



# Therap White Paper

## Solution to Federal Joint Report:

### Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight

February 13, 2018

A graphic with the words "Joint Report" in white on a red arrow pointing right, followed by logos for the U.S. Department of Health and Human Services, the U.S. Department of Justice, the Administration for Community Living (ACL), and the U.S. Department of Health and Human Services Office for Civil Rights.

### Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight

#### Group Home Beneficiaries Are at Risk of Serious Harm

- OIG found that health and safety policies and procedures were not being followed. Failure to comply with these policies and procedures left group home beneficiaries at risk of serious harm.
- These are not isolated incidents but a systemic problem – 49 States had media reports of health and safety problems in group homes.

#### A Roadmap for States – Compliance Oversight Model Practices

A toolbox for better health and safety outcomes in group homes

**Model Practices for State Incident Management and Investigation**

- Reporting and notification
- Incident review
- Investigation
- Corrective action and implementation
- Trend analysis

**Model Practices for State Incident Management Audits**

- Assess incident reporting
- Assess response and review of incidents
- Assess investigations
- Assess corrective actions
- Assess identification and response to incident trends

**Model Practices for State Mortality Reviews**

- Identify cause and circumstances of beneficiary death
- Where warranted, take corrective action
- Identify mortality trends
- Systemic responses and evaluation of their efficacy
- Reporting

**Model Practices for State Quality Assurance**

- Oversight of service planning and delivery
- Periodic assessment of performance
- Review network capacity and accessibility
- Compliance monitoring of requirements and outcomes

562 Watertown Avenue, Waterbury, CT 06708

© Therap Services, LLC. 2003 - 2018, All Rights Reserved.

[www.TherapServices.net](http://www.TherapServices.net)

203-596-7553

In June of 2003, the General Accounting Office (GAO) [reported on systemic concerns](#) at the state and federal level regarding how reporting on and responding to critical incidents affected the quality of care of individuals with Intellectual and Developmental Disabilities (I/DD). GAO recommended more oversight of Home and Community Based Services (HCBS) waiver programs. In 2017, National Association of State Directors of Developmental Disability Services (NASDDDS) [Health and Welfare Review](#) reported on the shortcomings of current practices of multiple state incident management systems, highlighting common issues relating to identification, reporting and trend analysis of critical incidents and the efficacy of preventive measures.

In January 2018, a [joint report](#) by the Office of Inspector General (OIG) of the U.S. Department of Health and Human Services' (HHS), the Administration for Community Living (ACL), and Office for Civil Rights (OCR), describes similar systemic issues in several states that were audited. In one state, the audit reported the following:

The State agency did not:

- Ensure that community-based providers reported all critical incidents to the State agency.
- Ensure that community-based providers conducted administrative reviews of all critical incidents involving serious injuries, dangerous situations, or suicidal acts and submitted their findings within 30 days.
- Report and appropriately document all instances of inappropriate use of restraint and other rights violations to Disability Rights.
- Review and analyze data on all critical incidents.
- Investigate all critical incidents involving suspected abuse, neglect, or exploitation and immediately report to law enforcement.
- Ensure that community-based providers reported all beneficiary deaths to the State agency and that the State agency analyzed, investigated, and reported each the medical examiner.

Despite the best intentions, substantial resources, multiple studies and numerous, often onerous, regulations and safeguards since 2003, the systemic problems seem to be winning the battle. As the delivery of services becomes more decentralized, the failings identified in the reports will likely be further compounded.

<sup>1</sup> General Accounting Office, Long-Term Care: Federal Oversight of Growing Medicaid Home and Community-Based Waivers Should be Strengthened, (June 2003) <https://www.gao.gov/new.items/d03576.pdf>

<sup>2</sup> Mary Lou Bourne, Mary Sowers, and Laura Vegas, National Association of State Directors of Developmental Disability Services, Health and Welfare Review: Report and Self-Assessment, (November 2017) [http://www.nasddds.org/uploads/documents/NASDDDS\\_Health\\_and\\_Welfare\\_Review\\_Report\\_10-2017\\_FINAL.pdf](http://www.nasddds.org/uploads/documents/NASDDDS_Health_and_Welfare_Review_Report_10-2017_FINAL.pdf)

<sup>3</sup> US Department of Health & Human Services, Office of Inspector General, Administration for Community Living, and Office for Civil Rights, Ensuring Beneficiary Health and Safety in Group Homes Through State Implementation of Comprehensive Compliance Oversight, (January 2018) <https://oig.hhs.gov/reports-and-publications/featured-topics/group-homes/group-homes-joint-report.pdf>

Systemic problems stem from issues inherent in an overall system. It is difficult, if not impossible, to isolate a specific factor that is consistent across multiple incidents or categories of incidents. Generally, a change to the structure of the system is the reliable solution to a systemic problem. The 2018 Joint Report concludes with these recommendations in Appendix A of the report:

- I. Identify Intended Outcomes of Incident Management and Investigation
- II. Identification of Participants in State Incident Management and Investigation
- III. Essential Components of State Incident Management and Investigation
- IV. Detailed Elements of the Essential Components
  - A. Reporting and Notifications
  - B. Incident Reviews
  - C. Investigation
  - D. Corrective Action Recommendations and Implementation
  - E. Trend Analysis

The recommendations in the report provide excellent patches and improvements to the current systems. What the recommendations do not provide is a way to change the current systems that 15 years of reports show is broken.

The 2003, 2017 and 2018 studies cited above were not random selections for this paper. In 2003, Therap Services began to develop a Case Management system for the I/DD population with a new approach to incident management. Therap would use a Software as a Service (SaaS) model to develop a configurable Commercial off the Shelf (COTS) product to provide support for the I/DD population with the innovative approach of using the best available technology to capture support data, including incident reporting, at the point of contact with the individual and deliver that data to highly configurable systems defined by the user.

In terms of the 2018 report's recommendation for transparency, a state, county, or other oversight body can use Therap to develop a complete incident management system. This replicates the traditional flow of a paper-based system at a provider agency with transfers from the initial entry of an incident, to a managerial review, to a Quality Assurance review, and directs the documentation to the oversight body, to oversight body reviews, to the development of findings, and the delivery of results and recommendations. Therap can also be configured to deliver that initial report to any designated recipients at the provider agency and oversight body at the same time. Reviews, notification and analyses are concurrent.

Therap's incident reporting module is used to document incidents, medication errors and other reportable events. Once a report is entered into the Therap system, it can be viewed by multiple staff members across programs and between disciplines, based on assigned access rights. Each edit or update action in the incident report captures the electronic signature of the user, date and time stamp and status marker, providing a high level of transparency, accountability and accuracy.

Therap's critical incidents allow for proper notifications of abuse and neglect allegations to be directed to appropriate personnel based on organizational preferences. Each report is clearly labeled with a priority level and configurable notification settings and displays in counts on the dashboard, based on status of the report. Provider staff have the ability by role to review, edit and approve reports. Providers and states have the ability to run trend reports as well.

This critical incident report tool is a fully operational module. Therap is experienced in quickly implementing this module at a state level and is currently being utilized by nine states across the country. Therap's experience and partnership with its customers has produced a best practices model. For years, Therap's best practice model has allowed users to analyze incident trends to make decisions on training, supports, personnel retention and a variety of other operational decisions. With the introduction of Therap's Business Intelligence dashboard module in 2016, Therap's data mining tool, users can now review all of the incidents that have been and are being collected with easy-to-use dashboards. This easy aggregation tool allows for the oversight organization to understand and make proactive, data-informed observations and decisions based on the actual data reported.

Therap is extending an invitation to talk with you and your state about our Incident Management and Resolution tool that provides solutions to all four key compliance oversight components, as recommended in this report. By the way, since 2003, we have supported providers in 50 states -- including nine state governments -- with our Incident Management and Resolution tool. This particular tool is provided at no cost to state governments. Plus, we can have you up and running in as few as 90 days.

## About Therap

Therap is the industry leader in providing electronic records and documentation in long-term care services for people with intellectual and developmental disabilities. Therap is a web-based application suite designed to provide a comprehensive solution for the planning, documentation, reporting, communication and billing needs of organizations supporting people with intellectual and developmental disabilities in home and community-based services (HCBS), and other Long-Term Services and Supports (LTSS) settings.

Using secure cloud technology, the Therap system improves the quality of service within day programs, assisted living facilities, ICF/IID facilities, community support programs, home settings and state organizations. Daily communication and reporting between state agencies, administrators, health care professionals, case managers, quality assurance teams and families become seamless. Therap currently supports more than 500,000 individuals across the United States and internationally.