



Beatrice State Developmental Center Quality Improvement

While each of the five Intermediate Care Facilities (ICFs) on the BSDC campus has its own internal quality and compliance functions, BSDC has a Quality Improvement Team that operates independently of the five ICFs. The Division developed this team to ensure the long-term sustainability of the progress at BSDC. Additionally, the BSDC Human Legal Rights Committee falls under the same chain of command, working in concert with the Compliance and Training Teams.

Compliance/General Quality Improvement

The Quality Improvement Team is led by the Compliance Team Manager and has three areas of focus: regulatory compliance, incident management, and medical services.

The regulatory compliance area is staffed with five Compliance Specialists, one assigned to each ICF. The Compliance Specialists have extensive training in the rules and regulations for ICFs for both the State of Nebraska and for CMS Title XIX. The Compliance Specialists know the rules, understand how to interpret the rules, know how they apply to everyday tasks, and they are able to coach and mentor the direct support staff to ensure they are providing the best support under these guidelines. When the Compliance Specialists are not teaching, they serve as internal auditors and conduct regular surveys on campus using self-audit tools. The results of the mock-audits are tracked and analyzed. Then Action Plans are written and completed as part of the quality improvement process.

The Quality Improvement Team has developed monitoring tools to assess all areas and levels of supports provided in the ICFs. The Compliance Specialists conduct monthly audits of the ICF to which they are assigned. They then provide feedback to ICF Administrators so that improvements can be made timely.

On a quarterly basis, the Compliance Specialists audit their respective ICFs. On a rotating basis, Specialists audit each other's ICFs, ensuring each ICF gets reviewed routinely by a "fresh set of eyes." The quarterly audit is part of the QI plan for each ICF. The quarterly audits are then compared with the monthly audits to ensure the consistency and quality of the team's work product.

The Incident Management Team consists of two Statistical Analysts and one Compliance Specialist, who analyze all reported incidents to:

- determine root cause(s), preventability, trends, and patterns at the home, ICF and agency levels
- tracks, trends and monitors all Action Plans developed from investigations of abuse/neglect or incidents that impact the health of safety of individuals.

The team also recommends changes in policy and procedures or processes and facilitates communicating these issues to appropriate decision makers for disposition.

The Medical QI team consists of two Registered Nurses who monitor, track, and trend medical indicators, conduct clinical peer reviews, and complete supplemental auditing of medication aides.

The BSDC Quality Improvement Plan consists of 71 quality indicators that are monitored on a quarterly or annual basis by the BSDC Quality Improvement committee. Each department also has a quality plan that is monitored at the department level. The quality indicators were selected after a review of regulatory requirements and discussions with each department. QI indicators are added, deleted, or modified based on current and historical data. The data for each quality indicator are summarized and reported quarterly to the QI committee. The Quality Improvement Committee identifies trends, patterns, or areas of concern, and these are brought to the QI Meeting and discussed. SMART (Specific, Measurable, Attainable, Realistic, and Timely) Action Plans are created to address identified concerns. Each quarter, Action Plans are reassessed to ensure that progress is made, certification is sustained, and support excellence is provided to each individual living on the BSDC campus. *A copy of the fourth quarter QI executive summary herein Appendix S and the QI Dashboard are attached herein Appendix T.*

Human Legal Rights and Advocacy

The Human Legal Rights Committee is responsible for ensuring that individuals living at BSDC are afforded basic human rights and that their legal rights are not restricted without appropriate review (as required by state and federal regulations). The Committee consists of behavior support and training experts, members of the parent/guardian groups, community members, and professionals in the developmental disabilities field such as Direct Support Professionals, Home Leaders, and Qualified Developmental Disabilities Professional (QDDP).

A significant rights restriction in an ICF environment is the use of physical, chemical, and mechanical restraints. BSDC has diligently worked to reduce restraints since 2007, and the HLRC team has played an integral role in this effort. HLRC has partnered with the Quality Improvement and Training Teams and Behavior Support Team to work with staff all across the BSDC campus to create a culture that values the people living at BSDC as individuals and focuses on person-centered practices and positive behavioral supports. Statistical data related to restraint usage at BSDC are included herein.

The HLRC Coordinator also leads an advocacy group on campus, consisting of individuals who live at BSDC. The group provides a formalized avenue for individuals to express concerns and provide input for consideration on facility practices and policies. This position also works with individuals to support them in developing self-advocacy skills.

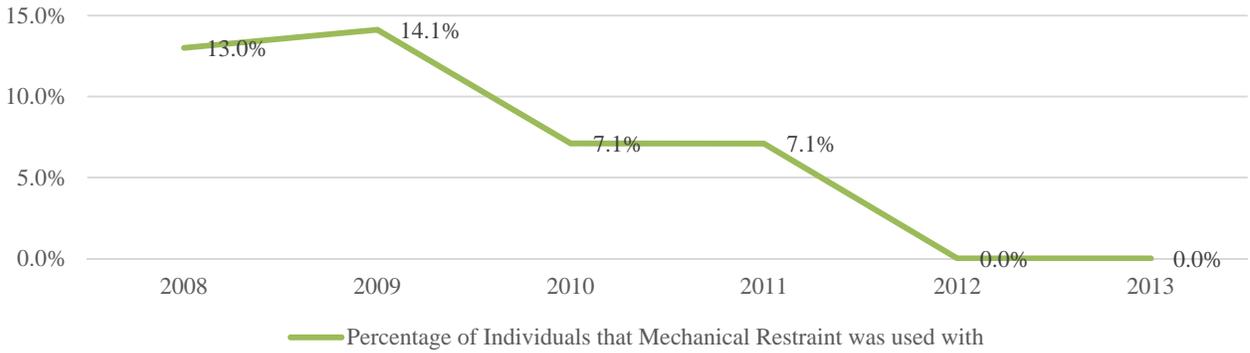
Mechanical Restraint Usage at BSDC

Time Period	1Q13	2Q13	3Q13	4Q13
Average Daily Census	132	129	126	126
# People who used mechanical restraint	0	0	0	0
% People who used mechanical restraint	0%	0%	0%	0%
# of Instances of Mechanical restraint Use	0	0	0	0
Average instances based on total census	0	0	0	0
Average instances for those who used Mechanical restraint	0	0	0	0
Total minutes in mechanical Restraint	0	0	0	0
Average minutes based on total census	0	0	0	0
Average minutes for those who used Mechanical restraints	0	0	0	0

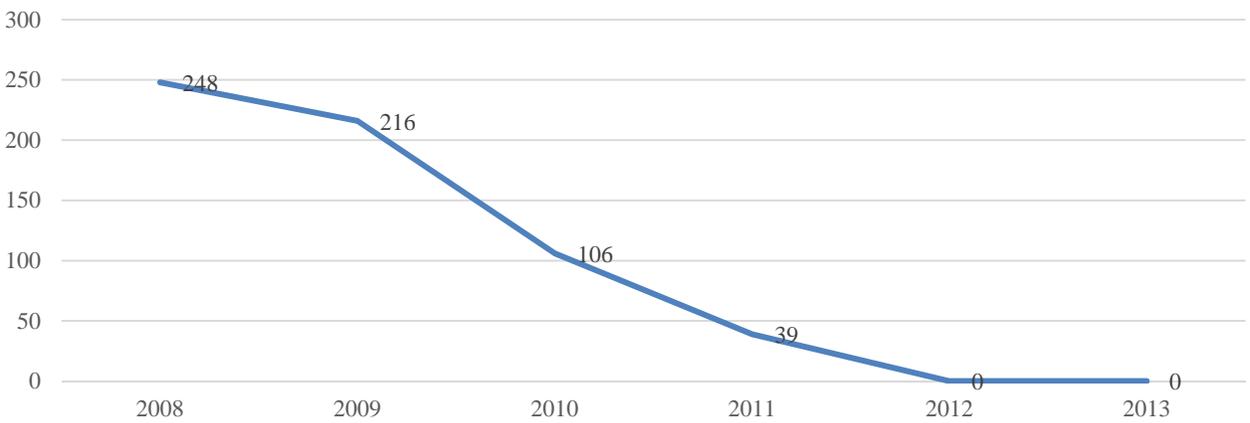
Physical Restraint Usage at BSDC

Time Period	1Q13	2Q13	3Q13	4Q13
Average Daily Census	132	129	126	126
# People who used Restraints	6	2	3	1
% People who used Restraints	4.5%	1.6%	2.4%	0.8%
# of Instances of Restraint Use	9	11	11	8
Average instances based on total census	.06	.08	.08	.06
Average instances for those who used restraints	1.5	5.5	3.6	8
Total minutes in Restraints	20	44	57	67
Average minutes based on total census	.15	.34	.45	.53
Average minutes for those who used restraints	3.3	22	19	67

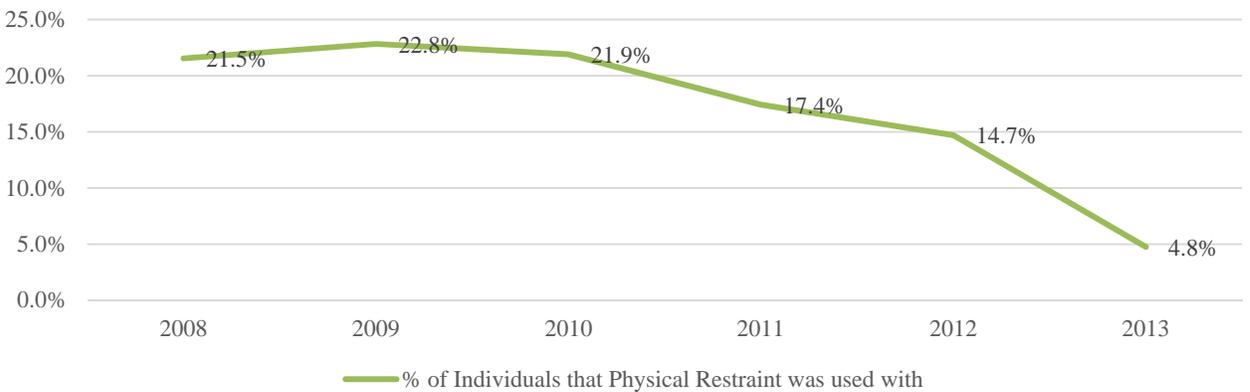
Percentage of Individuals with whom Mechanical Restraint was used



Total Number of Incidents of Mechanical Restraint



Percentage of Individuals with whom Physical Restraint was Used



Physical Restraint Incidents

