



September 24, 2021

Patrick J. O'Donnell, Clerk of the Legislature
Clerk of the Legislature
State Capitol, Room 2018
Lincoln, NE 68509-4604

RE: Annual Report per Neb. Rev. Stat. §83-1216.01

Dear Mr. O'Donnell,

Per Neb. Rev. Stat. §83-1216.01 and pursuant to requirements set forth in Section 8 of LB333 (2017), the Division of Developmental Disabilities is required to submit an annual report beginning on or before September 30, 2021. This report outlines some of the Division's improvement priorities, and activities during the previous fiscal year since submitting the last Quality Management Strategy (QMS) report in September 2020.

In the prior state fiscal year, the Division created a public website that is dedicated to quality assurance activities. We continue to expand and build upon this site, and are beginning to publically post our quality data. The webpage can be accessed at: <https://dhhs.ne.gov/Pages/DD-Quality-Assurance.aspx>

The Division has once again executed a contract with Munroe-Meyer Institute (MMI) to conduct National Core Indicators (NCI) surveys for participants utilizing DD services. This is an in-person survey conducted with the person receiving services or their proxy (if applicable). This survey yields invaluable data about the satisfaction of the persons receiving DD services, as well as identifies areas in which the system can be improved. The 2021-2022 contract also includes additional funding for MMI to build a public, interactive dashboard for the NCI data, which will allow the information to be disseminated even more broadly. The most recent NCI Survey report results were released this summer and can be reviewed at nationalcoreindicators.org.

The Division continued to make progress on its systems for incident reporting. The Division's Quality Team began conducting an ongoing, focused review of all submitted incident reports with an "abuse or neglect suspected" indicator. This review was put into place to more closely monitor incidents that could be a result of abuse, neglect, or exploitation (A/N/E) by examining these particular incidents in near-real-time. These reviews occur in two phases. The first phase involves a daily review of all incidents marked with the "abuse or neglect suspected" indicator. This first phase is intended to be a triage to address any immediate concerns with the incident. The second phase is a weekly meeting with other staff to discuss all A/N/E incidents and assign further follow-up (when needed). These incidents are also reviewed a third time in order to ensure that the investigation/follow-up was completed.

Also in the last fiscal year, the Division implemented a policy introducing clear requirements for acceptable Emergency Safety Intervention (ESI) Systems. This policy affords the Division increased oversight of ESI systems used by Agency Providers and necessitates an approach that is clinically sound with heightened focus on safety. Included in the policy is specific criteria that all ESI systems must include, and requires currently-certified DD Agency providers to submit copies of the Agency Policies/Procedures relating to use of ESI as well as the ESI system curriculum, which are subsequently reviewed by the Division's Clinical Team. The Division also now requires any Agencies certified after the date of the provider bulletin to have their chosen ESI system reviewed and approved by the Division prior to certification issuance.

Lastly, the Division is looking forward to continuing efforts to enhance the quality management systems in the upcoming year. As noted in previous annual reports, the Division was seeking a certified Quality Improvement Organization (QIO) to assist with the enhancement of a quality management strategic plan. This contract was fully executed with Liberty Healthcare Inc., in January 2021. They immediately began their work with three initial priorities: (1) Mortality Review Committee, (2) Critical incident management and (3) Provide recommendations for an overall quality framework to begin implementing. This important partnership provides the Division with the resources and support to further our development of policies and procedures, data management and reporting, staff training, and other aspects of the Quality Management Strategy. The QIO includes a comprehensive and robust pathway to person-centered service design, enhanced quality of services, increased oversight of critical aspects of health and safety and is bolstered by transparency and availability of data.

The Division will continue to work through the Quality Management Strategy priorities and regularly report to the Governor's Advisory Committee on Developmental Disabilities as required in NE Rev Statute 83-1216.01 (1)(a) to keep them apprised of the progress.

Sincerely,



Tony Green, Director
Division of Developmental Disabilities
Department of Health and Human Services