

**BRIDGES Ombuds Program
SBHO Administrative Review Tool**

Date:

Conducted by:

Scoring range: 1-absent, 2-partially developed, 3-evidence of full compliance

#	ITEM	SCORE	COMMENTS
1. Administrative Services			
a	Ombuds program Information is made available Measure- Review marketing/informational materials.		
b	Comply with SBHO Fraud and Abuse Plan Measure– Review staff training to identify and report possible fraud/abuse.		
c	Provide evidence of Code of Conduct. Ensure elements adhere to SBHO Code of Conduct content.		
d	Identify all, if any, civil monetary penalties and assessments of vendors, subcontractors.		
e	Advanced Directives written information is provided and available (42 CFR 438.6.i.3, SBHO Rights) Measure- Review written information		
f	Programs comply with all applicable state and federal laws. Measure – Audit contract compliance and review policies and procedures.		
g	ADA self-assessment of building completed Measure- ADA self- assessment tool completed		
h	Programs submit required SBHO reports in a timely manner. Measure- Submission of monthly program activity, quarterly concerns and bi-annual Exhibit N reports		
2. General Services			
a	Maintain confidentiality. Measure- Review Ombuds case records, documentation, and verify ROIs		
b	Direct concerns through formal and informal channels for grievances Measure- Review staff training records. Review records for compliance with SBHO Grievance policy. Protocol for addressing client dissatisfaction with Ombuds services.		
c	Remain accessible to consumers, including a toll free phone number. Measure- Verify toll free number and accessible		

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d	Receive and investigate concerns at the request of an individual. Measure- Review call log, ROI process, and investigation process		
e	Assist in conflict resolution to resolve concerns and grievances at the lowest/ most local level. Measure- Ombuds Manual for Investigation and Resolution P&P, review informal grievance process		
f	Assist and advocate for clients and family members in voicing concerns/ grievances with the provider, SBHO, or State. Measure- Review case notes		
g	Responds to issues of concerns in a timely manner; close cases in a timely manner. Measure- Review logs for response times, Exhibit N for closed cases status.		
h	Tracks data and trends regarding dignity and respect issues Measure- Review data collections and tracking trends		
i	Review agency cultural diversity goals and how the goals are assessed. Is agency administration familiar with CLAS (HHS website) expectations.		
j	Actively outreaches to consumers and family members to inform them of services and provide assistance with issues of dissatisfaction. Measure- Review outreach activities, how services are publicized		
k	Coordinates and collaborates with allied system advocacy and Ombuds services to improve the effectiveness of advocacy and to reduce duplication of efforts for shared clients (WAC) Measure- Review case examples		
l	Refer matters to mediation, when possible and appropriate. Measure- Review case record that was referred to mediation services.		
3. Quality Assurance Activities			
a	Participate on the SBHO Quality Improvement Committee, Quality Review Team activities, and monthly SBHO Advisory Board meetings. Make recommendations to improve the quality of services provided through the network, based on investigation and reporting trends. Measure- Review participation in QUIC and QRT		
b	Program improvements. Efforts to target and improve BRIDGES program services or areas needing improvement. Able to demonstrate steps to address issue(s). Measure- Review staff meeting notes or other documentation		

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4. Enrollee Rights			
a	Posted general enrollee rights in all prevalent languages. Measure- Has rights available in prevalent languages.		
b	Ombuds is aware of client rights regarding a second opinion. Measure- Staff interview		
c	Ombuds is aware of a client's rights regarding choice and change of providers. Measure- Staff interview		
5. Utilization and Resource Management			
a	Demonstrate understanding of authorization requirements and process. Measure- Staff interview		
b	Demonstrate knowledge of appeal process for clients when services have been denied or reduced. Measure- Staff interview.		
6. Personnel			
a	Ensure number of qualified staff to provide age and culturally appropriate services. Measure - Review monthly activity reports for program.		
b	Ombuds staff have not been employed by a service provider two years previous to hire, unless with SBHO notification or State approval Measure – Personnel records.		
c	Review of agency employee files for supervision, training, and/or evaluation plans Measure- Review all personnel files for evidence of training (state sponsored Peer Support or BHC, etc.) documents, evaluation plans, and supervision logs.		
d	Review of Exit Interviews from recently departed staff (within the past 12 months) Measure- Review Exit Interviews if applicable.		
e	Signed statements are maintained on file acknowledging understanding and agreement to abide by HIPAA requirements. Measure – Review all personnel files, HIPAA training		
f	Staff interviews (see staff interview questions) Measure- Conduct Staff interview(s)		

Staff Interview Questions

Staff interviewed: _____

1. True or False.
An individual can request a Fair Hearing, prior to exhausting the local Grievance process.
2. Do you know how to access Interpreters/ Hearing Impaired services, if they were needed for a client requesting your services?
3. True or False.
A client with special health care needs shall have unencumbered access to a MHP.
4. If a client or family member requested a second opinion, what are the next steps?
 - a. For an intake assessment
 - b. Regarding diagnosis or treatment strategy
5. If a client requested a change of providers, what are the guidelines (timeframes) listed on the SBHO Client Rights form?
6. Are you aware of your roles, responsibilities, and communication channels when you are concerned of agency or staff Medicaid Fraud and Abuse?
7. Please give an example of when you had the opportunity to advocate for a client so that they were not denied, limited, or discontinued medically necessary behavioral health services?
8. Please explain the Ombuds role in the appeal process for a client whose behavioral health services have been denied or reduced.
9. From your perspective, what are the top three behavioral health service delivery issues most commonly addressed through the Ombuds program?
10. Please provide the SBHO feedback about how our office could assist in the quality improvement of services provided through the Ombuds program?
11. What is the approximate time between when records are requested by a provider (Profiler) and when records are received?