



SUSANA MARTINEZ, GOVERNOR

CATHERINE D. TORRES, M.D., CABINET SECRETARY

Date: September 14, 2011

To: Suzan Karcz, Director

Provider: A Better Way of Living, Inc.
Address: 117 Montclair Drive SE Albuquerque, NM,
State/Zip: Albuquerque, New Mexico 87108

Email: [susankarcz@yahoo.com](mailto:suskarcz@yahoo.com)

Region: Metro
Program: Developmental Disabilities Waiver
Survey Type: Quality Assurance/Improvement Plan and Process Review

Dear Ms. Karcz;

The Division of Health Improvement Quality Management Bureau will be completing a review of your agency's required Quality Assurance/Quality Improvement Plan. The purpose of the survey is to determine compliance with federal and state standards; to assure the health, safety, and welfare of individuals receiving services through the Developmental Disabilities (DDSD) Waiver; and to identify opportunities for improvement. The specific focus of this off-site survey is to determine compliance with QMB Tag 1A03, Quality Assurance/Quality Improvement (QA/QI) Plans and the Incident Management Quality Improvement System as well as the requirements in your Provider Agreement with the Developmental Disabilities Supports Division (DDSD).

To ensure your agency's compliance with tracking, trending and measuring the required information in accordance with the DDSD and New Mexico Administrative Code (NMAC) statutes you must supply the following information no later than **October 14, 2011**;

1. Your Agency's full QA/QI Plan which addresses all required items according to the current DDW Standards, DDSD Provider Agreement and New Mexico Administrative Code
2. Evidence of full implementation/compliance of your entire QA/QI Plan. (Process meetings, attendees, agenda, actions stemming from QA/QI Plan, etc.)
3. A narrative describing the following requirements:
 - Data that has been collected and analyzed.
 - How the data will be compiled, how trends will be analyzed and the frequency.
 - How the analyzed data is used to identify opportunities to improve.
 - How the data is used to improve the delivery of services.
 - Method to evaluate if implemented improvements are working.
 - How the required satisfaction surveys are used to improve the delivery of services.



"Assuring safety and quality of care in New Mexico's health facilities and community-based programs."

Division of Health Improvement • Quality Management Bureau
5301 Central Ave. NE, Suite 400 • Albuquerque, New Mexico 87108
(505) 222-8623 • FAX: (505) 222-8661 • <http://dhi.health.state.nm.us>

For additional information on the requirements for a Quality Assurance/Quality Improvement plan please see attachment A, below.

Please send evidence of compliance to the following address: (electronic submission *is* encouraged)

Quality Management Bureau
5301 Central Avenue - Suite 400
Albuquerque, New Mexico 87108
c/o Deputy Bureau Chief
scott.good@state.nm.us

Failure to submit information by the date requested may result in the imposition of a \$200 per day Civil Monetary Penalty until it is received.

Please email me at scott.good@state.nm.us if you have questions about the survey. Thank you for your cooperation and for the work you perform.

Sincerely,

Scott Good, MRC, CRC
Deputy Chief
Quality Management Bureau
Division of Health Improvement

CC: Distribution List: DOH - Division of Health Improvement
DOH - Developmental Disabilities Supports Division
DOH - Office of Internal Audit
HSD - Medical Assistance Division

Attachment A

DDSD DDW Standards Chapter 1.I. (1)-(7) effective date 4/1/2007

- H. Quality Assurance/Quality Improvement Program.** Agencies must develop and maintain an active QA/QI program in order to assure the provision of quality services. This includes the development of a QA/QI plan, data gathering and analysis, and routine meetings to analyze the results of QI activities.
1. Development of a QI plan: The quality management plan is a critical operational feature that an agency utilizes to continually determine whether it operates in accordance with program requirements, regulations, achieves desired outcomes and identifies opportunities for improvement. The quality management plan describes the process of discovery, remediation and improvement. Additionally, it outlines the frequency of those processes, the source and types of information gathered, analyzed and utilized to measure performance. The quality management plan should describe how the data collected will be used to improve the delivery of services and methods to evaluate whether implementation of improvements are working.
 2. Implementing a QI Committee: The QA/QI committee shall convene on at least on a quarterly basis and as needed to review monthly service reports, to identify any deficiencies, trends, patterns or concerns as well as opportunities for quality improvement. The QA meeting shall be documented. The QA review should address at least the following:
 - a. Implementation of the ISP: extent to which services are delivered in accordance with the ISP including the type, scope, amount, duration and frequency specified in the ISP as well as effectiveness of such implementation as indicated by achievement of outcomes;
 - b. Trends in category II and III Significant events;
 - c. Compliance with Caregivers Criminal History Screening Requirements;
 - d. Compliance with DDSD training requirements;
 - e. Trends in reportable incidents; and
 - f. Results of improvement actions taken in previous quarters.

NMAC 7.1.13.9 E.1-4 INCIDENT MANAGEMENT SYSTEM REPORTING REQUIREMENTS FOR COMMUNITY BASED SERVICE PROVIDERS:

E. Quality Improvement System for Community Based Service Providers: The community based service provider shall establish and implement a quality improvement system for reviewing alleged complaints and incidents. The incident management system shall include written documentation of corrective actions taken. The community based service provider shall maintain documented evidence that all alleged violations are thoroughly investigated, and shall take all reasonable steps to prevent further incidents. The community based service provider shall provide the following internal monitoring and facilitating quality improvement system:

- (1) Community based service providers funded through the Developmental Disabilities Services Division to provide waiver services shall have current incident management policy and procedures in place, which comply with the department's current requirements;
- (2) Community based service providers providing developmental disabilities services must have a designated incident management coordinator in place;
- (3) Community based service providers providing services under the disabled & elderly waiver must have current incident management policy and procedures in place, which comply with department's current requirements;
- (4) Community based service providers providing developmental disabilities services must have an incident management committee to address internal and external incident reports for the purpose of looking at internal root causes and to take action on identified trends or issues.

[7.1.13.9 NMAC - N, 02/28/06]

DDSD PROVIDER AGREEMENT - ARTICLE 16. PROGRAM EVALUATIONS

- a. In order to monitor the performance of services and compliance with the provisions of this Provider Agreement by the PROVIDER, employees of the DEPARTMENT or State and Federal agencies which have provided funds under this Provider Agreement, or their duly authorized representatives, shall be allowed to visit without interference or delay the offices and service locations of the PROVIDER to examine the PROVIDER'S operations and records. Client records shall be reviewed in accordance with the ARTICLE 15 DISCLOSURE OF INFORMATION.
- b. The DEPARTMENT shall conduct site visits to any service locations when appropriate. The DEPARTMENT may elect not to provide advance notice of the site visit to the PROVIDER.
- c. The PROVIDER shall provide information and access to copies of records promptly upon request by the DEPARTMENT.
- d. PROVIDER shall have a Quality Management and Improvement Plan in accordance with the current Medically Fragile Waiver Standards and/or the Developmental Disabilities Waiver Standards specified by the DEPARTMENT. The Quality Management and Improvement Plan for DD Waiver Providers must describe how the PROVIDER will determine that each waiver assurance and requirement is met. The applicable assurances and requirements are: (1) level of care determination; (2) service plan; (3) qualified providers; (4) health and welfare; (5) administrative authority; and, (6) financial accountability. For each waiver assurance, this description must include:
 - i. Activities or processes related to discovery, i.e., monitoring and recording the findings. Descriptions of monitoring/oversight activities that occur at the individual and provider level of service delivery. These monitoring activities provide a foundation for Quality Management by generating information that can be aggregated and analyzed to measure the overall system performance;
 - ii. The entities or individuals responsible for conducting the discovery/monitoring processes;
 - iii. The types of information used to measure performance; and,
 - iv. The frequency with which performance is measured.

Date: October 20, 2011
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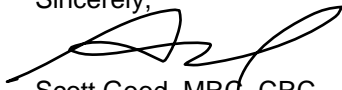
After an extensive review of your QA/QI plan and other documents submitted it has been determined that your plan meets all requirements.

The Survey process is now complete.

To maintain ongoing compliance with Standards and regulations, continue to update and use your Quality Assurance processes. Consistently using these Quality Assurance processes will enable you to identify and promptly respond to problems, enhance your service delivery.

Thank you for your cooperation with the Survey process and for helping to provide for the health, safety and personal growth of the people you serve.

Sincerely,



Scott Good, MRC, CRC
Deputy Chief
Quality Management Bureau
Division of Health Improvement

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