
ROLE of the QIDP

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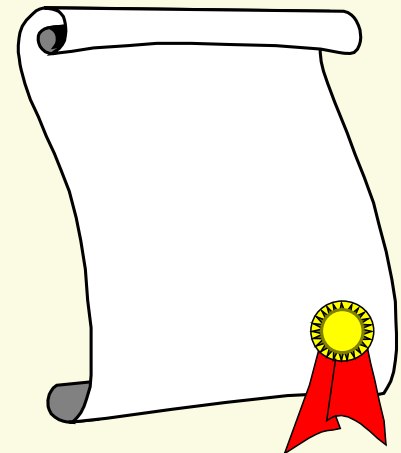
*“View the person serving in this role as **pivotal** to the adequacy of the program the individual receives, since it is the role that is intended to ensure that the individual receives those services and interventions necessary by competent persons capable of delivering them. The paramount importance of having persons competent to **judge and supervise active treatment issues cannot be overstated.**”*



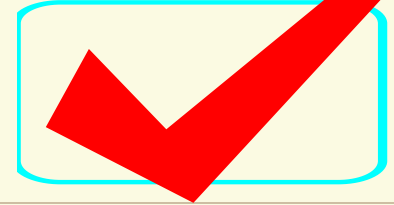
Contract Requirements:

Requires an **approval letter** from the Department of Developmental Services.
Requires **one-year experience** with the Mentally Retarded and/or the Developmentally Disabled.

(W 160)



Please Note:



The QIDP **must** be one of the following:

A doctor of medicine osteopathy, a registered nurse or an individual who holds at least a Bachelor's degree in a professional category

(**W 180** – Human Services Professional – must have at least a degree in a human services field (including, but not limited to sociology, special education, rehabilitation, counseling and psychology.) and be licensed, certified, or registered, as applicable, to provide professional services by the State in which he/she practices.)

Role: (In Relation to the Requirements)

W 120 – The facility must assure that outside services meet the needs of each client.

*Is there a relationship among the objectives, data, techniques, etc., within the programs or services delivered?

*Does the facility periodically observe services that are provided by the outside resources?

*Is there a system in place to facilitate open communication between the facility and the day programs/schools?

W 123 – The facility must inform each client, parent or legal guardian, of the client's rights and the rules of the facility.

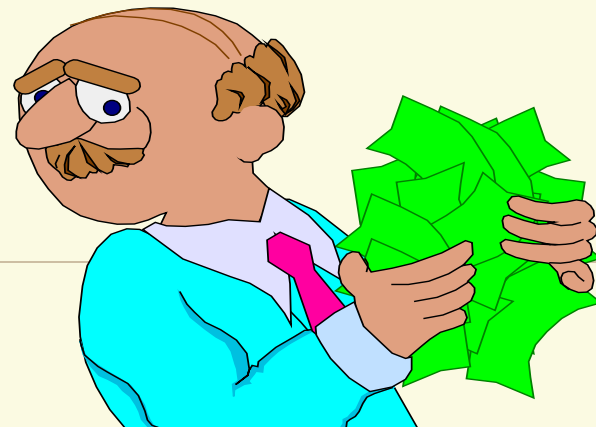
*Have client's participated in the formation of the rules of the facility?

*What manner of assistance is provided once a decision is made that an individual has a need for advocacy, guardianship, or protective services?

*Are rights and rules of the facility posted and or discussed?



W 126

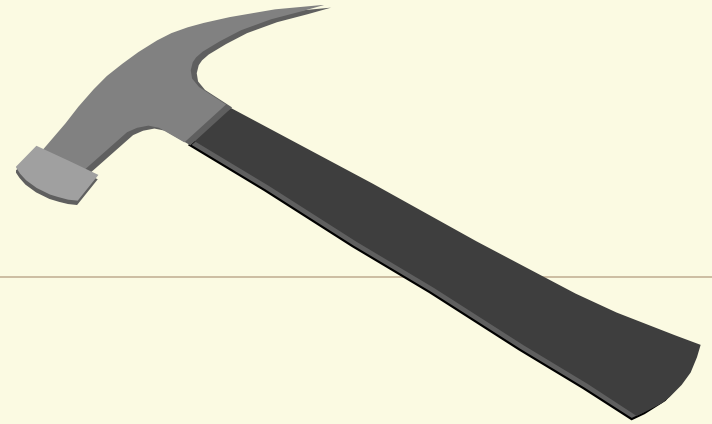


The facility must allow individual clients to manage their financial affairs and teach them to do so to the extent of their capabilities.

*

Do individuals have opportunities to hold and manage their own money to the maximum extent of their capabilities or has the facility demonstrated, based on the objective data, that the individual was unable to be taught how to use money before the decision was made to restrict that right?

W 128



The facility must ensure that clients are free from unnecessary drugs and physical restraints and are provided active treatment to reduce dependency on drugs and physical restraints.

***The use of all drugs and physical restraints is based on individual need.**

***The presenting problem cannot be addressed by other means and must include an active treatment program, which includes mechanisms to reduce dependency on drugs and restraints.**

(Based on the individual needs of the client.)

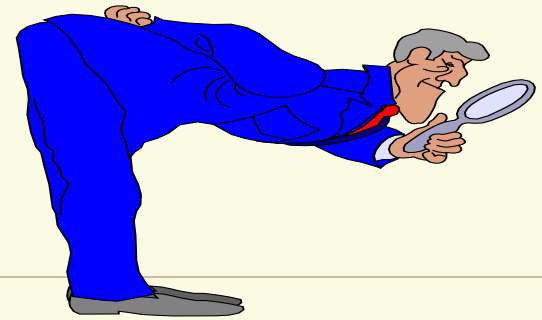
W 137



The facility must ensure that clients have the right to retain and use appropriate personal possessions and clothing.

*Does each individual's active treatment program maximize opportunities for choice and self-direction with regard to choosing and shopping for clothing which enhances his/her appearance, and selecting daily clothing in accordance with age, sex and cultural norms.

W 140



The facility must assure a full and complete accounting of client's personal funds entrusted to the facility on behalf of the client.

*How are funds held? What is the facility system for accountability? Is there a policy and procedure developed for all staff to follow?

*Is there an Individual Program Plan which incorporates how the facility will assist each client with spending, saving and the overall management of their funds?

W 142

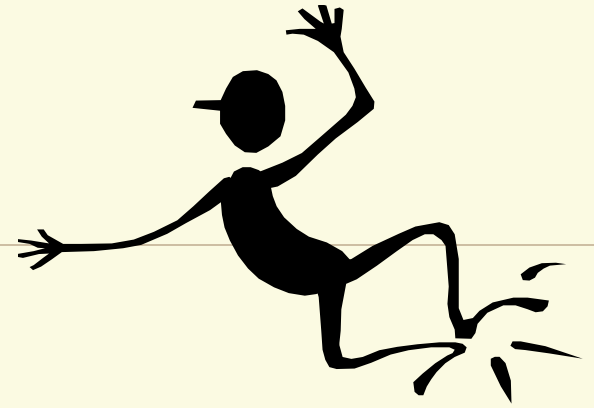


The facility must ensure the client's financial record is available on request to the client

(Parent, or Legal Guardian, if agreed by client).

Does the facility have a policy and procedure for the provision of providing confidential financial information to the client, parents or legal guardians?

W 143



The facility must promote the participation of parents and legal guardians in the process of providing active treatment to a client unless their participation is unobtainable or inappropriate.

How is the facility promoting participation? Is the parent/legal guardian invited to the Individual Program Plan meeting? Are they advised of changes to the plan?

W 159

Each client's "Active Treatment" program must be integrated, coordinated and monitored by the QIDP.

*What is the system for monitoring and coordination of the Individual Program Plans? Does the QIDP observe the client during the implementation of the plan and visit the day programs/work sites or schools?

*Is there consistency between the internal (Facility) and external (Outside Services) programs and data collection?

*Does the QIDP ensure environmental supports, assistive devices, outside services (including transportation and safety), equipment and written program plans are present and utilized.

*What is the provision for "***promoting independence?***"

Please note:

ICF/DD-H regulations - Title 22 - 76860 (a) (9) - directs the QMRP to document monthly progress notes.

W 166

Professional Program Staff must work directly with paraprofessionals and other program staff who work with the client.

****What is the system for **assessment, evaluation and communication**?***

****Does the staff have the qualifications, training and skills needed to be able to support the interventions as written in the Individual Program Plans?***

****Is ongoing training provided to clients and DCS for the individual program plans by professional program staff?***

W 167

The facility must have available *enough* qualified professional staff to carry out and monitor the various professional interventions in accordance with the stated goals and objectives of every (all) individual program plans.

- *Are there *sufficient* professional staff employed to implement the program plans, as developed?
- *Is the professional staff available to *monitor, train and implement* the developed plans?
- *Does the professional staff *review* and *revise* the program plans, as needed?
- *Does the **QIDP** support the Direct Care Staff (DCS) in the implementation of the Individual Program Plans?

W 168



Professional program staff must participate as members of the *Interdisciplinary Team* in relevant aspects of the active treatment program.

*Are services available when they are of the most benefit to the individual client?

*Is each individual program plan *reviewed, discussed, revised and implemented*, as necessary?

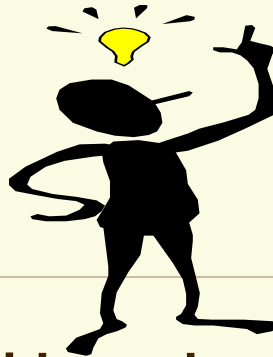
W 169

Professional program staff must participate in on-going staff development and training, in both formal and informal settings with other professional and paraprofessional staff members.

*Are all professional staff able to provide evidence of continuing education and aware of current developments in their field?

*Have the DCS been trained to provide individual program plans as developed?

W 189



The facility must provide each employee with initial and ongoing training that enables the employee to perform his/her duties effectively, efficiently, and competently.

- *Has all professional staff received training (initial and ongoing) which ensure competency with their job performance?
- *Are orientation/skills checklists complete and are in-service records up to date?
- *Does the staff-training program reflect the basic needs of the individuals served within the program?
- *Do observations of staff interactions with individuals reveal that staff know how to alter their own behaviors to match needs and learning style of individuals served within the program?

W 193



The facility staff must demonstrate the skills and the techniques necessary to administer interventions to manage inappropriate behavior of clients.

Does staff have the knowledge to correctly and consistently implement the intervention techniques specified in the behavior plans of all clients with whom they are working?

W 194

The facility staff must be able to demonstrate the skills and the techniques necessary to implement the individual program plans for each client for whom they are responsible.

*Does staff have the knowledge to correctly and consistently implement the specific program plans for all clients with whom they are working?

*Is additional training needed?



W 196

Each client must receive a continuous active treatment program, which includes aggressive, consistent implementation of a specialized and generic training program, treatment, and health and related services.

- *Are staff directed by the QIDP to provide ongoing training programs as identified in the Individual Program Plans and collect data for measurement of success and review? Do the IDT meet to review and revise the IPP as needed?
- *Does each client have an assessment of their strengths and needs and addressing major life areas?
- *Are new skills are encouraged and reinforced?
- *Are client routines and the environments organized to facilitate acquisition of skills, appropriate behavior, greater independence and choice?

W 206

The facility must provide an Individual Program Plan developed by the IDT that represents the professions, disciplines or service areas to assess client needs for services.

*Is the IDT composed of those individuals (professionals, paraprofessionals and non-professionals) who possess the knowledge, skills and expertise necessary to accurately identify the comprehensive array of the individual's needs and design a program plan which is responsive to those needs?

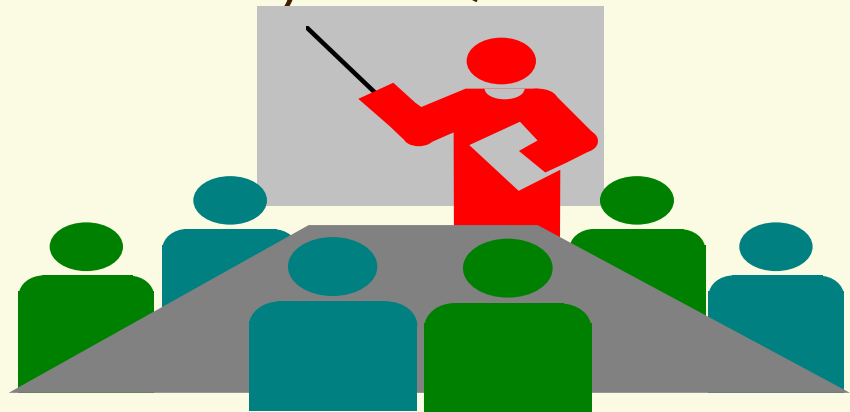
*Is the facility making every effort to coordinate the Individual Education Plan (IEP) or program plan from an outside day program with the IPP process – (integration of the IPP across various settings.)

W 207

Appropriate facility staff must participate in IDT meetings.

*Are meetings scheduled and conducted to facilitate the participation of all members of the team?

*Are these meeting coordinated by the QIDP?



W 210

Within 30 days after admission, the IDT must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission.

*Are new admissions assessed or reassessed within 30 days?

*Does the assessment identify the functional abilities of the client?

*Does the assessment ensure the accuracy of the assessment information?

W 211

The Comprehensive Functional Assessment (CFA) must take into consideration the client's age and the implications for active treatment at each stage, as applicable.

Do assessments address areas and active treatment needs, which are relevant to the chronological age of the client?

W 212

The CFA identifies the presenting problems and disabilities and where possible, their causes.

Are assessments based on accurate data and all diagnoses are based on relevant, objective and accurate data?

Are diagnoses modified as accurate, relevant and updated as medical or other professional information becomes available?

W 213

The CFA identifies the client's specific developmental strengths.

*Are the client's individual preferences, methods of coping/compensation, friendships and positive attributes described (documented) in functional terms in assessments?

*Are the identified strengths current, complete and consistent with the individuals observed functional status?

W 214

The CFA identifies the client's specific developmental and behavioral management needs.

*Have the client's individual needs, skill deficits and functional limitations been clearly described in functional terms in the assessments?

*Are the identified needs are current, accurate, complete and do they reflect the individuals observed functional status?

W 215

The CFA identifies the client's needs for services without regard to the actual availability of the services needed.

*Are the needed services based on the CFA?

*Are recommendations present to address areas of deficits?

W 216

The CFA includes physical development and health.

CFA

W 217 – The CFA includes nutritional status.

W 218 – The CFA includes sensorimotor development.

W 219 – The CFA includes affective development.

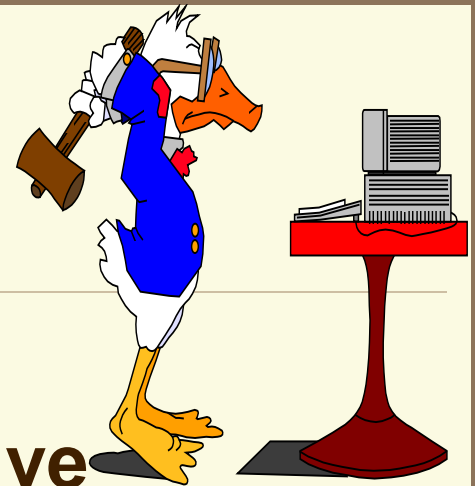
W 220 – The CFA includes speech and language development.

W 221 – The CFA includes auditory functioning.

W 222 – The CFA includes cognitive development.

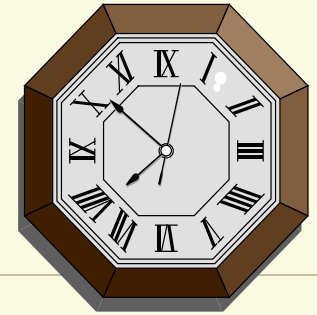
W 223 – The CFA includes social development.

CFA



W 224 – The CFA includes adaptive behaviors or independent living skills necessary for the client to be able to function in the community.

W 225 – The CFA includes vocational skills, as applicable.



W 226

The IDT must (within thirty days after admission) prepare an individual Program Plan (IPP).

W 227 – The IPP states the specific objectives necessary to meet the client's needs, as identified by the CFA.

*Does the IPP list all specific objectives based on needs identified in the CFA?

*Is there a clear link between the specific objectives and the functional assessment data and recommendations?

*Are the objectives “learner-oriented”?

W 228

The IPP objectives state a planned sequence for dealing with those objectives.

*Is there a logical order?

*Are the objectives organized in a sequence relevant to the individual's long term development?

W 229

The IPP objectives must be stated in terms of single behavioral outcomes.

Is each objective clearly stating ONE expected learning result?

W 230

The IPP objectives are assigned projected completion dates.

Is the completion date based on the individual client's rate of learning?

W 231

The IPP objectives must be expressed in behavioral terms that provide measurable indications of performance.

*Are the learning outcomes stated in a manner, which enables all staff working with the individual to consistently identify the target behavior and to clearly identify when it is being displayed?

*Are objectives stated in a manner, which permits them to be quantifiably measured?

W 232

The IPP objectives must be organized to reflect a developmental progression appropriate to the individual.

*Are objectives and criteria for success based on the individual's current and baseline functional abilities?

*Are objectives individualized to take into consideration the individuals abilities and disabilities?

*Are objectives organized to begin with the next logical step, given the individual's current functioning, and move toward more complex behaviors?

W 233

The IPP objectives must be assigned priorities.

Written Training Programs

W 234 – Each written training program designed to implement the objectives in the individual program plan must specify the methods to be used.

W 235 - Each written training program designed to implement the objectives in the individual program plan must specify the schedule for use of the method.

W 236 - Each written training program designed to implement the objectives in the individual program plan must specify the person responsible for the program.

Written Training Programs

W 237 - Each written training program designed to implement the objectives in the individual program plan must specify the type and frequency of the data collection necessary to be able to assess progress toward the desired objectives.

W 238 - Each written training program designed to implement the objectives in the individual program plan must specify the inappropriate behavior of the client, if applicable.

W 239 - Each written training program designed to implement the objectives in the individual program plan must specify provisions for the appropriate expression of behavior and the replacement of inappropriate behavior, if applicable, with behavior, that is adaptive or appropriate.

W 240

The IPP must describe relevant interventions to support the individual toward independence.

W 241

The IPP must identify the location where program strategy information can be found.

W 242

The IPP must include training in personal skills essential for privacy and independence – toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming and communication.

*Do all individuals lacking in these skills have skill programs developed and designed to meet their needs?

*Are these programs implemented in both formal and informal settings?

*Is there documentation of consistent, appropriate attempts to teach individuals these skills, or specific evidence as to a medical condition, which would preclude acquisition, prior to determination of developmental incapability?

Program Documentation

W 252 – Program documentation must include data relative to the accomplishments of the criteria specified in the IPP objectives – must be in measurable terms.

W 253 – The facility must document significant events that are related to the client's individual program plan and assessments.

W 254 - The facility must document significant events that are related to the client's individual program plan and assessment and contributes to an overall understanding of the client's ongoing level and quality of functioning.

IPP

W 255 – The IPP must be reviewed and revised (QMRP), as necessary, including, but not limited to situations in which the client has successfully completed an objective or objectives identified in the IPP.

W 256 - The IPP must be reviewed and revised (QMRP), as necessary, including, but not limited to situations in which the client is regressing or losing skills already gained.

W 257 - The IPP must be reviewed and revised (QMRP), as necessary, including, but not limited to situations in which the client is failing to progress toward identified objectives after reasonable efforts have been made.

W 258 - The IPP must be reviewed and revised (QMRP), as necessary, including, but not limited to situations in which the client is failing to progress toward identified objectives after reasonable efforts have been made OR is being considered towards new objectives.

CFA , IPP, and HRC

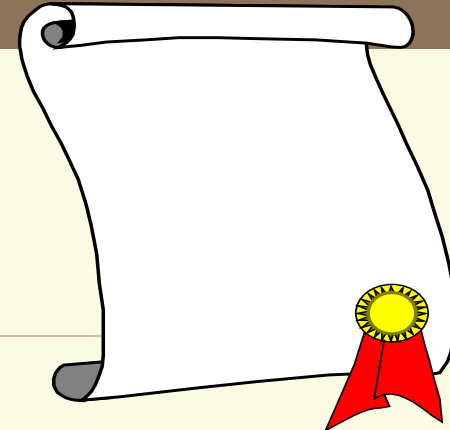
W 259 – At least annually, the CFA must be reviewed by the IDT for relevancy and updated as needed.

W 260 – The IPP must be reviewed, as appropriate.

W 262 – The Human Rights Committee must review, approve and monitor individual programs designed to manage the inappropriate behavior and other programs involving risks to client protections and rights.

W 263 – Ensure these programs (W 262) are conducted only with the written informed consent of the client, parents, or legal guardians.

Policies and Procedures



W 267 – The facility must develop written *policies and procedures* for the management of conduct between staff and clients.

W 273 – Clients must not discipline other clients, except as part of an organized system of self-government.

W 289 – The use of *systematic interventions* to manage inappropriate client behavior must be incorporated into the client's individual program plan.

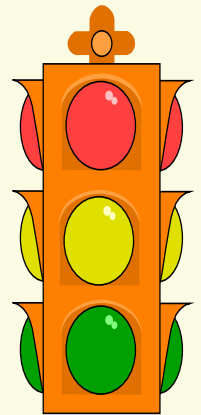
*Are all behavior interventions/supports part of the IPP?

*Is there a complete description of the behavior occurring and evidence to show that as inappropriate behaviors diminish, desired, appropriate behaviors increased?

W 435

The facility must provide *sufficient space and equipment* in dining, living, health services, recreation and program plans to enable staff to provide clients with needed services.

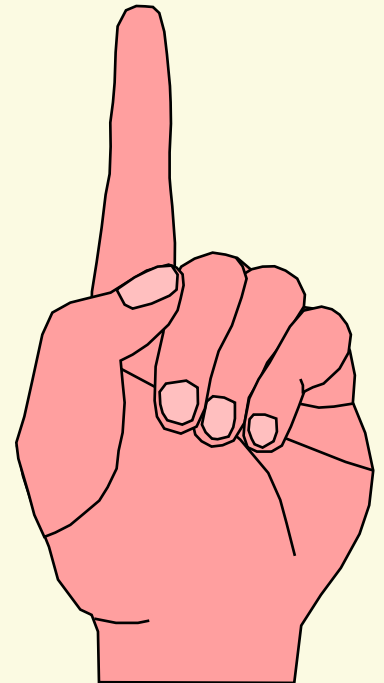
- *Space?
- *Equipment?
- *Materials available to reflect the chronological age?



W 436

The facility must furnish, maintain in good order and teach clients to make informed choices about the use of *dentures, eyeglasses, hearing and other communication aide, braces and other devices.*

- *Adaptive equipment? (Plates, Spoons, Cups, Walkers)
- *Supports? (Glasses, Hearing Aides)
- *Prosthetics? (Artificial Legs, Braces, Dentures)
- *Mobility Aids? (Wheelchairs)
- *All equipment is in good repair – functional batteries?



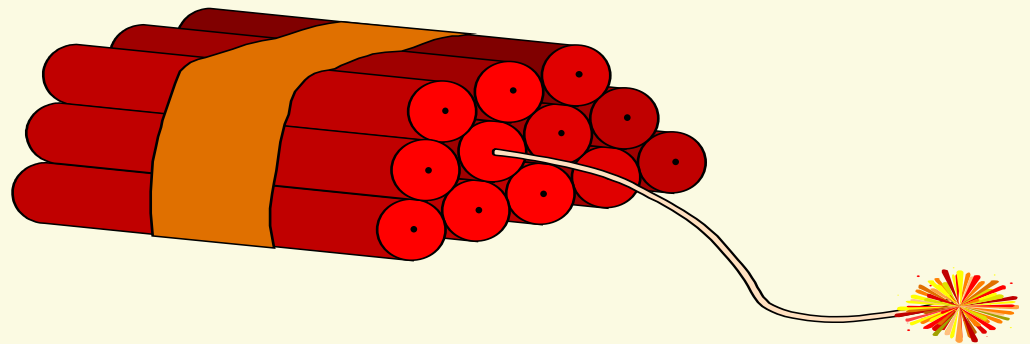
W 438

The facility must develop and implement written detailed *plans and procedures* to meet all potential emergencies and disasters such as fire, severe weather, and missing clients.

*Emergency plans must exist?

*Do “Emergency” drills occur as necessary?

*Are Emergency drill “problems” assessed and has corrective action been taken?



W 439

The facility must communicate, periodically review, make a plan available, and provide training to the staff.

*Have all staff been trained to follow the plan and are in-service records available for review?

*Have plans been reviewed as conditions changed in the facility?



THE END

Please Note:

*This presentation was designed to provide an overview of the role of the **QIDP**. It is the responsibility of the **IDT** to work together and share roles and responsibilities. Therefore “sufficient staffing” requirements are not discussed within this role.*