

## Pennsylvania Office of Developmental Programs

### Quality Assessment & Improvement (QA&I) Cycle 2, Year 2 (C2Y2) Questions Tool for SCOs

#### Overview of the QA&I Process

*The mission of the Office of Developmental Programs (ODP) is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice, and opportunity in their lives.*

*ODP's vision is to continuously improve an effective system of accessible services and supports that are flexible, innovative, and person-centered.*

*The QA&I Process is a way for ODP to evaluate our current system and identify ways to improve it for all individuals to have a life that meets the Everyday Lives Values in Action principles.*

#### General Instructions

- 1. In preparation for completing the QA&I Tool, all relevant materials regarding the QA&I Process that are posted on the MyODP Training & Resource Center at <https://www.myodp.org> should be reviewed.*
- 2. Please send inquiries regarding the questions asked in the tool or the QA&I Process to the QA&I Process mailbox at [RA-PWQAIProcess@pa.gov](mailto:RA-PWQAIProcess@pa.gov).*
- 3. If an unreported incident is discovered during the QA&I Process, the incident must be immediately reported in the Enterprise Incident Management (EIM) system according to Incident Management procedures. The AE, SCO and Provider shall ensure the health and welfare of individuals at all times. If any entity determines there is an imminent threat to the health and welfare of the individual, immediate steps should be taken to ensure the health and welfare of the individual and the appropriate regional ODP office should be contacted. Based on circumstances, the entity shall proceed according to the policy established in [ODP Bulletin #00-21-02](#) (effective 7/1/21), Incident Management and as determined appropriate by the regional ODP office.*

## Tool Completion Instructions

*The following guidelines are intended to help a user complete this tool successfully:*

- 1. Prior to responding to a question, the guidance and source documents must be reviewed to understand the requirements and expectations of the topical area(s).*
- 2. The review period for the entity is the 12 months preceding the date of the review unless otherwise specified in the guidance. When counting back 12 months, always start at the 1st day of the month. The first day an entity begins their review establishes the 12-month time frame for the review period. For example, the entity begins their review on August 15, 2023, questions would be answered based on a start date of August 1, 2022, to July 31, 2023.*
- 3. When applicable, shared source documents are listed first followed by those that are specific to the Intellectual Disability/Autism (ID/A) waivers or the Adult Autism Waiver (AAW).*
- 4. Questions associated to the Centers for Medicare and Medicaid Services (CMS) Performance Measures are marked with an asterisk (\*). Questions associated to ODP's Information Sharing and Advisory Committee (ISAC) recommendations are marked with two asterisks (\*\*).*
- 5. Use the QA&I review spreadsheet to capture responses for all applicable questions. For each question, the response option and any required remediation (full and record review only reviews) must be entered into QuestionPro after the review spreadsheet has been completed in its entirety.*
- 6. Comments will be mandatory for all instances when the requirement is not met ("No" response) or as directed in the guidance. When a question requires specific information to be documented, "COMMENT NEEDED" is stated in the guidance.*
- 7. When the requirement is not met for a QA&I question, ODP expects that remediation will occur within 30 days of discovery unless there are concerns for health and safety where remediation must occur immediately. For full and record review only reviews, all documentation to validate remediation activities must be submitted to the appropriate QA&I Lead.*
- 8. For self-assessments, the entity MUST retain all related documentation, including policy & procedure documentation, training curriculum, records, and other training documentation as well as documentation associated with service/supports delivery.*
- 9. For full and record review only reviews, the entity must retain and provide all requested documentation, including policy & procedure documentation, training curriculum, records, and other training documentation as well as documentation associated with service/supports*

*delivery. If this documentation is received more than 24-business hours after the conference, the documentation is considered remediation, not discovery.*

10. Questions labeled as exploratory are intended to encourage discussion while identifying “promising practices” that will in the future be supported by specific criteria. ODP incorporates these questions to ensure entities have opportunities to begin moving practices in these directions.

## Demographic Information

Question	Guidance
SCO Name.  <b>Non-Scored</b>	<ul style="list-style-type: none"> <li>• Select the organization’s name used in HCSIS.</li> </ul>
Master Provider Index (MPI) Number.  <b>Non-Scored</b>	<ul style="list-style-type: none"> <li>• Enter nine-digit Master Provider Index (MPI) number. This number is located in HCSIS and is the first nine digits of PROMISe ID.</li> </ul>
Indicate the ODP Waiver(s) and/or program(s) the SCO is approved to provide services.  <b>Non-Scored</b>	<ul style="list-style-type: none"> <li>• Select all applicable ODP Waiver(s) and/or program(s) the SCO is approved to provide services:                             <ul style="list-style-type: none"> <li>○ Adult Autism Waiver (AAW)</li> <li>○ Any ID/A Waiver (Consolidated Waiver, P/FDS Waiver, Community Living Waiver)</li> <li>○ Targeted Support Management (TSM)</li> <li>○ Base-Funded</li> </ul> </li> </ul>
Region in which SCO is located.  <b>Non-Scored</b>	<ul style="list-style-type: none"> <li>• Select the appropriate region for the SCO from the drop-down list.                             <ul style="list-style-type: none"> <li>○ In the ID/A waivers, please designate the region that has been identified on the ID/A sample file.</li> <li>○ In the AAW, please select the region where the SCO’s main office is located.</li> </ul> </li> </ul>
Contact information for person entering the data into QuestionPro. <ul style="list-style-type: none"> <li>• Contact Name (First &amp; Last Name)</li> <li>• Contact Telephone Number</li> <li>• Contact Email Address</li> </ul> <b>Non-Scored</b>	<ul style="list-style-type: none"> <li>• Enter the contact information for the person who is entering the data into QuestionPro.</li> </ul>

Data and Policy

#	Question	Guidance	Response Options	Source Document
1.	<p><b>**The SCO uses person-centered performance data in developing the Quality Management Plan (QMP) and its Action Plan.</b></p>	<ul style="list-style-type: none"> <li>• This question is about assessing the SCO’s utilization of the <b>“Plan” and “Do” steps</b> in the Plan-Do-Check-Act (PDCA) quality improvement cycle.</li> <li>• The reviewer requests to see performance data used by SCO to develop the QMP and its Action Plan.</li> <li>• The reviewer discusses with SCO the data results and how priorities for quality improvement projects were identified, how target objectives were determined and what performance measures were chosen for tracking performance over time.                             <ul style="list-style-type: none"> <li>○ Person-centered performance data specifically targets people outcomes, not compliance outcomes and <i>can include but is not limited to:</i> <ul style="list-style-type: none"> <li>- Results from QA&amp;I self-assessments and full reviews (if applicable), targeting those areas where performance falls below 86%</li> <li>- Employment</li> <li>- Individual interviews (QA&amp;I and IM4Q)</li> <li>- Communication needs</li> <li>- Community Participation</li> <li>- Self-direction, choice, and control</li> <li>- Management of incidents of abuse, neglect, exploitation, rights violations, and unexplained deaths.</li> <li>- Use of restrictive interventions, including restraints</li> <li>- Local level data, e.g., agency satisfaction surveys</li> </ul> </li> <li>○ Engaging agency leadership and gathering input from agency staff and other stakeholders to develop the QMP and its Action Plan (response option #1), is considered the best practice/high quality standard.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>Select the response option that best represents the SCO’s use of performance data to develop the QMP and its Action Plan.</b></li> </ul> <ol style="list-style-type: none"> <li>1. (Yes) The SCO used person-centered performance data to develop the QMP and its Action Plan and engaged agency leadership and gathered input from agency staff and other stakeholders to develop the QMP and its Action Plan.</li> <li>2. (Yes) The SCO used person-centered performance data to develop the QMP and its Action Plan.</li> <li>3. (No) The SCO does not have a QMP and its Action Plan.</li> <li>4. (No) The SCO has a QMP and its Action Plan but did not use person-centered performance data to develop it.</li> <li>5. (N/A) The SCO is new (defined as an SCO determined to be qualified/enrolled in the previous fiscal year) or the SCO did not work with any individuals at any point during the entire review period.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa Code Chapter 6100.45</li> <li>• Everyday Lives Values in Action 2021</li> <li>• Bulletin 00-17-01, <i>Quality Management Strategy of the Office of Developmental Programs</i></li> <li>• ODP Quality Management Certification Handbook</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<p>Response option #2 is compliant however, the SCO should be encouraged to strive to achieve the best practice/high quality standard. To assess this the reviewer should first ask the SCO about their practice (is agency leadership engaged in the process and how; is input gathered from agency staff/stakeholders and how?) and then request documentation as evidence to support leadership engagement and stakeholder input (e.g., meeting minutes/agendas, etc.).</p>		
1a.	SCO develops a QMP and its Action Plan using person-centered performance data.	<ul style="list-style-type: none"> <li>The SCO develops and submits a QMP and its Action Plan that demonstrates the use of person-centered performance data in generating it.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
1b.	SCO revises QMP and its Action Plan using person-centered performance data.	<ul style="list-style-type: none"> <li>The SCO revises and submits a QMP and its Action Plan demonstrating the use of person-centered performance data in generating it.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
2.	<p><b>**The SCO uses data to assess progress towards achieving identified person-centered Quality Management Plan (QMP) goals and its Action Plan target objectives.</b></p>	<ul style="list-style-type: none"> <li>This question is about assessing the SCO’s utilization of the <b>“Check” and “Act” steps</b> in the Plan-Do-Check-Act (PDCA) quality improvement cycle. <i>Use of data involves the following actions:</i> collecting data, analyzing data, sharing data, <i>and</i> taking actions based on what the data reveals.</li> <li>The reviewer determines if the SCO uses data to assess progress toward achieving identified person-centered QMP goals and its Action Plan target objectives by <i>ensuring all three criteria listed below have been met:</i> <ol style="list-style-type: none"> <li>Requesting to see data SCO collects on a routine basis (monthly data collection is desired best practice).</li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li><b>Select the response option that best represents the use of data to assess progress and track performance including changes to the Action Plan items as warranted.</b></li> </ul> <ol style="list-style-type: none"> <li>(Yes) The SCO collects person-centered data monthly and leadership, managers, responsible parties, and staff review it at least quarterly to assess progress toward QMP goals and updates the QMP and</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.45</li> <li>Everyday Lives Values in Action 2021</li> <li>Bulletin 00-17-01, <i>Quality Management Strategy of the Office of Developmental Programs</i></li> <li>ODP Quality Management</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<ol style="list-style-type: none"> <li>2. Asking SCO to share data analysis, including how often analysis occurs and how/where results are documented and shared with leadership and stakeholders, e.g., managers, responsible parties, staff, individuals, and families, etc. (Quarterly analysis and reporting are the desired best practice.)</li> <li>3. Asking how SCO uses routine data and analysis to track performance over time, including whether changes to the Action Plan are warranted and why.</li> </ol> <ul style="list-style-type: none"> <li>• Response option #1, is considered the best practice/high quality standard. Response option #2 is compliant however, the SCO should be encouraged to strive to achieve the best practice/high quality standard. To achieve option #1, the SCO must be able to provide the reviewer with evidence that person-centered data is: collected monthly, analyzed, and shared with leadership and stakeholders at least quarterly, and that actions are taken and documented, via changes to its Action Plan, based on what the data reveals.</li> </ul>	<p>its Action Plan target objectives annually.</p> <ol style="list-style-type: none"> <li>2. (Yes) The SCO uses person-centered data to determine if goals and objectives are on track in the QMP and its Action Plan, at least every 3 years.</li> <li>3. (No) The SCO does not have a QMP and its Action Plan.</li> <li>4. (No) The SCO has a QMP and its Action Plan but does not use person-centered data to assess progress towards achieving person-centered QMP goal(s) and its Action Plan target objectives.</li> <li>5. (No) The SCO has not updated the QMP in more than 3 years.</li> <li>6. (No) The SCO has a QMP and its Action Plan but does not use person-centered data to assess progress towards achieving person-centered QMP goal(s) and its Action Plan target objectives AND has not updated the QMP in more than 3 years (i.e., both 4 and 5 are “No”).</li> <li>7. (N/A) The SCO is new (defined as an SCO determined to be qualified/enrolled in the previous fiscal year) or the SCO did not work with any individuals at any point during the entire review period.</li> </ol>	<p>Certification Handbook</p>
2a.	SCO develops a QMP and its Action Plan using person-centered performance data.	<ul style="list-style-type: none"> <li>• The SCO develops and submits a QMP and its Action Plan that demonstrates the use of person-centered performance data in generating it.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Options	Source Document
2b.	SCO revises QMP and its Action Plan using person-centered performance data.	<ul style="list-style-type: none"> <li>The SCO revises/updates and submits a QMP and its Action Plan demonstrating the current use of person-centered performance data in generating it.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
2c.	SCO uses data to assess progress towards achieving identified person-centered goals and target objectives.	<ul style="list-style-type: none"> <li>The SCO has submitted documentation demonstrating the use of person-centered performance data in assessing progress, e.g., raw data, data analysis and the sharing of routine reports. (For more details, refer to the question guidance.)</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
3.	<p><b>**The SCO engages in activities, or has a written policy, to improve racial equity performance.</b></p> <p><b>Non-Scored</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the SCO engages in activities, or has a written policy, to improve racial equity performance.                             <ul style="list-style-type: none"> <li>Engagement activities can be determined through conversation or other written documentation.</li> </ul> </li> <li>Racism is defined as when people are treated unfairly because of their race; treating people different because of the color of their skin.</li> <li>Racial inequity is defined as when a group of people is not getting the same opportunities because of their race or color of their skin.</li> <li>The policy or activities may include, but are not limited to, the following areas:                             <ul style="list-style-type: none"> <li>Addressing racial disparities across all levels of the organization.</li> <li>Training opportunities on racial diversity/competency.</li> <li>Access to racial data and improvement strategies for areas of low performance.</li> <li>Participation in racial equity activities for leadership/management.</li> <li>Participation in racial equity activities for front line staff.</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SCO engaged in activities and/or has a written policy to improve racial equity performance.</li> <li>(No) The SCO has not engaged in activities and does not have a written policy to improve racial equity performance.</li> </ol>	<ul style="list-style-type: none"> <li>Exploratory</li> <li>Everyday Lives Values in Action 2021</li> <li>ISAC Recommendation #14, Promoting Racial Equity</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<p><b>COMMENT NEEDED – If “Yes,” identify how the entity is improving racial equity performance.</b></p>		
<p>4.</p>	<p><b>*The SCO’s staff completed annual training core courses as required in the training year.</b></p>	<ul style="list-style-type: none"> <li>• <b>This question not applicable to AAW only SCOs.</b> <ul style="list-style-type: none"> <li>○ <b>All AAW SCOs are evaluated during AAW SCO Qualifications.</b></li> </ul> </li> <li>• For Self-Assessments, the SCO will list Supports Coordinators (SCs) and SC Supervisors who are currently employed with the SCO, date of hire and annual training year dates for each staff person as directed on the QA&amp;I spreadsheet.</li> <li>• For full reviews, the SCO will list all Supports Coordinators (SCs) and SC Supervisors who are currently employed with the SCO, date of hire, start date of most recently completed training year, and end date of most recently completed training year for each staff person as directed on the <i>Staff Training Record</i>.</li> <li>• The reviewer will review 25% of staff who have been working with the SCO for at least one complete training year, with a minimum of five staff and a maximum of 25 staff. If there are less than five staff, all staff records must be reviewed.</li> <li>• Exclude staff who have a discrete Base and/or SC Services Only caseload.</li> <li>• Exclude staff that are no longer employed with the SCO.</li> <li>• The reviewer determines if the identified staff completed all required annual training core courses based on SCO training records including, but not limited to: a description of the course, sign-in sheets, transcripts, or certificates of completion from the training.                             <ul style="list-style-type: none"> <li>○ A training year is defined by the SCO and is a 12-month time frame.</li> <li>○ SCOs can choose to use the same training year to cover all persons or different training years for each person.</li> <li>○ The reviewer should review records from the most recently completed 12-month training year.</li> </ul> </li> <li>• 55 Pa. Code Chapter 6100.143 core courses are:                             <ul style="list-style-type: none"> <li>○ The application of person-centered practices, community integration, individual choice and</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) All staff reviewed completed all required annual training core courses in the training year.</li> <li>2. (No) One or more staff reviewed did not complete all of the required annual training core courses in the training year.</li> <li>3. (N/A) The SCO is only enrolled in the AAW.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa Code Chapter 6100.143</li> <li>• ODP Announcement 21-034, “ODP Regulation Update: Orientation and Annual Training Question and Answer Document and Annual Training Clarifications”</li> </ul>



#	Question	Guidance	Response Options	Source Document
		<p>assisting individuals to develop and maintain relationships.</p> <ul style="list-style-type: none"> <li>○ The prevention, detection and reporting of abuse, suspected abuse, and alleged abuse in accordance with the Older Adults Protective Services Act (35 P.S. §§ 10225.101—10225.5102), the Child Protective Services Law (23 Pa.C.S. §§ 6301—6386), the Adult Protective Services Act (35 P.S. §§ 10210.101—10210.704) and applicable protective services regulations.</li> <li>○ Individual rights.</li> <li>○ Recognizing and reporting incidents.</li> <li>○ The safe and appropriate use of behavior supports if the person works directly with an individual.</li> <li>○ Implementation of the individual plan if the person provides an HCBS or base-funding service.</li> </ul> <p>On the QA&amp;I Spreadsheet, the reviewer must complete the training tracker for each required annual training course.</p> <ul style="list-style-type: none"> <li>• Enter or copy and paste the SCO staff information (last name, first name, title, date of hire, start date of most recently completed training year and end date of most recently completed training year) for the selected staff.</li> <li>• The final response based off the information entered into training tracker will auto-populate into the “Questions” tab of the spreadsheet.</li> <li>• The percentage, number of staff reviewed and number of staff where training courses can be verified must be entered into QuestionPro.</li> </ul> <p>For full review:</p> <ul style="list-style-type: none"> <li>• <b>When the overall percentage falls below 86.0%, ODP will review for further actions to be taken.</b></li> <li>• <b>ODP will determine the seriousness, continued or repeated nature, and combination of issues identified to determine appropriate actions through DCAP or sanctions, which may include adjusting of claims.</b></li> </ul>		

#	Question	Guidance	Response Options	Source Document
4a.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed all required annual training as appropriate.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
4b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
4c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to SCO staff no longer being employed at the SCO.</li> </ul>		
5.	<b>New SC(s) completed the required ODP SC Orientation prior to working alone with individuals, and within 30 days after hire or starting to provide a service to an individual.</b>	<ul style="list-style-type: none"> <li><b>This question is not applicable to AAW only SCOs.</b> <ul style="list-style-type: none"> <li><b>All AAW SCOs are evaluated during AAW SCO Qualifications</b></li> </ul> </li> <li>For Self-Assessments, the SCO will list new SCs hired by the SCO within the last 12 months, date of hire, and date of first time SC provided service to an individual for each SC as directed on the QA&amp;I spreadsheet.</li> <li>For full reviews, the SCO will list all new SCs hired by the SCO within the last 12 months, date of hire, and date of first time SC provided service to an individual for each SC as directed on the <i>Staff Training Record</i>.</li> <li>The reviewer will review 25% of new SCs, with a minimum of five SCs and a maximum of 25 SCs. If there are less than five staff, all staff records must be reviewed.</li> <li>Exclude SCs who are no longer employed with the SCO.</li> <li>Exclude SCs that are within their first 30 calendar days of hire.</li> <li>The reviewer determines the date the new SC selected for reviews completed the SC Orientation packet as required</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) All new SCs reviewed completed the SC Orientation packet as required prior to working alone with individuals, and within 30 calendar days of hire or within 30 calendar days after starting to provide a service to an individual.</li> <li>(No) One or more new SCs reviewed did not complete the SC Orientation packet as required prior to working alone with individuals, and within 30 calendar days of hire or within 30 calendar days after starting to provide a service to an individual.</li> <li>(N/A) The SCO is only enrolled in the AAW, or there were no new SCs hired, or all newly hired SCs are within their 30 days of hire.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.142</li> <li>Consolidated, P/FDS and CL Waivers</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services</i></li> <li>ODP Announcement 21-034, ODP Regulation Update: Orientation and Annual Training Question and Answer Document</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<p>based on review of the SC and SC Supervisor signatures on the SC Orientation packet.</p> <ul style="list-style-type: none"> <li>The reviewer searches service notes from the date of hire to the date of orientation completed (per the SC Orientation certificate).</li> <li>PATH: HCSIS &gt; SC &gt; Service Notes &gt; Search &gt; Advanced Search &gt; Comment Author Last Name and First Name.</li> <li>The reviewer searches for waiver billable face-to-face service notes by the contact date and ensures they have evidence that the SC did not attend these independently (i.e., documenting supervisor or co-workers' attendance).</li> </ul> <p>On the QA&amp;I Spreadsheet, the reviewer must complete the orientation tracker.</p> <ul style="list-style-type: none"> <li>Enter or copy and paste the SC information (last name, first name, date of hire, and date of first time SC provided service to an individual) for the selected SCs.</li> <li>Enter the date of first time SC worked alone with an individual for the selected SCs.</li> <li>The final response based off the information entered into orientation tracker will auto-populate into the "Questions" tab of the spreadsheet.</li> <li>The percentage, number of new SCs reviewed and number of new SCs where orientation can be verified must be entered into QuestionPro.</li> </ul> <p>For full reviews</p> <ul style="list-style-type: none"> <li><b>When the overall percentage falls below 86.0%, ODP will review for further actions to be taken.</b></li> <li><b>ODP will determine the seriousness, continued or repeated nature, and combination of issues identified to determine appropriate actions through DCAP or sanctions, which may include adjusting of claims.</b></li> </ul>		<p>and Annual Training Clarifications</p>
5a.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed all required orientation training as appropriate.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the</li> </ul>

#	Question	Guidance	Response Options	Source Document
				remediation action date.
5b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
5c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to SCO staff no longer being employed at the SCO.</li> </ul>		
6.	<b>SCO staff completed the required number of training hours in the training year.</b>	<ul style="list-style-type: none"> <li><b>This question is not applicable to AAW-only SCOs.</b></li> <li><b>All AAW SCOs are evaluated during SCO Qualifications</b></li> <li>The SCs and SC Supervisors who were identified for the annual training question will be used for answering this question.</li> <li>The reviewer determines if the staff completed the required 24 hours of annual training in the training year based on SCO training records including, but not limited to: a description of the course, sign-in sheets, transcripts, or certificates of completion from the training.                             <ul style="list-style-type: none"> <li>A training year is defined by the SCO and is a 12-month time frame.</li> <li>SCOs can choose to use the same training year to cover all persons or different training years for each person.</li> <li>The reviewer should review records from the most recently completed 12-month training year.</li> </ul> </li> </ul> <p>On the QA&amp;I Spreadsheet, the reviewer must complete the Additional Training Hours tracker for each staff person identified.</p> <ul style="list-style-type: none"> <li>Staff’s last name from the Training Tracker will auto-populate in the Additional Training Hours tracker.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) All staff reviewed completed the required number of annual training hours in the training year.</li> <li>(No) One or more staff reviewed did not complete the required number of annual training hours in the training year.</li> <li>(N/A) The SCO is only enrolled in the AAW.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.143</li> <li>Consolidated, P/FDS and CL Waivers</li> <li>ODP Announcement 21-034, ODP Regulation Update: Orientation and Annual Training Question and Answer Document and Annual Training Clarifications</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services</i></li> </ul>

#	Question	Guidance	Response Options	Source Document
		<ul style="list-style-type: none"> <li>Reviewer must enter the course name on first row and the number of hours on the second row for each additional training staff completed.</li> <li>The final response based off the information entered into the Additional Trng Hours tab and added to Trng Tracker tab will auto-populate into the “Questions” tab of the spreadsheet.</li> </ul> <p>The percentage, number of staff reviewed and number of staff where training course can be verified must be entered into QuestionPro.</p> <ul style="list-style-type: none"> <li><b>When the overall percentage falls below 86.0%, ODP will review for further actions to be taken.</b></li> <li><b>ODP will determine the seriousness, continued or repeated nature, and combination of issues identified to determine appropriate actions through DCAP or sanctions, which may include adjusting of claims.</b></li> </ul>		
6a.	SCO develops/modifies a policy	<ul style="list-style-type: none"> <li>The SCO develops/modifies and submits a policy that ensures that staff complete required training during training year.</li> <li>The SCO trains staff that did not meet the requirement on the developed/modified policy and submits verification of training.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
6b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
6c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to SCO staff no longer being employed at the SCO.</li> </ul>		

#	Question	Guidance	Response Options	Source Document
7.	<b>The SCO has an Incident Management (IM) Representative that is a Certified Investigator (CI).</b>	<ul style="list-style-type: none"> <li>The reviewer will determine that the SCO has designated a person who is fulfilling the role of the agency's IM Representative through verification of evidence provided, including but not limited to a current organizational chart or designation by position description.</li> <li>The reviewer will determine if the IM Representative has a current CI certificate.</li> <li>The reviewer will compare the date the IM Representative assumed their role as the IM Representative with the current date the IM Representative obtained their certificate.</li> <li>IM Representatives have 12 months from the date of assuming their role as IM Representative to complete and pass the ODP CI training.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) There is evidence that the SCO has an IM Representative that is a CI, or the IM Representative assumed their role less than 12 months ago.</li> <li>(No) There is no evidence that the SCO has an IM Representative.</li> <li>(No) The IM Representative did not have a CI certificate within the required timeframe.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> </ul>
7a.	SCO designates a person to fulfill the role of the agency's IM Representative.	<ul style="list-style-type: none"> <li>The SCO submits evidence that identifies the agency's IM Representative.</li> <li>The SCO will ensure the designated IM Representative obtains CI certificate within 12 months.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
7b.	SCO ensures agency's IM Representative obtains CI certificate.	<ul style="list-style-type: none"> <li>The SCO enrolls the designated IM representative in an upcoming CI course.</li> <li>The SCO submits documentation of enrollment and when completed CI certificate as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
7c.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of "other" remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Options	Source Document
8.	<b>The SCO maintains written documentation of any delegated or purchased function related to incident management.</b>	<ul style="list-style-type: none"> <li>The reviewer will determine if the SCO delegates or purchases any IM functions.</li> <li>Incident management functions include:                             <ul style="list-style-type: none"> <li>Incident Management Training</li> <li>Investigations conducted by a Department CI</li> <li>Administrative Review of Investigations</li> <li>Certified Investigator Peer Review (CIPR) Process</li> <li>Quality Management and Trend Analysis</li> <li>Data Entry</li> <li>IM Representative Functions</li> </ul> </li> <li>The reviewer will verify the existence of contracts or agreements (and any amendments to contracts or agreements) related to delegated or purchased incident management functions.</li> </ul> <p><b>*Record name of agency completing the function for any IM function that is delegated or purchased.</b></p>	<ol style="list-style-type: none"> <li>(Yes) There is written documentation for all delegated or purchased incident management functions.</li> <li>(No) There is not written documentation for one or more delegated or purchased incident management functions.</li> <li>(N/A) The SCO does not delegate or purchase any incident management functions.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> </ul>
8a.	SCO obtains required documentation.	<ul style="list-style-type: none"> <li>The SCO obtains and submits written documentation of delegated or purchased function related to incident management.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
8b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
9.	<b>The SCO completes monitoring of delegated or purchased incident management function(s).</b>	<ul style="list-style-type: none"> <li>The reviewer will determine if the SCO completes monitoring for delegated or purchased IM function(s) identified in previous question.</li> <li>Monitoring documentation should include at a minimum:</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SCO completes monitoring of delegated or purchased IM function(s) and has written documentation of all the listed requirements.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> </ul>

#	Question	Guidance	Response Options	Source Document
		<ul style="list-style-type: none"> <li>○ A method to verify compliance with written policies and procedures, departmental decisions, state and federal laws and regulations that are related to the function purchased/delegated.</li> <li>○ The frequency for monitoring by the SCO (at least quarterly)</li> <li>○ The staff position/titles responsible for the monitoring</li> <li>○ Description of any issues detected during monitoring and their resolution</li> </ul>	<p>2. (No) The SCO completes monitoring of delegated or purchased IM function(s) but did not have written documentation of all the listed requirements.</p> <p>3. (No) The SCO did not complete monitoring of delegated or purchased IM function(s) and did not have written documentation of all the listed requirements.</p> <p>4. (N/A) The SCO does not delegate or purchase any incident management functions or the delegated/purchased incident management function did not need to be utilized during the review period.</p>	
9a.	SCO completes monitoring of delegated or purchased IM function(s).	<ul style="list-style-type: none"> <li>• The SCO completes monitoring of delegated or purchased IM function(s) and all requirements were met.</li> <li>• The SCO submits documentation as appropriate.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
9b.	SCO completes required documentation.	<ul style="list-style-type: none"> <li>• The SCO completes documentation of completed monitoring of delegated or purchased IM function(s) that meets all requirements.</li> <li>• The SCO submits documentation as appropriate.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
9c.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>



#	Question	Guidance	Response Options	Source Document
10.	<b>The SCO has a written policy that supports the release of the incident information upon request.</b>	<ul style="list-style-type: none"> <li>• The reviewer determines if the SCO has a written policy, or is included in a larger policy, that supports the release of the incident information to the individual, or persons designated by the individual, upon request.</li> <li>• The incident information is the incident report or a summary of the incident, the findings and the actions taken.</li> <li>• The information must be redacted to exclude information about another individual and the reporter, unless the reporter is the individual who receives the information.</li> <li>• An incident report does not include the investigation file. In order to satisfy these requirements, the SCO policy must support the release of the following:               <ul style="list-style-type: none"> <li>○ A summary of the incident, to include:                   <ul style="list-style-type: none"> <li>- A description of the incident</li> <li>- The immediate action(s) taken to protect the health, safety, and well-being of the individual</li> <li>- Incident classification</li> <li>- All notification information to include date and person or entity notified</li> </ul> </li> <li>○ The findings, to include:                   <ul style="list-style-type: none"> <li>- Additional Information</li> <li>- Investigation findings and determination (when applicable)</li> </ul> </li> <li>○ The actions taken, to include:                   <ul style="list-style-type: none"> <li>- Corrective Actions planned or implemented</li> <li>- Medical Intervention Information</li> </ul> </li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) The evidence indicates that a policy exists, and all the listed requirements are met.</li> <li>2. (No) There is no evidence that a policy exists, or all the listed requirements were not met.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa. Code §6100.401</li> <li>• Bulletin 00-21-02, <i>Incident Management</i></li> </ul>
10a.	SCO develops/modifies a policy.	<ul style="list-style-type: none"> <li>• The SCO develops/modifies and submits a policy that supports the release of incident report.</li> <li>• The SCO trains staff on the developed/modified policy and submits verification of training.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
10b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to</li> </ul>

#	Question	Guidance	Response Options	Source Document
11.	<p><b>The SCO has a policy to monitor EIM incidents reports, including but not limited to, restraint and medication error reports in order to ensure proper procedures are followed and detect abuse and neglect.</b></p>	<ul style="list-style-type: none"> <li>• The reviewer will determine if the SCO has a written policy related to the review of all EIM incident reports, including but not limited to restraint and medication error incident reports. The policy at a minimum should contain processes that outline:                             <ul style="list-style-type: none"> <li>○ The review of all EIM incident reports, including but not limited to restraint and medication error reports on an ongoing basis. This process is to include the review of reports that have been initiated but not submitted.</li> <li>○ The ongoing review of EIM auto generated email notifications that indicate when a restraint or medication error report is in need of follow-up. If it is determined that a critical incident is to be filed, the SCO must verify in EIM or follow up with the reporting entity to ensure the filing of a critical incident.</li> <li>○ Methods to recognize unreported critical incidents and ensure reporting, investigation, and implementation of corrective actions.</li> <li>○ Collaboration and communication with the individual’s team to ensure health and safety.</li> <li>○ Collaboration and communication with the individual’s team to revise ISP, behavior support plan, and risk mitigation plan.</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) The evidence indicates that a policy exists, and all the listed requirements were met.</li> <li>2. (No) There is no evidence that a policy exists, or all the listed requirements were not met.</li> </ol>	<ul style="list-style-type: none"> <li>• Bulletin 00-21-02, <i>Incident Management</i></li> <li>• ODP Announcement 19-042, Generation of EIM Email Notification for Supports Coordinators and Supports Coordination Supervisors</li> <li>• ODP Announcement 22-012, Clarification of Incident Management Responsibilities for Supports Coordination Organizations in the Adult Autism Waiver</li> <li>• Alert User Guide, 2021</li> </ul>
11a.	SCO develops/modifies a policy.	<ul style="list-style-type: none"> <li>• The SCO develops/modifies and submits a policy to monitor EIM restraint and medication error reports in order to ensure proper procedures are followed and detect abuse and neglect.</li> <li>• The SCO trains staff on the developed/modified policy and submits verification of training.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Options	Source Document
11b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
12.	<b>The SCO completes monthly individual incident data monitoring.</b>	<ul style="list-style-type: none"> <li>• The reviewer will determine if the SCO monitored incident data to take action(s) to mitigate risk, prevent recurring incidents, and implement corrective action as appropriate.</li> <li>• The reviewer will review documentation of the activity from the last three months.</li> <li>• SCOs are responsible for monitoring monthly incidents that are reported by the SCO.</li> <li>• Documentation of this monthly activity must include at a minimum:               <ul style="list-style-type: none"> <li>○ Review of incident data to detect incidents that have been initiated but have not had the First Section submitted</li> <li>○ Identification and implementation of preventative measures to reduce:                   <ul style="list-style-type: none"> <li>- The number of incidents</li> <li>- The severity of the risks associated with the incident</li> <li>- The likelihood of an incident recurring</li> <li>- The monitoring of the effectiveness of any noted corrective actions in incident reports</li> <li>- Actions taken by the SCO to address ineffective corrective actions</li> </ul> </li> <li>○ Documentation of:                   <ul style="list-style-type: none"> <li>- The need to revise the ISP with the ISP team to include new and/or revised information, risk mitigation plans, or a change in services or supports</li> <li>- The need to consult with a County ID Program/AE/BSASP Risk Manager for assistance related to monthly data monitoring</li> <li>- The actions and outcomes of any activities that occurred related to the monthly data monitoring</li> </ul> </li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) The evidence indicates that individual incident data monitoring was completed, and all the listed requirements were met.</li> <li>2. (No) There is no evidence individual incident data monitoring was completed or all the listed requirements were not met.</li> <li>3. (N/A) There were no incidents entered by the SCO for the review period.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa. Code §6100.403-6100.405</li> <li>• Bulletin 00-21-02, <i>Incident Management</i></li> <li>• ODP Announcement 21-066, Incident Management (IM) Frequently Asked Questions (FAQ)- Version 3</li> </ul>

#	Question	Guidance	Response Options	Source Document
12a.	SCO completes individual incident data monitoring.	<ul style="list-style-type: none"> <li>The SCO completes individual incident data monitoring.</li> <li>The SCO submits documentation as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
12b.	SCO develops/modifies a policy.	<ul style="list-style-type: none"> <li>The SCO develops/modifies and submits a policy that ensures the SCO completes and documents individual incident data monitoring.</li> <li>The SCO trains staff on the developed/modified policy and submits verification of training.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
12c.	SCO trains staff on the existing policy.	<ul style="list-style-type: none"> <li>The SCO trains staff on the existing policy and submits verification of training.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
12d.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
<b>13.</b>	<b>The SCO conducts and documents a trend analysis of all incident categories at least every 3 months.</b>	<ul style="list-style-type: none"> <li>The reviewer will determine if the SCO conducted a trend analysis by reviewing the most recent analysis of the incidents the SCO entered.                             <ul style="list-style-type: none"> <li>The trend analysis will include the development, the methodology used, data source, implementation plan, and documentation of both individual and agency-wide</li> </ul> </li> </ul>	1. (Yes) The documentation indicates that a trend analysis was completed, and all the listed requirements are met. 2. (No) There is no documentation that a trend analysis was completed, or all listed requirements were not met.	<ul style="list-style-type: none"> <li>55 Pa Code §6100.405</li> <li>Bulletin 00-21-02, <i>Incident Management</i></li> <li>ODP Announcement 21-066, Incident</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<p>risk mitigation activities based on the results of the analysis.</p> <ul style="list-style-type: none"> <li>• The three-month analysis shall include, but is not limited to (as applicable):                             <ul style="list-style-type: none"> <li>○ Adherence to timeframes in accordance with policy as it relates to reporting, investigation, and finalization of incidents as stated in 55 Pa. Code §§6100.401-§6100.404</li> <li>○ Evaluation of effectiveness of corrective actions for all incident categories</li> <li>○ Evaluation of the effectiveness of education to the individual, staff, and others based on the circumstances of an incident</li> <li>○ A review and trend analysis of comments from the County ID Program/AE and ODP initial management review and disapproval reasons from the final management review</li> <li>○ Identification and implementation of preventative measures to reduce:                                     <ul style="list-style-type: none"> <li>- The number of incidents</li> <li>- The severity of the risks associated with the incident</li> <li>- The likelihood of an incident recurring</li> </ul> </li> <li>○ Documentation of the actions and outcomes of any activities that occurred related to trend analysis</li> </ul> </li> </ul> <p><b>COMMENT NEEDED – Provide details on how the SCO is completing their trend analysis.</b></p>	<p>3. (N/A) There were no incidents entered by the SCO for the review period.</p>	<p>Management (IM) Frequently Asked Questions (FAQ)-Version 3</p>
13a.	SCO conducts and documents trend analysis of all incident categories.	<ul style="list-style-type: none"> <li>• The SCO conducts and documents a trend analysis of all incident categories.</li> <li>• The SCO submits documentation as appropriate.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
13b.	SCO develops/modifies a policy.	<ul style="list-style-type: none"> <li>• The SCO develops/modifies and submits a policy that ensures the Provider conducts and documents a trend analysis of all incident categories at least every 3 months.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the</li> </ul>

#	Question	Guidance	Response Options	Source Document
		<ul style="list-style-type: none"> <li>The SCO trains staff on the developed/modified policy and submits verification of training.</li> </ul>		notification date to the SCO and the remediation action date.
13c.	SCO trains staff on the existing policy.	<ul style="list-style-type: none"> <li>The SCO trains staff on the existing policy and submits verification of training.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
13d.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation ODP of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

## Record Review

#	Question	Guidance	Response Option	Source Documents
14.	<p><b>The SCO has an individual record sample.</b></p> <p><b>Non-Scored</b></p>	<ul style="list-style-type: none"> <li><b>SCOs will answer this question as part of the self-assessment.</b></li> <li><b>ODP will answer this question as part of the full review.</b></li> <li>SCOs who are currently working with individual(s) in the ID/A and or AAW waiver(s) are expected to select a sample of individuals to review as part of their self-evaluation of performance.</li> <li>SCOs will select their own individual sample which will include 1% with a minimum of 5 and a maximum of 10 individuals.                             <ul style="list-style-type: none"> <li>If an entity serves less than 5 individuals, 100% of individuals must be a part of the review.</li> </ul> </li> <li>The individuals selected must meet the following criteria:                             <ul style="list-style-type: none"> <li>A cross-section of individuals served</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SCO is currently working with individual(s).</li> <li>(No) The SCO is not currently working with individual(s).</li> </ol>	<ul style="list-style-type: none"> <li>QA&amp;I Process Document</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>○ Waiver and non-waiver funding/program types</li> <li>○ Locations</li> <li>○ Counties</li> <li>○ Types of services.</li> </ul>		
15.	<p><b>Indicate the total number of individuals that were included in the sample selected.</b></p> <p><b>Non-Scored</b></p>	<ul style="list-style-type: none"> <li>• <b>SCOs will answer this question as part of the self-assessment.</b> <ul style="list-style-type: none"> <li>○ SCOs will select the total number of individual records reviewed (1 to 10) from the list.</li> </ul> </li> <li>• <b>ODP will answer this question as part of the full review and will select N/A.</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Select a number from 1 to 10.</li> <li>2. (N/A) The review is being completed by ODP.</li> </ol>	
16.	<p><b>The SC documents the individual was provided with information about on-going opportunities and support necessary to participate in community activities of the individual’s choice.</b></p>	<ul style="list-style-type: none"> <li>• The reviewer determines if the SC included evidence that the individual was provided with information about getting support for community activities of the individual’s choice based on a review of service notes, Individual Monitoring Tools, and the ISP.</li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) The individual was provided with information about on-going opportunities and support necessary for community activities of the individual’s choice.</li> <li>2. (No) The individual was not provided with information about getting support for community activities of the individual’s choice.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa Code Chapters 6100.182, 6100.223, and 6100.261</li> <li>• Everyday Lives Values in Action 2021</li> </ul>
16a.	<p>SCO provides the individual with information as required.</p>	<ul style="list-style-type: none"> <li>• The SCO ensures the individual is provided with information about on-going opportunities and support necessary to participate in community activities of the individual’s choice and is documented in HCSIS.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
16b.	<p>Other remediation action.</p>	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
16c.	<p>Remediation by exception.</p>	<ul style="list-style-type: none"> <li>• Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s</li> </ul>		

#	Question	Guidance	Response Option	Source Documents
		death, moving out of state, inactive record status or transferring to another SCO. • The SCO enters the reason for the exception in the comment field.		
17.	<b>The SC offers information about services and resources to the family.</b>	• The reviewer determines if the SC offered the family information about services and resources (i.e., trainings, community resources, support groups, etc.) based on a review of service notes, Individual Monitoring Tools, and the ISP. • Family is defined as both those related by birth and those chosen as family by the individual.  <b>COMMENT NEEDED – If “Yes,” identify the information that was offered to the family.</b>	1. (Yes) The SC offered information to the family. 2. (No) The SC did not offer information to the family. 3. (N/A) There was no family involvement.	• Everyday Lives Values in Action 2021 • Consolidated, P/FDS, CL, and Adult Autism Waivers
17a.	SCO offers the family information as required.	• The SCO ensures information about services and resources is offered to the family and is documented in HCSIS.	If YES, when: • The SCO chooses the appropriate time frame from the drop down.	• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.
17b.	Other remediation action.	• The SCO submits documentation of “other” remediation actions taken to comply with the requirements. • The SCO enters the REMEDIATION ACTION taken in the comment field.	If YES, when: • The SCO chooses the appropriate time frame from the drop down.	• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.
17c.	Remediation by exception.	• Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO. • The SCO enters the reason for the exception in the comment field.		



#	Question	Guidance	Response Option	Source Documents
18.	<p><b>*The individual had an identified change in need.</b></p> <p><b>Non-Scored</b></p>	<ul style="list-style-type: none"> <li>• A change in need is one that would result in an ODP funded service being added, increased, modified, reduced, suspended, terminated, or denied.</li> <li>• Not every identified change requested is considered a change in need and should be evaluated on a case-by-case basis.</li> <li>• The reviewer determines if the individual had identified change(s) in need based on a review of service notes, incident reports, PUNS, assessments including but not limited to the SIS assessment, Health Risk Screening Tool (HRST) and Periodic Risk Assessment (PRE), Individual Monitoring Tools and ISPs completed during the review period.</li> </ul> <p><b>COMMENT NEEDED – If “Yes,” identify the need(s), the date(s) the need(s) was identified, the service(s), and type of change(s).</b></p>	<ol style="list-style-type: none"> <li>1. (Yes) The individual had an identified change(s) in need.</li> <li>2. (N/A) There was no change(s) in need identified.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa Code Chapter 6100.221</li> <li>• Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>• ISP Manual (ID/A Waivers)</li> <li>• Adult Autism Waiver (AAW)</li> <li>• AAW SC Manual (AAW)</li> </ul>
19.	<p><b>*The individual’s ISP was updated when a change in need was identified.</b></p>	<ul style="list-style-type: none"> <li>• The reviewer determines if the ISP was updated when change(s) in need were identified based on a review of service notes, Individual Monitoring Tools, and the ISP.</li> <li>• ID/A Waivers PATH: HCSIS &gt; Plan &gt; History &gt; Critical Revision.</li> <li>• AAW PATH: HCSIS &gt; Plan &gt; Manage Plan &gt; View Plan History &gt; Critical Revision</li> <li>• The reviewer uses the ISP history screen to ensure a draft Critical Revision ISP was submitted for the change(s) being identified.</li> <li>• If the individual’s ISP was not updated when change(s) in need were identified, the reviewer determines if the SC documented justification of the reason(s) why the update was not made based on a review of the service notes, Individual Monitoring Tools, and the ISP.</li> </ul> <p><b>COMMENT NEEDED – If “No,” identify the current need(s) that was not included.</b></p>	<ol style="list-style-type: none"> <li>1. (Yes) The ISP was updated when change(s) in need were identified.</li> <li>2. (Yes) The SC documented justification if the ISP was not updated when change(s) in need were identified.</li> <li>3. (No) The ISP was not updated to reflect an ODP funded service change, and the SC did not document justification for the ISP not being updated when change(s) in need were identified.</li> <li>4. (N/A) There was no change(s) in need identified.</li> </ol>	<ul style="list-style-type: none"> <li>• 55 Pa Code Chapter 6100.221</li> <li>• Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>• ISP Manual (ID/A waivers)</li> <li>• ODP Announcement 19-012, <i>New Documentation Requirements for Individual Support Plans (ISPs) Within the Consolidated Waiver (ID/A Waivers)</i></li> <li>• Adult Autism Waiver (AAW)</li> <li>• AAW SC Manual (AAW)</li> </ul>
19a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>• The SCO must update the ISP to reflect the change in need.</li> </ul>	If YES, when:	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days</li> </ul>

#	Question	Guidance	Response Option	Source Documents
			<ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	between the notification date to the SCO and the remediation action date.
19b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
19c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
<b>20.</b>	<b>The Service Notes (SNs) met quality standards.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the service notes meet quality standards based on a review of service notes.                             <ul style="list-style-type: none"> <li>Quality Standards:                                     <ul style="list-style-type: none"> <li>Person-centered</li> <li>Clear and concise</li> <li>Objective</li> <li>Include Who, What, When and Where</li> <li>Detailed</li> <li>Describe actions taken and actions needed</li> </ul> </li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The service notes met quality standards.</li> <li>(No) The services did not meet quality standards.</li> </ol>	<ul style="list-style-type: none"> <li>SC Orientation</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>ODP Trainings “<i>Service Notes Basics 2013 – Part 1</i>” &amp; “<i>Service Notes – Part 2 (2014)</i>”. (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> </ul>
20a.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on the quality standards.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				the SCO and the remediation action date.
20b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
21.	<b>If there were identified issues, the SC followed up on the issues.</b>	<ul style="list-style-type: none"> <li>• The reviewer determines if there are any issues identified based on a review of service notes and Individual Monitoring Tools.                             <ul style="list-style-type: none"> <li>○ Issues are defined as:                                     <ul style="list-style-type: none"> <li>- Any situation that warrants corrective action and timely response by an individual providing supports</li> <li>- Circumstances that negatively impact an individual’s quality of life</li> <li>- An individual is not receiving the appropriate quality, type, duration, and frequency of services as identified in the ISP</li> <li>- An individual is dissatisfied with the manner in which the services or supports are delivered</li> </ul> </li> </ul> </li> <li>• The reviewer determines if the SC followed-up on issues based on a review of service notes, Individual Monitoring Tools, and the ISP.</li> <li>• Documentation within service notes, monitorings or the ISP should indicate follow-up action which includes notification of the Provider of the issue.</li> </ul>	<ol style="list-style-type: none"> <li>1. (Yes) The SC followed up on identified issues, including notification of the Provider.</li> <li>2. (No) The SC did follow up on identified issues but did not notify the Provider.</li> <li>3. (No) The SC did not follow up on identified issues.</li> <li>4. (N/A) There were no issues.</li> </ol>	<ul style="list-style-type: none"> <li>• Bulletin 00-10-16, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>• Individual Monitoring Tool Guidance (ID/A Waivers)</li> <li>• SC Individual Monitoring Form Guidance (AAW)</li> <li>• AAW SC Manual (AAW)</li> </ul>
21a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>• The SCO follows-up on the issue and documents the action in HCSIS.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
21b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
21c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
22.	<b>*The SC documented a risk assessment.</b>	For individuals in an ID/A waiver: <ul style="list-style-type: none"> <li>The reviewer determines if the SC documented a risk assessment based on a review of service notes, incident reports, Individual Monitoring Tools, the Supports Intensity Scale (SIS) assessment, HRST (if applicable) and other provider assessment tools.</li> <li>Risk assessment information should be incorporated into the ISP.</li> <li>ISP PATH: HCSIS &gt; Plan &gt; Health &amp; Safety &gt; Focus Area &gt; General Health Safety Risks, Fire Safety, Traffic, Cooking/Appliance Use, Outdoor Appliances, Water Safety, Safety Precautions, Knowledge of Self-Identifying Info, Stranger Awareness, Sensory Concerns, Meals/Eating.</li> </ul> For individuals in the AAW: <ul style="list-style-type: none"> <li>The reviewer determines if the individual had a PRE or HRST (if applicable) completed to assess risk.</li> <li>Risk assessment information should be incorporated into the ISP.</li> </ul> <p><b>COMMENT NEEDED – If “No,” identify the risks that have not been documented.</b></p>	1. (Yes) The ISP included evidence of a risk assessment. 2. (No) The ISP did not include evidence of a risk assessment.	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.223</li> <li>Pennsylvania Health Risk Screening Tool Protocol</li> <li>ISP Manual (ID/A Waivers)</li> <li>AAW Periodic Risk Evaluation (PRE) Manual (AAW)</li> <li>PRE Service Guidance Document 2 – Individual Support Plan (AAW)</li> </ul>
22a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO documents a risk assessment in the ISP in HCSIS.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				the SCO and the remediation action date.
22b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
22c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
23.	<b>*The SC incorporated risk mitigation strategies into the ISP.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC incorporated risk mitigation strategies based on a review of the entire ISP.</li> <li>Risks can be found in the service notes, Individual Monitoring Tools, ISP, Incident Reports, SIS assessment (ID/A waivers), PRE (AAW), Scales of Independent Behavior-Revised (SIB-R) assessment (AAW), HRST (if applicable) and any applicable planning assessments.</li> </ul> <p><b>COMMENT NEEDED – If “No,” identify the risks that did not have risk mitigation documented.</b></p>	<ol style="list-style-type: none"> <li>(Yes) The ISP included risk mitigation strategies.</li> <li>(No) There are risks identified but the ISP did not include risk mitigation strategies.</li> <li>(N/A) There were no risks that required mitigation.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.223</li> <li>Pennsylvania Health Risk Screening Tool Protocol</li> <li>ISP Manual (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> <li>AAW PRE Manual (AAW)</li> <li>PRE Service Guidance Document 2 – Individual Support Plan (AAW)</li> </ul>
23a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO documents risk mitigation strategies in the ISP.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				the SCO and the remediation action date.
23b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
23c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
24.	<b>*The SC developed a person-centered ISP to address all assessed needs.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC developed a person-centered ISP that incorporates all formal and informal assessed needs based on a review of service notes, the ISP, Individual Monitoring Tools, PUNS (ID/A), the SIS assessment (ID/A), the PRE (AAW), SIB-R (AAW), HRST (if applicable), communication assessments and any applicable assessments.</li> <li>The reviewer determines if the SC incorporated all services and support through waiver funded services or other funding sources or natural supports to mitigate identified risks into the ISP.</li> </ul> <p><b>COMMENT NEEDED – If “No,” identify the assessed needs that have not been documented in the ISP.</b></p>	<ol style="list-style-type: none"> <li>(Yes) The ISP was person-centered and included evidence that all assessed needs were reviewed and addressed.</li> <li>(No) The ISP was not person-centered, and/or the identified assessed needs were not included.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa. Code Chapter 6100.221</li> <li>ISP Manual (ID/A Waivers)</li> <li>Bulletin 00-20-02, <i>Individual Support Plans (ISPs)</i> (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> <li>AAW PRE Manual (AAW)</li> </ul>
24a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO ensure the SC develops a person-centered ISP to address all assessed needs.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				remediation action date.
24b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
24c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
25.	<b>*An ISP was developed that supports the outcomes/objectives throughout the entire plan.</b>	<ul style="list-style-type: none"> <li>For the ID/A waivers, the reviewer determines if the SC developed an ISP that supports the outcomes throughout the ISP based on a review of the ISP.</li> <li>For the AAW, the reviewer determines if the SC ensured that the objectives are consistent in the ISP based on the review of the ISP.</li> <li>Outcomes/objectives should reflect the personal goals of the individual.</li> </ul> <p><b>COMMENT NEEDED – If “No,” identify the outcomes/objectives that are not supported/consistent and what is missing.</b></p>	<ol style="list-style-type: none"> <li>(Yes) The outcomes were supported by the information in the ISP (ID/A), or the objectives were consistent with the information in the ISP (AAW).</li> <li>(No) The outcomes were not supported by the information in the ISP (ID/A) or if the objectives were not consistent with the information in the ISP (AAW).</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa. Code Chapter 6100.223</li> <li>ISP Manual (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> </ul>
25a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO must ensure that the ISP is updated to support the outcomes/objectives.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				remediation action date.
25b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
25c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
26.	<b>The SC conducted all monitorings at the required frequency.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC conducted monitorings at the required frequency based on a review of the Individual Monitoring Tools.</li> <li>PATH: HCSIS &gt; SC &gt; Indiv Monitoring.</li> <li>For the ID/A waivers, if the individual has an approved non-statutory frequency, identify them in the comments section by MCI#, name(s), or initials.</li> <li>Consolidated and Community Living is minimum of a monitoring once every two months during a six (6) calendar month timeframe.</li> <li>P/FDS is a minimum of a monitoring once in every three (3) calendar months.</li> <li>TSM and Base is a minimum once a year and the monitoring cannot take place on the same day as the annual ISP meeting.</li> <li>AAW is a minimum of a monitoring once per quarter over a 12-month period based on the individual’s Plan Effective Date.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC conducted all monitorings at the required frequency.</li> <li>(No) The SC did not conduct all monitorings at the required frequency.</li> <li>(N/A) The individual was not due for a monitoring at the time of the review.</li> </ol>	<ul style="list-style-type: none"> <li>Consolidated, P/FDS, CL and Adult Autism Waivers</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>ODP Announcement 126-17 CMS Approves the Targeted Support Management State Plan Amendment (ID/A waivers)</li> </ul>
26a.	SCO completes a monitoring.	<ul style="list-style-type: none"> <li>The SCO ensures the SC completes a monitoring and documents the activity in HCSIS.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the</li> </ul>



#	Question	Guidance	Response Option	Source Documents
				notification date to the SCO and the remediation action date.
26b.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on the monitoring requirements as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
26c.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
26d.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
27.	<b>The SC conducted all monitoring at the required location.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC conducted monitorings at the required location based on a review of the Individual Monitoring Tools.</li> <li>ID/A PATH: HCSIS &gt; SC &gt; Indiv Monitoring.</li> <li>AAW PATH: HCSIS &gt; SC &gt; SC Monitoring</li> <li>For the ID/A waivers, if the individual has an approved non-statutory frequency, identify them in the comments section by MCI#.</li> <li><b>For all individuals residing in a residential setting:</b> Remote monitorings are not permitted <b>in residential settings</b> and no</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC conducted all monitorings at the required location.</li> <li>(No) The SC did not conduct all monitorings at the required location.</li> <li>(N/A) The individual was not due for a monitoring at the time of the review.</li> </ol>	<ul style="list-style-type: none"> <li>Consolidated, P/FDS, CL and Adult Autism Waivers</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>ODP Announcement 22-085 (Update) Clarification for Supports</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>more than six months can lapse between face-to-face monitorings at the residential setting.</p> <ul style="list-style-type: none"> <li>• ID/A Waivers – during a six (6) calendar month timeframe:                             <ul style="list-style-type: none"> <li>○ One (1) of the visits must take place at the waiver participant’s residence,</li> <li>○ One (1) visit must take place at the waiver participant’s day service, including a nontraditional day program, and</li> <li>○ One (1) visit may take place at any location where an authorized service is rendered, OR any location agreeable to the waiver participant.</li> <li>○ Cons. &amp; CL Waivers- A remote face-to-face monitoring can take the place of three out of the six required face-to-face monitorings per year.</li> <li>○ P/FDS- A remote face-to-face monitoring can take the place of one out of the four required face-to-face monitorings per year.</li> </ul> </li> <li>• TSM and Base have no location requirements.</li> <li>• AAW – during a 12-month timeframe:                             <ul style="list-style-type: none"> <li>○ One (1) face-to-face in the individual’s home,</li> <li>○ One (1) face-to-face in a location outside the home where the individual receives services, and</li> <li>○ Two (2) face-to face meetings at any location agreeable to the individual.</li> <li>○ A remote face-to-face monitoring can take the place of one out of the four required face-to-face monitorings per year (note: this does not apply to AAW individuals receiving Residential Habilitation).</li> </ul> </li> </ul>		<p>Coordination Organizations on Resuming SC In-Person Monitorings</p> <ul style="list-style-type: none"> <li>• ODP Announcement 126-17 CMS Approves the Targeted Support Management State Plan Amendment (ID/A Waivers)</li> <li>• Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Version 2.0 (ID/A Waivers)</li> <li>• Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver – Version 2.0 (AAW)</li> </ul>
27a.	SCO completes a monitoring at the required location.	<ul style="list-style-type: none"> <li>• The SCO ensures the SC completes a monitoring and documents the activity in HCSIS.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
27b.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on the monitoring requirements as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
27c.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
27d.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
28.	<b>The Individual Monitoring Tools met quality standards.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC entered Individual Monitoring Tools during the review period that meet quality standards based on a review of the Individual Monitoring Tools.</li> <li>Quality Standards (as per the trainings):                             <ul style="list-style-type: none"> <li>Person-centered</li> <li>Checks whether services are meeting needs as per the ISP</li> <li>If the individual has access to services</li> <li>If services are being delivered according to the ISP</li> <li>Describe actions needed</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The Individual Monitoring Tools met quality standards.</li> <li>(No) The Individual Monitoring Tools did not meet quality standards.</li> <li>(N/A) The individual was not due for a monitoring at the time of the review.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.225</li> <li>SC Orientation</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>ODP Trainings “Introduction to Individual Support Plan (ISP) Monitoring” &amp; “ISP Monitoring 2014”. (ID/A Waivers)</li> <li>AAW SC Individual Monitoring Form Guidance (AAW)</li> </ul>

#	Question	Guidance	Response Option	Source Documents
28a.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on the quality standards.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
28b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
29.	<b>*The individual received services in type, scope, amount, duration, and frequency as defined in the ISP.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the individual’s approved services and supports were received in the type, scope, amount, duration, and frequency as defined in the ISP based on a review of the service notes, Individual Monitoring Tools, and service utilization identified in the Service Details section of the ISP.</li> <li>The service frequency must include how often a service will be provided and can be flexible to meet the needs of the individual (i.e., 2 days/week, 4 hours/day, etc.).</li> <li>If the individual’s approved services and supports were not received in the type, scope, amount, duration, and frequency as defined in the ISP, the reviewer determines if the SC documented evidence of actions taken to resolve lack of service delivery based on a review of the service notes, Individual Monitoring Tools, and the ISP.</li> <li>Examples of acceptable justification can include (but not limited to): individual out of town, extended illness, hospitalization / rehabilitation, disruptions experienced due to the COVID-19 pandemic, etc.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The individual received all approved services and supports as per the ISP, or the SC documented acceptable justification when the individual did not receive all approved services and supports as specified in the ISP.</li> <li>(No) The individual did not receive all approved services and supports as per the ISP and the SC did not document acceptable justification.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.223 and 6100.226</li> <li>Consolidated, P/FDS, CL and Adult Autism Waivers</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services</i> (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<b>COMMENT NEEDED – If “No,” identify which services and supports were not provided.</b>		
29a.	SCO documents justification.	<ul style="list-style-type: none"> <li>The SCO ensures that the justification of services not being provided as authorized is documented.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
29b.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO ensures that the individual’s ISP is updated to accurately reflect the type, scope, amount, duration, and frequency of the individual’s approved services and supports.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
29c.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on the requirements.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
29d.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
29e.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> </ul>		

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
30.	<p><b>The SC provided due process rights information at the annual ISP meeting.</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC provided the due process rights at the annual ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs were responsible for documenting the verbal consent of the participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC provided due process rights at the ISP meeting, or the ISP Signature Page was checked “Yes”.</li> <li>(No) The SC did not provide due process rights at the ISP meeting, or the ISP Signature Page was not checked or “No” is checked.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.181</li> <li>PA 1135 Approval Letter (Section 1135 of the Social Security Act)</li> <li>Consolidated, P/FDS, CL and Adult Autism Waivers</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services (ID/A Waivers)</i></li> <li>Bulletin 00-08-05, <i>Due Process and Fair Hearing Procedures for Individuals with Mental Retardation (ID/A Waivers)</i></li> <li>ISP Manual Section 4 (ID/A Waivers)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Versions 2.0 and 3.0 (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> <li>Operational Guide for Appendix K: Emergency</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				Preparedness and Response for the Adult Autism Waiver – Versions 2.0 and 3.0 (AAW)
30a.	SCO provides the individual with information as required.	<ul style="list-style-type: none"> <li>The SCO ensures due process rights information is provided and documented on an ISP Signature page.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
30b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
30c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
31.	<b>*Choice of Providers was offered to the individual/family.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC offered choice of providers to the individual/family at the annual ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC offered choice of providers at the ISP meeting, or the ISP Signature Page was checked “Yes”.</li> <li>(No) The SC did not offer choice of providers at the ISP meeting, or the ISP Signature Page was not checked or “No” is checked.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Ch 6100.225 and 6100.182</li> <li>PA 1135 Approval Letter (Section 1135 of the Social Security Act)</li> <li>ISP Manual (ID/A Waivers)</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs were responsible for documenting the verbal consent of the participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</li> </ul>		<ul style="list-style-type: none"> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Versions 2.0 and 3.0 (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> <li>Adult Autism Waiver (AAW)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver – Versions 2.0 and 3.0 (AAW)</li> </ul>
31a.	SCO provides the individual with information as required.	<ul style="list-style-type: none"> <li>The SCO ensures choice of providers is provided and documented on an ISP Signature page.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
31b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>



#	Question	Guidance	Response Option	Source Documents
31c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
32.	<b>*Choice of services was offered to the individual/family.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC offered individual choice at the annual ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs were responsible for documenting the verbal consent of the participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC offered choice of services at the ISP meeting, or the ISP Signature Page was checked "Yes".</li> <li>(No) The SC did not offer choice of services at the ISP meeting, or the ISP Signature Page is not checked or "No" was checked.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Ch 6100.223</li> <li>PA 1135 Approval Letter (Section 1135 of the Social Security Act)</li> <li>ISP Manual Section 4 (ID/A Waivers)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Versions 2.0 and 3.0 (ID/A Waivers)</li> <li>AAW SC Manual (AAW)</li> <li>Adult Autism Waiver (AAW)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				– Versions 2.0 and 3.0 (AAW)
32a.	SCO provides the individual with information as required.	<ul style="list-style-type: none"> <li>The SCO ensures choice of services is provided and documented on an ISP Signature page.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
32b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
32c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
33.	<b>*The SC provided the individual information on participant directed service (PDS) options annually.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC provided information about PDS options at the annual ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs were responsible for documenting the verbal consent of the</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC offered PDS options at the ISP meeting, or the ISP Signature Page was checked “Yes”.</li> <li>(No) The SC did not offer PDS options at the ISP meeting, or the ISP Signature Page was not checked or “No” is checked.</li> </ol>	<ul style="list-style-type: none"> <li>PA 1135 Approval Letter (Section 1135 of the Social Security Act)</li> <li>ISP Manual (ID/A Waivers)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</p>		<p>(ID/A) Waivers – Versions 2.0 and 3.0 (ID/A Waivers)</p> <ul style="list-style-type: none"> <li>• ODP Announcement 20-103, Adult Autism Waiver (AAW): New Individual Support Plan (ISP) Signature Form (AAW)</li> <li>• Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver – Versions 2.0 and 3.0 (AAW)</li> </ul>
33a.	SCO provides the individual with information as required.	<ul style="list-style-type: none"> <li>• The SCO ensures PDS information has been shared and documented on an ISP Signature page.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
33b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
33c.	Remediation by exception.	<ul style="list-style-type: none"> <li>• Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> </ul>		

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
34.	<p><b>The individual attended the Annual Review Update ISP meeting or ARP ISP meeting or if the individual did not attend the meeting, the SC reviewed the results with the individual.</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the individual attended the Annual Review Update ISP meeting or ARP ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>If the individual is under 18 or has a surrogate/legal representative, they are not required to attend.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs were responsible for documenting the verbal consent of the participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</li> <li>The reviewer determines if the SC reviewed the results of the ISP meeting with any individuals who did not attend based on the ISP Signature Page or in a Service Note.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The individual attended the ISP meeting or if the individual did not attend and the SC reviewed the results of the ISP meeting with the individual.</li> <li>(No) The individual did not attend the ISP meeting and the SC did not review the results of the ISP meeting with the individual.</li> <li>(N/A) The individual is under 18 (ID/A waivers), the surrogate attended (ID/A waivers), or the legal representative attended (AAW &amp; ID/A waivers).</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Ch 6100.221</li> <li>Consolidated, P/FDS, CL and Adult Autism Waivers</li> <li>ISP Manual (ID/A Waivers)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Versions 2.0 and 3.0 (ID/A Waivers)</li> <li>Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver – Versions 2.0 and 3.0 (AAW)</li> </ul>
34a.	<p>SCO provides the individual with information as required.</p>	<ul style="list-style-type: none"> <li>The SCO ensures the results of the ISP meeting has been reviewed with the individual and documented on an ISP Signature page.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
34b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
34c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
35.	<b>The SC follows ODP's PUNS policy based on the individual's current need(s).</b>	<ul style="list-style-type: none"> <li><b>This question is not applicable to individuals enrolled in the AAW.</b></li> <li>The reviewer determines if the individual's PUNS is being maintained appropriately following ODP's PUNS policy based on a review of service notes, Individual Monitoring Tools, ISP, and SIS.</li> <li>ODP's PUNS policy includes:                             <ul style="list-style-type: none"> <li>Active PUNS must be updated at least annually.</li> <li>A PUNS must be created or updated within 30 days of the identified change in need if it cannot be met immediately or</li> <li>A PUNS must be made inactive when all needs have been met and the individual is fully served</li> </ul> </li> <li>PATH: HCSIS &gt; Individual &gt; PUNS &gt; PUNS Change.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC followed ODP's PUNS policy based on the individual's current need(s).</li> <li>(No) The SC did not follow ODP's PUNS policy based on the individual's current need(s).</li> <li>(N/A) The individual is enrolled in the AAW.</li> </ol>	<ul style="list-style-type: none"> <li>PUNS Bulletin 00-19-03</li> <li>PUNS Manual</li> </ul>
35a.	SCO updates the individual's PUNS.	<ul style="list-style-type: none"> <li>The SCO ensures the individual's PUNS is updated based on the individual's current need(s) and ODP's PUNS policy.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
35b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
35c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
36.	<b>If the individual has Limited English Proficiency, the SCO has staff or contractors/language services who are trained to communicate with the individual.</b>	<ul style="list-style-type: none"> <li>Limited English Proficiency is defined as “a person who does not speak English as their primary language and who has a limited ability to read, write, speak or understand English”. Please note that signed language users, such as ASL users, may also be limited English proficient.</li> <li>The reviewer determines if the individual has Limited English Proficiency based on a review of assessments, service notes, Individual Monitoring Tools, and the ISP.</li> <li>If the individual has Limited English Proficiency, the reviewer determines if the SCO has staff or available contractors/language services to communicate with the individual with Limited English Proficiency.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SCO has staff or contractors/language services who are trained to communicate with the individual with Limited English Proficiency.</li> <li>(No) The SCO does not have staff or contractors/language services who are trained to communicate with the individual with Limited English Proficiency.</li> <li>(N/A) The individual does not have Limited English Proficiency.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.45</li> <li>Bulletin 00-04-13, <i>Limited English Proficiency</i> (ID/A waivers)</li> <li>Adult Autism Waiver (AAW)</li> <li>Adult Autism Waiver SC Manual</li> </ul>
36a.	SCO obtains staff or contractors/language services.	<ul style="list-style-type: none"> <li>The SCO ensures they have staff or contractors/language services to support individuals who have Limited English Proficiency.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
36b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> </ul>	If YES, when:	<ul style="list-style-type: none"> <li>The SCO calculates the number of days</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<p>between the notification date to the SCO and the remediation action date.</p>
36c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
37.	<p><b>**The ISP includes information about how the individual communicates and the communication supports and services the individual may need to assure effective communication.</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the ISP includes information about how the individual communicates and, if necessary, communication supports and services to assure effective communication based on a review of the Supports Intensity Scale (SIS), SIB-r, service notes and Individual Monitoring Tools (IMTs).</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The ISP includes information about how the individual communicates and, if necessary, communication supports and services to assure effective communication.</li> <li>(No) The ISP includes how the individual communicates but does not include information on communication supports and services, that based on the ISP the individual needs to assure effective communication.</li> <li>(No) The ISP does not include information about how the individual communicates and, if necessary, communication supports and services to assure effective communication.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-08-18, <i>Communication Supports and Services</i></li> <li>Everyday Lives Values in Action 2021</li> </ul>
37a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO updates the ISP to include information about communication supports and services the individual may need to assure effective communication.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
37b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
37c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
38.	<b>If there is documentation in the individual’s record of interest in employment or a goal of employment, the ISP supports how this interest or goal will be pursued.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the individual has expressed interest in or has a goal related to employment based on a review of service notes, Individual Monitoring Tools, and the entire ISP.</li> <li>If the individual has expressed interest in or has a goal related to employment, the reviewer determines if the SC documented active and ongoing opportunities, appropriate employment options, and services that support an individual to pursue or retain competitive integrated employment in the ISP.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The individual expressed an interest in employment or has an employment goal and the SC documented the information described above.</li> <li>(No) The individual expressed an interest in employment or has an employment goal and the SC has not documented the information described above.</li> <li>(N/A) The individual expressed that he or she would not like to pursue competitive integrated employment and does not have an employment goal, or the individual is not of employment age.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.262 &amp; 6100.223</li> <li>Pathways to Employment Guidance for Conversations Document (ID/A waivers)</li> <li>Executive Order 2016-03</li> <li>Consolidated, P/FDS and Community Living Waivers (ID/A waivers)</li> <li>Bulletin, 00-20-02, <i>Individual Support Plans (ISPs)/Attachment #1 ISP Manual (ID/A Waivers)</i></li> <li>ODP – BSASP Pathways to Employment Tool (AAW)</li> </ul>



#	Question	Guidance	Response Option	Source Documents
				<ul style="list-style-type: none"> <li>AAW SC Manual (AAW)</li> </ul>
38a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO updates the ISP to include information on how the individual’s interest or goal of employment will be pursued.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
38b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
38c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
39.	<b>**At the annual ISP meeting, the SC provided education and information to the individual about employment services (i.e., competitive, integrated employment, OVR services, benefits counseling or the “Guidance for Conversations about Employment”).</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SC offered individual information about employment services at the annual ISP meeting (or initial ISP meeting if newly enrolled) based on a review of the ISP Signature Page or service notes.</li> <li>During the emergency period, consent with the ISP could be verified by electronic signatures, or electronic verification via secure email consent from the participant, his or her designee if applicable, and service providers, in accordance with HIPAA requirements. Signatures would include a date reflecting the ISP meeting date.</li> <li>In addition to electronic signatures or electronic verification, verbal consent with the content of the ISP was acceptable. SCs</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SC provided education and information about employment services at the ISP meeting, or the ISP Signature Page is checked “Yes”.</li> <li>(No) The SC did not provide education and information about employment services at the ISP meeting, or the ISP Signature Page is not checked or “No” is checked.</li> </ol>	<ul style="list-style-type: none"> <li>Consolidated, P/FDS, Community Living, and Adult Autism Waivers</li> <li>55 Pa Code Ch 6100.223 and 6100.262</li> <li>PA 1135 Approval Letter (Section 1135 of the Social Security Act)</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>were responsible for documenting the verbal consent of the participant and all providers responsible for implementation of the ISP and any other members who attended the ISP meeting on the ISP Signature Page or in a Service Note.</p>		<ul style="list-style-type: none"> <li>• Executive Order 2016-03</li> <li>• Pathways of Employment Guidance for Conversations Document – 2015 (ID/A waivers)</li> <li>• Operational Guide for Appendix K: Emergency Preparedness and Response for the Intellectual Disability/Autism (ID/A) Waivers – Version 2.0 (ID/A)</li> <li>• ODP – BAS Pathways to Employment Tool (AAW)</li> <li>• AAW SC Manual (AAW)</li> <li>• Operational Guide for Appendix K: Emergency Preparedness and Response for the Adult Autism Waiver – Version 2.0 (AAW)</li> </ul>
39a.	SCO provides the individual with information as required.	<ul style="list-style-type: none"> <li>• The SCO ensures employment education and information has been shared and documented on an ISP Signature page.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
39b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
39c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
40.	<b>A referral is made and the eligibility determination or case closure letter from OVR is in the individual’s record for those individuals who are under age 25, authorized for the prevocational component of CPS, and are paid subminimum wage.</b>	<ul style="list-style-type: none"> <li><b>This question is only applicable to individuals in an ID/A waiver(s) who meet all the following criteria:</b> <ul style="list-style-type: none"> <li>Authorized to receive the prevocational component of CPS for the first time during the review period.</li> <li>Are paid subminimum wage; and</li> <li>Were under the age of 25 at the time CPS prevocational services were first added to their ISP.</li> </ul> </li> <li>The reviewer determines if the eligibility determination or case closure letter from OVR is in the individual’s file and that it complies with the requirements in Bulletin 00-19-01, <i>OVR Referral Policy for ODP Employment-Related Services</i>.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) There is evidence of OVR correspondence in the individual’s file that meets the standards set forth in Bulletin 00-19-01, OVR Referral Policy for ODP Employment-Related Services.</li> <li>(No) There is no OVR correspondence in the file or if the correspondence is not acceptable in accordance with Bulletin 00-19-01, OVR Referral Policy for ODP Employment-Related Services.</li> <li>(N/A) The individual is enrolled in the AAW or the individual did not meet the criteria.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-19-01, <i>OVR Referral Policy for ODP Employment-Related Services</i></li> <li>Consolidated, P/FDS and Community Living Waivers</li> <li>Workforce Innovation and Opportunity Act (WIOA)</li> </ul>
40a.	SCO makes a referral to OVR.	<ul style="list-style-type: none"> <li>The SCO ensures that the individual is referred to OVR.</li> <li>The SCO submits documentation as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
40b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
40c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
41.	<b>The Employment/Volunteer section of the individual’s ISP indicates that the individual has an employment goal.</b>	<ul style="list-style-type: none"> <li><b>This question is only applicable to individuals that receive the following services:</b> <ul style="list-style-type: none"> <li><b>For ID/A Waivers: Supported Employment, Advanced Supported Employment the prevocational component of CPS, and Small Group Employment</b></li> <li><b>For AAW: Supported Employment, Career Planning, and Small Group Employment</b></li> </ul> </li> <li>The reviewer determines if the Employment/Volunteer section of the individual’s ISP indicates that the individual has an employment goal.</li> <li>PATH: HCSIS &gt; Plan &gt; Functional Info &gt; Functional Level &gt; Employment/Volunteer Information.</li> <li>Individuals receiving the applicable services above must have a “Yes” response to “Does this consumer have employment/volunteer goals?” in the Employment/Volunteer Information section of their ISP.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The individual’s ISP indicated he or she has an employment goal in the Employment/Volunteer section of the individual’s ISP.</li> <li>(No) The individual’s ISP did not indicate that he or she has an employment goal in the Employment/Volunteer section of the individual’s ISP.</li> <li>(N/A) The individual does not receive the applicable services.</li> </ol>	<ul style="list-style-type: none"> <li>Consolidated, P/FDS, Community Living, and Adult Autism Waivers</li> <li>Bulletin, 00-20-02, <i>Individual Support Plans (ISPs)/Attachment #1 ISP Manual (ID/A Waivers)</i></li> <li>AAW RO ARP Full Checklist (AAW)</li> </ul>
41a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>The SCO ensures the Employment/Volunteer section of the individual’s ISP is updated with an employment goal.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>

#	Question	Guidance	Response Option	Source Documents
41b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
41c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
42.	<p><b>*The individual’s identified physical and mental health care needs are addressed.</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the individual’s identified physical and mental health care needs are being addressed based on a review of the ISP, service notes, Incident Reports, PRE (AAW), HRST (if applicable), and Individual Monitoring Tools.</li> <li>The reviewer will put the information (ISP, service notes, Individual Monitoring Tools) into context by first considering this question: <b>does the documentation identify and address acute and chronic health conditions and wellness health promotion?</b> <ol style="list-style-type: none"> <li>This includes: <ul style="list-style-type: none"> <li>routine health care needs (recommended health screenings, checkups, and annual physicals),</li> <li>acute (unexpected situations that require follow-up such as infection treatment, skin breakdown, injuries),</li> <li>chronic health (diabetes, high blood pressure, seizure disorder, medication management, etc.),</li> <li>mental and behavioral health care needs (therapies, medications, behavior support),</li> <li>wellness and health promotion (nutritional consults, weight management, exercise, access to activities), and</li> <li>other needs such as mobility or assistive technology.</li> </ul> </li> </ol> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) All of the identified physical and mental health care needs have been addressed or if the individual does not take any medications and no physical and mental health care needs have been identified, i.e., “Health is stable” (interpret to mean health care needs are being addressed).</li> <li>(No) Any of the identified physical and mental health care needs are not addressed.</li> <li>(No) The SC did not document follow-up on identified physical and mental health care needs.</li> </ol>	<ul style="list-style-type: none"> <li>Everyday Lives Values in Action 2021</li> <li>Bulletin 00-10-06, <i>Supports Coordination Services</i> (ID/A waivers)</li> <li>ISP Monitoring Tool SC Guidance Document (ID/A waivers)</li> <li>Adult Autism Waiver, Appendix G (AAW)</li> <li>AAW SC Individual Monitoring Form Guidance (AAW)</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>○ To put information into context, apply a holistic approach to health and wellness that occurs over time and includes:                             <ul style="list-style-type: none"> <li>▪ Behavioral</li> <li>▪ Dental/Vision</li> <li>▪ Emotional/Mental</li> <li>▪ Physical</li> <li>▪ Psychological</li> </ul> </li> <li>2. Before determining a final response, review and incorporate the information from these two additional Individual Monitoring Tool questions:                             <ul style="list-style-type: none"> <li>▪ <i>Have there been changes observed in the individual's overall health functioning and health status since the last monitoring?</i> <ul style="list-style-type: none"> <li>• (A YES response needs follow-up of some type)</li> </ul> </li> <li>▪ <i>Necessary appointments were scheduled and kept.</i> <ul style="list-style-type: none"> <li>• Multiple SNs may need to be reviewed to determine this.</li> </ul> </li> </ul> </li> </ul> <p><b>COMMENT NEEDED - If "No," identify any specific physical and mental health care needs that are not addressed, or which needs the SC did not document follow-up.</b></p>		
42a.	SCO ensures the individual's identified physical and mental health care needs are addressed.	<ul style="list-style-type: none"> <li>• The SCO ensures the individual's identified physical and mental health care needs are addressed and follow-up is documented in HCSIS.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
42b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of "other" remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				remediation action date.
42c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status, or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
<b>43.</b>	<b>The SCO maintains records that they notified the AE and Regional Program Manager (RPM) or the AAW Regional Office if there was imminent risk to the health &amp; welfare of the individual.</b>	<ul style="list-style-type: none"> <li>If there is an imminent risk, there is a need to act immediately to protect the individual from the undesired event and when necessary, taking action to first enlist the support of emergency services.</li> <li>The reviewer determines if the SCO notified the AE and RPM (ID/A waivers) or the AAW Regional Office (AAW) of the imminent risk based on a review of service notes and Individual Monitoring Tools.</li> <li>The reviewer should request proof of notification during the review if it is not in the record.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) There was imminent risk and there is documentation of AE and RPM or the AAW Regional Office notification.</li> <li>(No) There was imminent risk and there is no documentation of AE and RPM or the AAW Regional Office notification.</li> <li>(N/A) There is no documented imminent risk.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> <li>Bulletin 00-10-06, <i>Supports Coordination Services</i> (ID/A waivers)</li> <li>AAW SC Manual (AAW)</li> </ul>
43a.	SCO notifies the AE and RPM or the AAW Regional Office as required.	<ul style="list-style-type: none"> <li>The SCO ensures that the AE and RPM or the AAW Regional Office are notified.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
43b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of "other" remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
43c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's</li> </ul>		

#	Question	Guidance	Response Option	Source Documents
		death, moving out of state, inactive record status, or transferring to another SCO. • The SCO enters the reason for the exception in the comment field.		
44.	<b>The ISP includes all identified medical personnel seen during the review period.</b>	• The reviewer determines all identified medical personnel such as doctors, dentists, psychiatrists, therapists/counselors, allied health professionals, specialists, etc. seen in the review period based on a review of service notes and Individual Monitoring Tools. • The reviewer determines if the ISP was updated with all identified medical personnel.	1. (Yes) The SC updated the ISP with all identified health care practitioners seen during the review period. 2. (No) The SC did not update the ISP with all identified health care practitioners seen during the review period.	• Everyday Lives Values in Action 2021 • ISP Manual Section 2.2 & 2.3 (ID/A waivers) • AAW SC Manual (AAW) • AAW ISP Worksheet (AAW) • AAW RO ARP Full Checklist (AAW)
44a.	SCO updates the ISP as required.	• The SCO must update the ISP to reflect all identified medical personnel seen during the review period.	If YES, when: • The SCO chooses the appropriate time frame from the drop down.	• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.
44b.	Other remediation action.	• The SCO submits documentation of “other” remediation actions taken to comply with the requirements. • The SCO enters the REMEDIATION ACTION taken in the comment field.	If YES, when: • The SCO chooses the appropriate time frame from the drop down.	• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.
44c.	Remediation by exception.	• Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO. • The SCO enters the reason for the exception in the comment field.		



#	Question	Guidance	Response Option	Source Documents
45.	<b>The individual's preferences for wellness activities are documented in the ISP.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the individual's preferences or lack of preference for wellness activities have been identified based on a review of service notes, and Individual Monitoring Tools and documented in the ISP.</li> <li>Areas in which the individual may wish to pursue wellness may include activities from any of the domains of wellness. The domains of wellness are: Emotional, physical, intellectual, spiritual, environmental, social, occupational, and financial.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The individual's preferences or lack of preference for wellness activities have been documented.</li> <li>(No) The individual's preferences for wellness activities have not been documented.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code 6100.223</li> <li>Everyday Lives Values in Action 2021</li> </ul>
45a.	SCO updates the individual's record as required.	<ul style="list-style-type: none"> <li>The SCO submits documentation of updates made to the individual's record where preferences or lack of preference for wellness activities have been identified.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
45b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of "other" remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
45c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status, or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
46.	<b>**If the individual has complex needs, the SC ensured there are strategies for supports in place to address those needs.</b>	<b>For individuals in an ID/A waiver:</b> <ul style="list-style-type: none"> <li>The reviewer determines if the individual has complex needs based on a review of service notes, Individual Monitoring Tools, and ISP.</li> <li>Complex needs are multiple (2 or more) needs across personal, physical, mental, social, and financial well-being that require</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) There are strategies for supports in place to address identify complex needs.</li> <li>(No) There are no strategies for supports in place to address identified complex needs.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa Code Chapter 6100.223</li> <li>Everyday Lives Values in Action 2021</li> <li>Bulletin 00-20-02, <i>Individual Support</i></li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>significant attention or resources. This can include 2 or more needs in one area and should be individualized.</p> <ul style="list-style-type: none"> <li>• Examples:                             <ul style="list-style-type: none"> <li>○ Medical complexity</li> <li>○ Socioeconomic factors</li> <li>○ Mental illness</li> <li>○ Behaviors and traits</li> </ul> </li> </ul> <p><b>For individuals in the AAW:</b></p> <ul style="list-style-type: none"> <li>• The reviewer determines if the individual has complex needs based on a review of the most current PRE.</li> <li>• Complex needs are needs in any of the following domains:                             <ul style="list-style-type: none"> <li>• Law Enforcement contact and accused of or being charged with a crime</li> <li>• Risk of Harm to Self/Others</li> <li>• Unstable Living Environment</li> <li>• Dysfunctional or absence of Natural Supports</li> <li>• Substance Use</li> <li>• Chronic Medical Conditions</li> <li>• Stressful Life Events</li> <li>• Co-occurring Mental Health Diagnosis</li> </ul> </li> <li>• The reviewer determines if strategies for supports are in place to address identified complex needs based on a review of service notes, Individual Monitoring Tools, ISP, and the most current PRE (AAW).</li> </ul>	<p>3. (N/A) The individual does not have complex needs.</p>	<p><i>Plans (ISPs)/Attachment #1 ISP Manual (ID/A Waivers)</i></p> <ul style="list-style-type: none"> <li>• Adult Autism Waiver (AAW)</li> </ul>
46a.	SCO updates the ISP as required.	<ul style="list-style-type: none"> <li>• The SCO ensures that a plan is in place to address complex needs.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
46b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>• The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				remediation action date.
46c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
47.	<b>The SCO ensures all reportable incidents are documented in the Enterprise Incident Management (EIM) system as required.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if there were reportable incidents based on a review of service notes, Individual Monitoring Tools, and other available documentation. The reviewer will determine if each reportable incident was documented in EIM.</li> <li>The reviewer will need to determine if the SCO recognized and/or was made aware of the need to document the incident(s) in EIM by an examination of all available documentation. The record must reflect the steps taken in order to ensure the incident report is entered in a timely manner by the entity responsible for reporting the incident in EIM.</li> <li>If the SCO notified a Provider of the need to enter an incident and the Provider failed to do so, the SCO is required to elevate this issue to the County ID Program/AE/BSASP Regional Office.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The SCO ensured reporting of all incidents for the individual, meaning incidents were recorded in EIM and there is no evidence/documentation of an unreported incident, or the incident was elevated to the County ID Program/AE/BSASP Regional Office.</li> <li>(No) The SCO did not ensure reporting of all incidents for the individual, meaning there is evidence/documentation of an unreported incident occurring during review period.</li> <li>(N/A) There is no evidence/documentation to indicate that any incidents occurred during the review period that were required to be reported.</li> </ol>	<ul style="list-style-type: none"> <li>55 Pa. Code §6100.401</li> <li>Bulletin 00-21-02, <i>Incident Management</i></li> </ul>
47a.	SCO ensures that an unreported incident is filed in EIM.	<ul style="list-style-type: none"> <li>The SCO submits the incident number(s) confirming that the unreported incident(s) have been filed in EIM within 24 hours of notification.</li> <li>ODP will verify in EIM that the incident number(s) provided references that the unreported incidents(s) and will record all incident numbers(s) in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
47b.	SCO ensures SCO staff complete required training.	<ul style="list-style-type: none"> <li>The SCO submits documentation that demonstrates the SCO staff completed training on ODP's Incident Management bulletin and the SCO's annual training on incident management as appropriate.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to</li> </ul>

#	Question	Guidance	Response Option	Source Documents
				the SCO and the remediation action date.
47c.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	If YES, when: <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
47d.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
48.	<p><b>The SCO educates individual based on the circumstances of incidents for which the SCO is required to file in EIM.</b></p> <p><b>Non-Scored</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the SCO offered and provided education to individuals about the circumstances of incidents that the SCO reported.</li> <li>Given the individualized nature of incidents, the reviewer will need to read the incident report to determine if the SCO educated the individual based on the circumstances of the incident (see the Verification of Incident Classification Screen in the Final Section of the incident report). Has the individual been notified of the findings and actions taken as a result of the incident as well as the investigation determination, if applicable? Review of SC Comments in incident reports, SC Service notes and Individual Monitoring Tools in order to determine what appropriate education may be based on the circumstances of the situation. The reviewer will need to consider the communication abilities of the individual, the nature of the incident and other factors to determine if the SCO completed this activity appropriately.</li> <li>Education must include:                             <ul style="list-style-type: none"> <li>Informing the individual that an incident occurred, a description of the incident, actions taken (including status</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) There is evidence that the individual was offered and educated about the circumstances of all incidents reported in the EIM system by the SCO.</li> <li>(Yes) There is evidence that the individual was offered education about the circumstances of all incidents reported in the EIM system by the SCO but refused the information.</li> <li>(No) There is no evidence that the individual was offered and/or educated about the circumstances of all incidents reported in the EIM system by the SCO.</li> <li>(N/A) The individual did not have incidents for which the SCO is required to file in EIM during the review period.</li> </ol>	<ul style="list-style-type: none"> <li>Exploratory</li> <li>55 Pa. Code §6100.405</li> <li>Bulletin 00-21-02, <i>Incident Management</i></li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>of target), investigation determination and corrective action(s).</p> <ul style="list-style-type: none"> <li>Evidence includes but is not limited to: documentation in service notes, the ISP, EIM/or sign-in sheets, transcripts, or certificates of completion from any training or educational opportunities.</li> <li>The SCO must offer education and individuals have the right to refuse the offer. Documentation of educational opportunities should reflect that they were presented in a manner in which the individual can understand. Refusals and attempts to educate should be documented in the record.</li> </ul> <p><b>COMMENT NEEDED – If “No,” provide details of what incidents did not have education provided.</b></p>		
49.	<p><b>The SCO identified and took action for issues identified upon review of initial incident reports in EIM.</b></p>	<ul style="list-style-type: none"> <li>The reviewer determines if the SCO identified an issue in the initial incident report based on a review of initial incident report. If an issue was identified, the reviewer determines if the service notes, Individual Monitoring Tools and/or EIM (including SC Comments) contains evidence that the SCO took action for identified issues related to the initial incident report in EIM.</li> <li>Upon review of an initial incident report in EIM SCO may need to take action that includes, but is not limited to:               <ul style="list-style-type: none"> <li>Contacting individuals (via the individual’s preferred communication method or in person depending on the nature of the incident) to assess their current status and offer assistance to help meet their needs</li> <li>Communicating with the entity that entered the incident to ensure health, safety, and rights are protected</li> <li>Requesting and obtaining additional information (not present in the initial incident report) needed to adequately explain an event in order to assess the actions taken to protect health, safety, and rights</li> <li>Requesting and obtaining additional information needed to address questions and concerns from the initial County ID Programs/AEs/BSASP Regional Office and/or regional management review, if noted during the SCO’s review of the initial incident</li> <li>Providing recommendations and timely actions to County ID Programs/AEs/BSASP Regional Office or their delegates,</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The documentation indicates that the SCO identified an issue and took action for all identified issues upon review of initial incident report(s) in EIM.</li> <li>(No) For one or more incidents, an issue was identified by the record reviewer but was not identified as such by the SCO or the documentation indicates that the SCO identified an issue(s) but did not take action for identified issues upon review of initial incident report(s) in EIM.</li> <li>(N/A) The documentation indicates that the SCO did not identify an issue upon review of initial incident report(s) in EIM or if there were no incidents in EIM.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> <li>ODP Announcement 21-049, IM Clarification of Responsibilities for SCOs</li> <li>ODP Announcement 22-012, Clarification of IM Responsibilities for SCO in the AAW</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<p>in order to improve a situation and increase protections for an individual, when the review of actions taken to protect health, safety, and rights reveals inappropriate or potentially ineffective risk mitigation strategies</p>		
49a.	SCO took action for issues identified upon review of initial incident reports in EIM.	<ul style="list-style-type: none"> <li>The SCO submits documentation of actions taken for issues identified upon review of initial incident reports in EIM.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
49b.	Other remediation action.	<ul style="list-style-type: none"> <li>The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
49c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual’s death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		
50.	<b>The SCO identified and took action for issues identified upon review of final incident reports in EIM.</b>	<ul style="list-style-type: none"> <li>The reviewer determines if the SCO identified an issue and took action upon review of final incident reports in EIM based on a review of the record which includes service notes, Individual Monitoring Tools and SC Comments in EIM. There may be times when the SC notes something in the SC Comments that the reviewer would expect to see in the Final Section but upon review of the Final Section, information is not contained in the Final Section.</li> <li>Physical Restraint and Medication Error incidents do not have final incident reports.</li> </ul>	<ol style="list-style-type: none"> <li>(Yes) The documentation indicates that the SCO identified an issue and took action for all identified issues upon review of final incident report(s) in EIM.</li> <li>(No) For one or more incidents, an issue was identified by the record reviewer but was not identified as such by the SCO or the documentation indicates that the SCO identified an issue(s) but did not take action for identified issues upon review of final incident report(s) in EIM.</li> </ol>	<ul style="list-style-type: none"> <li>Bulletin 00-21-02, <i>Incident Management</i></li> <li>ODP Announcement 21-049, IM Clarification of Responsibilities for SCOs</li> <li>ODP Announcement 22-012, Clarification</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>• Upon review of a Final Section of an incident report in EIM the SCO may need to take action that includes, but is not limited to:                             <ul style="list-style-type: none"> <li>○ Contacting individuals (via the individual’s preferred communication method or in person depending on the nature of the incident) to assess their current status and offer assistance to meet their needs</li> <li>○ Requesting and obtaining additional information needed to address questions and concerns from the initial County ID Programs/AEs/BSASP Regional Office and/or regional management reviews, if noted during the SCO's review of the initial incident</li> <li>○ An assessment of preventative and additional corrective actions for appropriateness and/or effectiveness to mitigate risk</li> <li>○ Contacting County ID Programs/AEs/BSASP Regional Office or their delegates if questions and concerns from the initial County ID Program/AE/BSASP Regional Office and/or regional management review are not addressed in the Final Section of the incident report</li> <li>○ Providing recommendations to County ID Programs/AEs/BSASP Regional Office or and where necessary, their delegates, in order to improve a situation and increase protections for the individual, when the review reveals inappropriate or potentially ineffective risk mitigation strategies</li> <li>○ Complete changes to an ISP based upon the incident, if applicable</li> </ul> </li> </ul>	<p>3. (N/A) The documentation indicates that the SCO did not identify an issue upon review of final incident report(s) in EIM, or the final section of the incident report has not been completed yet, or the incident does not have a final incident report, or there were no incidents in EIM.</p>	<p>of IM Responsibilities for SCO in the AAW</p>
50a.	SCO took action for issues identified upon review of final incident reports in EIM.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of actions taken for issues identified upon review of final incident reports in EIM.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the notification date to the SCO and the remediation action date.</li> </ul>
50b.	Other remediation action.	<ul style="list-style-type: none"> <li>• The SCO submits documentation of “other” remediation actions taken to comply with the requirements.</li> </ul>	<p>If YES, when:</p> <ul style="list-style-type: none"> <li>• The SCO chooses the appropriate time frame from the drop down.</li> </ul>	<ul style="list-style-type: none"> <li>• The SCO calculates the number of days between the</li> </ul>

#	Question	Guidance	Response Option	Source Documents
		<ul style="list-style-type: none"> <li>The SCO enters the REMEDIATION ACTION taken in the comment field.</li> </ul>		notification date to the SCO and the remediation action date.
50c.	Remediation by exception.	<ul style="list-style-type: none"> <li>Remediation can be completed by exception, meaning there is no way to remediate the non-compliance due to an individual's death, moving out of state, inactive record status or transferring to another SCO.</li> <li>The SCO enters the reason for the exception in the comment field.</li> </ul>		