



STATE OF CONNECTICUT
OFFICE OF POLICY AND MANAGEMENT

January 8, 2018

The Honorable Marilyn V. Moore, Senate Democrats Chair
The Honorable Len Suzio, Senate Republicans Chair
The Honorable Diana S. Urban, House Chair
Committee on Children, State Capitol, Room 011
Hartford, CT 06106

The Honorable Michael A. McLachlan, Senate Republicans Chair
The Honorable Mae Flexer, Senate Democrats Chair
The Honorable Daniel J. Fox, House Chair
Government Administration and Elections Committee, Legislative Office Building, Room 2200
Hartford, CT 06106

The Honorable Marilyn V. Moore, Senate Democrats Chair
The Honorable Joe Markley, Senate Republicans Chair
The Honorable Catherine F. Abercrombie, House Chair
Human Services Committee, Legislative Office Building, Room 2000
Hartford, CT 06106

The Honorable Heather B. Somers, Senate Republicans Chair
The Honorable Theresa B. Gerratana, Senate Democrats Chair
The Honorable Jonathan Steinberg, House Chair
Public Health Committee, Legislative Office Building, Room 3000
Hartford, CT 06106

Dear Committee Chairs:

Enclosed please find the Licensure and Certification Workgroup Final Report as required by Section 1 (d) of Special Act 17-21.

If you have any questions on the report, please contact Allison Fisher, Director of LeanCT, at the Office of Policy and Management, at alison.fisher@ct.gov or (860)-418-6212.

Sincerely,

A handwritten signature in black ink, appearing to read "Benjamin Barnes".

Benjamin Barnes
Secretary
Office of Policy and Management

cc: Members and Clerks of the Children, Government Administration and Elections, Human
Services, and Public Health Committees
Licensure and Certification Workgroup
Clerk of the Senate
Clerk of the House
Office of Legislative Research
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LICENSURE AND CERTIFICATION WORKGROUP: FINAL REPORT

*Special Act 17-21: Establishing A Working Group To
Review The Licensure and Certification Process For
Certain Nonprofit Community Providers*

December 31, 2017

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Executive Summary

The Licensure and Certification Workgroup (LCW) was formed pursuant to [Special Act 17-21 \(SA 17-21\)](#). The Act required the Office of Policy and Management (OPM) to convene a workgroup to conduct a review of the certification and licensure processes of certain non-profit community providers, and study potential efficiencies. Membership consisted of six representatives of non-profit community providers and two representatives from the Department of Children and Families (DCF), Department of Developmental Services (DDS), Department of Mental Health and Addiction Services (DMHAS) and Department of Public Health (DPH). An interim report, as required by the Act, was submitted to the legislature on September 15, 2017, and a final report is due to the legislature by December 31, 2017.

Progress Update

The following activities have been completed as of December 31, 2017:

- The state's LeanCT Director, Alison Fisher from OPM, was charged with implementing SA 17-21 through the convening of a workgroup and facilitation of the Lean process.
- State agencies used the Lean process to identify potential licensure and certification efficiencies within their individual agencies.
- The Licensure and Certification Workgroup (LCW) was formed to participate in the statewide Lean event to review the certification and licensure processes of certain nonprofit community providers and identify potential efficiencies.
- An official [LCW web page](#)¹ was established on the OPM website
- The first meeting of the LCW was held on August 29, 2017.
- A five day Lean event was held from November 3, 2017 – November 9, 2017 at the Department of Social Services' Central Office in Hartford. This event was used to identify cross-agency efficiencies, improve cross-agency collaboration, and develop a timeline for implementation of recommendations.
- On the fourth day of the Lean event, November 8, 2017, a presentation of the recommendations developed as a result of this multi-day process was delivered to guests from the Office of Policy and Management, the Office of the Governor (OTG), and state legislators to gather initial feedback.
- The LCW team also presented their recommendations presented to state agency leadership on December 7, 2017 and to the Public Policy Committee of the CT Nonprofit Alliance on December 21, 2017. A third and final presentation is scheduled to be delivered to members of the legislature on January 30, 2018.

Continuing Efforts

Although this report is the final legislative requirement of SA 17-21, the collaboration that has been built across state agencies and non-profit community providers will continue into the future. The LCW workgroup will hold its next meeting on January 4, 2018, to refine and adjust the implementation plan and performance measures associated with this project. OPM staff from the Policy Development and Planning Division (PDPD), David Guttchen, Director of Health and Human Services, and Pamela Trotman, Planning Specialist will serve as project leads.

¹ LCW web address: <http://www.ct.gov/opm/cwp/view.asp?Q=595480>

Licensure and Certification Workgroup Membership

Member Category	Designee	Agency/Organization
Lean Facilitator	Alison Fisher, Director LeanCT	Office of Policy & Management
LCW Staff	Melissa Morton, Planning Analyst	Office of Policy & Management
Project Leads	David Guttchen, Director Pamela Trotman, Planning Specialist	Office of Policy & Management
Representing Non-Profits	Steve Girelli, President & CEO	Klingberg Family Centers
Representing Non-Profits	Alyssa Goduti, President & CEO	CT Council of Family Service Agencies
Representing Non-Profits	Anne Ruwet, CEO	Central CT ARC
Representing Non-Profits	Rick Radocchia, Chief Clinical Officer	MCCA
Representing Non-Profits	Stan Soby, VP Public Policy & External Affairs	Oak Hill
Representing Non-Profits	William Young, Chief Strategy Officer	Intercommunity
Representing a State Agency	Jim McPherson	Department of Children and Families
Representing a State Agency	Jim Moore	Department of Children and Families
Representing a State Agency	Josh Scalora	Department of Developmental Services
Representing a State Agency	Claudine Testani	Department of Developmental Services
Representing a State Agency	Natasha Kennedy	Department of Mental Health & Addiction Services
Representing a State Agency	Mary Mason	Department of Mental Health & Addiction Services
Representing a State Agency	Barbara Cass	Department of Public Health
Representing a State Agency	Alice Martinez	Department of Public Health

Background and Statutory Authority

The Licensure and Certification Workgroup (LCW) was formed pursuant to [Special Act 17-21 \(SA 17-21\)](#). The Act required the Office of Policy and Management (OPM) to convene a workgroup to conduct a review of the certification and licensure processes of certain non-profit community providers, and study potential efficiencies. Specifically, the licensure categories and facilities listed are, (A) psychiatric clinics and child guidance clinics licensed pursuant to chapter 319 of the general statutes; (B) extended day treatment facilities and residential child care facilities licensed pursuant to chapter 319a of the general statutes; (C) community-based residential facilities licensed pursuant to chapter 319b of the general statutes; and (D) behavioral health facilities, alcohol or drug treatment facilities or outpatient clinics licensed pursuant to chapter 368v of the general statutes. Membership of the LCW consisted of six representatives of non-profit community providers and two representatives from the Department of Children and Families (DCF), Department of Developmental Services (DDS), Department of Mental Health and Addiction Services (DMHAS) and Department of Public Health (DPH). A progress report was submitted to the legislature by September 15, 2017 and a final report is due to the legislature by December 31, 2017.

SA 17-21 was passed to address the following issues with the state's current licensure and certification processes:

- Multiple state agencies have licensure and certification requirements for the same community providers.
- Nonprofit providers need to do more with less, and have identified perceived inefficiencies in regulatory function across multiple state agencies.
- State agencies face a shrinking workforce and budget while the State and Federal entities continue to mandate activities for them to implement.

Process – Utilizing Lean

OPM guided the group through the Lean process to achieve the goals of SA 17-21.

What is Lean?

Lean is a continuous improvement process that utilizes a systematic method of examining an issue when a process is not working, or when resources are limited, and facilitating collaborative conversation around current process, related issues, and how to resolve issues in the future. In state government, it is a philosophy requiring a change in mindset used to bridge the gap between program, fiscal and IT staff. It requires staff to step back from daily work and collaboratively determine who is involved in an issue, who or what is impacted and what data is available versus the daily “firefighting” of challenges.

Why was Lean used to implement SA 17-21?

The LCW utilized the Lean process to meet the charge put forth in SA 17-21 because it is a continuous improvement process that results in: (1) improved quality; (2) cost effectiveness; (3) service delivery and responsiveness to the public; and (4) freed up staff time to focus on more important activities. Lean has many benefits, the greatest of which may be staff development and improved morale. Specifically,

the LCW held a five day Lean event to achieve the goals of SA 17-21 for the state’s licensure and certification processes².

Timeline

- State agencies conducted reviews of their internal licensure and certification processes throughout the summer of 2017.
- The first LCW meeting was held on August 29, 2017.
- An Interim Report was submitted to the legislature on September 15, 2017 as required by SA 17-21.
- An Inter-agency Lean Event was held November 3-9, 2017. The 5-day schedule was as follows:

11/3/17: Day 1	11/6/17: Day 2	11/7/17: Day 3	11/8/17: Day 4	11/9/17: Day 5
<ul style="list-style-type: none"> • Scope Definition • Suppliers, Inputs, Process, Outputs, Customers (SIPOC) exercise • Current State Review 	<ul style="list-style-type: none"> • Data Collection • Identification of Opportunities for Improvement • Brainstorm Solutions 	<ul style="list-style-type: none"> • Finalize Improvement Ideas • Future State Documentation • Create DRAFT Final Presentation 	<ul style="list-style-type: none"> • Implementation Plan Documentation • Key Performance Measure Identification • Deliver DRAFT Final Presentation to Guests from OPM, OTG, and members of the legislature 	<ul style="list-style-type: none"> • Continued Implementation Plan Documentation

- A presentation of recommendations developed during the five day lean were delivered to state agency leadership on December 7, 2017 and the CT Nonprofit Alliance Public Policy Committee on December 21, 2017
- The next LCW meeting is scheduled for January 4, 2018 to refine the project work plan and implementation strategy. Presentation to members of the Legislature is scheduled for January 30, 2018.

Inter-Agency Lean Event – November 3-9, 2017

The inter-agency Lean event was held from November 3-9, 2017 at the Department of Social Services’ Central Office in Hartford, CT. The team was made of up representatives from DCF, DDS, DMHAS, DPH, and the Nonprofit Alliance. The event was facilitated by Alison Fisher from OPM and Easha Canada from the Department of Administrative Services, Bureau of Enterprise Systems and Technology (DAS-BEST), with the assistance of Melissa Morton from OPM and Kristin Karr from the Office of the Secretary of the State (SOTS).

² To learn more about Lean and its utilization in Connecticut state government visit [the LeanCT web page](#).

This project was championed by Benjamin Barnes, Secretary of OPM, co-sponsored by Gian-Carl Casa, President and CEO of the Nonprofit Alliance and Anne Foley, Undersecretary for Policy Development and Planning at OPM. The project leaders are David Guttchen, Director of Health and Human Services within the Policy Development and Planning Division (PDPD) at OPM and Pamela Trotman, Planning Specialist also from the PDPD of OPM.

- Over the course of the 5-day event, team members discussed the details associated with the licensure and certification process for certain settings in specific licensure categories. These parameters were agreed upon on the first day, as part of a project scope conversation, which allowed the team to be targeted and data-driven in their discussions throughout the week (See [Table 1: Project Scope](#)).
- One of the first activities the team completed, the Suppliers, Inputs, Process, Outputs, Customers (SIPOC) exercise (See [Table 2: SIPOC Analysis](#)), enabled the team to fully appreciate the complexity of this project, and the effort that would be necessary to address inefficient practices.
- On the second and third days of the event, the team identified opportunities to improve the current processes that exist across the state's licensing agencies, and designed what the future process will look like, when licensing procedures are standardized across state agencies and non-profit community providers. The team discussed various assumptions, both cultural and practical, that will need to be employed in order for the future state to become a reality. The assumptions are as follows:

Cross-Agency Assumptions and Standards: Process

- Increased and improved communications and trust;
- Consistent timelines and interpretation of the licensure process;
- All supervisor approvals will occur within 2 business days;
- All renewal notifications will be sent 120 days prior to license expiration;
- All renewal site visits will be scheduled 45 days prior to license expiration;
- Continued training and support for state agency and provider staff;
- Enhanced provider readiness for site visits; and
- Process review with providers at least every 5 years.

Cross-Agency Assumptions and Standards: Technology

- All providers will have electronic service records, standardized data layout and reporting;
- Existence of data sharing across agencies and providers using eLicensing, BizNet and/or electronic service records;
- Use of electronic approvals and signatures;
- Use of electronic, mobile process for visits and documentation; and
- Provision of ongoing technical support and training for providers.

Cross-Agency Assumptions and Standards: Uniform Future Processing

- Announced initial visits for licensure;
- Announced renewal visits for licensure, **only when** resources are available to complete unannounced visits for compliance;
- Tiered system for renewal license compliance issues (based on DCF weighted scoring methodology for inspections and CMS scope and severity process);
- Individuals receiving services/supports are invited to take part in licensing visits; and
- Data sharing across agencies and providers to the extent possible.

On the fourth day of the event, the team achieved the following: (1) finalized its draft recommendations, including the necessary revisions to statutory and regulatory language, to change the licensure and certification process from its current state to the future design; (2) developed a communication plan, which will be used to inform and engage process stakeholders in the proposed changes; (3) mapped out a project plan, assigning specific tasks and deadlines to team members; and (4) identified performance measures which will be used to monitor progress and ensure continued success.

During the afternoon of the fourth day, a presentation of the draft recommendations was delivered to guests from the Nonprofit Alliance (Brunilda Ferraj), the OTG (Bill Welz), and members of the Legislature (Representative Catherine Abercrombie, Representative Whit Betts, Representative Jay Case, and Representative Daniel Fox), to share the progress that had been made and gather initial stakeholder feedback.

During the fifth and final day of the Lean event the team refined the communication plan, project plan, and performance measures to incorporate stakeholder feedback received after the presentation on day four and prepare for future implementation efforts.

Findings

Individual Agency Leans

Upon passage of SA 17-21, DCF, DDS and DPH conducted internal licensure and certification process reviews (Lean) with the following aim and objectives:

Aim of all Leans

- Improve service while limiting disruption for the individuals we support by reviewing our current licensure processes;
- Reduce non-value added activities, and the burden put on the provider networks where possible;
- Maintain requirements for a safe and secure environment;
- Ensure efficiencies by convening an intensive workgroup;
- Improve relationships with providers; and
- Review process for contract monitoring (DMHAS).

Objectives

- Develop two or three recommendations to improve efficiency by September 15, 2017;

- Document and define processes to standardize the work and incorporate recommendations into the future state; and
- Educate providers and legislators on the licensing process.

During the process review agencies engaged in the following activities:

- Reviewed licensing process and roles;
- Identified pain points, non-value added steps (waste) and opportunities for improvement;
- Developed recommendations to improve our process, ease provider burdens, and reduce pain points;
- Established a work plan to achieve our goals by identifying short and long term action items; and
- Developed performance measures.

Results

As a result of the licensure and certification process review agencies achieved the following:

- Identified efficiencies already in place;
- Developed recommendations to improve efficiency;
- Documented and defined processes to standardize work and incorporate recommendations into the future state of the licensure and certification process; and
- Shared their findings and recommendations with the LCW at the first meeting on August 29, 2017.

See **Appendix A** for a full report on the DCF, DDS and DPH individual agency licensure and certification process reviews.

Current State: Evaluation

Operational Definitions

- Initial licensure: the first time a license is granted to a service provider upon demonstrated and verified compliance with regulations established by a state agency to operate an institution licensed by DPH, a community living arrangement licensed by DDS, or a residential child caring facility, extended day treatment program, or outpatient psychiatric clinic for children licensed by DCF.
- Renewal licensure: the process by which an initial license, as described above, is renewed.

Table 1: Project Scope

	In Scope	Out of Scope
Process	<ul style="list-style-type: none"> • Initial and renewal licensing processes for: <ul style="list-style-type: none"> ○ DDS ○ DCF ○ DPH • With help from: <ul style="list-style-type: none"> ○ DMHAS ○ DSS ○ Nonprofit Community Providers • For facilities as referenced in SA 17-21 • Standardization across agencies and staff regarding terminology and licensing visit check lists • Overlapping facility licenses 	<ul style="list-style-type: none"> • Accreditation • Non-licensing processes • Municipal involvement • Facilities licensed by the CT Court Support Services Division, Department of Correction, and the Office of Early Childhood.
Data Collection	<ul style="list-style-type: none"> • <u>All</u> state agency visits to provider-run facilities by type/reason for visit • Accreditation by facility/provider • License by facility/provider and type of license • Overlap of licenses and accreditation • All source documentation/requirements by facility and by program (i.e. regulation, statute, policy, procedure, practice) • Dual licensure by facility/provider 	

Table 2: SIPOC Analysis

Suppliers	Inputs	Process	Outputs	Customers - Internal	Customers - External
1. Providers/State Agencies	budget	application	license	providers: non-profit, for-profit, and state run	individuals we serve and their families
a. provider roles: program staff/human resources/program admin/agency admin/finance and business/admin support/quality assurance/governance boards/IT/legal/facility maintenance staff	policy	visit	services	licensing agencies: DPH, DDS, and DCF	state citizens
2. State Agencies	collective bargaining	issuance	violation letter (DPH)/statement of citation (DDS)/ field visit report (DCF)	contract/fidelity monitoring agencies: DCF, DDS, and DMHAS	legislators
a. surveyors/case managers/resource managers/case management/admin/licensing unit/supervisors/nursing staff/legislative staff/regulatory staff	customer satisfaction surveys		service development plan (DCF)/ plan of correction (DPH and DDS)	DSS	lobbyists
3. Legislative Branch/CGA	license application		licensing action: revocation/ facility		CMS
a. regulations review committee/LCO/committees of cognizance (GAE, Human Services, Public Health, Children's, Finance, Appropriations)	accreditation		DDS conducts enhanced monitoring after statement of citation		OPM
4. Individuals we serve (provide feedback to providers)	past practice				boards and commissions
5. Federal partners	inspection reports				trade organizations
a. HRSA/CMS/SAMHSA	records - client, governance, and board minutes				advocacy and self-advocacy groups
6. State Police/DESPP	fire marshal certification				OTG

Suppliers	Inputs	Process	Outputs	Customers - Internal	Customers - External
7. DMHAS Community Services Division	zoning permissions				DESPP/local law enforcement
	all forms - BizNet				Municipalities (i.e. fire marshals, housing inspectors, etc.)
	mediation				insurance companies
	program plans				practitioner licensing and investigations - DPH
	evacuation plans				courts/court support services
	all components of case records				

Table 3: Statutory and Regulatory References

Facility Type/Setting	How many?	Agency	Is it licensed now?	Statutory Citation	Regulatory Citation
Community Living Arrangement (CLA)	818	DDS	Yes	CGS 17a-227	17a-227-1-20
Outpatient Psychiatric Clinic for Children (OPCC)	66	DCF	Yes	CGS 17a-20	17a-20-11---
Child Guidance Clinics (with OPCC)	26	DCF	Yes	CGS 17a-20	17a-20-11---
Extended Day Treatment (EDT) - most have OPCC license	14	DCF	Yes	CGS 17a-147	17a-147-1--
Residential Care Facility (RCF)	84	DCF	Yes	CGS 17a-145	17a-145-48
Behavioral Health Facilities	550	DPH	Yes	CGS 19a-495	19a-495-55
Alcohol and Drug Treatment Facilities	243	DPH	Yes	CGS 19a-495	19a-495-570
Psychiatric Outpatient Clinics (POCA)	266	DPH	Yes	CGS 19a-495	19a-495-550
Outpatient Clinics	442	DPH	Yes	CGS 19a-493c	19-13-D45

Table 4: Current State Data Collection

Licensing Entity	# of Licensed Settings	Renewal timeframe (years)	Avg visit, in hours (initial/renewal)
DPH	995	2, 3 or 4	8/16
DDS	886	1, 2	4/8
DCF	190	2	16/32

Recommendations

The LCW identified a list of recommendations that will enable state agencies and non-profit community providers to work together to continue to improve the licensure and certification process in CT. The recommendations are listed below, as well as in further detail (including anticipated deadlines and responsible parties) in the team’s project plan and presentation slide deck, which can be found in Appendices [B](#) and [E](#), respectively, of this report.

The process recommendations are:

1. No more paper;
2. Give agencies read-only access to relevant information in Electronic Health Records;
3. Increase marketing/training on BizNet;
4. Conduct a separate Lean event at DMHAS to examine contract monitoring;
5. Align regulations across state agencies to achieve consistency;
6. Give providers pre-application and site visit checklists in advance;
7. Use electronic systems such as BizNet and eLicense to provide state agency staff the ability to conduct “desk audits” to confirm completed applications and reduce the length of on-site visits;
8. Utilize the eLicense system to send/receive licensure status updates and increase transparency;
9. Allow the use of electronic signatures;
10. Remove notary requirements for DPH and DDS renewal certifications;
11. Use photos to communicate “violations” and “corrections”; and
12. Prepare for site visit/discussion before renewal (can be completed as a desk audit, limiting the amount of time the licensing agency will spend at the facility).

The legislative and regulatory recommendations are:

1. Enable DPH to license, regulate, and inspect state-operated Local Mental Health Authorities (LMHA) similar to private LMHA process, ensuring a standardized process, if resources become available. Currently state operated LMHAs are not licensed.
2. Standardize the medication administration certification process, including web-based processes, across state agencies and provider types;
3. Eliminate the requirement that DCF license DDS Continuous Residential Supports (CRS) for individuals under 18. Providers are already qualified by DDS and oversight for CRSs is provided by DDS;
4. Eliminate DDS' application licensing fee for Community Living Arrangement providers (\$50);
5. Clarify DDS' unannounced licensing visit requirements to allow flexibility for Commissioner's discretion; and
6. Compress eight (8) licensure DPH categories to five (5).

The LCW's goal is to complete the following related tasks by July 1, 2018:

1. Standardize Medication Administration certification: Uniform training accepted across agencies (DDS, DPH and DCF);
2. Electronic Medical/Health Records (EMR/HR) Access: Recommendations proposed for offsite/on site use and training;
3. Uniform Initial License Application:
 - a. Development of: application and site visit checklists; fillable application forms; clear instructions; expected timeframes; FAQs -- all in electronic format and uploaded to Biznet;
4. Desk audits: the move to enhanced utilization of web related tools such as BizNet and eLicensure system will allow state agency staff to review completed applications and client files in the office and share questions, concerns and staff needed at the site visit with providers prior to conducting the site visit;
5. Renewal Licensing Compliance: develop and implement a tiered approach to issuing violations that may be discovered during the renewal process. Allow for an application to be renewed when violations are not related to health and safety (i.e. aesthetic issues such as worn carpet or walls that need painting) and potential holding of a renewal application for providers that receive violations in areas that affect health and safety (i.e. not having a working fire prevention and alert system).
6. Legislative Action: The legislative subcommittee of the LCW workgroup will have submitted a package during the 2018 Session;
7. DMHAS/DPH and DCF/DDS partnerships: Agencies have met and future licensure process efficiencies will be determined.

The LCW's goal is to complete the following related tasks by January 1, 2019:

1. Uniform Renewal License Application:
 - a. The LCW will develop (1) application and site visit checklists; (2) fillable application forms; (3) clear instructions; (4) expected timeframes; and (4) Frequently Asked Questions for providers.

- b. Notary requirements will be removed;
2. The Learning Management System, eLearning will be accessible to all providers;
3. All agency and provider staff will receive training on new licensure processes.

Additional Opportunities for Improvement

Throughout the course of their efforts, the LCW had various conversations about tangential issues and concerns that were technically out of scope for this particular project, but still warranted further attention and discussion. The team developed a list of additional opportunities for improvement, which involve many of the same entities and will be analyzed further in the coming months.

1. ICF/IID Licensing and Certification Process (meeting scheduled for early 2018);
2. Psychiatric Residential Treatment Facility Licensing and Certification Process;
3. Certificate of Need process;
4. Process for an initial license: new facility versus relocation of a facility;
5. Quality Service Review – outcome-based to include state regulations. DDS will consider whether or not this process could be linked to licensure, in order to further streamline workflow; and
6. Potential for additional Capital Improvement Bond Funding opportunities for community providers.

Process Stakeholder Feedback

In addition to the recommendations identified by the LCW, process stakeholders from OPM, OTG, CGA, state agency leadership, and the Nonprofit Alliance Public Policy Committee provided input on the team's recommendations. Stakeholders were:

- Impressed by the progress made by the workgroup and the inclusion of multiple stakeholders;
- Supportive of recommendations; and
- Interested in supporting legislative changes to ensure that the action plan is achievable.

Stakeholders encouraged LCW members to:

- Continue the momentum in order to avoid repeating historical shortfalls in process follow through;
- Take advantage of the upcoming legislative session to present to a larger stakeholder group of legislators and interested members of the public;
- Investigate potential grant opportunities that support statewide systems change; and
- Involve members of the Regulations Review Committee and executive sponsors.

Key Performance Indicators

In order to monitor progress and ensure that the overall effort is successful, the LCW identified five short and long-term performance indicators to measure the effectiveness of the improvement efforts. The team agreed that the project's purpose, beyond what was prescribed in SA 17-21, is to improve the safety and quality of the services provided to Connecticut residents. The following indicators allow the LCW to evaluate the success of the recommendations and make process adjustments as necessary:

1. One uniform medication administration certification program proposed by all agencies by July 1, 2018;
2. Reduce by 20% on-site time required of provider staff (currently on average 9 hours initial/on average 18 hours renewal) by July 1, 2019;
3. Increase provider participation in electronic licensure document storage to 90% by July 1, 2019;
4. Reduce by 50% on-site time required of provider staff by July 1, 2021; and
5. Increase provider satisfaction to 90% with new licensure process (via quarterly or biannual survey) by July 1, 2021.

Next Steps

The LCW will continue its work toward improving quality and reducing inefficiencies within the licensure and certification process. The team will meet on a regular basis to review its project plan, monitor the timely completion of identified tasks, and problem solve as challenges arise. Under guidance from OPM, the team will also continuously review and refine the goals it set out to achieve, as well as the performance indicators it identified through the Lean process. The most immediate next steps for the LCW are:

- LCW meeting scheduled for January 4, 2018;
- Presentation to be delivered to members of the Legislature on January 30, 2018.

The LCW will continue the mutual understanding, respect, and consideration across agencies that was built during the five day Lean event. Team members will continue to build trust within a system that has historically struggled to address some of its most difficult inter-agency challenges.

Conclusion

Although there is still more work to be done, the agencies and individuals who participated in this project have made significant progress in improving CT's licensure and certification process. Ultimately, the LCW was formed to streamline and standardize the process by which certain types of facilities are licensed by state agencies, thereby lessening the administrative impact on nonprofits through the reduction of time spent away from the individuals receiving supports and services. SA 17-21 sought to bring all affected parties together to solve a long-standing issue around process inefficiency and lack of trust.

The LCW is optimistically working toward the future state it has designed for licensure and certification. This future state is streamlined, standardized, and seeks to deliver high quality services and supports to the individuals served. The future state maximizes the use of available technology and reorganizes work in a way that is effective, respectful, and outcome-oriented. The future state is achievable, through hard work, trust, and positive change. The team will continue to collaborate in order to achieve their expected results.

Appendix A – Summary of Agency Leans

SA 17-21: An Act Establishing a Working Group to Review the Licensure and Certification Process for Certain Nonprofit Community Providers: Progress Report

In Scope

Steps in preparing for, scheduling, execution and reporting of site visits for initial licensing applications and renewals for: behavioral health and outpatient clinics, child guidance clinics, residential child care facilities, extended day treatment facilities, and Licensed Community Living Associations (CLAs).

Documents and materials related to such reviews/visits are also included.

Start: Provider requests initial or renewal license (for DPH, DPH contacts provider for renewals)

Stop: Issuance of initial or renewal license

Out of Scope

Licensure process for any other type of facilities or settings, other non-licensing review processes, unrelated documents and materials.

Efficiencies We Have Already Implemented

DDS

- * Combining Quality System Review (QSR) and licensing visits (sampled in licensing year)
- * Reduced QSR indicators required for follow up from 36 to 21
- * No more repeat licensing citations for one deficiency
- * Allowing one corrective action plan for multiple not-met indicators requiring follow-up in QSR
- * No more physical inspection for Community Companion Homes with no individuals placed for 12 months
- * Until Nov. 30 all licensing and QSR visits will be pre-scheduled except for enhanced monitoring and one-year licenses

DPH

- * Electronic issuance of license (means facility can receive license immediately vs. postal mail)
- * Inspections for renewing providers may be done regardless of when application materials are finalized/submitted
- * The uniform licensing application (Biznet) has been implemented to allow for sharing of documentation between key stakeholders and reduce duplication
- * Consolidation of licensure activity for multiple inspection types
- * Integrated state program into federal database to allow for electronic reporting of violations

Ideas for Additional Improvement

DDS

To be completed by June 30, 2018

- * Waiver to automatically issue renewal license on off years vs. requiring providers to submit application packet on off year for their 2 year license
- * Waiver of Licensing fee
- * Streamline documentation review by allowing providers to submit Staff Training grid and doing spot-checks to verify data
- * Allow providers to complete and submit the Licensing Readiness Checklist vs. waiting for DDS Resource Management to complete and submit to Licensing

To be completed by December 31, 2019

- * Updated and streamlined business rules
- * Standardization of inspection process to support above
- * Electronic Licensing system with the following capabilities:
 - * Automated rules, scheduling, notification and work-flow
 - * Provider access to system including requesting licensure, submitting documents, receiving Summary of Citations and submitting Plans of Correction
 - * Electronic signature
 - * Electronic issuance of license

DCF

To be completed by October 1, 2018

- * Implement a single Annual Assessment of boilerplate items universal to all types of licenses for multi-license providers.
- * Perform HR records assessments in records rooms, once a year in the “off-season”.
- * Investigate allowing providers’ employees to begin working based on private background check until a Department of Emergency Services and Public Protection (DESPP) background check can be completed – Employees could be limited to orientation and training activities during this period.
- * Consider using the same licensing cycle as the accreditation body, for licenses with quarterly review cycles.
- * Pilot Mobility solutions for the Licensing Team, to improve efficiency and give providers quicker feedback.

To be completed by December 31, 2019

- * Improve BizNet Functionality – Reducing the need for the same documents to be submitted repeatedly, more intuitive functioning, improve workflow and allow for sharing of documents for different licenses within the same agency and amongst all the agencies. Expand documentation that can be uploaded. Allow for materials related to HR records to be uploaded and remain active for active employees, adding in new employees, background checks, educational records, etc.
- * DCF will develop a robust Provider Portal to assist in licensing activities as well as reporting activities.
- * Unify or standardize similar licensing regulations amongst all the Health and Human Services Agencies.

DPH

To be completed by June 30, 2018

- * Implement/pilot outlook calendar of scheduled inspections for the Facility Licensing and Investigations Section (FLIS)
- * Improve inspection process by standardizing and utilizing technology
- * Eliminate redundancies in requests for documentation
- * Develop and utilize a checklist for survey visits
- * Deliver provider training regarding Department requirements to providers
- * 100% of facilities ready for initial site visit by January 1, 2018

To be completed by December 31, 2018

- * Post violation letters with plans of correction to e-licensing platform
- * Define role and responsibility and relationship with other state partners for Life safety code requirements
- * Define role and responsibility and relationship with other state partners regarding food service operations



STATE OF CONNECTICUT
OFFICE OF POLICY AND MANAGEMENT

Licensure and Certification Workgroup

August 29, 2017

10:00 – 12:00

OPM, Conference Room 2A

Agenda

- I. Welcome and Introductions
- II. Overview of SA 17-21
- III. Lean/Process Improvement Overview
- IV. Agency Process Review Updates and Findings
 - a. Department of Public Health
 - b. Department of Developmental Services
 - c. Department of Children and Families
- V. Scope of Interagency Work
- VI. Roles and Responsibilities
- VII. Proposed Work Plan and Schedule
- VIII. Next Steps
- IX. Adjournment

Licensure and Certification Workgroup (LCW)

August 29, 2017

10:00 – 12:00

OPM, Conference Room 2A

Minutes

Members Present: Barbara Cass (Department of Public Health); Steve Girelli (Klingberg Family Centers); Alyssa Goduti (CT Council of Family Service Agencies); Natasha Kennedy (Department of Mental Health and Addiction Services); Mary Mason (Department of Mental Health and Addiction Services); Alice Martinez (Department of Public Health); Jim McPherson (Department of Children and Families); Jim Moore (Department of Children and Families); Rick Radocchia (MCCA); Anne Ruwet (Central CT Arc); Josh Scalora (Department of Developmental Services); Stan Soby (Oak Hill); Claudine Testani (Department of Developmental Services); and William Young (Intercommunity).

Guests Present: Representative Cathy Abercrombie; Cindy Butterfield (Department of Children and Families); Josh Howroyd (Department of Children and Families); Jill Kennedy (Department of Public Health); Ben Shaiken (CT Community Nonprofit Alliance); and Bill Welz (Office of the Governor).

Members Excused: None

Meeting called to order at 10:05 A.M.

- X. **Welcome and Introductions:** Alison Fisher, OPM, facilitator of the LCW, welcomed members and defined her role as facilitator. Members and guests introduced themselves and their goals for the LCW.
- XI. **Overview of SA 17-21:** Alison Fisher summarized the charge of the LCW as defined in [Special Act 17-21 - An Act Establishing A Working Group To Review The Licensure and Certification Process for Certain Nonprofit Community Providers](#).
- XII. **Lean/Process Improvement Overview:** Alison Fisher provided an [overview of Lean](#), what it is and how it works. Highlights of the presentation include:
- Review of the 50 year history of Lean and its utilization in Connecticut State Government. Governor Malloy has requested that state agencies implement the Lean process whenever possible.
 - Lean/continuous improvement is a systematic method of examining an issue when a process is not working or resources are limited and facilitating collaborative conversation around current process, issues, and how to resolve issues in the future. In state government it is a philosophy requiring a change in mindset used to bridge the gap between program, fiscal and IT staff. It requires staff to step back from daily work and collaboratively determine who is involved in an issue, who/what is impacted and what data is available versus the daily “firefighting” of challenges.
 - Why Lean? It leads to: (1) improved quality, (2) cost effectiveness; (3) service delivery and responsiveness to the public; and (4) frees up staff time to focus on more important

activities. Lean has many benefits, the greatest of which may be staff development and improved morale.

- Key principle that the LCW will use as a touchstone throughout the Lean process: *The focus is on the people we serve*. Although changes implemented through Lean may make work easier for state staff and providers, they can never be made at the detriment of the people receiving services. Throughout the five day Lean session, the LCW will check all process changes against this standard to measure the impact on those served by the affected state programs.
- How Lean be implemented for the LCW: (1) Utilization of an Implementation Plan that will ensure accountability by assigning tasks, names and deadlines; (2) Hold a five day Kaizen (Lean/continuous improvement) event. This communication tool will allow the group to transform the current licensure and certification process by focusing on flow, pull, standard work and reducing waste. A key component at the onset of this process is defining the scope of the problem; and (3) Utilization of Value Stream Mapping to examine information flow, service/process flow (identify the eight wastes and areas of overlap that impact providers) and develop a plan of action.
- The LCW will have a clear understanding of what the group would like to accomplish and how to measure success with quantitative and qualitative data.
- Discussion followed the Lean overview presentation. Highlights are below:
 - The Lean process should be implemented to facilitate the work of the nonprofit cabinet;
 - There is overlap with the work of the LCW and the Nonprofit Cabinet. Members hoped the cabinet would be made aware of the findings from the LCW. Alison Fisher noted that Chair of the Nonprofit Cabinet, Anne Foley, is aware of the LCW and has been involved in its development. She noted that Melissa Morton, OPM staff for the LCW, works for Anne Foley.

XIII. **Agency Process Review Updates and Findings:**

- The Department of Public Health, Department of Developmental Services, and Department of Children and Families each went through the Kaizen process prior to this meeting to identify individual agency *good states* (changes that can occur in a year) and *great states* (changes requiring longer than one year and needing external resources) to create efficiencies in their licensure and certification processes. Each agency summarized their results for members of the LCW. [Agency summaries](#) will be used as the starting point for the LCW five day Kaizen event this fall. In general, proposed recommendations for process improvement had little overlap across agencies which may indicate the ability to share mutually beneficial efficiencies during the Lean process.

XIV. **Scope of Interagency Work**

- The LCW defined the scope of the project: Identifying where items from the completed interagency process maps intersect, overlap or are independent. Agreement on the scope will assist the group with determining how to utilize the process maps that

agencies have already created. Below is a summary of the scope for the Licensure and Certification Lean:

	In Scope	Out of Scope
Process	<ul style="list-style-type: none"> • Initial and renewal licensing processes for: <ul style="list-style-type: none"> ○ DDS ○ DCF ○ DPH • With help from: <ul style="list-style-type: none"> ○ DMHAS ○ DSS ○ Nonprofit Community Providers • For facilities as referenced in SA 17-21 • Standardization across agencies and staff regarding terminology and licensing visit check lists • Overlapping facility licenses 	<ul style="list-style-type: none"> • Accreditation • Non-licensing processes • Municipal involvement • Facilities licensed by CSSD, DOC, and OEC
Data Collection	<ul style="list-style-type: none"> • <u>All</u> state agency visits to provider-run facilities by type/reason for visit • Accreditation by facility/provider • License by facility/provider and type of license • Overlap of licenses and accreditation • All source documentation/requirements by facility and by program (i.e. regulation, statute, policy, procedure, practice) • Dual licensure by facility/provider 	

XV. Roles and Responsibilities: Due to time constraints the group decided that roles and responsibilities will be developed via e-mail prior to the five day Kaizen event. The workgroup will need to identify and define the roles of (1) facilitator(s); (2) champions; (3) business owner(s); (4) team members; and (5) guests.

XVI. Proposed Work Plan and Schedule: Alison Fisher informed the group that an accountability implementation plan will be developed to ensure the timely completion of tasks and shared the [timeline](#) for the five day Kaizen event.

XVII. Next Steps

- OPM staff will distribute a list of LCW members and their affiliations;
- OPM staff will distribute a larger version of the five day Kaizen timeline;
- OPM staff will share a summary of individual state agency Lean results;
- State agencies will locate and catalogue all source documents relating to licensure and certification processes (i.e. statutes, regulations, agency protocols etc.) prior to the first day of the five day Kaizen;
- LCW members will electronically work to identify and define the roles of (1) facilitator(s); champions; (3) business owner(s); (4) team members; and (5) guests prior to the five day Kaizen;
- OPM staff will initiate a doodle poll to determine which of the following weeks work best for the five day Kaizen: the weeks of 10/2, 10/6 or Friday 11/3 – Thursday 11/9.
- OPM staff will circulate an interim report for LCW member review by 9/8/17 and members will review and submit comment back to OPM by 9/13/15.
- OPM staff will submit the interim workgroup report by 9/15/17.

Meeting was adjourned at 12:06 P.M.

Appendix C – Communication Plan

Impacted Stakeholder	Communication Vehicle	Task/Venue	Purpose	Delivery	Task Owner	Due Date	Comments
State Agency Executives	Presentation	TBD	Readout of LEAN activities, get buy in on implementation plan and determine regular communication schedule	In Person	Each state agency liaison	12/1/2017	Looking to target the week after Thanksgiving Will send poll to get executive availability
Trade Organization (Alliance, Reg Health Services Council)	Presentation	Rocky Hill, CT		In Person	Ben S	12/21/2017	Planned conference??
Leaders of Legislative Committees	Presentation	LOB - 2C Forum	Information forum to get buy-in on report and recommendation to bring forward to next session	In Person	Pam T	January 2018	Need pre-meeting to develop united message The message should be sent on behalf of the legislative liaisons
Advocates for Individuals Served (NAMI, CLRP, KTP, ARC of CT, Councils, DDS Families First, Urgent Care Centers, Consumer Rights - OCA)	Presentation	LOB - 2C Forum	Information forum to get buy-in on report and recommendation to bring forward to next session	In Person	Pam T	January 2018	

Impacted Stakeholder	Communication Vehicle	Task/Venue	Purpose	Delivery	Task Owner	Due Date	Comments
Agency Union Stewards							Want to give agency leaders the discretion of determine how and when to communication to this group. Get this information from the pending 12/1/18 meeting with the agency executive team.
Caucus Leadership							Determine how to communicate after the Legislative Committee meetings
Bill Co-Sponsors	Presentation	LOB - 2C Forum	Information forum to get buy-in on report and recommendation to bring forward to next session	In Person	Pam T	January 2018	
BHPOC/MAPOC	Presentation	LOB - 2C Forum	Information forum to get buy-in on report and recommendation to bring forward to next session	In Person	Pam T	January 2018	Determine another meeting to do a secondary presentation for a committee specific event

Appendix D – Project Plan

Workgroup	Task	Task Owner	Task Completion Date - Projected	Task Completion Date - Actual	Agency Responsibility	Who Else Needs to be Informed?
Digital Records	Lead and coordinate Digital Records workgroup	Stan Soby				
EMR/HR Record Access	Lead and coordinate EMR/HR Record Access workgroup	Bill Young	2/15/2018			
EMR/HR Record Access	Define recommendations regarding off site and on site use of electronic medical records and HR records	Bill Young	2/15/2018		Alliance	Jim McPherson, Alice Martinez, Jackson Pierre-Louis, Alyssa Giduti, Natasha Kennedy
EMR/HR Record Access	Identify training needs for state agencies and non-profits					
EMR/HR Record Access	Develop communication strategy for process stakeholders					
Initial License Application	Develop application checklist - design and content	Jim McPherson	2/1/2018		ALL - State	Providers
Initial License Application	Definition of application checklist items	Stan Soby	2/1/2018		ALL - State	Providers
Initial License Application	Develop site visit checklist (DPH model)	Jimmy Moore	2/1/2018		ALL - State	Alice Martinez
Initial License Application	Definition of site visit checklist items	Stephanie Guess	2/1/2018		ALL - State	Providers
Initial License Application	Fillable application form design	Jill Kennedy	2/1/2018		ALL - State	Providers

Workgroup	Task	Task Owner	Task Completion Date - Projected	Task Completion Date - Actual	Agency Responsibility	Who Else Needs to be Informed?
Initial License Application	Develop process map for entire initial licensing process with expected timeframe	Josh Scalora	3/1/2018		ALL - State	Providers
Initial License Application	Lead and coordinate Initial License Application workgroup	Barbara Cass	5/1/2018		ALL - State	Providers
Initial License Application	FAQs for entire process - including links	Alyssa Giduti	5/1/2018		ALL - State	Providers
Initial License Application	Clear instructions - all documents be uploaded into BizNet/ comm. And marketing	Jim McPherson	5/1/2018		DAS-BEST	Easha Canada, All State Agencies, All Providers
Initial License Application	All application documents, that you create, must be developed and available in electronic format - no print/scan	Natasha Kennedy	5/1/2018		ALL - State	Providers
Legislation and Regulation	Lead and coordinate Legislation and Regulation workgroup	Christine Pollio	6/1/2018		ALL - State	
Legislation and Regulation	Coordinate one legislative change packet for the 2018 Legislative Session	Christine Pollio	2/1/2018		OPM	Lean Team Members, CGA, OPM
Legislation and Regulation	Develop changes to regulation	Brie Wolf	6/1/2018			Regulation Review Committee
Medication Certification	Reciprocity for Med Cert through state agencies	Barbara Cass	5/1/2018			All State Agencies
Medication Certification	Med Cert online training - replicate DCF's model	Barbara Cass	5/1/2018			Jim McPherson, Training Workgroup
Medication Certification	Lead and coordinate Medication Certification workgroup	Barbara Cass	7/1/2018			
Medication Certification	1 Med Cert standard across state agencies	Barbara Cass	7/1/2018			All State Agencies

Appendix E – Presentation Slide Deck

Facility Licensure and Certification

As defined in Special Act 17-21



MEET THE TEAM

Team Members

State Agencies

- Dept. of Public Health (DPH): Barbara Cass, Alice Martinez, Brie Wolf, Jill Kennedy
- Dept. of Mental Health and Addiction Services (DMHAS): Natasha Kennedy, Erin Leavitt-Smith, Jeremy Wampler, Stephanie Guess
- Dept. of Children and Families (DCF): Jim McPherson, Jim Moore
- Dept. of Developmental Services (DDS): Josh Scalora, Claudine Testani, Christine Pollio Cooney
- Dept. of Administrative Services-Bureau of Enterprise Services and Technology (DAS-BEST): Kimberly Ware

Team Champion: Secretary Ben Barnes (CT Office of Policy and Management)

Team Sponsors: Gian-Carl Casa (CT Nonprofit Alliance) and Anne Foley (OPM)

Team Leads: Pam Trotman and David Guttchen (OPM)

Facilitators: Easha Canada (DAS-BEST) and Alison Fisher (OPM)

Guest Facilitators: Kristin Karr (Office of the Secretary of the State) and Laurie Ann Wagner (DPH), and Melissa Morton (OPM)

Connecticut Nonprofit Alliance

- CCFSA: Alyssa Goduti
- CCARC, Inc.: Anne Ruwet
- MCCA: Rick Radocchia
- Oak Hill: Stan Soby
- Klingberg : Steve Girelli
- Intercommunity: Bill Young





WHY ARE WE DOING THIS?

To improve the safety and quality of the services we provide to the 3.5 million healthcare beneficiaries that we serve!

WHAT ARE WE TRYING TO ACHIEVE?

To streamline and standardize the process by which certain types of facilities are licensed by state agencies.

In doing this we will lessen the administrative impact on nonprofits to reduce time away from the individuals supported.

HOW DID WE DO IT?

- Passage of SA 17-21
- Internal agency Lean Events to prepare for November Lean event
- Facility Licensure and Certification Workgroup meetings
- Lean Event: November 3 – 9, 2017



WHAT DOES SA 17-21 REQUIRE?

- OPM to convene a workgroup to conduct a review of the certification and licensure processes of certain nonprofit community providers, and study potential efficiencies.
- Membership must consist of six representatives of non-profit community providers and two representatives from DCF, DDS, DMHAS and DPH.
- A progress report must be submitted to the legislature by September 15, 2017 and a final report is due to the legislature by December 31, 2017.

SCOPE

- Steps in preparing, scheduling, executing and reporting of site visits for initial licensing applications and renewals.

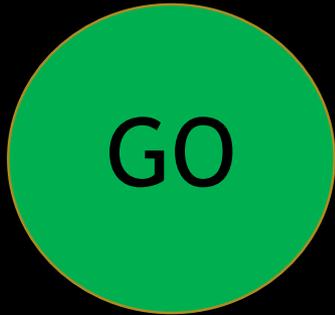
IMPACTED LICENSE TYPES

- Substance abuse and behavioral health clinics for adults and children (DPH and DCF)
- Substance abuse and behavioral health facilities (DPH)
- Outpatient clinics (DPH)
- Residential child care facilities (DCF)
- Extended day treatment facilities (DCF)
- Community Living Arrangements (DDS)

OPERATIONAL DEFINITIONS

- Initial licensure: the first time a license is granted to a service provider upon demonstrated and verified compliance with regulations established by a state agency to operate an institution licensed by DPH, a community living arrangement licensed by DDS, or a residential child caring facility, extended day treatment program, or outpatient psychiatric clinic for children licensed by DCF.
- Renewal licensure: the process by which an initial license, as described above, is renewed.

SCOPE: INITIAL/RENEWAL LICENSE



Provider has a Service to Deliver or
Provider is Notified That it is Time to
Renew Their License



1. Application
2. Site Visit
3. License is Issued/Renewed



LEAN WEEK: WHAT WE DID

- Reviewed the current licensing process
- Identified non-value added steps as opportunities for improvement
- Developed recommendations on how to improve our process
- Discussed recommendations with process stakeholders
- Designed the future/ideal initial and renewal licensing process
- Established a roadmap to achieve our project goals by identifying short and long term action items
- Developed a communication plan/strategy to ensure all stakeholders are aware of the changes we will make

CURRENT STATE OVERVIEW

Licensing Entity	# of Licensed Settings	Renewal timeframe (years)	Avg visit, in hours (initial/renewal)
DPH	995	2, 3 or 4	8/16
DDS	886	1, 2	4/8
DCF	190	2	16/32

CROSS-AGENCY ASSUMPTIONS AND STANDARDS

- Increased and improved communications and trust
- Consistent timelines and interpretation of the licensure process
 - All supervisor approvals will occur within 2 business days
 - All renewal notifications will be sent 120 days prior to license expiration
 - All renewal site visits will be scheduled 45 days prior to license expiration
- Continued training and support for state agency and provider staff
- Enhanced provider readiness for site visits
- Revisit this process with providers at least every 5 years

CROSS-AGENCY ASSUMPTIONS AND STANDARDS: TECHNOLOGY

- All providers: electronic service records, standardized data layout and reporting
- Data sharing across agencies and providers using eLicensing, BizNet and/or electronic service records
- Electronic approvals and signatures
- Electronic, mobile process for visits and documentation
- Ongoing technical support and training

UNIFORM FUTURE PROCESSING

- Announced initial visits for licensure
- Announced renewal visits for licensure, **only when** resources are available to complete unannounced visits for compliance
- Tiered system for renewal license compliance issues (based on DCF weighted scoring methodology for inspections and CMS scope and severity process)
- Invite individuals receiving services/support to take part in licensing visits
- Data sharing across agencies and providers to the extent possible

RECOMMENDATIONS

1. No more paper
2. Give agencies read-only access to relevant information in Electronic Health Records
3. Increase Marketing/Training on BizNet
4. DMHAS will engage in a Lean process to examine contract monitoring
5. Alignment across agency regulations to achieve consistency
6. Give providers pre-application AND site visit checklists ahead of time

RECOMMENDATIONS, CONT'D

7. State agency “desk audit” to ensure complete applications and limit on-site visit time
8. eLicense system – status updates/transparency
9. Use of electronic signatures
10. Remove notary requirements for DPH and DDS renewal certifications
11. Use photos to communicate “violations” and “corrections”
12. Prep visit/discussion before renewal (can be desk audit)

REGULATORY AND STATUTORY CHANGE RECOMMENDATIONS

- With additional resources, DPH could license, regulate, and inspect state-operated Local Mental Health Authorities (LMHA) similar to private LMHA process, ensuring a standardized process.
- Standardized, statewide, and web-based medication administration certification process
- Eliminate DCF licensure requirement of DDS Continuous Residential Supports (CRS) if individuals under 18. Providers are already qualified by DDS oversight for CRSs is provided by DDS.
- Eliminate DDS' application licensing fee for Community Living Arrangement providers (\$50).
- Clarify DDS' unannounced licensing visit requirements to allow flexibility for Commissioner's discretion.
- Compress eight (8) licensure categories to five (5)

*These recommendations still require Executive & Legislative review and approval

HOW WE WILL GET THERE: SHORT TERM SUCCESS (0-6 MONTHS)

- Standardize Medication Administration certification : Uniform training accepted across agencies (DDS, DPH and DCF).
- Electronic Medical/Health Records (EMR/HR) Access: Recommendations proposed for off site/on site use and training
- Uniform Initial License Application:
 - Development of: application and site visit checklists; fillable application forms; clear instructions; expected timeframes; FAQs -- all in electronic format and uploaded to Biznet
- Desk audits: expectations identified
- Pre-qualification process: reviewed and streamlined
- Renewal Licensing Compliance: tiered approach defined
- Legislation changes: Packet ready for 2018 Session
- DMHAS/DPH and DCF/DDS partnerships: Agencies have met and future processes determined

HOW WE WILL GET THERE: LONGER TERM (6-12 MONTHS)

- Uniform Renewal License Application:
 - Development of: application and site visit checklists; fillable application forms; clear instructions; expected timeframes; FAQs.
 - Removal of notary requirements
- Learning Management System, eLearning: access broadened to providers
- Training on new licensure processes: delivered to all agency and provider staff

KEY PERFORMANCE INDICATORS

- One uniform medication administration certification program proposed by all agencies by July 1, 2018
- Reduce by 20% on-site time required of provider staff (currently ~9 hours initial/~18 hours renewal) by July 1, 2019
- Increase provider participation in electronic licensure document storage to 90 % by July 1, 2019
- Reduce by 50% on-site time required of provider staff by July 1, 2021
- Increase provider satisfaction to 90% with new licensure process (via quarterly or biannual survey) by July 1, 2021

ADDITIONAL OPPORTUNITIES FOR IMPROVEMENT

- ICF/IID Licensing and Certification Process (meeting scheduled for early 2018)
- Psychiatric Residential Treatment Facility Licensing and Certification Process
- Certificate of Need process
- Process for an initial license: new facility vs. relocation
- Quality Service Review – outcome based to include state regulations. Should this process be linked to licensure?
- Capital Improvement Bond Funding for Providers

LESSONS LEARNED

What the Lean approach taught us about collaborative problem-solving:

- Focusing on processes and not people allowed participants to interact collaboratively and respectfully
- 5 agencies, 20 people resolved a long-standing issue in just 5 days
- Sharing/uncovering individual agency processes was enlightening
- Cultural change based on collaboration/partnership

HOW CAN YOU HELP?

- Provide leadership and support by helping us remove barriers
- Champion this project and be our partner in ensuring lasting change
- Hold us accountable and give us your feedback

THANK YOU

Bill Welz - OTG

Gian-Carl Casa – Alliance

Anne Foley – OPM

David Guttchen – OPM

Kristin Karr – SOTS

Our Guests:

Brunilda Ferraj – Alliance

Cindy Butterfield – DCF

John Vittner – OPM

Commissioner Amy Porter , CT Department of
Rehabilitation Services

Representative Catherine Abercrombie

Representative Whit Betts

Representative Jay Case

Representative Daniel Fox



Our Facilitators:

Easha Canada – DAS/BEST

Melissa Morton – OPM

Alison Fisher – OPM

**Our Host: DAS-BEST (55
Farmington Ave, Hartford)**