

Preparation for 90-Day Review

The team will need a quiet, private place to work, with access to the Director, as necessary.

Personnel and Training Records

The following items will be reviewed for personnel and training records:

- ◆ Fill out the “Personnel and Training Checklist” found here <https://dbhddid.ky.gov/1915riseinitiative> for each employee, subcontractor, and volunteer. Please note there are multiple tabs for personnel, training, and College of Direct Supports (CDS), all of which should be filled out.
- ◆ The actual document for each personnel/training requirement will be reviewed for all employees, including the Director:
 - Clear documentation of the date of hire or contractual agreement.
 - Date of independent functioning.
 - Documentation of agency orientation.
 - A signed job description or contract.
 - Credentials for those employees whose job description includes specific educational requirements or related experience (transcripts, licenses, and resumes).
 - Documentation of negative tuberculosis assessment results for each employee, subcontractor, or volunteer dated within the past 12 months, obtained within 30 days of employment.
 - Director and other staff performance evaluations or probationary evaluation if they are required as of this date (if not required, we will review the form you will use for the annual evaluation).
 - Documentation of pre-hire drug test results for all employees, volunteers, and subcontractors.
 - Pre-hire background checks and registry checks for all employees and volunteers, including out-of-state equivalents if the person worked, lived, or volunteered out of state within the past 12 months.
 - Documentation of all trainings required prior to independent functioning for all applicable employees, subcontractors, and volunteers, including CDS competency checklists.
 - If using electronic signatures, we will review the signed consent form, the original filed signature, and anything else required in your policies.

- ◆ Training curricula for all training not obtained from the Department for Behavioral Health, Developmental and Intellectual Disabilities/Adobe Learning Manager (ALM) **and** credentials of all trainers (e.g., nurse's license, College of Direct Support transcript, etc.)

Participant Records

We will review the **individual records for all participants** currently being supported in any service, including, but not limited to:

- ◆ Reviewing **all required documents** per the regulation. You can find the checklists that will be used for case management records and non-case management records here <https://dbhddid.ky.gov/1915iriseinitiative>.
- ◆ Service notes to date.
- ◆ Documentation of training given to each individual on abuse, neglect, exploitation, isolation, and punishment.
- ◆ Documentation of training given to each individual on **emergency disaster training** (if providing a site-based service).
- ◆ Documentation of the **admission and transition process** for all new admissions to your agency.
- ◆ A signed **lease** or legally enforceable agreement for every participant receiving residential supports.
- ◆ Medication administration records.
- ◆ Documentation that supports you have implemented your policy on **monitoring medication administration**.
- ◆ Incident reports and monthly medication error reports to date.

Additional Agency Organizational Requirements

- ◆ Agency should be set up in **MWMA/Therap** and set up with an **ALM** account.
- ◆ Documentation of liability insurance.
- ◆ A **Satisfaction Survey** that you have created to obtain information regarding participants' satisfaction with services. Although this does not need to be completed/filled out for this review, you should be prepared to show that you have utilized that information for your next review.
- ◆ Completed **Evacuation Drill Log** if you utilize service sites, this can be found here <https://dbhddid.ky.gov/1915iriseinitiative> and this should include all types of evacuation drills (fire, severe weather, etc.) that were conducted. This log is to be completed by the agency prior to our arrival and we will need a copy for our records.

- ◆ A copy of **all evacuation/fire drills** conducted since initiating supports. We will need to see the actual completed form (developed by the agency) showing the location of the drill, length of the drill, etc.
- ◆ **Quality Improvement Plan.** We are not talking about your POLICY. We expect to see that the agency is progressing from a policy to a written plan. Reference RISE regulation 907 KAR 16:015 Section 1 (3)(e)5., and your policy and procedure manual for the minimum requirements. You will need to have at least one assessment tool (such as the satisfaction survey) developed and be prepared to explain:
 - What it will be measuring.
 - Who is responsible.
 - Timeframe for implementation.
 - How the results will be used.
- ◆ **A Memorandum of Understanding (MOU)** between the service provider agency and the case management agency providing supports to the participants you support. The MOUs should be signed by the agency Directors. If you provide case management services, you need an MOU with all of the service provider agencies listed on each person's PCSP. If you are providing any other service, you must have a signed MOU with the case management agency providing case management services to each of your participants.
- ◆ Documentation of participation in a Human Rights Committee (**HRC**), as well as a certificate of completion of the HRC orientation for anyone who is attending. Download the orientation and certificate of completion here <https://dbhddid.ky.gov/1915riseinitiative>.
- ◆ A documented list of all new admissions, denials, and terminations.
- ◆ Discuss the agency's plan for recruiting staff, obtaining new admissions and a plan for growth, which adheres to ethical standards. *This does not necessarily have to be written out, but the Director should be prepared to discuss, if not.*
- ◆ If you have a **Board of Directors (Board)**, the following will be needed:
 - Copy of meeting minutes.
 - List of Board members, their roles, and experience.
 - Documentation of orienting new Board members, etc.
 - The name, address, and email address of the Chairman.
- ◆ Make contact with your regional community mental health center Crisis Coordinator and discuss the program and available supports.
- ◆ We will review changes made to the following documents since the pre-service review:

- Policies and procedures, including personnel policies. Be sure to **identify any changes** made since your pre-service review.
- A list of **ALL** of the owners/shareholders/investors/silent partners of the company.
- A statement of mission and values.
- Brochure/website/description of services offered to the public.
- Table of organization. Please identify the names of employees occupying each position.
- Articles of incorporation/organization or business license.
- Business plan and projected budget for the initial six months past the date of certification. Please identify if there have been changes made since your preservice review.
- A **current** financial statement indicating that the agency has sufficient funds to continue operations.

Site Visits

We will conduct site visits for all residential home locations. The checklists for residential site visits can be found at <https://dbhdid.ky.gov/1915iriseinitiative>.

If you have any questions, please contact your Provider Development Specialist or the Quality Administrator working with your agency.