



Quality Improvement Organization
National Core Indicator
In-Person Survey
Standard Operating Procedure

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AUDIENCE

- DDA Headquarter Staff
- Liberty Healthcare Staff

PURPOSE

The National Core Indicators (NCI) is a program that uses surveys for state developmental disabilities agencies to measure and track their own performance. The Developmental Disabilities Administration (DDA) uses these surveys to judge results of employment, rights, service planning, community inclusion, choice, and health and safety. This is to help provide information on the results of DDA's programs. The DDA is committed to improving people's quality of life.

DEFINITIONS

- A. "Advocate Reviewer" is a person with an intellectual or developmental disability, employed by Liberty, who is conducting the IPS. Advocate Reviewer qualifications require:
- a. Experience in public sector quality satisfaction surveys of people with I/DD;
 - b. Working knowledge of person-centered practices with adults who have an intellectual or other developmental disability.
- B. "Background Information" means a section of the In-Person Survey in ODESA intended to capture a person's personal information prior to the completion of the survey.
- C. "Consent" means the person has given permission to complete the survey. Consent could be in the form of verbal, written, or other methods of communication identified in the person's PCP. Consent from a legal guardian is not required for people receiving waived services to complete the survey.

- D. “Community Coordination Services” or “CCS” are targeted case management services for people who are enrolled in a DDA Medicaid Waiver or State-Funded program.
- E. “DDA Medicaid Waiver program” means each Medicaid Home- & Community-Based Waiver program submitted by the Maryland Department of Health and approved by the Centers for Medicare & Medicaid Services pursuant to § 1915(c) of the federal Social Security Act, which is overseen and administered by DDA: Community Pathways, Community Supports and Family Supports.
- F. “DDA Provider” means an individual or entity, licensed or certified/approved by the Maryland Department of Health, that furnishes DDA-funded services to applicant(s) or participant(s) in accordance with the DDA’s requirements and, if furnishing Waiver program services, enrolled as a provider in the Medicaid Program.
- G. “Human Services Research Institute” or “HSRI” means an organization who assesses the outcomes of services provided to individuals and families through the conduction of the National Core Indicators (NCI) surveys.
- H. “In-Person Survey” means a face-to-face and or remote survey completed with people with a developmental disability who are 18 years of age or older.
- I. “Inter-rater Reliability” or “IRR” means the degree of agreement among independent surveyors who documents responses for the In-person Survey.
- J. “LibertyTRAKs” means the data management system used by Liberty Healthcare to track and maintain data gathered.
- K. “National Core Indicators” or “NCI” means a voluntary effort by public developmental disabilities agencies to measure and track their own performance through standardized surveys.

- L. “Online Data Entry System Application” or “ODESA” means the online platform in which all National Core Indicator survey results are entered.
- M. “Participant/people/person” means an individual enrolled in, and receiving, DDA-funded waiver services.
- N. “People on the Go” or “POG” is a group of advocates with intellectual and developmental challenges who use their voices to be heard and recognized. POG aids in recruiting and supporting Advocate Reviewers employed by Liberty. People on the Go assist Advocate Reviewers to prepare for surveys as needed, with the following:
- a. Transportation for surveys scheduled in-person;
 - b. Familiarity with computer equipment, Microsoft Teams and Google Meet;
 - c. Technology back-up plans during surveys;
 - d. HIPAA compliant work settings to conduct remote surveying; and
 - e. Method to record responses with 85% inter-rater reliability
- O. “Person-Centered Plan” or “PCP” means a written plan that is developed by a planning process driven by the individual with a developmental disability to:
1. Identify the goals and preferences of the individual. Identify services to support the individual in pursuing the individual’s personally defined outcomes in the most integrated community setting.
 2. Direct the delivery of services that reflect the individual’s personal preferences and choice; and
 3. Identify the individual’s specific needs that must be addressed to ensure the individual’s health and welfare.
- P. “Pre-survey questions” are questions asked before the survey takes place. Gaining answers to the pre-survey questions allows the reviewer to tailor the survey questions more specifically so the respondent understands the questions being asked and facilitates

the survey process. “Proxy Questions” mean required questions that must be asked prior to proceeding with the survey. A person must be able to answer both questions validly in order to take part in the survey.

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R. “Proxy Respondent” or “PR” is a provider staff or family member who knows the person well and will support them to complete the survey. Due to the nature of NCI questions, proxy respondents cannot be case managers (e.g., CCS’s).

S. “Quality Reviewer” means the lead Liberty employee assigned to conduct a survey.

Quality Reviewer qualifications require:

- a. A bachelor's degree in a health and human service or related field and 4 years' experience in the field of I/DD.;
- b. Experience with I/DD services; CMS Home and Community Based Services (HCBS); Quality Improvement; and Maryland Administrative Code;
- c. Working knowledge of person-centered practices with children and adults who have an intellectual or other developmental disability.

T. “Regional Office” or “RO” means one of the four local offices of the DDA, serving as the point of contact for applicants, people, and DDA providers located in certain counties of Maryland. Each RO has the authority to review individual PCPs and authorize funding for services. The RO are:

1. Central Maryland Regional Office, serving Anne Arundel, Baltimore, Howard, and Harford Counties and Baltimore City;
2. Eastern Shore Regional Office, serving Caroline, Cecil, Dorchester, Kent, Queen Anne’s, Somerset, Talbot, Wicomico, and Worcester Counties;

3. Southern Maryland Regional Office, serving Calvert, Charles, Montgomery, Prince George's, and St. Mary's Counties; and
 4. Western Maryland Regional Office, serving Allegany, Carroll, Frederick, Garrett, and Washington Counties.
- U. "Self-Directed Supports" sometimes called consumer-direction or person-directed, provides people a greater degree of choice in how services are delivered, when, where, and the rate of payment. The core functions of self-direction are CHOICE and CONTROL over how services are provided, and who is being paid to provide these services.
- V. "Unmet Needs" are issues brought up by the person during the course of the survey that do not rise to the level of mandated reporting, but that the person may need attention for – most typically this is an issue with a particular service, or equipment/environmental adaptations the person needs or wants.

OVERVIEW

In partnership with the DDA, Liberty Healthcare Corporation will implement the NCI In-Person Survey through a statistically valid, random proportionate sampling of people receiving waiver services, 18 years of age or older, by DDA Medicaid Waiver program and Regional Office. Along with use of the standard survey/survey instruments from NCI®-IDD, Liberty will use the Online Data Entry System (ODESA) to capture all data to be used for Maryland's report about the following individual outcomes:

- Health, welfare, and rights,
- Staff stability and competency,
- Family outcomes, and
- System performance.

As the QIO-like entity conducting the surveys, Liberty's role is to provide the necessary components of discovery. Liberty will gather data to inform decision making by the DDA. Liberty will identify opportunities for system level improvements, including participant level trends, to be considered by the DDA.

View more information on the NCI Website: <https://www.nationalcoreindicators.org/>

View the NCI Founding Principles here:

https://legacy.nationalcoreindicators.org/upload/aidd/NCI_Founding_principles_FINAL1.pdf

All Liberty Staff completing NCI In-Person Survey's must complete the self-paced course and NCI live training remotely. You can view the NCI Generic Training here: [NCI Generic Training](#)

APPLICABILITY

This guidance applies to the Developmental Disabilities Administration (DDA) of the NCI In-Person Survey conducted by Liberty Healthcare staff.

- A. The NCI In-Person Survey is completed with adults 18 and older who have an intellectual or developmental disability. The person must receive at least one service from the DDA.
- B. Background information is gathered about the person receiving services in partnership with the Coordinator of Community Services (CCS).
- C. The survey is conducted by trained surveyors with the person receiving services and may include a proxy respondent (i.e., natural support, direct support professional, etc.) who knows the person well. However, the goal is to ask and allow the person to respond to questions. Trained surveyors have field-based experience conducting satisfaction surveys and experience as self-advocates.
- D. Using the survey provided by NCI, data collected will capture people's opinion regarding:
 1. Home
 2. Employment and Other Daily Activities
 3. Feeling Safe
 4. Friends and Family
 5. Community Participation and Leisure
 6. Rights and Privacy
 7. Staff
 8. Coordination of Community Services
 9. Community Inclusion
 10. Choices
 11. Technology
 12. Health and Wellness
 13. Access to Needed Services/Supports
 14. Self-Directed Supports

SAMPLING METHODOLOGY

- A. Remove all people receiving services who are below the age of 18.
- B. Randomize the remaining list by DDA Waiver program and Region.

- C. Determine the proportionate number of required surveys necessary to meet the target required by the DDA.
- D. The following sample distribution will be used (to be updated based on actual distribution of people receiving services in advance of pulling the official numbers):

Region	Community Pathways	Community Supports	Family Supports	Combined
Central Region	303	224	159	686
Southern Region	272	201	142	615
Western Region	79	58	41	178
Eastern Shore Region	53	40	28	121
Combined	707	523	370	1600

- E. The first 400 peoples of the 1600 people pulled (matching the proportion) are selected based on the random sequence of people in each region.
- F. If a person does not participate, the next person from the waiver/region list will serve as the replacement. This will ensure that the integrity of the original sampling methodology is retained (i.e., proportionate random sampling).
- G. The above procedure is repeated in the future years of the contract with completed and attempted cases removed.

SURVEY PROCESS

Development of the NCI Work Plan

Annually, the DDA Director of Quality Enhancement and Liberty Healthcare will collaborate to complete the NCI workplan and Bi-Crosswalk. Both documents are reviewed and approved by the DDA Director of Federal Programs.

The DDA Director of Quality Enhancement schedules a meeting with the Human Services Research Institute (HSRI) to discuss the approved work plan per HRSI guidelines.

- a. Work plans must be received by HSRI (2) business days prior to the scheduled meeting.
- b. Once the work plan is approved, Liberty reviewers move on to notification of people in survey sample.

Step 2: Notification of People in Survey Sample

Assignments for selected people are made in LibertyTRAKs, flagging the Quality Reviewer and indicating Advocate Reviewers assignments.

A list of all selected people is generated from LibertyTRAKs and emailed to the provider agency requesting assistance contacting each person in the sample. Provider contact is staggered throughout each quarter. When a response is not received within 3 business days, a follow-up email and phone call is made to the provider. If contact is not made with the provider, the reviewer reaches out to the DDA Regional Office for assistance contacting the provider.

Quality Reviewers reviews a person's PCP prior to contact, for the following: basic information about the person, communication needs/supports of the person to determine if an interpreter is needed (Language Line Interpreting Services are available as needed), guardianship status and/or primary contacts. Reviewers use information supplied by providers to contact people. Reviewers may also contact the person, their family, CCS, or other contact directly when contact information is available in LTSS. Reviewers make at least 3 attempts each (with a minimum of 1 business day between contacts) to contact selected people, their provider and CCS by phone or email.

Step 3: Consent

Reviewers are required to speak directly to the person to provide education about the survey and gain informed consent. People may verbally consent to participate or decline the survey. People who have a legal guardian may consent or decline participation in the survey without guardian approval.

Step 4: Proxy Determination

Proxy determination is required by NCI prior to conducting the survey. Valid answers for both NCI prescribed proxy questions are required to complete the survey without a proxy respondent.

People can choose to have another person present during the survey regardless of proxy determination responses.

Step 5: Scheduling the Survey

Preference of the person and proxy respondent (if applicable) is the first consideration in scheduling. Both in-person surveys and videoconferencing are options to complete the survey.

The following secure remote surveying platforms are available:

- Microsoft Teams account,
- Maryland.gov Google Meets account or
- Zoom.

Remote surveying can be used if the person has access to high-speed internet, a device that connects to video conferencing and a camera. The person and primary contact will receive a confirmation email including details of the survey within 1 business day of scheduling the survey.

Step 6: Background Information Collection

For each survey scheduled, the reviewer collects answers to NCI background information questions (demographics) from LTSS and inputs them into ODESA. Answers to background information questions are based on factual information found within LTSS – assumptions are not used to answer questions when information is missing. Some background information questions are permitted by NCI to be asked at the end of the survey.

Step 7: Confirming the Survey

Reviewers make a confirmation call to the person, **provider**, CCS or other contact 2 days in advance of the survey date. If confirmation cannot be completed prior to departure for an in-person survey, the reviewer will contact the person to reschedule.

Step 8: The Survey

When the survey begins, the reviewer(s) will provide an overview of the survey and answer any questions the person has. Reviewer(s) conduct the survey per instructions and guidelines created by NCI. Section I of the NCI IPS must be answered by the person if they are able. Proxy respondents may not respond to Section I of the survey. Section II of the survey should be directed at the person; however, the proxy respondent may support the person to answer these questions. If requested by the person, a follow-up session may be scheduled to complete the survey.

After the survey is complete, the reviewer(s) may obtain follow-up background information (questions that are noted as field-based questions on the NCI BI-Crosswalk). Unmet need and incident reporting is completed by the reviewer(s) as per NCI guidelines and PORII requirements.

Step 9: Inter-Rater Reliability

Surveyors must initially achieve 85% or higher inter-rater reliability scores and maintain throughout the year. Once initially achieved, 34% of in-person surveys are randomly selected for IRR throughout the year. Additional training is provided for reviewers who receive inter-rater reliability scores below 85%. Follow-up is completed with the person to ensure accuracy of any survey below 85% inter-rater reliability.

Step 10: Quality Control

Quality control is performed in ODESA and LibertyTRAKs. ODESA's survey dashboard is monitored weekly for accuracy of data: survey code, reason if not surveyed, answers date added, background completed, survey finished, last modified. Surveys are also reviewed in ODESA for completion of survey status, pre-survey, background information, proxy determination, consent, section I, Section II and surveyor feedback sections.

ODESA is regularly monitored to ensure the minimum number of surveys meet NCI's sampling requirements of 95% confidence level, 5% margin of error. Complete surveys are also reviewed for its proportion related to each of the four DDA regions. A weekly report including survey status information is generated from LibertyTRAKs and sent to the DDA contract monitor.

Survey responses are analyzed and released to participating states by HSRI annually and data is made available on DDA's website or NCI's website: <https://www.nationalcoreindicators.org/>. Surveys are retained by HSRI for 7 years after the final data reports are released by HSRI. Liberty retains all survey related information in LibertyTRAKs until one (1) year after the final data reports are released by HRSI.