



Welcome!

As you know, the coordination of the Community Practice Review is complicated and time consuming. All of the Regional DDSD staff have done an outstanding job of ensuring that past Reviews went smoothly, including the planning, coordinating, scheduling, problem solving, copying, etc. This guide is intended to summarize some of the tasks and timelines that we collectively know need to happen in order for the 2009 Review to be completed accurately and timely.

This is the first year that we will have a dedicated Community Practice Review Team (CPRT). Consequently, this review guide will identify who carries the primary responsibility for a given task by indicating "Region" and/or "CPR Team" in parenthesis at the end of sentences. If no designation is provided, it is assumed to be the responsibility of the region.

As in the past, additions to this Guide are identified with RED font color.

Community Monitor's Contact Information:

Lyn Rucker

rpaltd@aol.com

Office: 785-258-2214 (If she's not in, please leave your information with David or Paula.)

### 60 days prior to the Review

- Notice to Providers:** The DDSD sends out a letter to all providers, including therapists, serving Jackson Class Members announcing the Review schedule and general requirements. (Region)

### At least 45 days prior to the Review

- Identify Regional Leads and Responsibilities**
  - Designate an overall Regional Review lead in each region. That name and contact information should be sent to the Community Monitor and Donna Storey, Community Practice Review Coordinator. (Region)
  - Designate responsibility for developing reviewer schedules<sup>1</sup>. (Region with CPR Team)
  - Designate responsibility for gathering, copying and sending files. (Region with CPR Team)
  - Designate responsibility for reviewing files for completeness. (Region with CPR Team)
  - Reviewing files for completeness prior to sending them to reviewers/Case Judges. (Region. If a CPR Team member reviews a file(s) for completeness, they can not conduct a CPR review on that file or any other file reviewed by a CPR Team member in that region)

<sup>1</sup> Please note that review schedules need to include a time (around 3:30 p.m.) when reviewers are available for therapists and agency nurses to come and talk with the Reviewer so one slot for interviews will have to be added.

- Designate “on call” responsibility during the review weeks. This person would be available to assist if programmatic issues/clarification arise during the review. (Region)
- **Reserve meeting room for the Friday** of the on-site review week for the “status update” summary that takes place with DDSD staff. (Region)
  - This room should comfortably accommodate reviewers, case judges, regional office staff (including staff who will follow up on issues for specific class members), some DDSD and DHI Central Office staff (2-4) and the Community Monitor.
- **Preparation for Sample Selection:** The Community Monitor received a consolidated list of Jackson Class Members from DDSD in 2003. As might be expected, the location and circumstances of class members change, so the Community Monitor greatly appreciates your assistance in being sure that her class member list is accurate and current. In order to ensure that the class members you serve match the Community Monitor’s list, reconciliation of the lists is essential. In order to ensure an accurate list from which to select a sample, please complete the following: (CPR Team with Region for this and following)
  - Update your Jackson Class Member list so that it is current. Be sure it is in an Excel format.
  - Leave all individuals on the list, if a class member has passed away, note that. If a class member has moved to a different region, note to which region the person moved.
  - Be sure to list the first and last name of the class member;
  - List the Social Security number of each class member;
  - List the current Case Management Agency and the name of the case manager serving each class member;
  - List the current day service provider(s) (including the type of day service receiving, e.g., Supported Employment, Community Access, Adult Habilitation, in home, etc.);
  - List the current residential service provider; (including the type of residential service provided, e.g., Family Living Services, Independent Living Services, supported living, etc.)
  - List the city in which the class member lives. If the class member lives in one town but receives day services in another, please provide that information.
- Please be sure that CURRENT service providers are listed. The sample is stratified, in part, by who is served by which provider so an accurate and up to date list is critical.
- Send this updated list of class members served by your region to the Community Monitor electronically, in Excel format, via e-mail. Her e-mail address is rpaltd@aol.com. She will acknowledge the receipt of this list. If you do not get an acknowledgement, please call her (785-258-2214). E-mail is not always reliable.
 

The Community Monitor needs to receive this list **at least 45 days in advance** of your Review so she can choose the sample and return the sample to you at least 30 days in advance of your review.
- Reconcile Jackson Class Member list with the Community Monitor. If there are any questions regarding the Class Member list, the Community Monitor will call the Regional Program Manager and/or the Regional Lead so that differences can be reconciled.

**30 days prior to the Early Bird Review**

- Sample Selection:** Once the Community Monitor has reconciled the information on the Class Member list with you, she will select the sample for your region. The list of class members to be reviewed for your region will be sent to you at least 30 days in advance of your Review.

At least one “alternate” will be selected in case there is some unforeseen obstacle that prevents someone in the sample from being reviewed.

**Note:** Only the Community Monitor can substitute an “alternate” for someone listed in the sample so if there are reasons you’d like to change to an alternate call the Community Monitor to review the issue and request the change. If the change is agreed to, the Community Monitor will submit the change to the appropriate Regional Program Manager in writing.

The projected sample numbers for each region are listed below:

Southwest	18
Metro	50
Northwest	11
Northeast	17
Southeast	16
<b>Total</b>	<b>112</b>

- You will need to know and provide the following information regarding each person chosen in the sample. This information will be helpful when assigning reviewers and case judges. (Region with CPR Team)
  - If a class member/guardian cannot speak English or prefers to speak a language other than English, we need to know what language they prefer, or if they prefer to use sign language, so that the appropriate reviewer or interpreter can be assigned.
  - Sample members who are on the Aspiration list;
  - Sample members who have contractures, positioning challenges, are in wheelchairs, etc.;
  - Which people have acute or chronic health care issues and what the nature of these issues are;
  - Which people have mental health and/or behavioral issues and the nature of these issues;
  - Identify who each person’s designated Health Care Coordinator is.
  - Individuals who are significantly visually, hearing or visual and hearing impaired.
  - Individuals who have issues which required the attention of the Regional Office during the past 12 months, e.g., hospitalizations, ER visits, Regional Office Intervention requests, CAIR Reports, incident reports, etc.
  - We will also ask for information regarding these issues and copies of documentation which provides information on the issue and follow up which has occurred.
- Please provide the Community Monitor with the name and phone number of the SLP, OT, PT, BSC, if there is one, working with each person. (CPR Team)
- Assignment of Reviewers (DDSD CPR Coordinator) and Case Judges (Community Monitor)**
  - Donna Storey, based on the needs of the class members, will assign reviewers. (CPR Team)
  - Once the Reviewers have been assigned, the appropriate Regional Program Manager and the Community Monitor will discuss each person in the sample. Based on the needs of the class members, the Community Monitor will assign Case Judges. (Community Monitor)

- Once the assignments have been made, the Community Monitor will send a list to the Regional Program Manager, DDSD Regional Office Director/his/her designee, reviewers, and case judges confirming and documenting the assignments.
  - Assignments of reviewers will take into consideration where the reviewer lives in order to make access as easy as possible.
  - Reviewers are not to review in their “home” region. The only person who can make an exception to this requirement is the Community Monitor.

□ **Scheduling of Reviews (Region with CPR Team)**

- Regional Office staff will begin to arrange interviews and set schedules for the reviewers. Reviews are scheduled to take place over a two-week period. The schedule, by region, follows: (Region with CPR Team)

Reviews are scheduled to take place over a two-week period. The schedule follows:

September 9 & 10	Training in Albuquerque
September 14 to 18	Metro #1 Early Bird
September 21 to 25	Metro #1 On Site Review
October 19 to 23	Northeast Early Bird
October 26 to 30	Northeast On Site Review
November 30 to December 4	Southwest Early Bird
December 7 to 11	Southwest On Site Review
January 25 to 29	Metro #2 Early Bird
February 1 to 5 <sup>th</sup>	Metro #2 On Site
March 1 to 5	Southeast Early Bird
March 8 to 12	Southeast On Site

- If possible, each Reviewer should conduct AT LEAST one review during the “early bird” week of your Region’s review (especially for Metro reviews). Reviewers and whoever schedules for your region will need to be in contact with each other to be sure the schedules work.
- For every class member in the review, the region will need to schedule the reviewer for:
  - A review of the case file at the case managers office first thing in the morning of the review day. Allow at least an hour for this review.
  - An interview with the case manager after the file review. PLEASE INFORM CASE MANAGEMENT AGENCIES THAT THE INTERVIEW MUST TAKE PLACE WITH THE CASE MANAGER FOR THE CLASS MEMBER. If the case manager is new (30 days or less) the supervisor may sit in but questions will be directed to the case manager. The supervisor may NOT answer questions for the case manager, however, the supervisor

may offer additional information AFTER the case manager has answered the question asked. Allow an hour for this interview.

- Be sure to allow adequate travel time between interviews.
- An interview with the class member. The reviewer needs to observe the class member in BOTH the day and residential service setting while the class member is present. If the class member receives a combination of day services it is preferable to observe them both. If the class member works, and it is acceptable to the class member and to his/her employer for a visit, please schedule an observation at the work site. If it is not acceptable to the class member and/or his/her employer the reviewer should not visit the work site. There is no exception to observing the residential site.
- If there are two day services (employment and community membership, for example) the Region should schedule interviews with both direct support day staff. If that is the case, the reviewer should fill out two separate day interview sections and indicate who was interviewed.
- An interview with the Guardian. If the Guardian is not a provider of Family Living Services, interviews may be over the phone or in a location chosen by the Guardian. If the class member lives with the guardian and/or the guardian is also the Family Living Services Provider this interview or the residential interview MUST take place in the home of the class member.
- An interview with the direct care staff person who works most closely with the class member when the class member is home. PLEASE INFORM PROVIDERS THAT THE INTERVIEW MUST TAKE PLACE WITH THE DIRECT CARE STAFF. If the direct care staff is new (30 days or less) the supervisor may sit in but questions will be directed to the direct care staff. The supervisor may NOT answer questions for the direct care staff, however, they may offer additional information AFTER the direct care staff person has answered the questions asked.
- Each reviewer should have a time where they can meet/talk by phone with therapists/nurses. Consequently, a room with phone conference capability will need to be made available. The phone provided in the room should have conferencing capabilities. Therapists should be invited and scheduled for a time certain to meet/speak with reviewers, and that information should be provided with the master schedule. Since some therapists may serve more than one person in the sample, the schedule will have to be coordinated so that therapists/nurses aren't double booked. This is a voluntary opportunity for therapists and nurses.

### 20 to 30 days prior to the Review

- Notification regarding status summary meeting:** The Friday of the on-site review week, during the time when the reviewers summarize their findings and recommendations with the Community Monitor, representatives from the Regional Office staff and DDS and DHI Central Office staff are invited to attend. (Invitation could be done by CPR Team)
  - The Regional Office staff who are assigned to follow up on specific class members in the Review sample should receive a special invitation to come to this meeting so their questions can be answered timely. (Region determines lead)

- Those attending should know that the Friday status review will go as late as needed to summarize all class members reviewed. We will try to have reviewers/case judges who have to travel home the greatest distances summarize first.
  - The Friday status summary will begin promptly at 8:30 a.m. (unless otherwise agreed) in an effort to complete all of the summations by 5:00 p.m.
  - Since the Regional Office will have typed copies of the DRAFT Individual Findings and Recommendations, we will review these documents together. Reviewers will be prepared to clarify what they found and answer questions.
  - DRAFT individual written findings and recommendations will be available for review by Regional Office staff as early as possible during the review week. Ideally, except for the last individuals reviewed, some of the individual findings will be available for review by DDS staff as early as Tuesday of the on site review week. For those reviewed later in the week, their findings and recommendations may not be available until late Thursday evening or very early Friday morning.
  - Once the status review is complete and any corrections to the findings and recommendations are made, those findings should be immediately forwarded to each team. The team should meet to discuss and/or take action on the findings and recommendations ASAP. Their progress should be reported at the team meetings with the Community Monitor that are often held within three weeks following the on site review. (Region)
  - If a Team has a better recommendation for resolving a particular finding, they should provide that proposed alternative recommendation in writing to the Community Monitor before, if possible, or at the team meeting with the Community Monitor. (Region)
- The 30-60-90 day timelines for follow up on recommendations will begin ten days following the on-site Review, unless the Community Monitor sets an alternative timeline for identified individuals based on one or more of the following issues. (Region)
  - If the Department has additional information that contradicts or suggests a change to a recommendation which was not considered by the Community Monitor regarding an individual class member, such information will be provided to the Community Monitor by the Department no later than ten working days following the receipt of an individual's draft findings and recommendations. The Community Monitor shall determine whether any of the findings or recommendations should be modified based on such additional information. Modifications, if any, will be made by the Community Monitor and provided to DOH and the appropriate regional office for distribution to the Interdisciplinary Team. (Region)
  - If the individual, his/her Guardian or Team has information that contradicts or suggests a change to a recommendation, that information should be provided by the Team, along with substantiating documentation, to the Community Monitor before or during her meeting with representatives of the class member's team. The Community Monitor shall determine whether any of the findings or recommendations should be modified based on such additional information. Modifications, if any, will be made by the Community Monitor and provided to DOH and the appropriate regional office for distribution to the Interdisciplinary Team. (Region)
  - The Community Monitor will issue final individual findings and recommendations no later than 10 days following the Team meetings.
- Acquiring and copying documents to be reviewed (Region)

Reviewers consider the case managers record to be the “individual’s primary record”. Consequently, they look to the information contained in the case managers file to be the primary source of documentation for the review. However, DDSD is implementing a new system to reduce movement of paper. There is now a matrix indicating which entity is responsible to maintain various records – this will have the effect of reducing somewhat the items contained in the case managers’ files.

The following documents are to be reviewed. The items listed below are copied and reviewed in advance of the review start date and should be sent to the reviewers one week in advance of the Community Practice Review start date for your region. PLEASE, DO NOT provide double sided copies!

Individual’s Primary Record (Case Manager’s File) Documents

A. On the cover sheet of the file please indicate

- √ The type of communication support, if any, the person needs. Need to indicate if interpretation support is needed and if so what type. For example, if the person/guardian speaks only Spanish, Navajo, etc., or if the person uses sign language please note that for the reviewer.

Note: Regional Office will need to make arrangements for needed interpretation if a reviewer who speaks the language or who signs cannot be matched with the individual/family.

Note: Please provide the phone numbers of the therapists working with this individual and the nurse who knows the person best.

B. Individual Support Plan

The following matrix identifies WHERE identified documents can be found. These documents are being requested in advance and should be included in the reviewer’s packet. The location of the document is a guide to the Region in terms of who is now responsible for having a copy of the identified document.

✓ when provided	Document to be Provided	Case Mgm’t Agency Ind. Case File	Com Living Home & Adult Hab AT SITE	Com Living Agency File AT AGENCY
	Long Term Care Assessment Abstract (LOC—MAD 378)	X		
	Waiver Review form (MAD 046)—Budget(s)	X		
	Last 2 ISPs (The most current Annual and the previous years ISP). Please verify completeness and that we have the most current one.	X	Current Complete Annual ISP	Current Complete Annual ISP
	Outcomes, Strategies and Action Plans	X	Teaching and Support Strategies	Teaching and Support Strategies
	ISP Signature Page	X		
	IDT Meeting Minutes	X		
	Individual Specific Training Requirements (Part of the ISP)	X		
	Individual Transition Plan, as applicable	X		

✓when provided	Document to be Provided	Case Mgm't Agency Ind. Case File	Com Living Home & Adult Hab AT SITE	Com Living Agency File AT AGENCY
	for any change in service and/or provider in the past year.			
	Day Habilitation Schedule for the person – what the class member is doing during the day and when (approximate time) for the past four months.		X	
	Residential Schedule for the person – what the class member is doing during nights and weekends or when the person is at home for the past four months.		X	
	Progress notes/Data Collection/Data Tracking (i.e. outcomes/objectives/ action steps for the past four months.		X	X
	Supported Employment Annual Assessment/profiles; (Will be contained within the ISP as an update to the VAP, unless another independent VAP was requested)	X		X
	Supported Employment Vocational Assessment Profile	X		X
	Career Development Plan (May be contained within the Work/Learn Action Plan of the ISP rather than a separate document)	X		X
	Supported Employment Quarterly Progress Report for current & prior ISP Year.	X		X
	Personal Definition of a Meaningful Day (Should be in ISP)	X		
	Signed Primary Freedom of Choice	X		
	Signed Secondary Freedom of Choice	X		
	Case Manager's Contact Notes and Monthly Face-to-Face Site Visit forms from the past year.	X		
	Guardianship/Power of Attorney Paperwork (type of guardianship, expiration date, etc.)	X		
	Case Manager Quarterly Day Habilitation <u>AND</u> Residential Aspiration Reviews. (Unless individual is already participating in the pilot phase of the Aspiration Risk Management Protocol,	X	X if participating in pilot phase	X if participating in pilot phase

✓when provided	Document to be Provided	Case Mgm't Agency Ind. Case File	Com Living Home & Adult Hab AT SITE	Com Living Agency File AT AGENCY
	in which case this is replaced by activities in the individualized monitoring plan.)			
	Case Manager Mealttime Observation Reports.(Unless individual is already participating in the pilot phase of the Aspiration Risk Management Protocol, in which case this is replaced by activities in the individualized monitoring plan.)	X	X if participating in pilot phase	X if participating in pilot phase
	Comprehensive Individual Assessment (CIA)	X		
	Psychological Evaluation	X		X
	Most recent Dental Exam	X		X
	ACT Report and related implementation documents.	X	X	X
	Most current Auditory/Hearing	X		X
	Positive Behavior Supports Annual Assessment	X		X
	Positive Behavior Supports Plan	X	X	X
	Behavior Crisis Plan, as needed	X	X	X
	Behavior Support Consultant Progress Notes/Quarterly Report	X		X
	Behavior Prevention/intervention Plan (Must have if: physical restraint is being used; Law-Enforcement has been used)	X	X	
	Relevant Human Rights Committee Minutes	X		X
	Annual Speech Therapy Assessment	X		X
	Annual Speech Therapy Treatment Plan	X	X	X
	SLP Semi-Annual Progress Report	X		
	Occupational therapy Annual Assessment	X		X
	Annual OT Treatment Plan	X	X	X
	OT Semi-Annual Progress Report	X		
	Physical therapy Annual Assessment	X		X
	Annual PT Treatment Plan	X	X	X
	PT Semi-Annual Progress Report	X		
	Therapy Closing Reports	X		
	Psychiatric Evaluation	X		
	Psychiatric Visit Reports		X	X

C. Health and Wellness

✓when provided	Document to be Provided	Case Mgm't Agency Ind. Case File	Com Living Home & Adult Hab AT SITE	Com Living Agency File AT AGENCY
	History and Physical and Doctor's notes	X for H&P	Current Doctor's orders	Doctor's orders and correspondence
	Medical Assistance Worker Form (MAW) DLH 052	X		
	Most Current Vision Exam	X		X
	Quarterly Reports from Nurses on individuals with a score of a 4, 5 or 6 on the HAT <b>from the past year.</b>	X		X
	Copy of most recent completed and signed MAR (Medication Administration Record) from all applicable providers.		X	X
	Health Assessment Tool (HAT)	X		X
	Medication Administration Assessment (MAAT; effective 11-1-06)	but result will be recorded in ISP		X
	Nutritional Evaluations/Reports for the past year.	X	X	X
	Results of Lab Work completed during the past year.			X
	Most current Neurological Evaluation	X		X
	Seizure Tracking		X	X
	TD Screening			X
	If applicable to the person, information regarding a living will, advance directives and DNR orders.	X	X	X
	Current written consent from individual/guardian/surrogate health decision maker for assistance with medication delivery by staff	X		X
	Current written consent from the individual's physician for assistance with medication delivery by staff	X		X
	Medical Crisis Prevention/Intervention Plan (Must have if medical conditions exist that may be life threatening) May also be called Medical Emergency Response Plan	X	X	X
	Healthcare Plan – required for HAT 4-6; addresses day to day management of chronic conditions &/or health goals	X	X	X
	Special health Care Needs (I.e. Mealtime Plan (MTP))	X	X	X

D. Other

✓when provided	Document to be Provided	Case Mgm't Agency Ind. Case File	Com Living, Int. Home & Adult Hab AT SITE	Com Living, Int., Agency File AT AGENCY
	ICAP/Vineland (ADL's) and/or ABS	X		
	CAIR Reports/Follow up Determinations.			X
	Incident Reports completed on the person which have occurred during the past 13 months.	X		X
	If the person has been hospitalized and/or had emergency room visits, provide DDSD post hospitalization tracking document/information including dates, cause per incident and discharge summaries per incident.	X		X
	Completed Regional Request for Intervention Forms submitted on behalf of this individual or issues affecting this individual (if action has been taken be sure to include the follow up information.	X		X if submitted by provider versus CM
	Completed Decision Justification Forms.	X		
	Follow up to most recent Community Practice Review indicating what was done on each finding.	X		

7 days before the Review begins: CPR Team

Distribution of review documents

- The entire file should be copied and is to be in the hands of the reviewers the Monday of the week before the Review begins. (For example, if Early Bird is October 17, the required documents should be to the reviewer by October 10.) (CPR Team could distribute/mail documents – not compile them)
- BLANK, BOUND PROTOCOL BOOKS SHOULD ACCOMPANY EACH REVIEWER'S CASE FILE.**

DDSD will print and bind the Protocol Documents. Paul Schwalje is the contact person who can help arrange for an adequate number of Protocols to be delivered to the Regional Office. If more than one Day Program staff is being interviewed (e.g., Job Coach and Community Access Staff person), reviewers will need additional copies of the Day Program Interview section. Extra copies of this section will be printed and available to include with the packets when needed. (CPR Team could ensure that reviewers have bound protocols)

- Documents to be provided for others: Other individuals are to receive information, too.
  - Complete packets for Case Judges are delivered to their hotel rooms the Sunday evening of the on-site review week. (These should be identical to the files the Reviewers receive.) (Region, CPR Team is reviewing)
 

NOTE: For individuals reviewed during the Early Bird week, you do NOT have to make an additional copy of the file for the Case Judge. The Reviewer will provide the Case Judge with the complete file he/she used during the review. This file will include all documents (including those which may have been provided by the Case Manager/Provider) reviewed by the Reviewer during the review. The Case Judge will use this as the official file so you do not have to copy another one.
  - Ruby Moore needs to receive: (Region)
    - Current Vocational Profile (or whatever profile the person has);
    - Career Development Plan, if the person has one;
    - Copies of the last two annual ISPs.
    - DDSD should send her the last quarter of data from the Supported Employment database.
    - The name and phone number of the hotel where each reviewer is staying, and their cell phone number or a way to reach them during the days of the on-site review.

### The Sunday before the on-site Review starts

- Reviewer schedules to Community Monitor: If not provided already, the Community Monitor and the DHI CPR Coordinator should receive (electronically or in hard copy) a copy of each Reviewer's schedule. (Region)
- Files to Case Judges: The Case Judges should receive the files of those whom they will be Case Judging along with the schedules of the reviewers whom they will Case Judge. These files should be secured in a box, the box taped shut and marked Confidential. They can be delivered to the Community Monitor for distribution to the Case Judges. This may change. (Region)

### During the Review week

- Access and Logistics:
  - The Community Monitor should have contact information for the person(s) who are to be called if technical or programmatic questions or problems arise during the review. (CPR Team)
  - If reviewers have personal health and/or safety concerns they will notify the Community Monitor immediately so that action needed to resolve the issues can be taken as quickly as possible. The Community Monitor will inform the Regional Staff Manager of all such concerns. (N/A)
  - If Case Managers/Providers believe they have information that was requested but not produced, the Case Manager/Provider has 24 hours from the time they are asked to produce the missing materials to provide the information. If they produce the missing information within the 24-hour timeline it will be reviewed and considered as a part of the review. Material provided after the 24-hour timeline will be accepted but not considered when scoring the findings. Please see Document Matrix beginning on page 7 for party responsible for particular documents. (N/A)

## Status Summary – Friday of the on-site Review week: **Region**

- 8:30 a.m. Status Summary Starts.**
- Thank you for arranging a room that will accommodate the regional office staff, reviewers, case judges and others from Santa Fe who may attend. **(Region)**
- Please bring copies of all the draft individual findings and recommendations so they can be handed out in the order they are to be reviewed. **(Region)**
- If you have received copies of individual findings and recommendations earlier in the week, please be sure the person who is designated as the follow up lead for that class member receives a copy as early as possible. **(Region)**
- If there are questions regarding individual summaries, these should be sent to the Community Monitor so as many as possible can be resolved in advance of the Status Summary. **(Region)**
- For findings and recommendations that are not available until late Thursday evening, questions will have to be addressed during the Status Summary.
- The Regional Lead should be available early Friday morning to copy individual findings and recommendations that have not been provided by the Regional Office by 5:00 p.m. Thursday evening.

## Following the Review

- Follow-up on Recommendations:** A *draft* of the person-specific findings and recommendations are provided the Friday of the on-site review. These are NOT for public dissemination. After discussions during the Status Summary modifications to the individual findings and recommendations may be made by the Community Monitor. Final versions will be distributed the week following the on-site review.
- As soon as the individual findings and recommendations are received and reviewed by the Regional Office, these findings should be distributed to Case Managers, providers, and all applicable Team members. The follow up timeline is expected to begin no later than 10 days after the Friday of the on-site review so providers must have the individual findings by that time.
  - The team should meet to discuss and/or take action on the findings and recommendations ASAP. Their progress should be reported at the team meetings with the Community Monitor that are held within a month of each review. If a Team has a better recommendation for resolving a particular finding, they should provide that proposal in writing to the Community Monitor.
  - The timelines for completion of recommendations (30-60-90) begins ten days following the Friday of the on-site review. Follow up for people with Immediate or Special Needs will begin sooner.
  - Meetings are scheduled to review findings and recommendations. These meetings are scheduled ASAP by the case manager, and include each individual's:
    - Day/home provider agency;
    - RO staff as appropriate;
  - 30-60-90 day follow-ups on recommendations are carried out and progress is reported regularly until completed.
- Follow-up meetings with individual teams.** The Regional Staff Manager, the DDSD CPR Coordinator, and the Community Monitor will set a time to meet with the class member and his/her team. **Reviewers will participate in these meetings in person or by phone whenever possible.** This meeting usually takes place within 30 days of the review. The purpose is to provide an opportunity to receive updated information

regarding the action which the team has taken since the review, clarify remaining questions and exchange information.

- Each meeting should be scheduled for approximately 45 minutes.
- These meetings may follow a group presentation of Review findings made by the Community Monitor to providers and case managers from throughout the region.
- Providers/case managers/teams who have traveled to attend the group presentation should be scheduled for their individual meetings, if at all possible, so they do not have to return a second time.

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