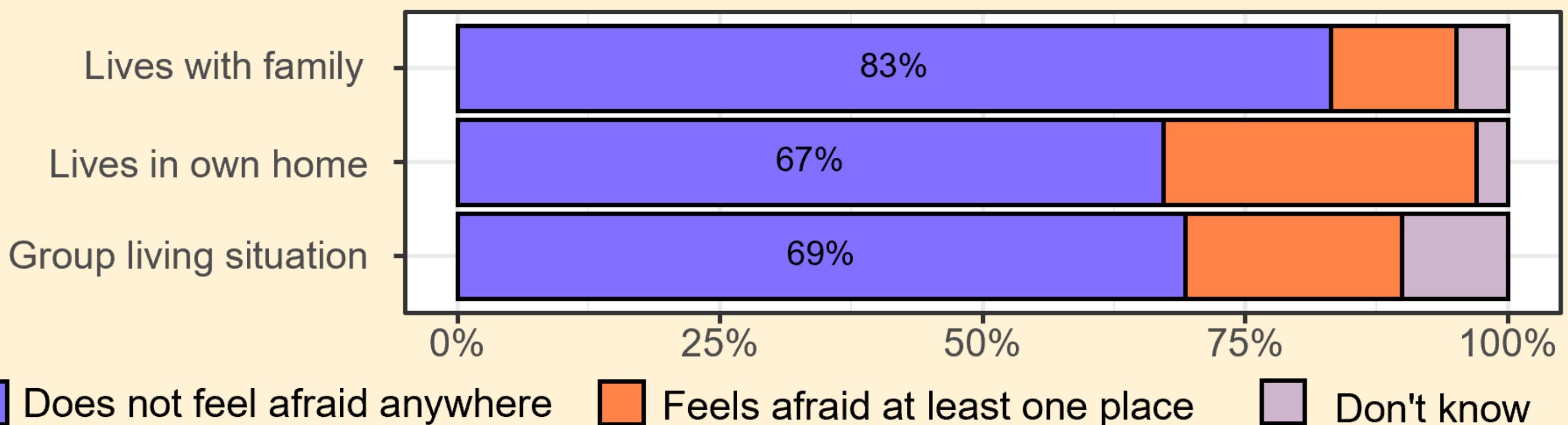
Individuals feel safe during their daily activities



72% of individuals are not afraid anywhere

8% said they did not know if they were ever afraid

There were some differences by living situation: individuals living with a parent or relative were most likely to say they don't feel afraid anywhere



75% of individuals have someone to talk to if they ever feel afraid

Data Sources (see Q&A at end of document for further details):

HCSIS Home and Community-based Services Information System - database used by DDS to record incident details

L & C Massachusetts DDS Licensure and Certification data collected in fiscal year (FY) 2019 (July 2018-June 2019)

NCI National Core Indicators, surveys collected in Massachusetts from individuals in FY2018 (July 2017-June 2018) and FY2020 (July 2019-June 2020, data collection was stopped on April 15, 2020 due to the Covid-19 pandemic)



Quality Assurance Brief

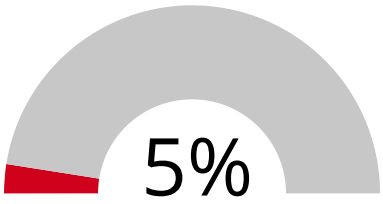
October 2023



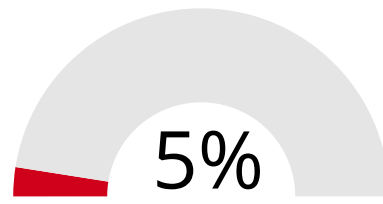
Places people have been afraid



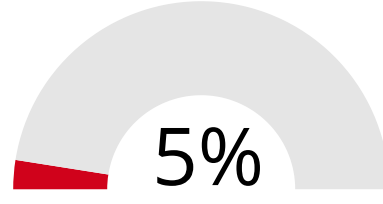
At home



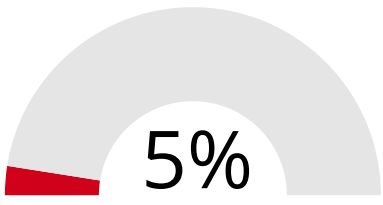
Walking in the community*



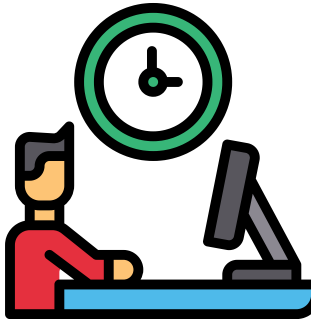
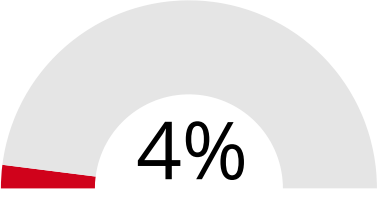
Some other place



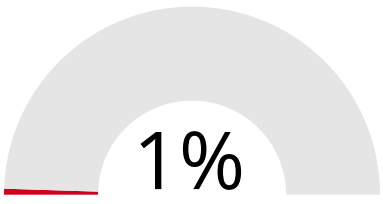
At a day program



On transport

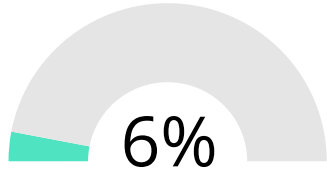


At work

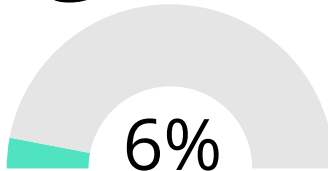


*due to a wording change in the FY2020 survey, the "walking in the community" category is limited to responses from FY2018.

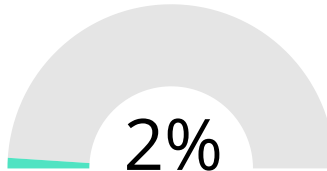
Felt afraid at home, by living situation



Group living



Own home

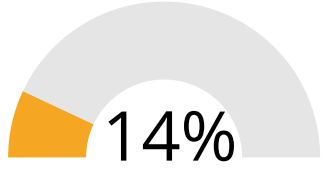
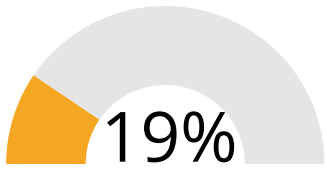
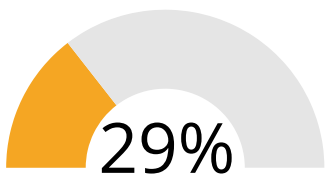


With family

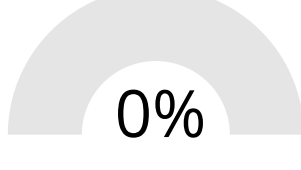
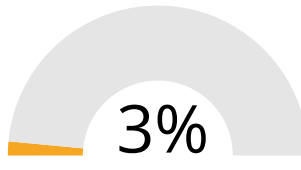
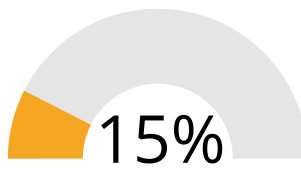


Racial differences

Ever felt afraid



Felt afraid at home



Black

White

Latino

*race categories with <15 respondents are not shown

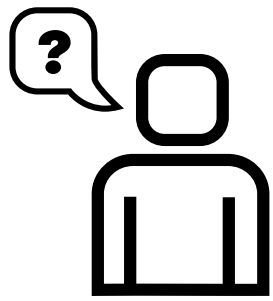


Quality Assurance Brief

October 2023



HCSIS



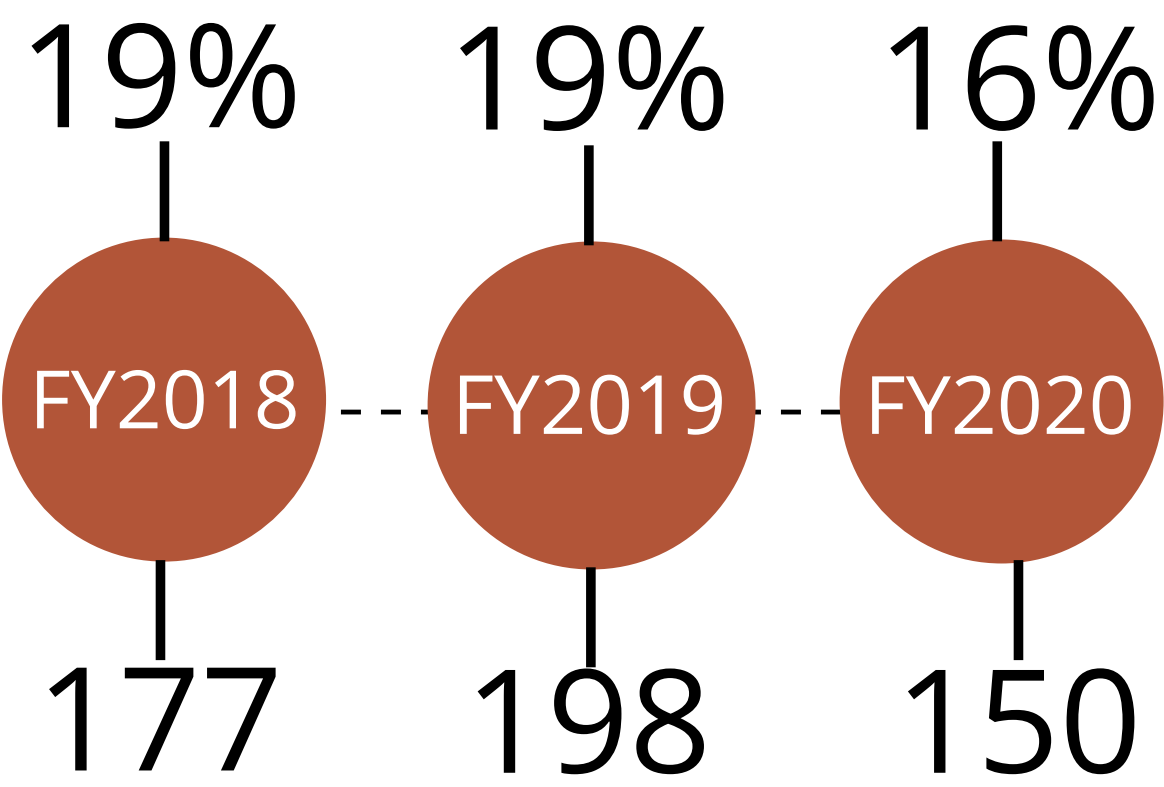
Allegations of abuse/neglect against a paid caregiver are investigated



% of investigations substantiating*
abuse/neglect by a paid caregiver



Total substantiated allegations



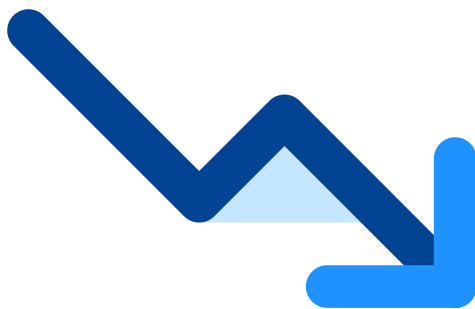
*"Substantiated" means that there were facts that showed the omission or abuse most likely occurred.



The type of abuse or neglect with the most substantiated allegations was *omissions of care placing people at risk*. This happened for about 2-3 per 1,000 people served in recent years.

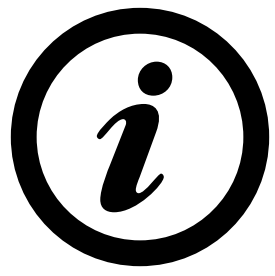


Physical abuse was the next most common type of substantiated abuse, at about 1 in 1,000 people served.



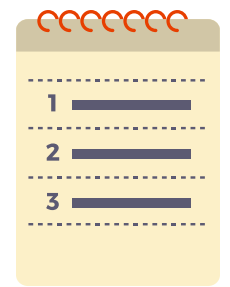
These rates were slightly lower in FY2020 than in prior years.

L & C



Individuals are protected when there are allegations of abuse, neglect, or mistreatment

% of providers surveyed who met each indicator

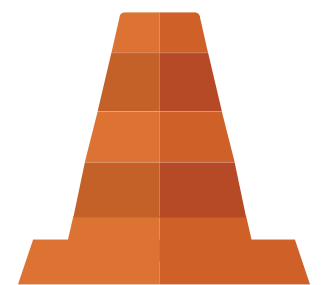


- 92% of providers have trained individuals and provided guardians with information in how to report alleged abuse/neglect
- 99% of providers report allegations of abuse/neglect as mandated by regulation



Safeguards are in place for individuals who are at risk

% of providers surveyed who met each indicator



- 97% of providers implement interventions to reduce risk for individuals whose behavior may pose a risk to themselves or others
- 100% of providers take immediate action to protect the health and safety of individuals when potential abuse/neglect is reported
- 100% of providers take action when an individual is subject to abuse or neglect



CORI checks are completed for staff and volunteers working directly with individuals

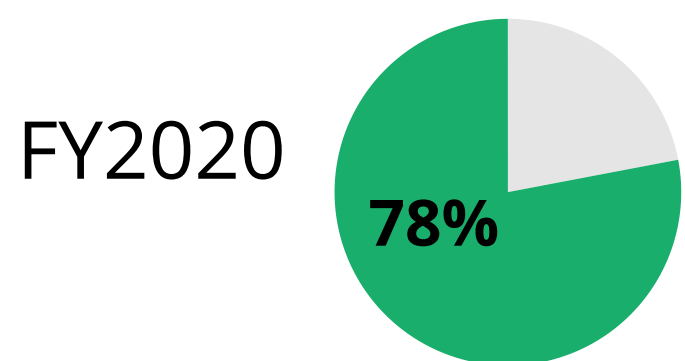
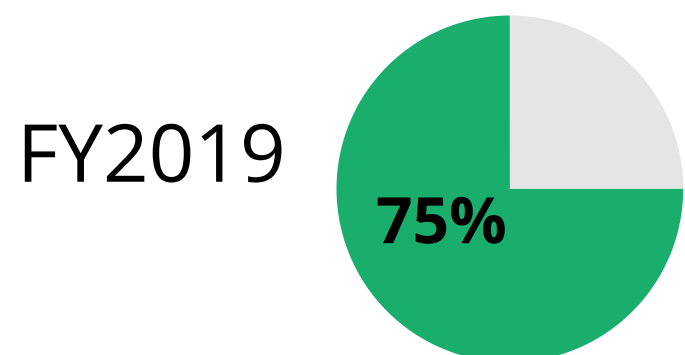
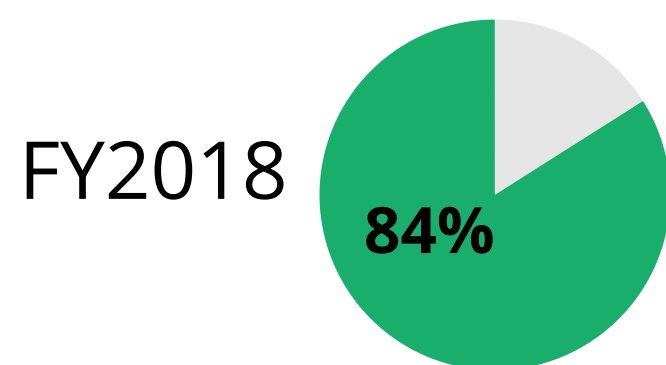


Each year, a complete audit is done to ensure CORI checks have been properly completed for all new hires.



All identified violations are quickly corrected or resolved through termination of employment.

Most providers are found to have no violations

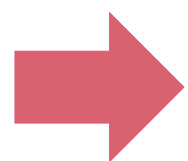


■ % of providers with **no** violations

Nearly all records reviewed in each year are free of violations

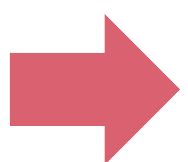


■ % of audited records with **no** violations ■ % of audited records with **any** violations



Among the small proportion of records with a violation, the most common types were:

- Procedural errors such a misspelled or reversed name or no consent form in file
- No CORI in file at time of audit



The fewest number violations (less than 2 per 1,000 records reviewed) were related to hiring violations for CORI offenses.

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 Safety and Protection data are from the following sources:

L & C **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 gathered on-site by a team of trained Quality Enhancement Specialists through interviews with staff, families, and service recipients as well as through reviews of documentation and observation. Data are obtained 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. The data are collected to inform whether the provider has met or not met each standard and ratings are restricted to these two categories (met/not met) only. *For this report, we examined data collected in Fiscal Years 2018, 2019, and 2020. In March through June 2020, due to the Covid-19 pandemic, reviews were completed by desk audit and did not include all indicators. For all indicators evaluated for this topic area, despite this disruption in data collection, there were no significant statistical differences in the proportion of providers meeting each indicator, so we have chosen to specify the results from the most recent Fiscal Year not impacted by the pandemic (FY 2019).*

NCI **National Core Indicators:** The National Core Indicators is a national survey conducted periodically in participating states. Massachusetts DDS has collected NCI data every two years since 1999. Trained staff conduct face-to-face interviews with a random, representative sample of all adults who receive paid supports from the MA DDS, including people who live by themselves, in residential supports, and with family. Normally, data are reported at the state level, at a +/- 5% margin of error with a 95% confidence level, and can be compared to averages of all participating states. Due to the truncated FY 2020 data collection period caused by the Covid-19 pandemic, a 10% margin of error threshold was used (the Massachusetts margin of error was 7.55%), and direct comparisons should not be made across states for that time period. For the measures reported here within Massachusetts, we did not find significant changes between FY 2018 and FY 2020, so made the decision to combine the independent responses across those time periods.

HCSIS **HCSIS:** The Home and Community Services Information System (HCSIS) is a web based service used by DDS that allows Service Providers and the Department to file clinical information and reports on incidents, medication occurrences, restraints, and investigations.

CORI Audits: All providers are audited annually to ensure compliance with requirements.

QUESTIONS AND ANSWERS

3) How often are data collected?

DDS collects data through its Licensure and Certification process each year. Each provider is required to go through the Licensure and Certification process at least once every two years. NCI data are collected every two years. A new sample is selected for each year of NCI data. HCSIS incident data is entered on a continuous ongoing basis. CORI Audits are completed each year.

4) Where can I learn more about this process?

DDS Licensure and Certification information:

<https://www.mass.gov/lists/dds-licensure-and-certification>

DDS Quality Management:

<https://www.mass.gov/dds-quality-management>

HCSIS:

<https://www.mass.gov/home-and-community-services-information-system-hcsis>

NCI:

<https://legacy.nationalcoreindicators.org/states/MA>