

**State of Vermont  
Division of Disability and Aging Services  
TBI Program**

**TBI QUALITY ASSURANCE QUALITY IMPROVEMENT – REVIEW PROCESS**

**PLEASE NOTE: the term “individual” refers to recipients of services, families, guardians, and legal representatives where applicable.**

**Purpose of the Traumatic Brain Injury Program Quality Management Plan**

The Traumatic Brain Injury (TBI) Program Quality Management process guides the activities of the Division of Disability and Aging staff and establishes the standards for assessing the quality of TBI services throughout Vermont.

This quality management process reflects the collaborative work of TBI Providers, Individuals with TBI, their family members, guardians and TBI program staff.

Quality management is a systematic approach for assuring that quality assurance and quality improvement activities are integrated and working as intended to achieve desired results. The purpose of the TBI Quality Management Process is to provide:

1. Process for gathering information, providing feedback, improving agency services and activities and sharing promising practices with other TBI service providers around Vermont.
2. A set of shared Outcomes, Indicators and Standards from which performance is measured; and
3. A cohesive and focused work plan that directs time, effort, and resources

**Desired Outcomes of Services**

**Outcomes** (1-8) describe the way people want to live their lives. **Indicators** describe specific components of the outcome, the desired results of services and the manner in which people receive their services. Eight outcomes of program services were developed, reviewed and agreed to by individuals receiving services, family members/guardians, service providers, and TBI program staff. Service providers will be measured by the extent to which they incorporate these Outcomes and their associated indicators into their daily service practices.

1. **Respect: Individuals are treated with dignity and respect.**
  - Rights are promoted and individuals are treated age appropriately
  - Providers offers choice
  - Provider uses positive behavioral supports/restraints are only used as a last resort
  - Provider agency respects people’s lifestyles, diversity, beliefs, and culture
2. **Self-Determination: Individuals direct their own lives**
  - Provider ensures options of services are given
  - People are allowed to take risks, are given choice of daily activities, and allowed to make decisions pertaining to them

- People are included in team meetings and allowed access to reports about him/her
  - Provider encourages individuals to control their own lives
  - Providers are able to recognize and work with and under the direction of Guardian
3. **Person-Centered Practices: Services and supports are individualized to meet people's needs and honor their strengths and preferences**
- Individuals establish their goals/offered a choice of goals
  - Learning and strategies are based on peoples strengths/learning styles
  - Agency is organized to benefit the people they serve
4. **Independent Living: Services support independent living.**
- The TBI provider collaborates with other organizations such as transit, therapies, vocation to help individuals manage their lives
  - TBI Provider encourages people to move to independence by: assisting them to learn the skills necessary to live; work/volunteer; by utilizing community based resources and offering a variety of service options
5. **Relationships: Individuals receive support to foster and maintain relationships**
- TBI Providers support/promote family relations and friendships if so desired by the people they serve
  - TBI Providers support intimate relationships
  - TBI Providers educate individuals on sexuality if so desired by the individual
6. **Participation: Individuals participate in their local communities.**
- Individuals have transportation when they want to go somewhere; agency coordinates transportation to/from community destinations
  - Providers inform/promote local events such as: town meetings, select board meetings, community dinners, dances etc.
7. **Well-being: Individuals services and supports promote health and well-being.**
- TBI Providers access services which optimize personal health
  - TBI Providers promote medical well-being, nutritional well-being, spiritual well-being, diet and exercise
  - TBI providers promote skills and educate individuals on good health and hygiene
  - TBI Providers offices are accessible, have established fire safety plans and coordinate home safety inspections with community support (home) providers
8. **Communication: Individuals communicate effectively with others.**

- Providers explore/support individuals' efforts to improve communication by encouraging access to every aspect of communication to include but not limited to assistive technology
- People have access to someone who understands them
- TBI Providers teach skills to improve individuals' communication and cognition
- Staff present in a way the people they serve understand

### **On-going Review of this Quality Management Plan**

This TBI Quality Management Process should be regarded as a living document. On-going changes in service delivery, funding, individual needs, staffing, policies, etc. will necessitate changes in quality management activities. The TBI Steering Committee, a workgroup of the Statewide TBI Advisory Board, will have an ongoing responsibility to periodically revisit the plan and recommend changes.

### **The Quality Services Review Process**

The Centers for Medicare and Medicaid Services (CMS) established that States have the responsibility for the health and safety of the individuals that receive services within Vermont. The core of the TBI Quality Management Process is the oversight of service provision through quality services reviews of agencies that provide direct service within an 18-month cycle. The TBI quality review process includes information gathering and identifying both promising practices and addressing areas for improvement. This quality services review process consists of direct feedback from individuals who receive services, record reviews, observations and discussions with agency staff. Agencies are reviewed using the TBI Program Standards and outcomes and Indicators as the "lens" through which the quality of services will be determined.

Agencies will receive feedback from TBI review staff throughout the process. TBI Review Reports summarize the performance of the agency over the course of the review and will address promising practices as well as areas for improvement and identify any potential technical assistance needs. In the instances where improvement is needed in a particular area, agencies will be required to complete a follow up plan which identifies solutions to the area needing improvement, timeframes to make the improvement, and any technical assistance needs from the Division of Disability and Aging Services (DDAS) staff.

### **Statewide Reporting for Systems Change**

Long term statewide trends reveal opportunities for systems change related to funding, training and programmatic structure. The Division of Disability and Aging Services will periodically report on statewide trends related to the Quality Service Standards. These reports will be available to stakeholders such as the Vermont Legislature, TBI Advisory Board, service providers, local advocacy organizations, and the general public. Periodically, the Division of Disability and Aging Services will host public forums to discuss these reports and potential systems change.

### **Technical Assistance (TA)**

TBI Program and other state staff will be available for on-going technical assistance.

Other TA forums such as: Case Manager and Life Skills Aide trainings, TBI Conferences and trainings by request will also be available throughout the year.

**Other TBI Quality Management Activities: Program Standards and References.**

The TBI Quality Review is not meant to replace program standards, but rather to supplement them and describe a method to ensure program standards are met. Agencies are held accountable for following program manuals, standards, policies, and other guidelines as applicable to the agency caseload.

***Provider Agreements***

The TBI program staff oversees the review process for the annual Provider Agreements of TBI agencies. The Division of Licensing and Protection reviews licensing requirements for all licensed facilities including Therapeutic Care Residences (TCR) with applicable State and Federal regulations.

***Protective Services***

All TBI Providers must adhere to the Vermont Mandated Reporter Protocols for suspected abuse, neglect, and exploitation of consumers located in the TBI Program Manual

***Background Check Policy***

All TBI service providers are required to comply with the Department of Disabilities, Aging, and Independent Living Background Check Policy. This policy describes what background checks are required and what needs to be done if a background check reveals a potential problem.

***Critical Incident Reporting Policy and Procedures***

Currently a critical incident reporting process is being developed for Department of Disabilities, Aging, and Independent Living providers. It is expected that a web-based reporting system will be developed. Critical incident reports for each agency received will be examined prior to the quality services review to identify trends.

***Appeals and Grievances***

The Global Commitment Medicaid Waiver, which the TBI Program is a part of, has its own appeals and grievances process. The Disability Law Project is available to assist individuals in the appeals and grievances processes. It is expected that each TBI Provider will develop its own local process for resolving consumer complaints and grievances for their agency e.g., Consumer is not satisfied with their Life Skills Aide.

**The TBI Review Process**

**Introduction**

The TBI Quality Review process, developed by TBI Service providers, individuals with TBI, their families, guardians and State TBI program staff, was designed to work collaboratively with service providers to assure and improve the quality of services based on a set of Quality Service Standards. These standards are used by TBI Program reviewers to monitor and review the quality of services. As part of the review process, Division of Disability and Aging Services (TBI program staff) and various stakeholders provide the review team their perspective on the quality of the agency's services. The TBI reviewers also collect information through existing sources such as monthly service reports and/or other service reviews in DDAS in order to reduce

redundancy.

Every TBI Provider will participate in a quality services review. The review process will take place within an 18 month cycle.

### **On-Site Reviews**

On-Site Reviews will take place over the course of one - two days and will determine the extent to which providers are in compliance with established TBI Program Standards. In some cases information may be gathered through a separate quality review process e.g. developmental services review.

#### **1. Notification and Scheduling**

Written notice of the review dates is sent to the Agency's Executive Director at least 30 calendar days in advance of the quality services review. The Quality Management Reviewer will coordinate with the agency to schedule the specific review activities for the **On-Site Review**. Agencies can expect to discuss coordination of record reviews, general availability of staff and key management staff during the course of the review, discussions regarding the consumer sample, schedules of team meetings and the review of agency documentation. The Agency's Executive Director may choose an agency contact person to serve as liaison for the coordination of the review process. The agency contact person is expected to facilitate, schedule, coordinate, and generally be available during review activities.

#### **2. Sample Selection**

A sample of individuals receiving TBI services is chosen to gain input from consumers and examine a variety of services in order to obtain a "picture" of the agency as a whole. Once notified of the agency's review, a sample of individuals receiving services will be identified and services will be reviewed on the day of the on-site review. The TBI Reviewer coordinates the sample of people being reviewed with the TBI Service Provider and TBI Program staff. A sample of no less than 10% of the providers' caseload will be reviewed. Once the sample has been selected, the TBI Reviewer confirms the feasibility of the sample and other logistics (e.g., does the individual have a guardian? Is the consumer still being served? Are there any reasons the sample should or should not include certain individuals?).

Following sample selection, the TBI provider agency will notify selected individuals and their guardians (where applicable) that a TBI Program Quality Reviewer will be reviewing their services. Agencies will support individuals to understand the purpose and intent of the review.

Agencies will also inform the TBI Reviewer of any unique circumstances that may be relevant (e.g., individual observes specific cultural/religious practices; individual needs an interpreter, etc.). Please note, if a provider services a client for a brief period of time but the client transfer to another provider or leaves the TBI program the provider will be reviewed based on the time frames that services were provided.

#### **3. TBI On-Site Review**

The TBI On-Site Review is a one - two day review, and is aimed at determining the extent to which a TBI Provider agency is compliant with standards set forth by the Department of Disabilities, Aging, and Independent Living, Division of Disability and Aging Services, and the TBI Program. The TBI On-Site review will examine the following areas:

- DAIL Background Check Policy
- Training and supervision
- Provision of community supports
- Service Contracts
- Community Collaboration
- Community Access
- TBI Program Documentation

Details of the bulleted sections are described in Attachment A “On-Site Review Form”

### **Process**

As this review will primarily examine documentation, access to consumer files and some corporate information will be necessary. The reviewer will also have discussions with agency management and staff to determine the agency’s practices around supervision and training. **Some provider agencies offer a variety of services such as developmental and aging services which may be subject to a separate review process.**

During the review process, the TBI Quality Reviewer will provide ongoing feedback to the agency. This presents an opportunity to seek clarification, acknowledge what is working well, and describe any areas that need improvement. After all information gathering is complete, the reviewer will meet with the agency director and other key agency staff to provide a summary of feedback before the On Site Review Report is completed. This feedback discussion provides the opportunity to describe agency strengths, attain clarity on issues raised, and identify technical assistance needs. The TBI Reviewer will identify and clarify any issues that need to be addressed and will discuss with the agency a plan to improve noted areas/items, identify technical assistance needs and determine relevant timeframes for completing corrections. The TBI reviewer will then follow-up periodically and provide technical assistance until the improvements are complete. Finally, the agency will be asked to provide feedback on the quality services review process.

***Please note, in the event the reviewer observes a life threatening situation for a consumer during the review, the agency will be asked to take immediate steps to correct the situation.***

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**State of Vermont  
Division of Disability and Aging Services  
TBI Program**

**TBI QUALITY ASSURANCE QUALITY IMPROVEMENT – ON-SITE REVIEW**

**1. Background Checks:** (Reference TBI Provider Agency Standard #2, DAIL Background Check policy)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken

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Additional Comments:

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The provider agency will adhere to DAIL background check policy established April 2006.

“Background check” includes all of the following:

1. a request for information about all substantiated findings of abuse, neglect, and exploitation directed to the Department for Children and Families (DCF) child abuse registry;
2. A request for information about all substantiated findings of abuse, neglect, and exploitation directed to the Department of Disabilities, Aging and Independent Living (DAIL), Division of Licensing and Protection adult abuse registry;
3. A request for information about all criminal convictions directed to the Vermont Crime Information Center (VCIC);
4. An on-line search of the Exclusions Database of the federal Department of Health and Human Services’ Office of Inspector General as [www.oig.hhs.gov](http://www.oig.hhs.gov).
5. For volunteers or workers who will be paid to transport a person by motor vehicle, a complete Motor Vehicle Driver Record from the Vermont Department of Motor Vehicles.

Comment [p1]: delete

**Periodic Updating of Background Checks**

Subsequent to the initial background check, an agency or provider shall have a policy for conducting periodic random checks of workers and volunteers covered above.

2. **Training and Supervision:** (Reference TBI Provider agency standards #3 & 4, Case Manager Job Description, Life Skills Aides Job Description)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken:

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Additional Comments:

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Provider Agencies will employ, train and supervise Case Managers and Life Skills Aides.

**Pre-service training:** Agency will provide evidence that staff has completed or is in the process of completing the TBI service training modules or other relevant training. Training can include:

- PRIDE, Inc. – conducts TBI pre-service training on a quarterly basis. Contact the PRIDE, Inc. office at 802-479-5801 to find out the next training date.
- Michigan Brain Injury Association training – found online at the following website: <http://www.mitbitraining.org/>. Only modules 1 to 3.
- Division of Disability and Aging Services (DDAS) – has training materials available for loan and on our website. Contact the TBI Program at 802-241-1228. Available [www.ddas.vermont.gov](http://www.ddas.vermont.gov).
- Certification for Brain Injury Specialist – information is available at the following website: [www.AACBIS.net](http://www.AACBIS.net).
- Annual Traumatic Brain Injury Conference and additional resources through the Brain Injury Association of Vermont. Information available at [www.biavt.org](http://www.biavt.org) or by calling 1-877-856-1772.

Comment [p2]: delete

**On-going training:** Agency will provide evidence that staff is provided 3 training opportunities per year.

Training can include:

- Attending relevant trainings
- Self Study: Reading TBI related books, journals, periodicals, videos
- Attending state offered Case management or Life Skills Aide meetings
- It is recommended to provider agencies to develop their own TBI trainings and resource library.

**Supervision:** Agency will provide evidence that on-going supervision occurs.

- Verification of annual employee evaluations
- Verification that regular supervision occurs
  - Who are you able to go to get questions answered
  - Do you receive an annual evaluation?
  - Does your provider offer ways for you to improve your skills such as training, classes, etc?
  - Who are you able to call when your client is in crisis?

3. **Provision of Community Support:** (Reference TBI Provider agency standard #5, Caregiver Functions and Standards, Respite Caregivers Functions and Standards).

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken:

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Additional Comments:

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Provider agencies will assure provision of community support in home and/or community setting. Residences will be licensed by appropriate state agency when required.

Comment [p3]: delete

- If serving more than 2 unrelated individuals, the facility will be licensed through the Division of Licensing and Protection. The agency will provide evidence of current licensure.
- If funded for community supports, the individual will have a private accessible room (the individual's agreement to any other arrangement must be documented).
  - If community supports are funded, the provider agency must complete the Housing Standards Forms required by DDAS policy.
- The Agency will provide evidence that the caregiver has completed or is in the process of completing the TBI Pre-service (or equivalent) training.
- The Caregiver will provide 24 hour supervision and will participate in the individual's rehabilitation program.
  - Assure a phone is available to the individual to use freely
  - Assure appointments are kept
  - Participate in the individual's weekly activities
  - Be available to attend team meetings

4. **Service Contracts:** (Reference TBI provider agency standard #7, DAIL background check policy established April 2006 & revised July 2009)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken:

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Additional Comments:

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TBI agencies will develop contracts with community service providers as appropriate. The contracted provider must adhere to the DAIL background check policy. Contracts are maintained at the provider agency and available upon request.

Comment [p4]: delete

- Contract must reflect services to be performed
  - How is the contract being monitored
  - For contracted home providers case managers must visit the home one time per month
- Duration of the contract must be identified
- Signature of both parties
- Date contract went into effect

5. **Community Collaboration:** (Reference TBI provider standard #10, Procedures for Completing TBI Service Plan)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken:

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Additional Comments:

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Provider agencies are responsible for development, coordination, and provision of all services identified in the individual service plan and financial plan and will utilize appropriate consultants as necessary. Consultants may include but are not limited to physicians, Vocational Rehabilitation Counselors, rehabilitation therapists, social workers and psychotherapy counselors.

- Agency will be able to discuss how community resources/consultants are identified and utilized
- TBI Providers will be asked how they are reaching out to and educating the community on Brain injury
- Agency will explain:
  - Purpose of consultants for the individuals being reviewed
  - Providers will be able to describe the level of TBI experience and qualifications of the consultants

Comment [p5]: delete

6. **Community Access:** (reference TBI provider agency standard #11, Procedures for Completing TBI Service Plan)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken:

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Additional Comments:

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The Provider Agency must provide or arrange transportation that meets the individual's needs and allows them access to community activities. If the agency provides transportation it must meet the State's minimum insurance requirements. Current driver's license and insurance is required by provider agencies and must be available upon request by the State.

- Transportation will be individualized to the consumer's TBI Service Plan
- Agency Staff will describe coordination efforts to provide community based rehabilitation activities.

7. **TBI Program Documentation** (Reference TBI provider standards #12 & 13, Procedures for TBI Evaluation, Procedures for Completing TBI ILA, Procedures for Completing TBI Service Plan, Procedures for Completing the Care Plan, Procedures

for Completing Life Skills Aide Report, Procedures for Completing the Case Managers Reporting Log, Procedures for Completing Care Conference Minutes, Procedures for Completing Weekly Activities Schedule, Case Manager Job Description, Life Skills Aide Job Description, Caregiver Functions and Standards)

Complete \_\_\_\_\_ Incomplete \_\_\_\_\_

Action to be taken: |

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\_\_\_\_\_  
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Additional Comments:

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Completion of the following reports is required and must be made available upon request by the

\_\_\_\_\_

Additional Comments:

State:

The following documents will be reviewed over the course of the year at the TBI Program office:

- TBI Service Plan
- TBI ILA
- TBI Evaluation
- Care Plan

The following documents must be made available upon request by the State:

- **Pre Admission Planning** (when applicable) – when an individual has been transitioned to a new setting the TBI Provider’s transition process will be reviewed. The TBI Program Transition Checklist will be used as a general guide to review the thoroughness of the transition process.
  - The TBI Provider Agency will transition the individual using the TBI Program Transition Checklist
- **Care Conference Minutes** – each month a record will be maintained that identifies the following has been discussed with the individual receiving services.
  - Relevant activities for the current month
  - Discussion of individuals’ priorities
  - Changes to the TBI Service Plan

- **LSA Daily Reports** – The Quality Reviewer will verify completion of LSA Daily Reports and will discuss with the Life Skills Aide information pertaining to the individuals' daily program
  - Do Daily scores generally support the quarterly report scores
  
- **Weekly Activities Schedule** – The Quality Reviewer will verify that a record is kept of the individual's rehabilitation activities. The reviewer may ask the individual and relevant staff questions based on identified activities.

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