



**NEW JERSEY
DEPARTMENT OF HUMAN SERVICES**

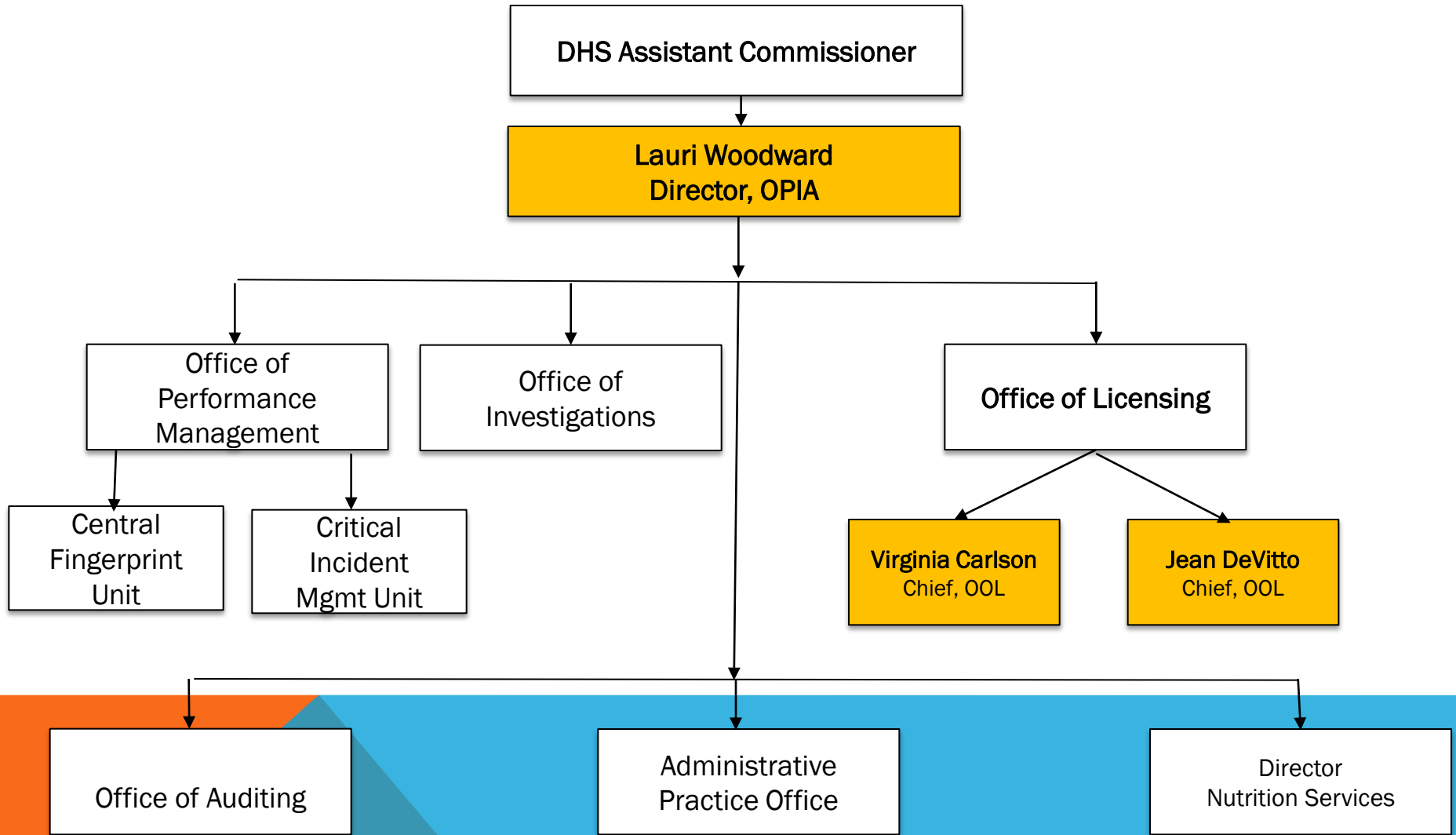
OFFICE OF PROGRAM INTEGRITY AND ACCOUNTABILITY

RISK MANAGEMENT SYSTEM

SEPTEMBER 2015

2015 NARA LICENSING SEMINAR

NEW JERSEY DEPARTMENT OF HUMAN SERVICES
Office of Program Integrity and Accountability



PRESENTATION OBJECTIVES

Overview of :

- **New Jersey Department of Human Services (NJDHS), Office of Program Integrity and Accountability (OPIA)**
- **NJDHS Risk Management System**
- **Critical domains and minimum thresholds in areas of health, safety, well-being, and fiscal integrity**
- **Risk Management Council process**

WHAT IS THE OPIA RISK MANAGEMENT SYSTEM?

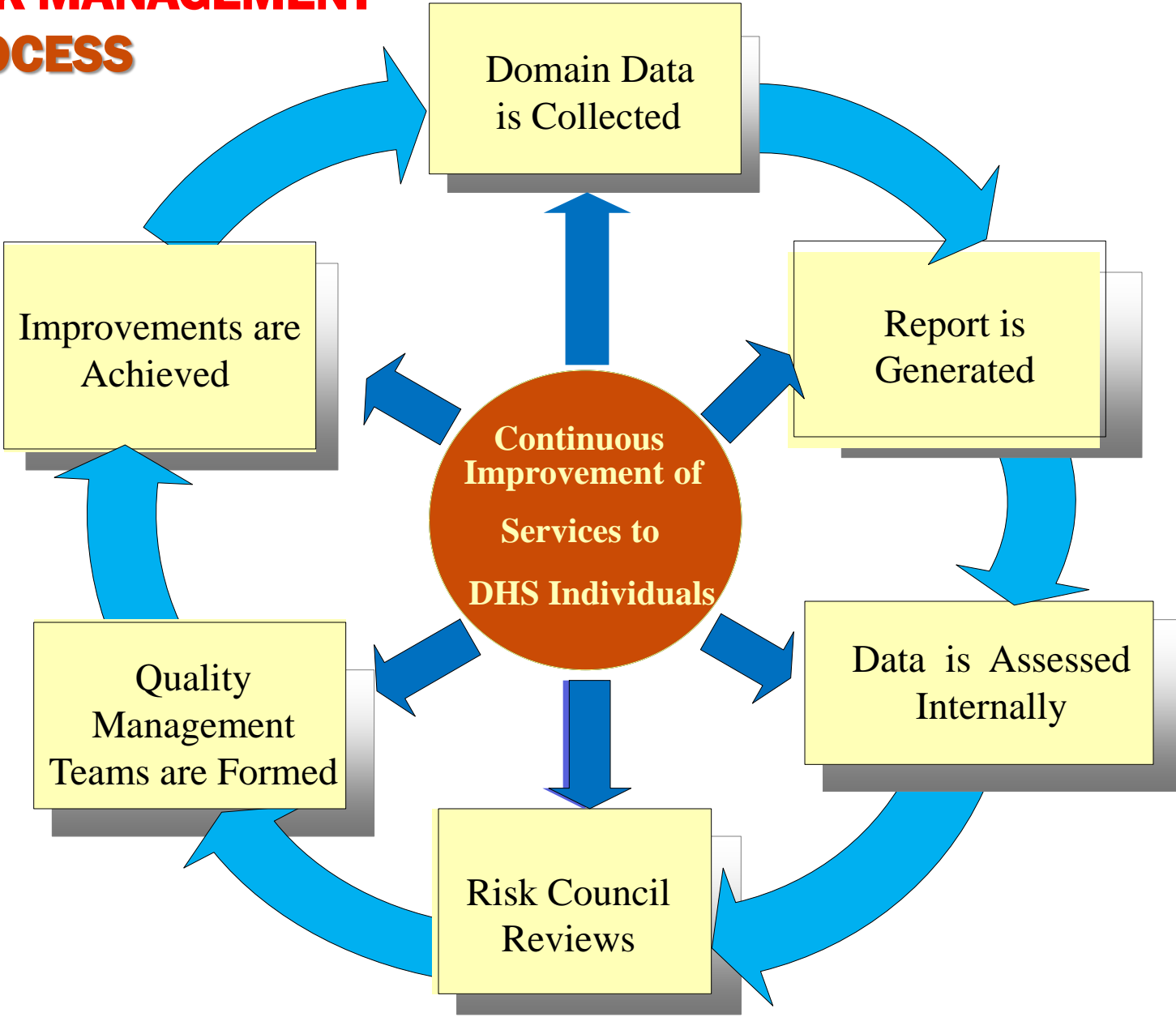
- **Systems approach to managing risk**
- **Data driven**
- **Consistent with CMS quality framework**
- **Best Practice**
- **Collaborative stakeholder partnership**

WHAT CAN IT DO?

- **Dispel myths**
- **Identify systemic problems**
- **Organize the way we look at data**
- **Present snapshots of agency performance**
- **Provide data to support decision making**
- **Support and refine quality improvement efforts**



RISK MANAGEMENT PROCESS



SYSTEM'S QUALITY DOMAINS AND INDICATORS

Incident reporting & management

- Unusual incident reporting
- Unusual incident reporting timeliness
- Investigation report submission

Abuse/neglect investigation

- Substantiated investigations
- Repeat victims

Inspection & program review

- Provisional licenses
- Multiple provisional licenses

Financial audits

- Audit submission
- Deficit fund balance



OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, April 01, 2014 And Wednesday, April 01, 2015

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/Neglect Investigation			Financial Audits		
	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provisional Licenses		Multiple Provisional Licenses	Unusual Incident Reporting Timeliness		Failure to Submit Invtn Rpts	Substantiated Investigations		Repeat Victims	Audit Submission	Deficit Fund Balance	
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	No	Yes	
Indicator Operational Definition	(These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)													
Agency	Maximum # of individual who can reside at an agency	Tier (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were provisional	% Of sites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mths of period	% of missing reports compared to those due	Number of incidents which SRU investigated	% of incidents SRU substantiated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance	
												Gray fields indicate no involvement		Thresholds Triggered:

Tier 1 (LRC of 101 or more)

ADVOSEV OF NEW JERSEY INC	424	Tier 1	52			1.5	1.6	1.5%	23	3		Yes	No	0
ALLIES INC	211	Tier 1	61			2.5	2.2		8	4		Yes	No	0
ALTERNATIVES INC	113	Tier 1	25	4.0%		2.1	1.9	1.0%	9			Yes	No	0
BANCROFT NEUROHEALTH	407	Tier 1	62			3.1	4.0	5.4%	31	9		Yes	No	1
COMMUNITY OPTIONS INC	294	Tier 1	100	3.0%		3.3	4.2	2.4%	19	7		Yes	No	1
DEVEREUX FOUNDATION	254	Tier 1	57	10.5%	2	4.2	1.9	2.4%	28	8		Yes	No	3
ENABLE	67	Tier 2	2	50.0%		2.1	2.1		8	4	1	Yes	No	2
HEART TO HEART HOME CARE	74	Tier 2	12	83.3%	1	6.0	1.9		5	4	1	No	No	5
HUNTERDON ARC	86	Tier 2	25			10.7	8.2	62.5%	2			No	No	3
NEW HORIZON'S IN AUTISM	51	Tier 2	13			1.2	1.0	50.0%	2	2		No	No	2
ADVANCING OPPORTUNITIES, INC.	47	Tier 3	20	65.0%	3	5.0	6.6	15.7%	13	4		Yes	No	3
AMIB INC	50	Tier 3	10			3.5	4.4		2			Yes	No	1
MIDLAND ADULT SERVICES	29	Tier 3	6			1.2	1.0	40%				Yes	No	1
PENNREACH	29	Tier 3	7			3.7	0.7	6.7%	3			Yes	No	1

OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, April 01, 2014 And Wednesday, April 01, 2015

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/Neglect Investigation			Financial Audits	
	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provisional Licenses	Multiple Provisional Licenses		Unusual Incident Reporting Timeliness		Failure to Submit Invign Rpts	Substantiated Investigations		Repeat Victims	Audit Submission	Deficit Fund Balance
Quality Indicator	N/A	N/A	N/A	10%	1 _r	3.0	N/A	30%	N/A	N/A	1	No	Yes
Threshold	N/A	N/A	N/A	10%	1 _r	3.0	N/A	30%	N/A	N/A	1	No	Yes
Indicator Operational Definition	Maximum # of individual who can reside at an agency	Tier (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were provisional	% Of sites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investigated	% of incidents SRU substantiated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance
Agency												Gray fields indicate no involvement	Thresholds Triggered

Tier 1 (LRC of 101 or more)

ADVOSERV OF NEW JERSEY INC	424	Tier 1	52			1.5	1.6	1.5%	23	3		Yes	No	0
ALLIES INC	211	Tier 1	61			2.5	2.2		8	4		Yes	No	0
ALTERNATIVES INC	113	Tier 1	25	4.0%		2.1	1.9	1.0%	9			Yes	No	0
BANCROFT NEUROHEALTH	407	Tier 1	62			3.1	4.0	5.4%	31	9		Yes	No	1
COMMUNITY OPTIONS INC	294	Tier 1	100	3.0%		3.3	4.2	2.4%	19	7		Yes	No	1
DEVEREUX FOUNDATION	254	Tier 1	57	10.5%	2	4.2	1.9	2.4%	28	8		Yes	No	3
ENABLE	67	Tier 2	2	50.0%		2.1	2.1		8	4	1	Yes	No	2
HEART TO HEART HOME CARE	74	Tier 2	12	83.3%	1	6.0	1.9		5	4	1	No	No	5
HUNTERDON ARC	86	Tier 2	25			10.7	8.2	62.5%	2			No	No	3
NEW HORIZON'S IN AUTISM	51	Tier 2	13			1.2	1.0	50.0%	2	2		No	No	2
ADVANCING OPPORTUNITIES, INC.	47	Tier 3	20	65.0%	3	5.0	6.6	15.7%	13	4		Yes	No	3
AMIB INC	50	Tier 3	10			3.5	4.4		2			Yes	No	1
MIDLAND ADULT SERVICES	29	Tier 3	6			1.2	1.0	40%				Yes	No	1
PENNREACH	29	Tier 3	7			3.7	0.7	6.7%	3			Yes	No	1

OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, April 01, 2014 And Wednesday, April 01, 2015

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/Neglect Investigation		Financial Audits		
	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provisional Licenses	Multiple Provisional Licenses	Unusual Incident Reporting Timeliness	Failure to Submit Invtn Rpts	Substantiated Investigations	Repeat Victims	Audit Submission	Deficit Fund Balance			
Quality Indicator	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	No	Yes
Threshold	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	No	Yes
Indicator Operational Definition	Maximum # of individual who can reside at an agency	Tier (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were provisional	% Of sites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investigated	% of incidents SRU substantiated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance
Agency												Gray fields indicate no involvement	Thresholds Triggered

Tier 1 (LRC of 101 or more)

Agency	LRC	Tier	Provisional Licenses	% of licenses that were provisional	Multiple Provisional Licenses	Unusual Incident Reporting Timeliness	Avg for last 3 mnths of period	% of missing reports compared to those due	Substantiated Investigations	Repeat Victims	Audit Submission	Deficit Fund Balance	Thresholds Triggered	
ADVOSEV OF NEW JERSEY INC	424	Tier 1	52			1.5	1.6	1.5%	23	3	Yes	No	0	
ALLIES INC	211	Tier 1	61			2.5	2.2		8	4	Yes	No	0	
ALTERNATIVES INC	113	Tier 1	25	4.0%		2.1	1.9	1.0%	9		Yes	No	0	
BANCROFT NEUROHEALTH	407	Tier 1	62			3.1	4.0	5.4%	31	9	Yes	No	1	
COMMUNITY OPTIONS INC	294	Tier 1	100	3.0%		3.3	4.2	2.4%	19	7	Yes	No	1	
DEVEREUX FOUNDATION	254	Tier 1	57	10.5%	2	4.2	1.9	2.4%	28	8	Yes	No	3	
ENABLE	67	Tier 2	2	50.0%		2.1	2.1		8	4	1	Yes	No	2
HEART TO HEART HOME CARE	74	Tier 2	12	83.3%	1	6.0	1.9		5	4	1	No	No	5
HUNTERDON ARC	86	Tier 2	25			10.7	8.2	62.5%	2		No	No	3	
NEW HORIZON'S IN AUTISM	51	Tier 2	13			1.2	1.0	50.0%	2	2	No	No	2	
ADVANCING OPPORTUNITIES, INC.	47	Tier 3	20	65.0%	3	5.0	6.6	15.7%	13	4	Yes	No	3	
AMIB INC	50	Tier 3	10			3.5	4.4		2		Yes	No	1	
MIDLAND ADULT SERVICES	29	Tier 3	6			1.2	1.0	40%			Yes	No	1	
PENNREACH	29	Tier 3	7			3.7	0.7	6.7%	3		Yes	No	1	

OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, April 01, 2014 And Wednesday, April 01, 2015

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/Neglect Investigation		Financial Audits		
	Licensed Residential Capacity (LRC)	Size of agency based on LRC	Provisional Licenses	Multiple Provisional Licenses	Unusual Incident Reporting Timeliness	Failure to Submit Invtn Rpts	Substantiated Investigations	Repeat Victims	Audit Submission	Deficit Fund Balance			
Quality Indicator													
Threshold	N/A	N/A	N/A	10%	1 _r	3.0	N/A	30%	N/A	N/A	1	No	Yes
Indicator Operational Definition <i>(These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)</i>	Maximum # of individual who can reside at an agency	Tier (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)	Number of licenses issued*	% of licenses that were provisional	% Of sites which had more than one provisional license	Average # of days between date known to staff and date reported	Avg for last 3 mnths of period	% of missing reports compared to those due	Number of incidents which SRU investigated	% of incidents SRU substantiated	Number of SRs who were involved in 2 or more substantiated SRU invstgns	Agency submitted an audit	Agency's audit identified a deficit fund balance
Agency	Gray fields indicate no involvement											Thresholds Triggered	

Tier 1 (LRC of 101 or more)

ADVOSEV OF NEW JERSEY INC	424	Tier 1	52			1.5	1.6	1.5%	23	3		Yes	No	0
ALLIES INC	211	Tier 1	61			2.5	2.2		8	4		Yes	No	0
ALTERNATIVES INC	113	Tier 1	25	4.0%		2.1	1.9	1.0%	9			Yes	No	0
BANCROFT NEUROHEALTH	407	Tier 1	62			3.1	4.0	5.4%	31	9		Yes	No	1
COMMUNITY OPTIONS INC	294	Tier 1	100	3.0%		3.3	4.2	2.4%	19	7		Yes	No	1
DEVEREUX FOUNDATION	254	Tier 1	57	10.5%	2	4.2	1.9	2.4%	28	8		Yes	No	3
ENABLE	67	Tier 2	2	50.0%		2.1	2.1		8	4	1	Yes	No	2
HEART TO HEART HOME CARE	74	Tier 2	12	83.3%	1	6.0	1.9		5	4	1	No	No	5
HUNTERDON ARC	86	Tier 2	25			10.7	8.2	62.5%	2			No	No	3
NEW HORIZON'S IN AUTISM	51	Tier 2	13			1.2	1.0	50.0%	2	2		No	No	2
ADVANCING OPPORTUNITIES, INC.	47	Tier 3	20	65.0%	3	5.0	6.6	15.7%	13	4		Yes	No	3
AMIB INC	50	Tier 3	10			3.5	4.4		2			Yes	No	1
MIDLAND ADULT SERVICES	29	Tier 3	6			1.2	1.0	40%				Yes	No	1
PENNREACH	29	Tier 3	7			3.7	0.7	6.7%	3			Yes	No	1

OPIA Risk Management System

Risk Indicator Report - DDD Community

Report on Data Collected Between

Tuesday, April 01, 2014 And Wednesday, April 01, 2015

Quality Domain	Inspection and Program Review					Incident Reporting and Management			Abuse/Neglect Investigation			Financial Audits		
<i>Quality Indicator</i>	<i>Licensed Residential Capacity (LRC)</i>	<i>Size of agency based on LRC</i>	<i>Provisional Licenses</i>		<i>Multiple Provisional Licenses</i>	<i>Unusual Incident Reporting Timeliness</i>		<i>Failure to Submit Invtrgn Rpts</i>	<i>Substantiated Investigations</i>		<i>Repeat Victims</i>	<i>Audit Submission</i>	<i>Deficit Fund Balance</i>	
<i>Threshold</i>	N/A	N/A	N/A	10%	1	3.0	N/A	30%	N/A	N/A	1	No	Yes	
<i>Indicator Operational Definition</i> <small>(These values represent data captured during the entire 12-month period and reflect the status of the agency during that timeframe only)</small>	<i>Maximum # of individual who can reside at an agency</i>	<i>Tier (101 or more), TIER 2 (51 to 100), TIER 3 (1 to 50), TIER 4 (0)</i>	<i>Number of licenses issued*</i>	<i>% of licenses that were provisional</i>	<i>% Of sites which had more than one provisional license</i>	<i>Average # of days between date known to staff and date reported</i>	<i>Avg for last 3 mnths of period</i>	<i>% of missing reports compared to those due</i>	<i>Number of incidents which SRU investigated</i>	<i>% of incidents SRU substantiated</i>	<i>Number of SRs who were involved in 2 or more substantiated SRU invstgns</i>	<i>Agency submitted an audit</i>	<i>Agency's audit identified a deficit fund balance</i>	
<i>Agency</i>												<small>Gray fields indicate no involvement</small>	<small>Thresholds Triggered:</small>	
Tier 1 (LRC of 101 or more)														
ADVOSEV OF NEW JERSEY INC	424	Tier 1	52			1.5	1.6	1.5%	23	3		Yes	No	0
ALLIES INC	211	Tier 1	61			2.5	2.2		8	4		Yes	No	0
ALTERNATIVES INC	113	Tier 1	25	4.0%		2.1	1.9	1.0%	9			Yes	No	0
BANCROFT NEUROHEALTH	407	Tier 1	62			3.1	4.0	5.4%	31	9		Yes	No	1
COMMUNITY OPTIONS INC	294	Tier 1	100	3.0%		3.3	4.2	2.4%	19	7		Yes	No	1
DEVEREUX FOUNDATION	254	Tier 1	57	10.5%	2	4.2	1.9	2.4%	28	8		Yes	No	3
ENABLE	67	Tier 2	2	50.0%		2.1	2.1		8	4	1	Yes	No	2
HEART TO HEART HOME CARE	74	Tier 2	12	83.3%	1	6.0	1.9		5	4	1	No	No	5
HUNTERDON ARC	86	Tier 2	25			10.7	8.2	62.5%	2			No	No	3
NEW HORIZON'S IN AUTISM	51	Tier 2	13			1.2	1.0	50.0%	2	2		No	No	2
ADVANCING OPPORTUNITIES, INC.	47	Tier 3	20	65.0%	3	5.0	6.6	15.7%	13	4		Yes	No	3
AMIB INC	50	Tier 3	10			3.5	4.4		2			Yes	No	1
MIDLAND ADULT SERVICES	29	Tier 3	6			1.2	1.0	40%				Yes	No	1
PENNREACH	29	Tier 3	7			3.7	0.7	6.7%	3			Yes	No	1

RISK MANAGEMENT COUNCIL

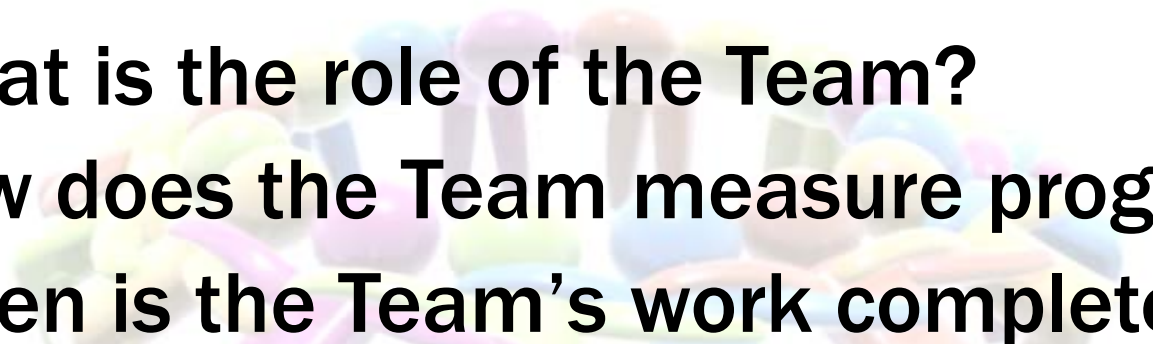
Once the Risk Indicator Report is disseminated and analyzed, the next level of action is convening an OPIA Council on Systemic Risk Assessment. The Council provides an executive level review of the Risk Indicator Report.

The OPIA Council on Systemic Risk Assessment:

- Focuses and aligns the activities of the participants who are responsible for performing risk management functions.
- Improves the ability to identify and reduce risk to individuals and the service delivery system.
- Creates a partnership with those contracted providers to improve delivery of services.
- Improves the processes and systems which are responsible for creating the data.
- Recommends the formation of a quality management team to provide technical assistance, training and resolution to the providers.



QUALITY MANAGEMENT TEAM

- **Who is on the Team?**
 - **What is the role of the Team?**
 - **How does the Team measure progress?**
 - **When is the Team's work completed?**
- 

FIRST FOUR YEARS OF IMPLEMENTATION

Threshold	1st Year	4th Year
Number of agencies participating	200	250 +
Number of agency teams	--	22
Measuring 3 or more domain thresholds	29	5
Missing Reports to Critical Incident Management Unit	21	3
Agency UIR Reporting Timeliness	85	44
Number of SRs involved in 3 or more alleged critical incidents	15	10
Multiple Provisional Licenses	15	8
Missing Audit Submission	31	25
Deficit Fund Balance	10	17

OUTCOMES

- **Accountability**
- **Quality Improvement**
- **Transparency**
- **Support to Divisions and Providers**
- **Collaborative Partnerships**
- **Proactive Systems Approach**
- **Data Driven Process Improvement**



NEXT STEPS

Expansion of the Risk Management System

Full inclusion of mental health providers

Full inclusion of substance use disorder providers

QUESTIONS?

Lauri.Woodward@dhs.state.nj.us

Jean.DeVitto@dhs.state.nj.us

Virginia.Carlson@dhs.state.nj.us