

## ODDS Quality Improvement Data Report, February 2022

### Summary

ODDS Leadership requested the Quality Improvement Unit compile a data report focused on ODDS Licensing reviews and Centralized Abuse Management (CAM) system data. This exploratory report was not intended to answer any single question, but was designed to shape a foundational landscape, allowing for further questions to be explored from any single data set. Both the Licensing data and Serious Incident data are housed in living service IT systems (ASPEN and CAM). Living service systems result in records being created, updated and edited often. The byproduct of using a living data set is that information housed in the IT system is prone to change, causing these data sets to be a snapshot of the systems at the time of the data pull. Some small variations in data can be anticipated if these data pulls are conducted under the same criteria for the same time span of the pull. For example, a Case Manager might discover new information for a Serious Incident in CAM. In that event, the record's data points may be updated to reflect the new information, possibly resulting in a change to the record type. Future pulls may result in that record not meeting the criteria of the previous data pull.

(Centralized Abuse Management IT system, 2022)

(ASPEN IT system, 2022)

This report includes data for ODDS Licensing reviews. Specifically, these reviews were conducted at 24-Hour Residential homes that serve both children and adults. The review period captured in this report is September

## ODDS Quality Improvement Data Report, February 2022

2021-December 2021 and was collected from Aspen<sup>1</sup>. The data reflects renewal reviews completed during this time (which occur every two years), active and pending providers and newly Certified Medicaid Agencies.

In addition, you will be provided with information from CAM. The numbers reflected in the tables/graphs are over the same 4-month span (Sept – Dec) as the Licensing data. Requests are being made from our partners in eXPRS to have quarterly numbers on CME population served, that will accompany this report going forward. For this report (February 2022) we do not have the comparisons. By mid-March, QI should have the data needed to show CME SI numbers in comparison to population served.

This report will cover the same data points as the previous report (October 2021): SI types, Responsible Counties and SI counts by CME.

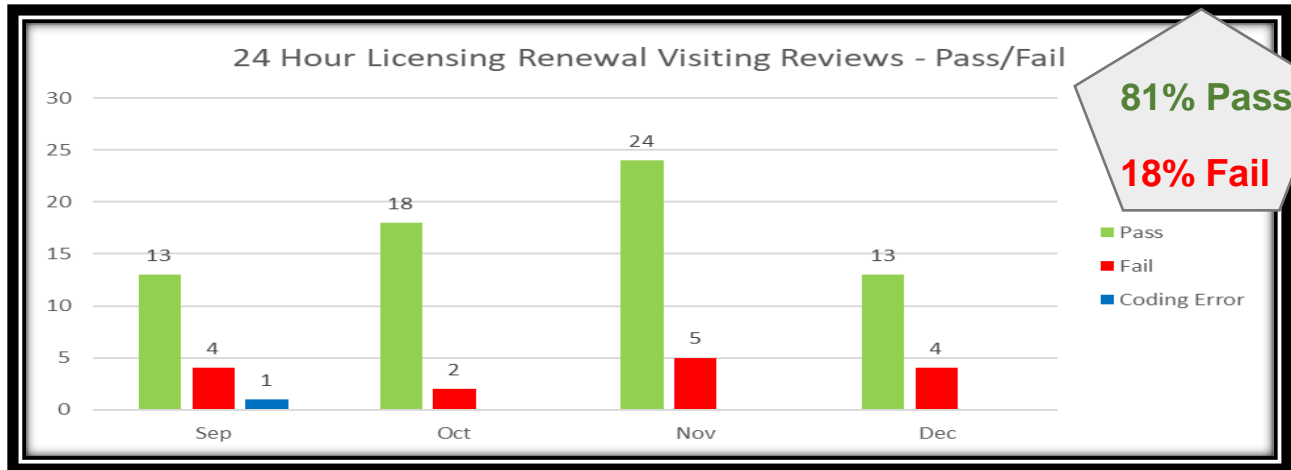
---

<sup>1</sup>Aspen is a dynamic system, meaning the data reported is dependent on the data inputted at the time of collection.

## TABLE OF CONTENTS

<b>SUMMARY .....</b>	<b>1-2</b>
<b>TABLE OF CONTENTS .....</b>	<b>3</b>
<b>STATEWIDE LICENSING DATA FOR 24-HOUR RESIDENTIAL HOMES .....</b>	<b>4-11</b>
Pass/Fail Data .....	4
Citation Data .....	5-8
Active & Pending Provider Data .....	9-11
MEDICAID AGENCY DATA .....	12
<b>CENTRALIZED ABUSE MANAGEMENT (CAM) .....</b>	<b>13-18</b>
SI'S BY TYPE .....	13-14
Serious Incident by Responsible County .....	15-16
SI BY CME TYPE .....	17-18

## Statewide Licensing Data for 24-Hour Residential Homes



(Chart 1)

ODDS licensors conducted 84 licensing renewal reviews. These reviews were considered hybrid reviews where a portion of the review was completed remotely, and the rest conducted on site in person. In total, 68 homes passed, 15 failed requiring at least one follow-up visit and 1 review contained a coding error<sup>2</sup>. During this review period two children’s residential homes were reviewed, both passed.

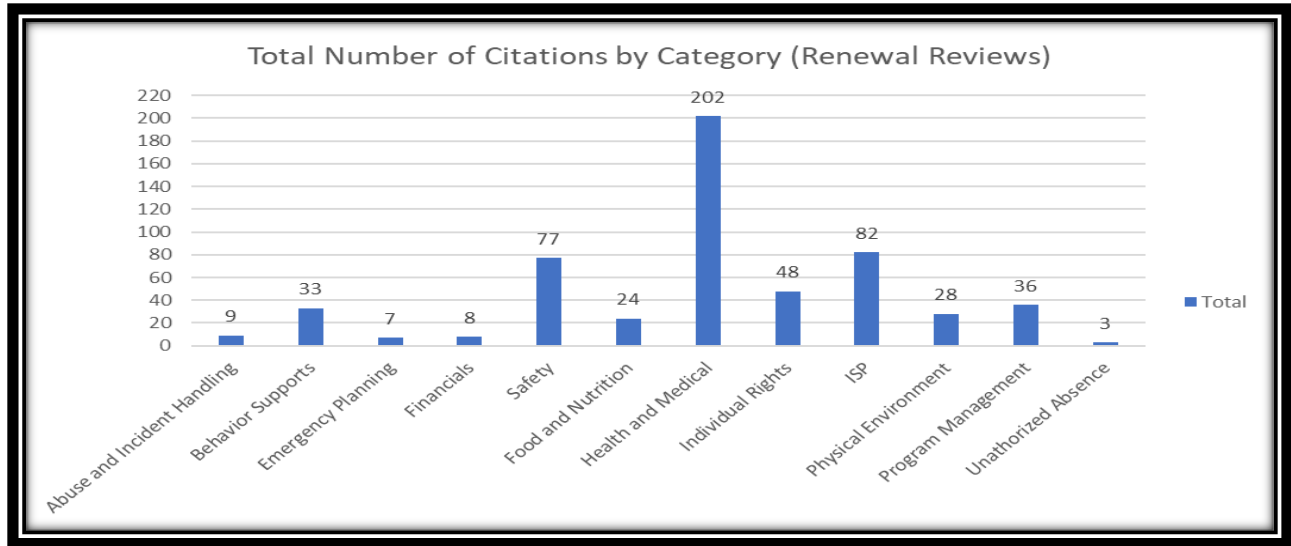
---

<sup>2</sup> “**Coding Errors**” may encompass citations indicating a “failure,” however, was misidentified as “passing” (not needing a follow-up visit). Pass/Fail indicator on the record may not have been completed or entered.

“**Pass**” indicates that while violations were found, none were significant health and safety concerns requiring a follow-up visit.

“**Fail**” indicates significant health and safety citations, and a required follow-up visit.

## ODDS Quality Improvement Data Report, February 2022



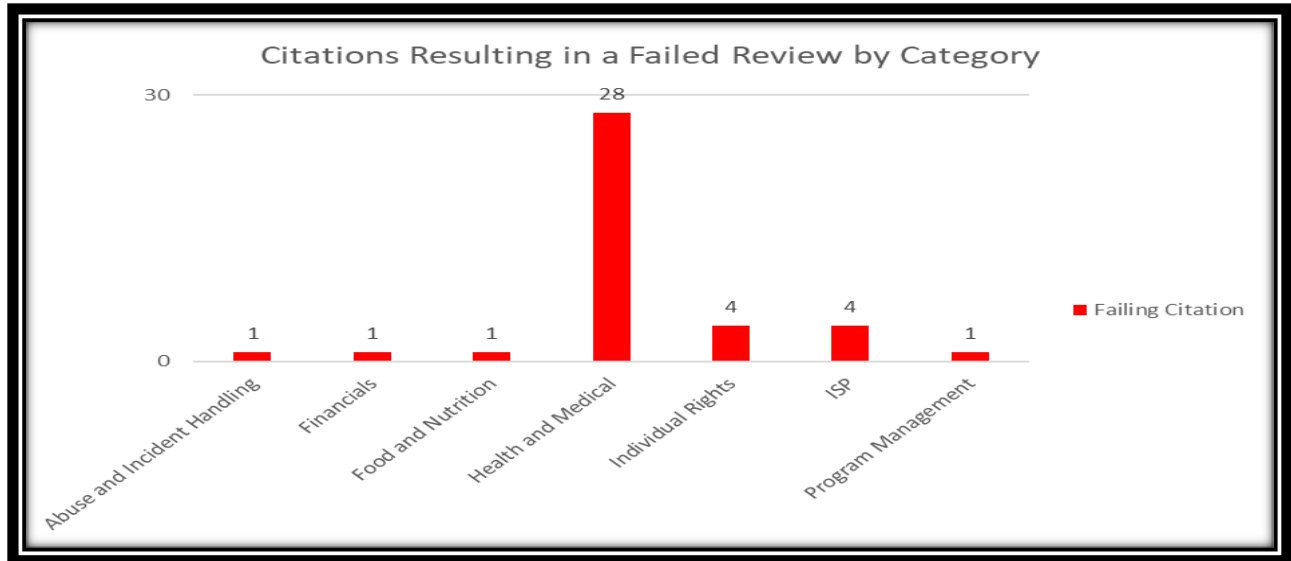
(Chart 2)

ODDS licensors issued 557 total citations during this review period<sup>3</sup>. This chart represents the citations issued, broken out by category.

---

<sup>3</sup> A single home may have more than one violation under a category. For example, in Health and Medical a single home may have a violation for medication administration errors as well as medical documentation errors. This would be counted as two citations in chart 2.

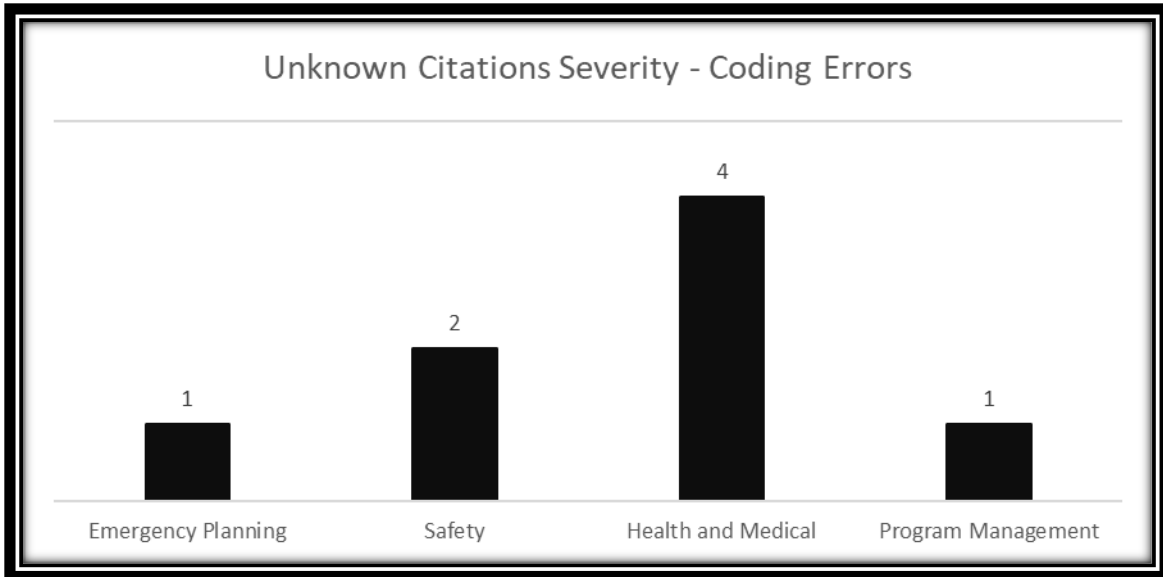
## ODDS Quality Improvement Data Report, February 2022



(Chart 3)

There were 40 citations designated as a “Failing” citation at 15 licensed homes issued during this time frame. A failing citation means there were serious citation(s) associated with that review which resulted in a follow-up. This makes up 7% of the total citations issued during this review period. This chart shows the number of serious violations resulting in a failed renewal review by topical area. This includes reviews conducted at both 24-hour licensed children and adult homes.

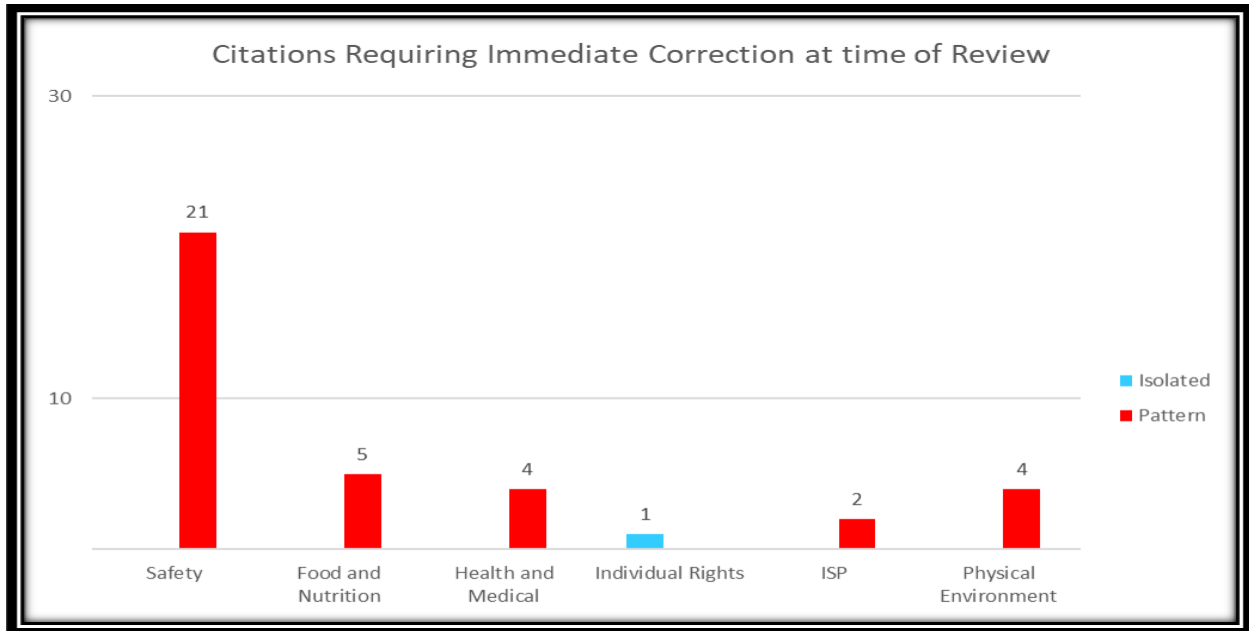
# ODDS Quality Improvement Data Report, February 2022



(Chart 4)

There were eight citations issued with unknown severities during this review period. This means a licenser did not document a scope and severity. Since last quarter reported, DD Licensing has dropped from 38 errors to the 8 errors documented above.

## ODDS Quality Improvement Data Report, February 2022



(Chart 5)

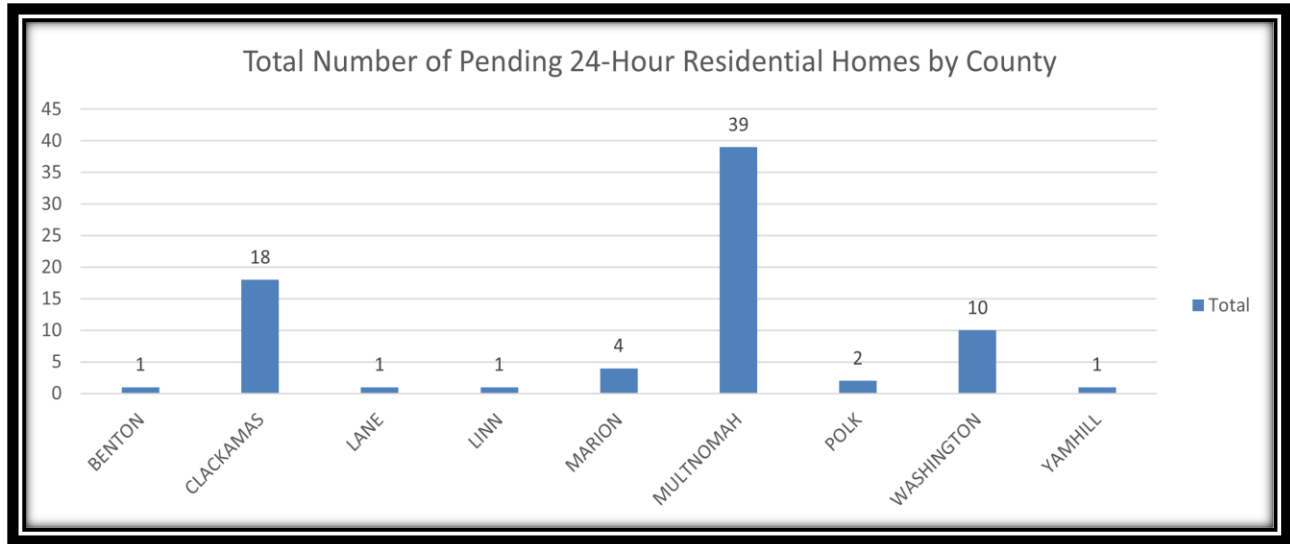
There were 37 citations which resulted in the need for an immediate correction prior to the licenser leaving the site. These were issued at 19 different homes during this review period<sup>4</sup>.

---

<sup>4</sup> A licenser may inform a provider that an immediate correction is required if there is a risk of health and safety concerns. This may be an isolated issue (limited to one issue or individual), or it may be in response to a pattern (a system issue or involving more than one individual). These corrections must be made before the licenser leaves the site. If the issue is resolved and there is no risk of harm evident, a follow-up may not be required. However, the provider will receive a citation in the licensing report.



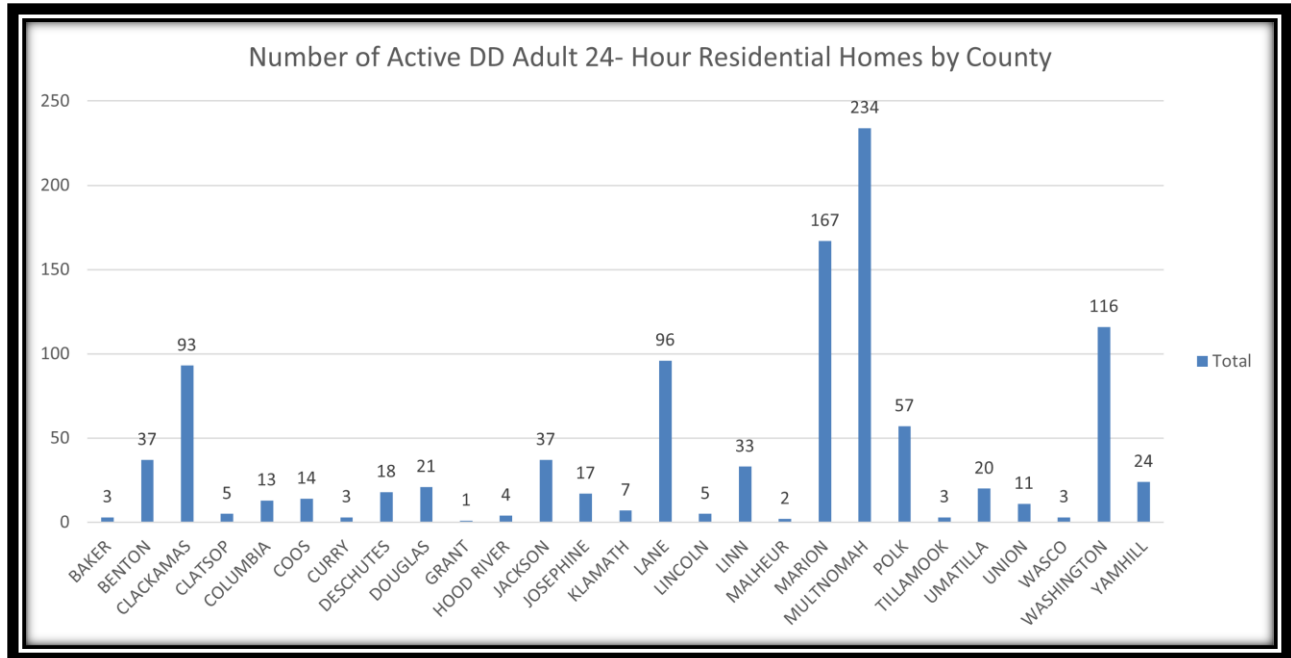
## ODDS Quality Improvement Data Report, February 2022



(Chart 6)

There were 77 applications for new homes “pending” at the time this data was pulled. Pending homes are those that are going through the licensure process and either need additional documentation or an initial onsite review completed in order to be in substantial compliance for licensure. This data can fluctuate daily and is considered a “snapshot in time” when looking at pending providers.

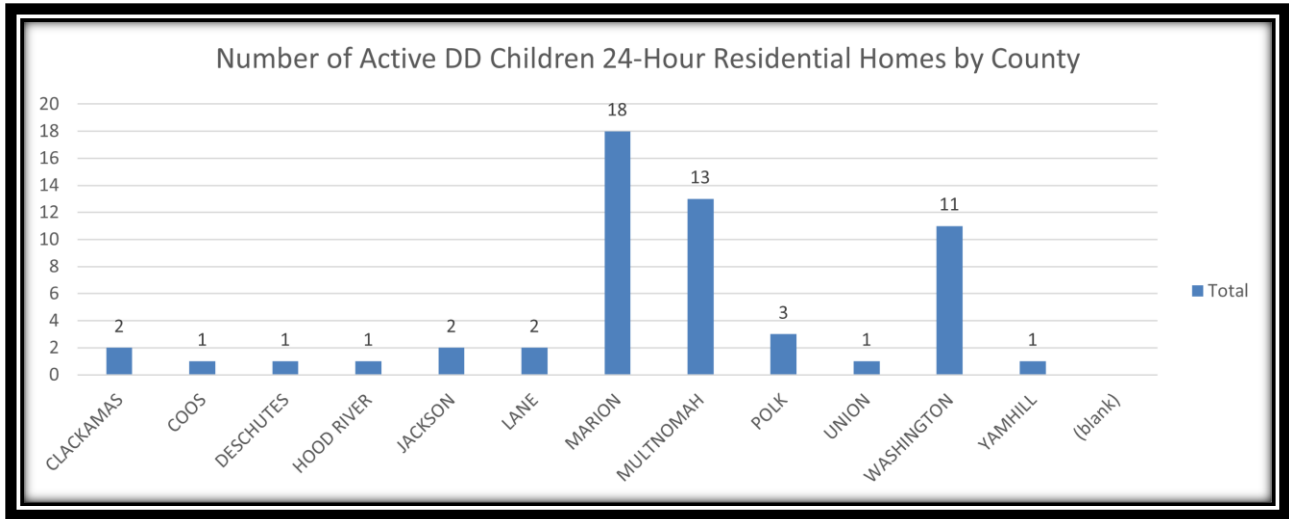
# ODDS Quality Improvement Data Report, February 2022



(Chart 7)

There are 1,044 active, licensed adult homes providing 24-Hour Residential services. This is an increase of 35 homes since our last report.

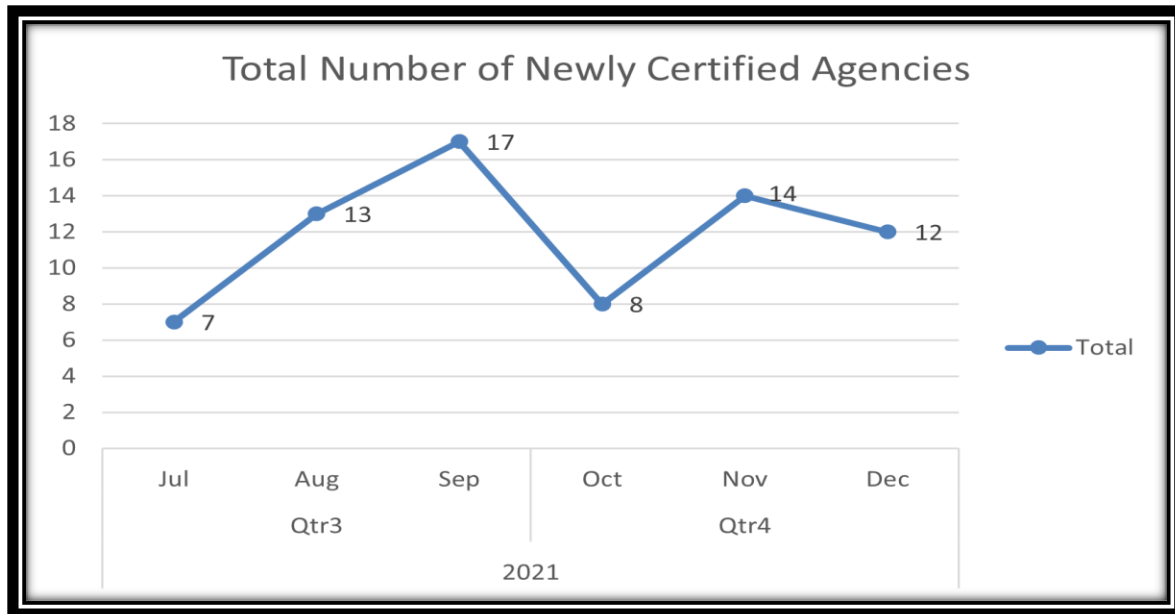
# ODDS Quality Improvement Data Report, February 2022



(Chart 8)

There are 56 active, licensed children homes providing 24-Hour Residential services.

## ODDS Quality Improvement Data Report, February 2022



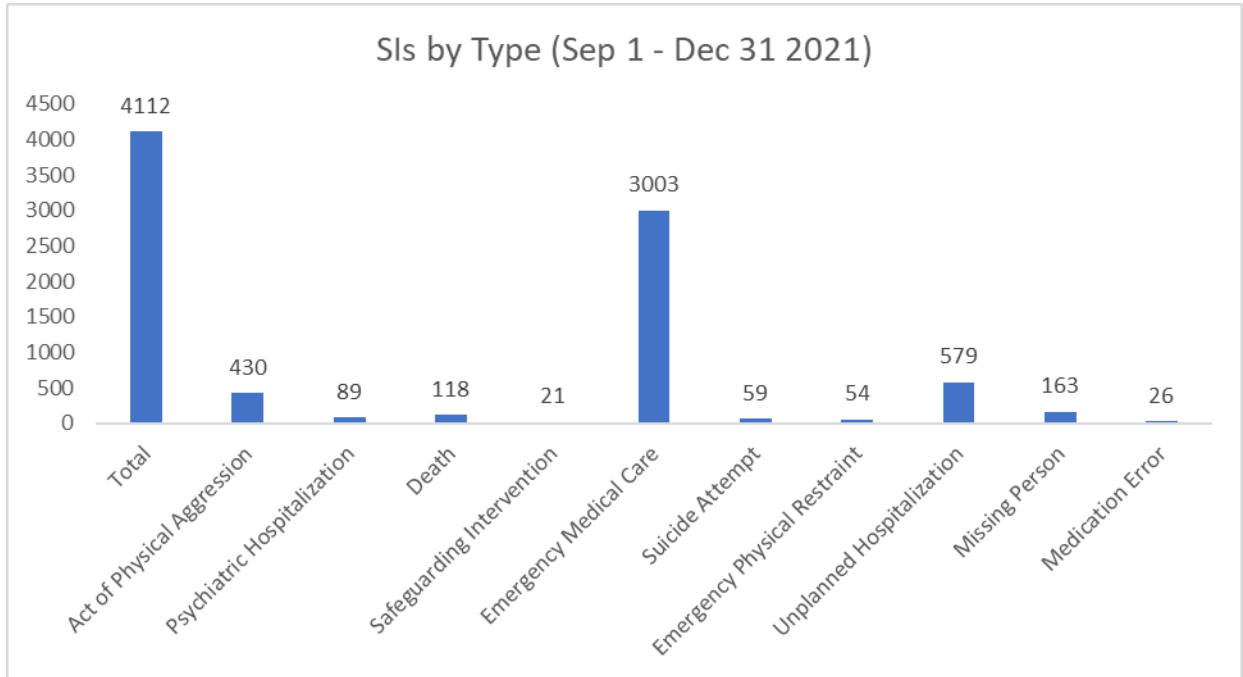
(Chart 9)

There were 71 newly Certified Medicaid Agencies during this period <sup>5</sup>. During quarter four of 2021 there was an average of 25% growth in Certified Medicaid Agencies.

---

<sup>5</sup> This chart includes two additional months of data as a result of how applications are processed.

## Centralized Abuse Management (CAM) Data



(Chart 10)

There were 4112 Serious Incidents (SI) reported during this period <sup>6</sup>. Emergency Medical Care (EMC) remains the highest SI type, consisting of 73% of all SIs. This is in line with a recent report ran, trending EMC averages from 2020 – 2021, which averaged 74% per Quarter.

---

<sup>6</sup> Individual SIs may have a higher count than the total sum because one SI can include multiple categories.

## ODDS Quality Improvement Data Report, February 2022

### SIs by Type and Percentage

Act of Physical Aggression	430	10%
Psychiatric Hospitalization	89	2%
Death	118	3%
Safeguarding Intervention	21	1%
Emergency Medical Care	3003	73%
Suicide Attempt	59	1%
Emergency Physical Restraint	54	1%
Unplanned Hospitalization	579	14%
Missing Person	163	4%
Medication Error	26	1%

(Chart 11)

Chart 11 is the same information presented above with the total percentage each SI type consists of from the total 4112 SIs.

# ODDS Quality Improvement Data Report, February 2022

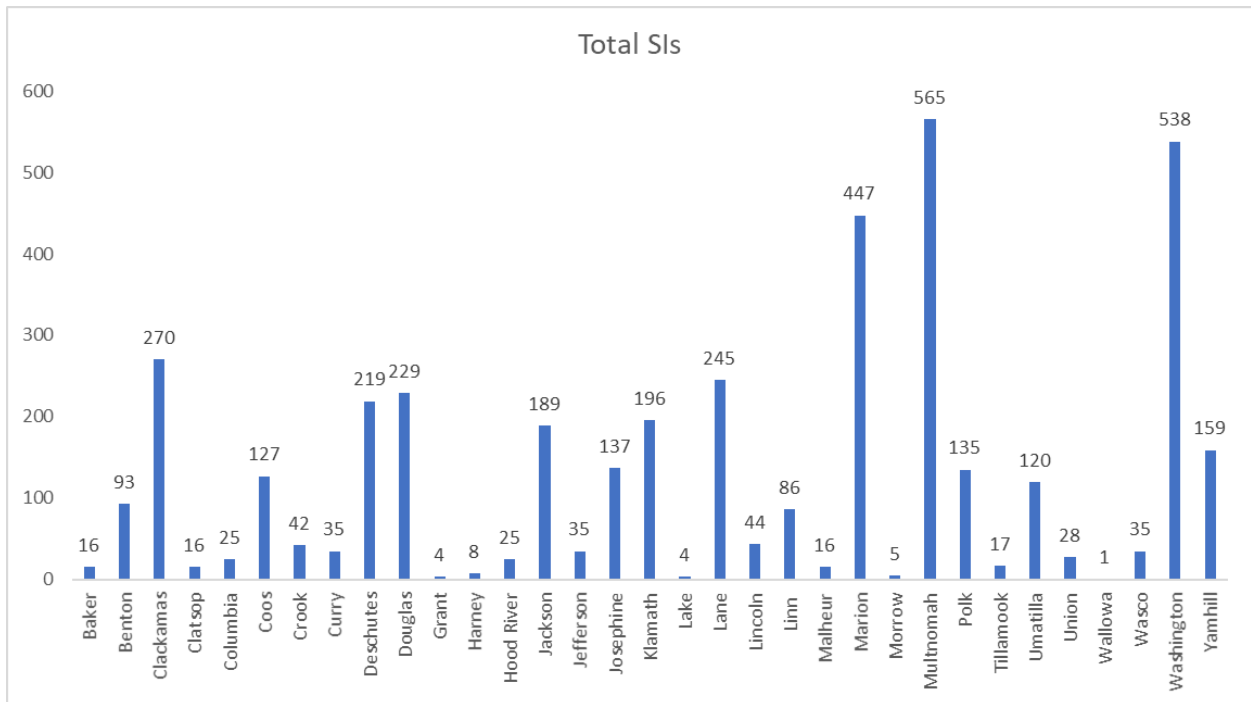
## Serious Incidents by Responsible County

Resp County	Total SIs	%
Baker	16	0%
Benton	93	2%
Clackamas	270	7%
Clatsop	16	0%
Columbia	25	1%
Coos	127	3%
Crook	42	1%
Curry	35	1%
Deschutes	219	5%
Douglas	229	6%
Grant	4	0%
Harney	8	0%
Hood River	25	1%
Jackson	189	5%
Jefferson	35	1%
Josephine	137	3%
Klamath	196	5%
Lake	4	0%
Lane	245	6%
Lincoln	44	1%
Linn	86	2%
Malheur	16	0%
Marion	447	11%
Morrow	5	0%
Multnomah	565	14%
Polk	135	3%
Tillamook	17	0%
Umatilla	120	3%
Union	28	1%
Wallowa	1	0%
Wasco	35	1%
Washington	538	13%
Yamhill	159	4%

(Chart 12)

## ODDS Quality Improvement Data Report, February 2022

Chart 12 represents total SIs by Responsible Counties. The third column in this chart (%), is the percent each County represents from total SIs. These SIs include all CME types within each County. This information has been historically reported on in previous reports.

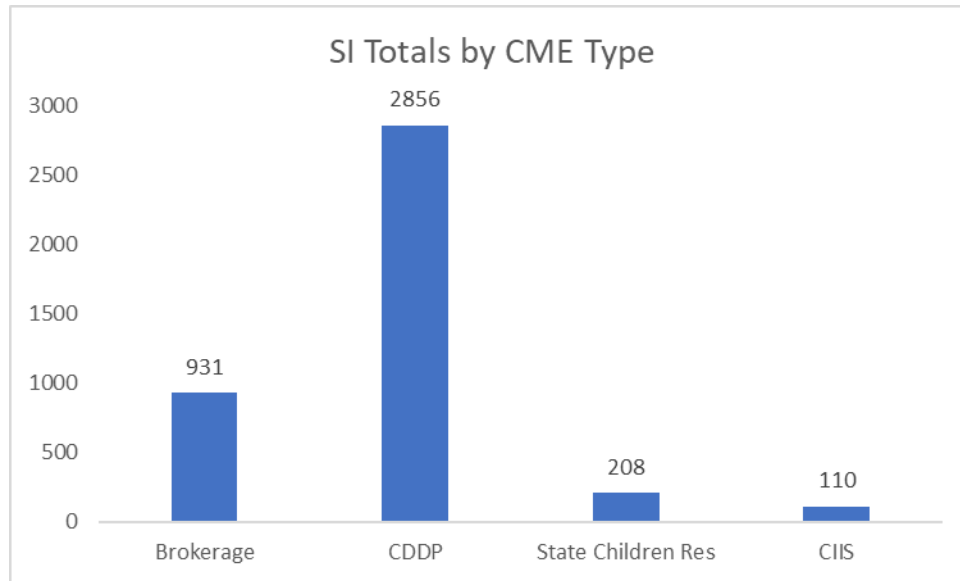


(Chart 13)

Chart 13 is the same as chart 12, but only shows the data by SI counts per County.



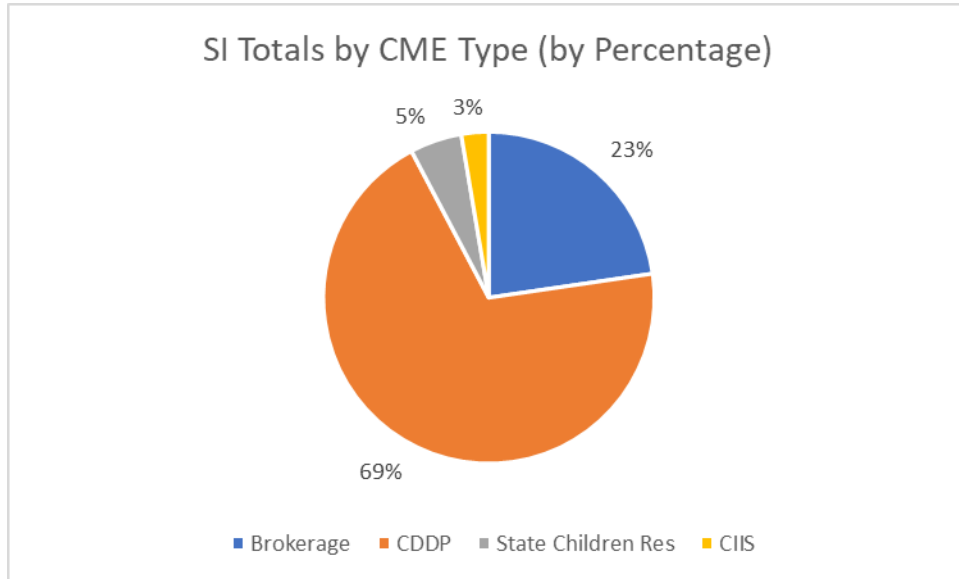
# ODDS Quality Improvement Data Report, February 2022



(Chart 14)

This chart reflects the total number of SI's entered by each CME type.

## ODDS Quality Improvement Data Report, February 2022



(Chart 15)

Chart 15 is the same information presented above with the total percentage each CME made up from the total SI's entered.

Total SIs represented within a county are not necessarily expected to correlate to population of individuals served within the county, because a high SI count does not necessarily reflect a negative trend. For example, if a small county has a high number of SIs per population this could be seen as the CME is doing their due diligence vs a larger county that could have a lower count per population missing SIs reported. It's also important to identify that SI record counts will usually be higher than total SI types, since multiple types can live on one record.