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Nevada's APS Quality Assurance Program Process

Aging and Disability Services Division Dena Schmidt, ADSD Administrator Friday, October 16, 2020





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Mission Statement

Our mission is to provide quality assurance oversight of Adult Protective Services and Long-Term Care Ombudsman Program by identifying areas of program improvement and to assist with developing solutions to ensure the highest level of services are provided to Nevadans.

Learning Objectives

- How did Nevada get here? Understanding the steps of developing a QA process.
- Utilizing ACL Voluntary Consensus Guidelines for the State Adult Protective Services system in the creation of the Case File Review Form and Instructions.
- Data to Action! How to turn data obtained from the Case File Review (CFR) forms into meaningful statistics.
- Understanding potential drawbacks to developing a QA process.



Nevada's Adult Protective Services Program Overview

- > July 1st, 2019 Nevada expanded to a full APS program.
 - Added protective services for vulnerable adults from the ages of 18-59 along with services for those 60 years and older.
- Nevada's APS program is administered through Aging and Disability Services Division (ADSD).
 - > Statewide program-
 - Office locations: Las Vegas, Reno, Carson City, and Elko
 - > Providing services to urban, rural, and frontier areas

History of Nevada's Elder Protective Services to Adult Protective Services

1981

Nevada's EPS program started and was housed within the State of Nevada's Medicaid Program. Nevada's EPS
provided
protection services
for those 60- years
and over; except
for Clark County
(Las Vegas area)
which only
provided
protection services
to those 60 years
and over who
received Medicaid
benefits.

July 1, 1999

EPS program was transferred to the Division for Aging Services (currently known as the Division for Aging and Disability services-ADSD).

July 1, 2010

Clark County Senior
Protection Services
turned their program
over to ADSD. The
transition expanded the
EPS program in Las
Vegas from 1 supervisor,
4 social workers, and 3
intake workers to 5
supervisors, 20 social
workers, and a
centralized intake unit
with 9 intake workers.

July 1, 2019

Nevada's EPS program expanded to Adult Protective Services (APS) for vulnerable adults from the ages of 18-59 along with services for those 60 years and older.

ACL Grants

2016 Nevada EPS was awarded the ACL State Grant to Enhance Adult Protective Services

2018 Nevada received ACL State Grant to Enhance Adult Protective Services

2020 Nevada received ACL State Grant to Enhance Adult Protective Services related to Opioid Misuse

NAMRS Data Utilized -

Trends differ between APS and EPS clients

Based on FFY20 Q3 Data

Allegation Type (MAL1)					
NAMRS Code Values	APS		EPS		
Abandonment	5	1%	10	0%	
Abuse	112	32%	458	22%	
Exploitation	47	14%	455	22%	
Isolation	8	2%	51	2%	
Neglect	78	22%	334	16%	
Self-Neglect	97	28%	745	36%	
Totals	347	100%	2053	100%	

Based on FFY20 Q3 Data

Client's Gender (CLT6)						
NAMRS Code Values	APS		EPS			
Female	113	48%	886	60%		
Male	119	51%	579	40%		
Transgender	1	0%	0	0%		
Totals	233	100%	1465	100%		

Improving Data Through NAMRS

- 1. New information available with addition of the following Case Components (added 10/1/2019): ADL Score, IADL Score, Schooling Level
- 2. Expansion of Services options based on feedback from supervisors:
 - Services at start \ Services at Close: Education, employment and training services (added 4/1/20)
 - APS Ancillary Services: APS Food Pantry (added 10/1/20); Transportation Assistance (added 10/1/2019)
 - APS Interagency Collaboration and\or Referral: Developmental Services (added 1/3/20); OCHA (added 1/3/20); VOCA Compensation Application (1/3/20)
- 3. Identified differences in trends between younger population (18 59) and older population (over 60):
 - Marital Status
 - Benefits
 - Mental Health Diagnosis
 - Substitute Decision Maker at Start
 - Substitute Decision Maker at Close
 - Allegations
 - Cohabitation at Start

Understanding the Steps of Developing a QA Process

- > Commitment to quality assurance
- Create process
- > Execute the process
- > Integrate the process in the workflow
- > Measure results and interpret findings
- Share the results with findings and recommendations
- Request feedback and be open to revisions



Commitment to Quality Assurance



> WHY COMMITMENT?

- > Improve services for client's served.
- Accountability for staff and program
- > Policy and program improvements
- Identify service gaps and training needs

Create the Process



- Define standards and goals
- Set policies and procedures
- > Involve program staff
- > Create QA tools

Execute the Process

NEXT STEPS

- Utilize ACT Voluntary Consensus Guidelines
 - > Identify elements to use
 - > Choose how to implement
 - Clearly state expectation of ACL Guidelines

THE PROCESS

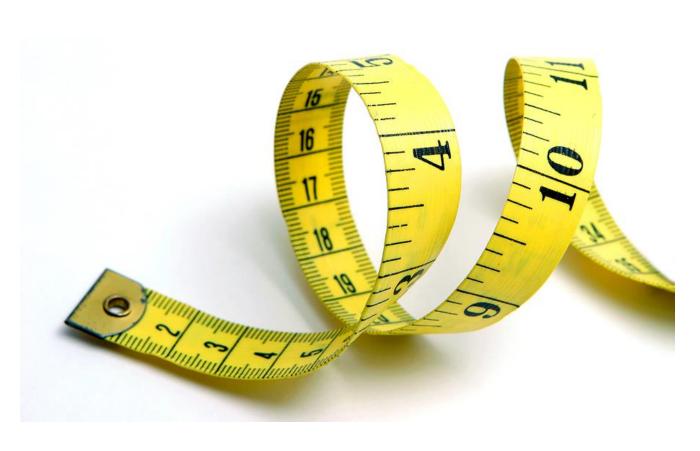
- > Case Review-Supervisory Process
 - QA uses the Case File Review (CFR) form as a tool to address areas of needed improvement and to ensure quality services are provided across the state.
- Case Worker Initial and Ongoing Training
 - > CFR form is used as a tool for supervisors to train new and ongoing staff.

Integrate the Process

- Integrate the process into the works flow
- > Integrate the process in steps
- Organize strategically short and long-term goals
- > Clear timeline of QA process
- > Ensure consistency



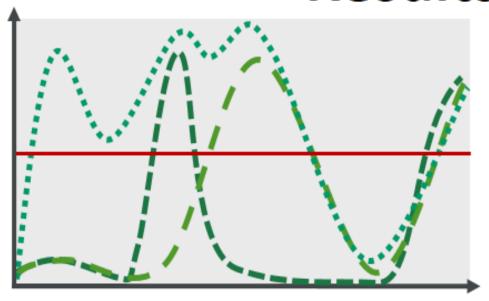
Measure results and interpret findings



- What tracking system will be used?
 - What is available?
 - Does measurement tool need to be created?
- Document the steps to tracking results.
- How do you want to present the data?

Share the results with findings and recommendations

Results



- > Time frames for sharing results
- Mode of sharing results
 - → Email
 - Standing meeting
- > Who receives the results
 - > Management
 - > Supervisors
 - > All program staff
- > How and where to save results



Request – feedback and be open to revisions

Understanding the Potential Drawbacks in Presenting Data

- Time consuming
- Difficultly with commitment
- End result vs. process
- Being accountable for the discovery
- Push back from staff regarding QA process



Nevada's QA Process

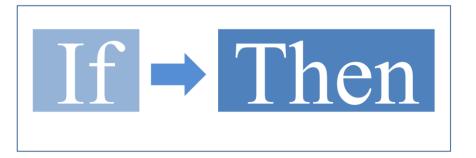


Case File Review Form

AGING AND DISABILITY SERVICES DIVISION: ADULT PROTECTIVE SERVICES- CASE FILE REVIEW FORM

Client Name (First): enter text.	Click or tap here to	Client Name (Last): Click or tap here to enter text. Harmony ID#:		Click or tap here to enter				
Investigator Choose	e an item.:	Reviewer: Choose an item. Review Date: Click or tap to enter a date.		Office: Choose an item.				
Report Date: Click o date.	r tap to enter a	a Case Initiation Date: Click or tap to enter a date. Face to Face A enter a date.		Actual Date:Click or tap to				
Allegation Type:	Abandonment 🗆	Abuse 🗆	Exploitation 🗆	Isolation 🗆	Neglect □ Self-Neglect □			
CLIENT POPULATION					Yes	No	N/A	
Is client under the age of 6o?								
2. If under the age of 60, does client have a diagnosis of ID/DD?								
3. If under the age of 60, does client require assistance with IADL/ADLs?								
INVESTIGATION PLANNING WORKSHEET (IPW)					Yes	No	N/A	
4. IPW completed for case?								
5. Allegations are listed with the reported supporting information underneath?								
6. All sections are completed?								
INITIAL CONTACT					Yes	No	N/A	
7. If assigned a level 1, was the case initiated within 24 hours?								
8. If level 1 was not initiated within 24, is there supporting documentation?								
9. Telephone call placed to the Reporting Party (RP)?								
10. Initial face-to-face visit reattempted within 5 working days of received report?								
ALLEGATION INFORMATION					Yes	No	N/A	
11. Allegations listed appropriate to case?								
12. Subsequent reports are appropriately associated (a.k.a. linked) in Harmony?								

Case File Review Instructions



Safety issues appropriately addressed in Harmony?

How to review this question: Review case notes for any identified safety concerns. Investigators and intake workers are required to document safety issues and concerns in Harmony for EPS (Harmony) by completing an Alert Note. When reviewing case records, Alert Notes should include any risk to personal safety and identify necessary precautions.

Examples:

"Yes", there are safety concerns and there is an Alert Note.

"No", if there are safety concerns stated in intake or during a home visit and there is **not** an Alert Note.

"N/A", if there are not any noted safety concerns during the duration of the case.

Participant's current address listed in Harmony?

How to review this question: Review prior case data and demographic information to ensure accuracy of participant's current address. Case notes may indicate that the client has a different address since the intake was entered. Review participant's address in Harmony under the 'Participants' tab, select 'Alleged Victim', then 'Addresses'.

Examples:

"Yes", participant's current address is listed in Harmony.

"No", participant's current address is **not** listed in Harmony.

Fiscal Year (FY) Quarterly Analysis

Quarterly Case File Review (CFR) Meeting Process

PROCESS

- QA will present ONE Shoutout and FOUR questions to Think About
- > Each CFR question will have review of:
 - > Policy
 - How to review the CFR question and how the question is answered
 - Where the information is in APS Database
 - and of course.... The data!

POLICY REVIEW

 Each CFR question is directed towards policy and/or best practices.

HOW TO ANSWER?

- The Quality Assurance
 Team created CFR
 Instructions.
- The purpose of the instructions:
- To ensure questions are interpreted and answered consistently statewide.

DATABASE LOCATION

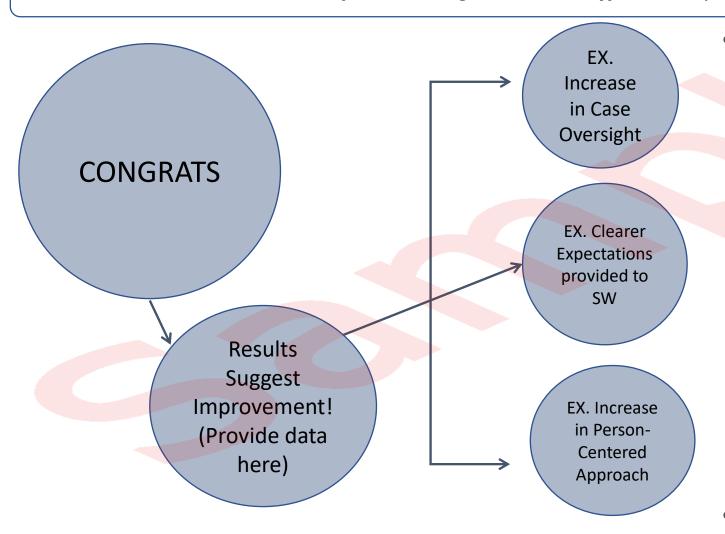
- > Each CFR question reviewed will have:
- Written instructions on where to find the answer within the APS Database.
- A screenshot of where information is available in the APS Database.

DATA

- Findings charts
 reflects the
 percentage of 'Yes'
 answers for ALL
 Applicable cases.
- Data listed to the right of each chart contains the monthly totals of cases reviewed, applicable cases, and cases that did not apply

FY Quarterly Analysis

CFR Question **Example**: Investigator made efforts to speak with client privately?



Person Centered Planning is an approach that places the person at the center of their investigation.

For vulnerable adults who are subjected to abuse, neglect, isolation, abandonment, or financial exploitation as well as those who are selfneglecting, protections must be made available.

Providing person centered services allows for considerations of an adult's needs, goals, preferences, cultural traditions, family situations, and values.

FY Quarterly Analysis

TOP 4 Questions to THINK about

Question # 29: Excluding closure question, is the Missing Data Report free of errors?

Question # 34: Release of information (ROI) note entered into Harmony?



Question # 31:

Documentation/case notes
completed within 3 working days?

Question # 38: Monthly face-to-face visits conducted?

How to Review

CFR Question Shoutout **Example**: *Investigator made efforts to speak with client privately?*



BEST PRACTICES/POLICY





Response Options on CFR Form should be answered as such:

"Yes", the investigator documented efforts to speak to the client privately. (OR)

"No", the investigator did not document efforts to speak to the client privately, i.e. documentation shows that investigator spoke in front of the POI without requesting privacy. (OR)

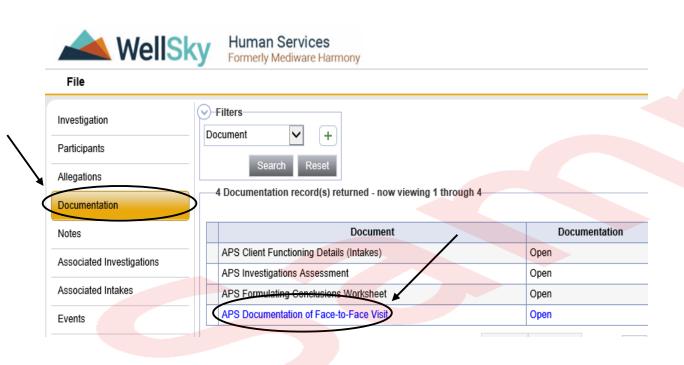
"N/A", the investigator has not met with the client at the time of the case review or the client refused services.

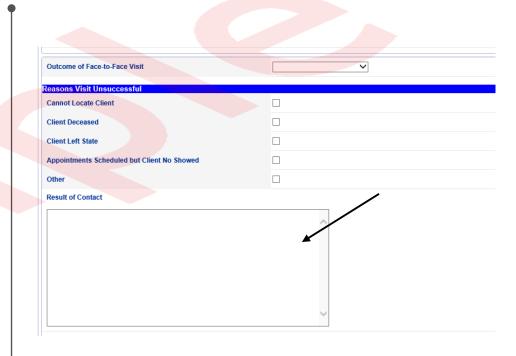


Review in APS Database, under the 'Documentation' section. A Face-to-Face should be conducted that states in the summary if investigator made efforts to speak with the client privately. See example listed on next slide.

Database Location

Question: Investigator made efforts to speak with client privately?





Interpret Findings Example

Question: Investigator made efforts to speak with client privately?



	Total Cases Reviewed	Total Applicable Cases	Total NOT Applicable	
JULY	126	103	23	
AUGUST	114	100	14	
SEPTEMBER	117	87	30	
OCTOBER	115	95	20	
NOVEMBER	109	89	20	
DECEMBER	109	93	16	
JANUARY	0	0	0	
FEBRUARY	0	0	0	
MARCH	0	0	0	
APRIL	0	0	0	
MAY	0	0	0	
JUNE	0	O	o	
TOTAL FY 20	690	567	123	

QA Share the Results

ESTABLISH

- > Time frames sharing results
- > Mode of sharing results
 - > Email
 - > Standing meeting
- > Who receives the results
 - > Supervisors
 - > All program staff
- > How and where to save results
- > Data to Action

KEY FINDINGS

- > No current privacy policy available
- Missing Data Report Errors

STRATEGY RECOMMENDATIONS

- Need for policy
- > Continue to utilize
- > Continue to monitor
- > Update CFR Instructions to provide clarification on

QA Next Steps

COLLABORATE

- QA will present ONE Shoutout and FOUR questions to Think About
- Missing Data Report Errors

IMPROVE

- Continue to identify areas of improvement
- > Be Solution-based
- Increase consistency with data collection process.
- Monitor Under 60 population
- Increase timely feedback provided to program.

PROMOTE

- > Need for policy
- > Continue to utilize
- > Continue to monitor
- Update CFR
 Instructions to provide clarification on

TARGET

- TA Pilot Project-Reviewing
 Substantiation Decisions for
 FY 20 closed cases
- 'New Tools' training for APS provided to Supervisors
- > Review >3 days closed cases
- Continued efforts to assist with training memos
- Assist with COVID-19 updates as needed.



Thank you!

Respectfully,
Nevada APS Quality Assurance Team

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