

Cathy Cooper  
Authorized Signature

**Number:** SPD-AR-10-114  
**Issue Date:** 12/17/2010

**Topic:** Other

**Due Date:** 12/20/2010

**Subject:** SPD Quality Assurance (1%) Case Reviews

**Applies to (check all that apply):**

- |                                     |                               |                                     |                                      |
|-------------------------------------|-------------------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/>            | All DHS employees             | <input type="checkbox"/>            | County Mental Health Directors       |
| <input checked="" type="checkbox"/> | Area Agencies on Aging        | <input type="checkbox"/>            | Health Services                      |
| <input type="checkbox"/>            | Children, Adults and Families | <input checked="" type="checkbox"/> | Seniors and People with Disabilities |
| <input type="checkbox"/>            | County DD Program Managers    | <input type="checkbox"/>            | Other (please specify):              |

**Action Required:** To comply with quality assurance requirements in the 1915(c) Waiver, a random sample of clients receiving waived services is to be reviewed annually using a standard survey. The review process is separated into three quarters (cycles). The current review cycle will end December 31, 2010. Each office will receive a new list of randomly selected cases by January 3, 2011 for the next cycle. The list will be greater than required to allow for changes in client status throughout the year and to assure an adequate sample. The number of reviews required to be completed will be indicated on the list. If additional cases are needed to complete the required number of reviews, please send a request to [QA.Team.SPD@state.or.us](mailto:QA.Team.SPD@state.or.us).

Results of the reviews are to be entered electronically into the 1% tool. A paper tool was also developed to assist with capturing data during the review process. Both can be accessed from our website at <http://www.dhs.state.or.us/spd/tools/qa/index.htm>.

**All results must be entered electronically.**

**Review Process Instructions:** Below outlines the four steps for 1% reviews. Each step must be done to complete a review.

Step #1 - Electronic review of the case using OACCESS. This step may also require checking other systems such as MMIS or the Mainframe.

Step #2 - File review to locate required forms and documentation of items not verified through the electronic review.

Step #3 - Client visit. Perform a "mini" assessment to determine if the assessment

matches the existing CAPS assessment or to clarify questions raised during the electronic review of the case.

Step #4 - Enter results electronically using the new review tool:

- Open review tool (Link to website is above).
- Every field in the survey is required with the exception of the note fields.
- To navigate through the tool use the selections in the bottom left hand corner of the screen. Selections available are “Back” or “Next”.
- To submit or enter a new review click “Finish”. At this point you may also close out of the tool.
- To review, print, or save a summary click “Review”. At this point you will need to click “Return to Survey” to enter a new review or close out of tool.
- Once you begin entering a review, you must complete it. There is no method for retrieving a partially entered review.

For further instruction regarding entering information into the electronic tool, please contact [QA.Team.SPD@state.or.us](mailto:QA.Team.SPD@state.or.us).

**Field/Stakeholder review:**     Yes     No

**If yes, reviewed by:**

*If you have any questions about this action request, contact:*

<b>Contact(s):</b>	<a href="mailto:QA.Team.SPD@state.or.us">QA.Team.SPD@state.or.us</a>		
<b>Phone:</b>		<b>Fax:</b>	
<b>E-mail:</b>	Above		