

August 2023

Quality Assurance Brief

Center for Developmental Disabilities Evaluation and Research (CDDER)

DDS Quality Outcomes Safety and Protection: Incident Reporting and Safe Environment

HCSIS

In Fiscal Year 2020, there were 26,438 incidents reported via the DDS reporting process. This is about 86 incidents per 100 people served.

About 90% were classified as "minor" incidents <u>Minor</u><u>90%</u><u>Major</u><u>10%</u> 10% (2,601 incidents) were classified as "major" due to:

- Mistreatment with life threatening result suspected
- Staff action or inaction exposed the individual to serious personal or public safety risk
- Law enforcement involved in some capacity
- Potential for broad, negative publicity

Critical Incidents

Critical incidents are a sub-set of incidents that rise to a higher level due to their complexity, risk of harm, and need for elevated communication. Incidents may be determined to be critical at the area, region or central office level.



In the first full year tracking these events (FY2020), there were 321 critical incidents identified: about 1 per 100 people served.

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

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





Quality Assurance Brief

August 2023

Center for Developmental Disabilities Evaluation and

Research (CDDER)



Incident reporting timeliness

Requirements that incidents be reported within a set time period ensure that proper response actions can be taken. This has been identified a target for improvement within DDS, particularly at the Area and Regional Office review level.



HCSIS

L&c

Incident Reporting Timeline

SECOND SECTION

All "day" requirements refer to business days

Provider to complete/finalize within 7 days

SECOND REVIEW

Major incidents only: DDS Regional Office complete within 7 days of completed Area Office Review

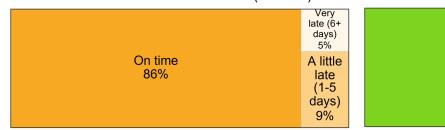
FIRST SECTION

Provider to fill out within 3 days for minor incidents and 1 day for major incidents

Provider First Section timeliness detail (FY2022)

FIRST REVIEW

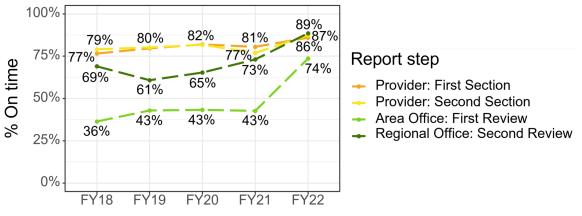
DDS Area Office complete within 7 days from finalization of the incident by the provider



Area Office First Review timeliness detail (FY2022)

On time 74%	A little late (1-5 days) 12%
	Very late (6+ days) 15%

5 year trend in incident reporting timeliness*



*Increases in recent years reflect active DDS efforts to improve these processes

46% of providers met the indicator for reporting and reviewing incidents as mandated by regulations in FY2019, the first year the indicator was introduced. Late reporting, rather than non-reporting, was the main reason for providers not meeting the indicator.



Mass Chan Center for Developmental Disabilities Evaluation and Research (CDDER)

People live and work in safe



L&c

Providers take indicated corrective actions

environments

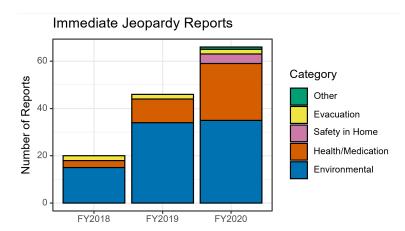
When safety concerns are identified while providing services or during inspections, actions are taken to correct the problem.



97% of providers met the indicator for implementing interventions to reduce risk for individuals whose behavior may pose a risk to themselves or others

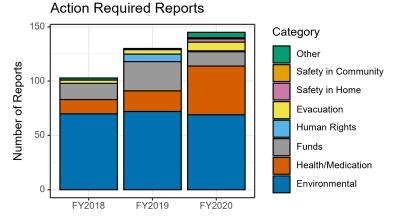
Immediate Jeopardy Reports

• In FY2018, FY2019, and FY2020 (20, 46, and 66 reports), all corrective actions were taken.



Action Required Reports

- In FY2018, all 103 reports were corrected.
- In FY2019, 98% of 130 reports were corrected (2 Funds reports were not corrected).
- IN FY2020, 97% of 145 reports were corrected (1 Environmental and 1 Funds report were not corrected, and 2 Funds reports were partially corrected).



DDS DUS

L&c

Quality Assurance Brief

August 2023

Center for Developmental Disabilities Evaluation and Research (CDDER)



Homes and workplaces are safe, secure, and in good repair

% of providers surveyed who met each indicator

- 100% of providers completed all required annual inspections
- 98% of providers demonstrated the required fire alarm system, including working smoke and carbon monoxide detectors in required locations
- 100% of providers had locations free of rodent and/or insect infestation
- 99% or providers ensured individuals were able to utilize equipment and machinery safely



People can safely evacuate in an emergency



% of providers surveyed who met each indicator

- 100% of providers ensured all individuals were able to evacuate in 2.5 minutes with or without assistance and workplaces within a reasonable amount of time
- 89% of providers conduct fire drills as required



People and their supporters know what to do in an emergency



% of providers surveyed who met each indicator

- 98% of providers have emergency back-up plans to assist the individual to plan for emergencies and/or disasters
- 95% of providers have emergency fact sheets that are current and accurate and available on site (86% and 85% in Fiscal Years 2018 and 2020)



L&c

Quality Assurance Brief

August 2023

Center for Developmental Disabilities Evaluation and Research (CDDER)

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:

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 nearly 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). For the one indicator showing a significant difference, we have included the results across all three Fiscal Years.

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.

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. HCSIS incident data is entered on a continuous ongoing basis.

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-informationsystem-hcsis