Region V Systems

Network Management Procedures
CARF Standard 11, 16   Revised: RA 9/21/17
206 NAC 4-001.03J-J1

■   **Quality Review & Analysis of Services Procedures**

Standard 11.a. (1)-(3)   Verification of Accreditation & Licensing

Network personnel will conduct an annual review of each Network Provider. As part of this quality review, verification of accreditation and licensing is conducted.

Region V Systems issues and administers contracts with each Network Provider on an annual basis. Contracts include language addressing *Network Provider Duties and Responsibilities* which identifies conformance to accreditation standards and licensing. Following are the requirements listed in the contract:

A.   <u>Accreditation</u>: To receive funds for service delivery, Network Providers must be accredited as appropriate to the organization's mission by one of the following: The Joint Commission (TJC), the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or other nationally recognized accreditation organization(s) approved by the Nebraska Division of Behavioral Health.

The Network Provider shall provide Region V Systems with documentation of accreditation as <u>follows</u>:

1.   A complete copy of the most recent official accreditation report;
2.   Documentation of the most recent official award of accreditation; and
3.   A complete copy of the plan of correction submitted in response to the official accreditation report, if applicable.

B.   <u>Licensing</u>: To receive funds for service delivery, providers must be licensed as appropriate or required by state law/regulations. As such, Network Providers are required to submit to Region V Systems a <u>current</u> copy of the required licenses issued by the Department of Health and Human Services or the applicable local licensing authorities of competent jurisdiction which apply to the program(s).

C.   <u>Certification</u>: Certification does not apply to Region V Systems' Network Providers.

Standard 11.b. (1)-(2) Non-Accredited Providers

All providers in Region V Systems' Provider Network must be nationally accredited, or have a plan to be accredited. If currently not accredited, the provider will be required to have regular onsite quality reviews conducted by the Network so that it can be determined if the provider has the capacity to provide services in accordance with the Network's requirements. During the time an organization is working toward accreditation, it must complete an Accreditation Development Plan to meet the standards for behavioral health services in 206 NAC 6. The Accreditation Development Plan must demonstrate a systematic approach toward achieving accreditation and must include:

1. Policies and procedures to be followed during the accreditation development period including policies and procedures for protecting the life, safety, and rights of consumers served;

2. A quality improvement program which follows the standards set by the national accreditation body which is being sought by the organization (TJC, CARF, COA, or other nationally recognized accreditation organization(s) approved by the Director);

3. A written plan for accomplishing the accreditation. The plan must include the type of accreditation being sought (TJC, CARF, COA, other nationally recognized accreditation organization(s) approved by the Director) that is appropriate to the organization's mission and includes goals, measurable objectives, target dates, person(s) responsible, and deadlines for making application for accreditation and for scheduling accreditation survey; and

4. A report on the results of a self-administered survey following the standards set by the national accreditation body which is being sought by the organization.

5. The organization must submit to the Region a semi-annual written progress report on the implementation of the Accreditation Development Plan.

6. The organization must revise the Accreditation Development Plan on an annual basis to reflect its present situation.

7. The Region must monitor the organization's progress until accreditation is granted.

8. Organizations that are denied accreditation or receive provisional accreditation will:

   1) Be allowed a one-time one-year extension from the date they receive notice from the accrediting body of their accreditation status to become an accredited organization; or

   2) Be required to submit a revised Accreditation Development Plan.

Standard 11.c.Regular Quality Review of Network Providers

As contractually required, Region V Systems monitors, reviews, and performs programmatic, administrative, quality improvement and fiscal accountability and oversight functions on a regular basis with all Network Providers. As a component of this oversight, Region V System annually conducts on-site quality reviews with each of its Network Providers to monitor and review contracted services. (Also see "Site Visit Policy" and "Site Visit Procedures")

Standard 16.a-d.   Review of Services Provided

Network Providers shall conduct a quarterly quality review of services provided and submit these quality review reports to Region V Systems upon completion. This review of records of persons served shall assess quality of services, appropriateness of services, patterns of service utilization, and timeliness of documentation. The representative sampling of records reviewed shall include both current and closed records. Reviews shall be conducted by trained, qualified staff. The review shall be performed by personnel who are not 1) the sole reviewer of the services for which he or she is responsible, 2) solely responsible for the selection of records to be reviewed.

In addition to Network Provider's internal quality review of services process, Network personnel will conduct an annual review of services provided by each Network Provider.

Standard 16.e.   Analysis of Services Provided

Aggregate quality review reports shall be communicated through the CQI Communication Plan and will include performance in relationship to established targets for:

- Quality of services.
- Appropriateness of services.
- Patterns of service utilization.
- Timeliness of documentation
- Trends.
- Actions for improvement.
- Results of improvement plans.
- Necessary education and training of network personnel and participating providers.