

ICFIID Quality Indicators Review

ICFIID Name _____

ICFIID MPN _____

Review Date _____

Indicators Reviewed _____

Indicators Selected

- ☐ **Quality Indicator 1:**
The ICFIID has developed and implemented a written policy to annually conduct satisfaction surveys for residents of the ICFIID.
- ☐ **Quality Indicator 2:**
The ICFIID has developed and implemented a written policy to ensure individual plans are person-centered.
- ☐ **Quality Indicator 3:**
The ICFIID has developed and implemented a written policy to ensure that each resident has opportunities to experience community integration on a person-centered basis.
- ☐ **Quality Indicator 4:**
The ICFIID has developed and implemented a written policy to ensure all direct care staff successfully complete, on an annual basis, at least one hour of training specific to resident or staff needs that is above and beyond the training required by paragraph (F)(1)(j) of rule 5123:2-3-01 of the Administrative Code. The training may vary among staff.
- ☐ **Quality Indicator 5:**
The ICFIID has developed and implemented a written policy for staff retention that includes measuring staff turnover for the cost report period.

Quality Indicator 1

The ICFIID has developed and implemented a written policy to annually conduct satisfaction surveys for residents of the ICFIID.

Instructions: Select 2 individuals or 20% of facility (whichever is greater).

Individuals Reviewed:

Suggested Documents: Written policy, survey, dates offered to resident/resident advocates, summary of responses, documentation that results were shared with residents/advocates, plan to respond to concerns

- Does this survey address the following? (check all that are addressed):

- ☐ The degree to which a resident feels happy and safe living in the ICFIID
- ☐ Staff interactions
- ☐ The level to which a resident and/or his or her guardian are involved in person-centered planning
- ☐ Community activities
- ☐ Medical Care

- Is the survey completed by or offered to each resident and/or the resident's guardian, family member or advocate? **Yes No**
- Are results summarized and shared with residents/advocates? **Yes No**
- Is there a written plan to respond to any concerns identified by the survey? **Yes No**

Indicator is met: **Yes No** (OAC 5123-7-34 – (D)(1)(a-d))

Notes:

Quality Indicator 2

The ICFIID has developed and implemented a written policy to ensure individual plans are person-centered.

Instructions: Select 2 individuals or 20% of facility (whichever is greater).

Individuals Reviewed:

Suggested Documents: Written policy, written process for obtaining input from residents, guardians and direct care staff, person-centered service plan

- Does the written policy set forth a process of obtaining input from residents, guardians, and direct care staff? **Yes** **No**
- Does the written process address the six essential elements of person-centered planning? (check those included):

- ☐ **Respectful and Empowering**
Plan language is descriptive, respectful, empowering, and uses everyday words that the person, those important to the person, and the providers can easily understand.
- ☐ **Uses a Trauma-Responsive Approach**
Strengths learned through life experiences are identified.
- ☐ **Makes Connections Throughout the Plan**
Important ideas are organized and interwoven.
- ☐ **Detailed and Thorough**
What is important To and Important For the person is specific, detailed, and reflected in outcomes and services.
- ☐ **Clear Outcomes and Experiences**
A person's entire team should understand what the person wants to accomplish and what supports they need to get there.
- ☐ **Clear Description of Services and Supports**
A clear description of services and supports will address the person's needs, achieve their outcomes, and value their choices.

Indicator is met: **Yes** **No** (OAC 5123-7-34 – (D)(2)(a-b))

Notes:

Quality Indicator 3

The ICFIID has developed and implemented a written policy to ensure that each resident has opportunities to experience community integration on a person-centered basis.

Instructions: Select 2 individuals or 20% of facility (whichever is larger).

Individuals Reviewed:

Suggested Documents: Written policy, person-centered plan, activity logs

- The written policy reflects person-centered planning **Yes** **No**
- There is documentation of opportunities given to individuals to experience community integration on a person-centered basis **Yes** **No**

Indicator is met: **Yes** **No** (OAC 5123-7-34 – (D)(3))

Notes:

Quality Indicator 4

The ICFIID has developed and implemented a written policy to ensure all direct care staff successfully complete, on an annual basis, at least one hour of training specific to resident or staff needs that is above and beyond the training required by paragraph (F)(1)(j) of rule 5123:2-3-01 of the Administrative Code. The training may vary among staff.

Instructions: Select 2 individuals or 20% of facility (whichever is greater).

Suggested Documents: Written policy, Annual Training Records

- The ICFIID has records of annual training that is at least one hour which focuses on resident or staff needs above required training **Yes** **No**

Indicator is met: **Yes** **No** (OAC 5123-7-34 – (D)(4))

Notes:

Quality Indicator 5

The ICFIID has developed and implemented a written policy for staff retention that includes measuring staff turnover.

Suggested Documents: Written policy, Staff documents, Documentation including measurement of turnover

- The ICFIID has records of the practices enacted to improve staff retention and evaluate/manage turnover **Yes No**

Indicator is met: **Yes No** (OAC 5123-7-34 – (D)(5))

Notes:

DRAFT

ICFIID Quality Indicators Review

Provider Acknowledgment:

This review has been discussed with the provider.

Provider Signature

Date:

RPS2:

RPS2 Name:

Determination Notification Date:

Reconsideration due:

Reconsideration requested: Yes No

Notes: