TBI Waiver Guidance Document: Assessment, Service Plan and Provider Quality Review

TBI Waiver policy requires each program member to have a service plan that is person-centered with individually identified goals and preferences.

Assessment

Assessment is the first step in service plan development. Based on assessment results, the team identifies needed services and addresses those on the member's Service Plan. All completed assessments must be reviewed with the member and considered in the development of the Person-Centered Service Plan.

The following person-centered assessments are required for initial, six month and annual service plan development.

Title of Assessment	Assessment Purpose	Policy reference
TBIW Program Form- Person-Centered Assessment	Comprehensive tool, which is used to identify the member's abilities, needs, preferences, and supports; determine needed services or resources; and provide a sound basis for developing the Person- Centered Service Plan.	512.13 PERSON-CENTERED ASSESSMENT
Good Day/Bad Day Morning Rituals	Person Centered Discovery Tools designed to have a conversation with the member to find out their routines and what is important to him/her.	 Completed at initial and annual Service Planning meeting
Risk Analysis and Mitigation Plan	A critical step in the assessment process is the comprehensive analysis of risk.	512.14 PERSON-CENTERED SERVICE PLAN DEVELOPMENT
24-Hour Emergency Back Up Plan	To determine how critical services and supports will be provided.	512.14 PERSON-CENTERED SERVICE PLAN DEVELOPMENT

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Service Planning

The case manager is responsible for development of the Person-Centered Service Plan in collaboration with the member. All Service Plans must be developed using a person-centered planning process that addresses health and welfare and long-term services and support needs in a manner that reflects individual preferences and goals.

Participation in the development of the <u>Initial Person-Centered Service Plan</u> is mandatory for the member and case manager. During the initial Service Plan meeting, the case manager, with input from the member, the selected personal attendant service provider and/or resource consultant, will write the personal attendant logs within the Service Plan development.

Participation in the <u>six-month Person-Centered Service Plan and Annual Person-Centered Service Plan</u> development is mandatory for the member, the case manager, and the personal attendant provider agency. The member may choose to have whomever else they wish to participate in the process such as personal attendant professional, family members, other service providers, informal supports, resource consultant (if applicable) etc.

Quality Monitoring of Service Plans

Kepro conducts quality reviews annually with all providers with an enrolled member. The items on the Quality Review tool are reflective of current policy. The following chart represents a cross walk of the program assessment/service planning documents, policy (512.14), and corresponding sections on the review tool. This chart represents how Kepro scores compliance with the review tool items related to Service Plan requirements. Providers can use this chart when conducting internal reviews, training with case managers, or responding to Plan of Correction.

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Item on the Quality Review Tool	Where Information Is Located on Assessment	Where to Include Information on Service Plan
2A - Detail of all services are in the member's Service Plan including Service Type, Provider of Service and Frequency	Pages 7-8 - #8-Goals and Current Resources (Formal Support section)	Page 6 - #3-Risk Reduction Page 9 - Summary page of the Service plan
2B - Informal Supports that provide assistance are documented in the member's Service Plan	Pages 7-8 - #8-Goals and Current Resources (Informal Support section)	Pages 7 & 8 - Informal Supports
2C - Social needs are addressed in the member's Service Plan	Page 5 - #5-Social Needs (Member Preferences)	 Page 2 #1-Personal Preferences: What would you like for your personal attendant to do for you? Page 6 #2 Are there any things you prefer the Personal Attendant NOT do for you? #3-Risk Reduction (List Social Needs)
2D – Emotional needs are addressed in the member's Service Plan	Page 5 - #6-Emotional Needs	Page 6 - #3-Risk Reduction (List Emotional Needs)
2E - Educational needs are addressed in the member's Service Plan	Page 6 - #7 -Educational Information	Page 8 -School Information
2F - Medical needs are addressed in the member's Service Plan	Pages 2-3 - #3 -Medical Needs Page 9 - #10-Medical Equipment Needs Pages 10-11 - #11-Risk Assessment	Page 6 - #3-Risk Reduction (List Medical Needs)
2G - Service Plan contains reference to any other services regardless of source of payment.	Page 9 - Additional Identified Needs	Page 11 - Additional Services
2H - Crisis/backup plan for the following events: Disruption in Personal Attendant Services, natural disasters and weather conditions was completed	Use the 24 Hour Emergency Back Up Plan	Pages 8-10 - Section specifically for Emergency Plans.