

Individual Assessment Form (IAF) Clarifications

June 2016

**Josh Anderson, Rhea Kemper and
Ashley Howard-McKinney**

Agenda Topics

- **Overview**
- **Behavior Domain**
 - Frequency Guidelines
 - Required Elements for Scoring Above “0”
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 - Plan
 - Documentation
 - Exception Reviews
- **Medical Domain**
 - Frequency Guidelines
 - Question 27. Oxygen & Respiratory Therapy
- **Implementation**
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 - Calendar Year 2015 Exception Reviews

Overview

Overview

- **Clarifications are the result of input from stakeholder workgroups and expert panels consisting of stakeholders and DODD staff**
- **Additional recommendations for acuity/staff intensity measurement from these workgroups will be taken to PCG, the reimbursement contractor, for consideration in the development of a new ICF Reimbursement model**
- **Language in the IAF Instructions updated to align with person-centered planning practices**

Behavior Domain

Behavior Domain

- **Frequency Guidelines**

- References to “occasional” mean 1-12 days in the quarter.
- References to “frequent” mean 13-44 days in the quarter.
- References to “daily” mean at least once per day for at least half of the days in the quarter.
- References to “continual” mean more than once per day for at least half of the days in the quarter.

Examples

- **John requires an intervention which can be counted every day in March, but did not require this intervention in January or February. What frequency is appropriate for the March 31 RPED?**

Frequent

- **This intervention is required to continue at least once per day through April and May, but is no longer required for the month of June. What frequency is appropriate for the June 30 RPED?**

Daily

- **This intervention is again required, multiple times per day for every day in July and September. What frequency would be appropriate for the September 30 RPED?**

Continual

- **Sally requires an intervention which can be counted twice in October, twice in November, and once in December. What frequency would be appropriate for the December 31 RPED?**

Occasional

Behavior Domain

- **Required Elements for Scoring Above “0”**

- Note that “0” does not equate to zero behaviors or zero staff time. It is a base level of care for individuals with an ICF level of care.
- Assessment
 - An assessment must have been completed no more than 365 days prior to when the behavior was scored on the IAF. This may include clinical assessments from psychologists, therapists, etc. and/or a comprehensive functional assessment by a QIDP.
 - Contents must include
 - Description of the behavior that may be demonstrated by the individual
 - Identification of triggers, precursors, or motivating factors for the behavior
 - Typical duration of incidents
 - If the behavior has not been exhibited within the past year, the assessment must clearly identify the indicators that verify the behavior is likely to recur in the absence of specific preventive measures included in the ISP.

Behavior Domain

- **Required Elements for Scoring Above “0”**
 - Plan
 - Strategies in the plan must be directly correlated to the behavior scored in the IAF and referenced in the assessment.
 - Strategies must detail the actions required by staff to either prevent the scored behavior and/or to intervene in the event that it does occur.
 - Some common behavior strategies may or may not require 1:1 staff time or attention. The plan must clearly describe how the interventions result in time dedicated to this particular individual. The strategies listed below will be assumed to NOT require staff time unless the plan clearly specifies how this is time intensive. For example, it may be necessary to provide eyes-on monitoring, frequent checks, environmental safety protocols, or guarding/blocking techniques in conjunction with these strategies.
 - Ignoring
 - Redirection
 - Supervision
 - When a preventive or reactive strategy may be perceived as a general support provided to any resident, be sure to describe how, for this person, the strategy relates directly to the scored behavior. For example, it may be important to perform a task in a particular way, using a certain approach, or communicating in a specific style to prevent harm to self or others.

Behavior Domain

- **Required Elements for Scoring Above “0”**
 - Documentation
 - Only strategies that clearly require staff time may be counted in the frequency referenced in the IAF. Prompting an individual to do something he is able to do independently would not be counted.
 - May include codes to reflect specific strategies outlined in the plan
 - May include total time spent supporting the individual with proactive/reactive strategies

Behavior Domain

- **Exception Reviews**

- Will include a review of assessment, plan, and documentation to validate scoring. Any missing component may result in a change in score.
- Will include verification that proactive/reactive strategies requiring staff time were implemented in accordance with the frequency noted in the IAF.
- If a change in score is recommended, providers will receive a summary of the required element that was missing.

Medical Domain

Medical Domain

- **Frequency Guidelines**

- References to “occasional” mean 1-12 days in the quarter.
- References to “frequent” mean 13-44 days in the quarter.
- References to “daily” mean at least once per day for at least half of the days in the quarter.
- References to “continual” mean more than once per day for at least half of the days in the quarter.
- **References to “all shifts” means at least three times in a 24-hour period, one of which occurs between the hours of 11:00 pm and 7:00 am, for at least half the days in the quarter.**

Examples

- **Provider A has three shifts of nursing care that run from 7AM-3PM, 3PM-11PM, and 11PM-7AM. Derek requires a medical intervention which can be scored on the IAF at 8AM, 1PM, and 1AM for at least half of the days in the quarter. Would this count as “All Shifts”?**

Yes. Even though there is no intervention during the 3PM-11PM shift the frequency guideline requirement of occurring three times in a 24-hour period, one of which occurred between the hours of 11PM and 7AM, has been met.

- **Provider B has two shifts of nursing care that run from 7AM-7PM and 7PM-7AM. Abby requires a medical intervention which can be scored on the IAF at 8AM, 1PM, and 8PM for at least half of the days in the quarter. Would this count as “All Shifts”?**

No. Despite the fact that these interventions occur during each of the scheduled shifts, one of them does not occur between the hours of 11PM and 7AM.

Medical Domain

- **Question 27. Oxygen & Respiratory Therapy**
 - Special measures to treat respiratory conditions, including but not limited to . . . IPPB, respirators, suctioning and oxygen. Do NOT count stand by oxygen or other as-needed special measures unless actually administered. Do NOT include prescribed medications e.g. asthma inhalers.
 - Incentive spirometry, pursed lip breathing, or other strategies used to generally promote respiratory health are not to be scored.
 - Airway clearance procedures, including the following, should be counted: IPPV, cough assist, CPT, PEP, high frequency chest wall oscillation vest, and IPV.

Implementation

Implementation

- **Clarification effective**
 - July 1, 2016 (For September 30, 2016 RPED)
- **Calendar Year 2015 Exception Reviews**
 - Providers “held harmless” for questions reviewed in the Behavior Domain
 - Question 27 scores reverted back to facility submission if individual able to perform Incentive Spirometer treatment
 - Annual scores were mailed and are also available via the IAF application

Resources

- **DODD's website:** Valuable information on everything new related to ICFs
dodd.ohio.gov/IndividualFamilies/WhereILive/Pages/IntermediateCareFacilities.aspx
- **DODD staff**
 - Josh Anderson, MDA Operations Manager
 - Phone - (614) 387-0576
 - Email - Joshua.Anderson@dodd.ohio.gov
 - Ashley Howard-McKinney, ICF Unit Manager
 - Phone - (614) 644-7596
 - email - Ashley.Howard@dodd.ohio.gov

Questions?

Reminder:

Bed Hold Day Webinar Next Week

Same time, same place!