

# DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Distribution: X, Z

## POLICY GUIDE 98.4

### INDEPENDENT UTILIZATION REVIEWS (IUR)

**RELEASE DATE:** June 15, 1998  
**TO:** Rules and Procedures Book Holders  
**FROM:** Jess McDonald, Director  
**SUBJECT:** Independent Utilization Review Process  
**Effective DATE:** **July 1, 1998**

#### I. PURPOSE

The purpose of this Policy Guide is to formalize the process used by the Department in conducting programmatic reviews of certain mental health, psychiatric and related specialized services provided to children and youth for whom the Department is legally responsible.

#### II. PRIMARY USERS

The primary users of this Policy Guide are administrators of psychiatric hospitals, group homes, child care institutions and DCFS staff responsible for monitoring those services.

#### III. POLICY

In order to ensure the appropriateness and quality of services provided to the children and families it serves, the Department of Children and Family Services reserves the right to conduct audits/reviews, limited reviews, follow-up reviews or investigations of entities which contract with or who are licensed by the Department. The Director or his/her designee

may elect to designate qualified individuals to perform such audits, reviews or investigations on behalf of the Department when an independent (non-DCFS) inquiry is deemed in the best interest of children served by the Department. Residential treatment facilities, hospitals, child care institutions, group homes and other entities providing services for children for whom the Department is legally responsible as well as clients of the Governor's Youth Services Initiative may undergo such programmatic reviews.

The Department will enter into an agreement with an independent consultant to perform independent utilization reviews (IURs) of mental health services and other specialized treatment provided by psychiatric hospitals and residential facilities.

#### **A. Professional Advisory Committee**

1. The Director will convene a Professional Advisory Committee (PAC) which will provide advice and consultation regarding the IUR process. The Professional Advisory Committee will consist of at least five and not more than ten individuals which will include child welfare professionals, Guardians Ad Litem, attorneys with child welfare experience, and child welfare advocates. Two members of the Professional Advisory Committee may be current employees or paid consultants to private agencies providing residential care or foster care. Professional Advisory Committee members will be appointed to a two year term. A simple majority of those appointed shall constitute a quorum. Professional Advisory Committee members will continue to serve on the Committee after the expiration of their term until they are reappointed or replaced by the Director.
2. The Director or the Deputy Director of Operations and Community Services will convene the Professional Advisory Committee at least quarterly to review the IUR process. The Professional Advisory Committee will examine all aspects of the IUR process including selection of agencies that are reviewed, content of the review, timeliness, report content, helpfulness of the review to the provider and general effectiveness of the review in improving the quality of care. Additionally, the Professional Advisory Committee will be convened as needed to review disputes between the Department and facilities or programs regarding the content of IUR reports or proposed corrective action plans and recommended resolutions.

#### **B. How Programs Are Selected For Review**

Independent utilization reviews of residential programs serving children for whom the Department is legally responsible are typically initiated by one of the following:

- (i) report(s) from caseworkers or others citing inadequate care or treatment;

- (ii) a pattern of unplanned or precipitous discharges, especially for the same behaviors that may have occasioned the original admission to the facility;
- (iii) an unusual incident or series of events suggesting that the program may lack the capacity or capability to provide appropriate care and treatment; or
- (iv) request from the chief executive officer of a private agency for an IUR and consultation.

When the Deputy Director of Operations and Community Services determines that any of the above conditions exist or that the health, safety or welfare of child(ren) for whom the Department is legally responsible is at risk, the Deputy Director of Operations and Community Services shall appoint a review team of persons qualified to review the program or facility in accordance with the procedures described below.

The Office of the Inspector General (OIG) will be notified when an IUR is initiated in order to coordinate with any existing OIG investigation.

### **C. Initiating the IUR**

1. The IUR will be conducted under the direction of a representative of the independent consultant under contract with DCFS or a senior DCFS manager. DCFS senior administrators and clinical consultants to DCFS may serve on the review team. Upon arrival at the facility or program, the review leader will introduce himself/herself to the facility manager on duty and present appropriate identification and a letter of introduction, signed by either the DCFS Director or DCFS Deputy Director of Operations and Community Services. The letter of introduction will state the purpose of the review including the reason that the review was initiated. Refusal of person(s) on-site at the facility to accept the letter of authorization shall not prevent the team from beginning their review of the facility or program.
2. The team's initial site visit will be unannounced, and may be conducted during the evening hours in order for the review team members to observe staff and resident interaction under normal operating conditions.
3. In the event that the senior administrator who is responsible for the management of the facility or program is not on-site when the review begins, the facility or program manager/supervisor on duty will be requested to notify him or her of the review.
4. During the introduction, the review leader will explain the purpose and scope of the review.

5. The reviewers are authorized to review and copy any and all files, medical records, treatment plans or other material relating to services provided to children and youth for whom the Department is legally responsible and clients of the Governor's Youth Services Initiative (GYSI) who are presently in (or have been discharged from) the facility or program. The reviewers are authorized to conduct private interviews with DCFS wards and GYSI clients away from facility or program staff.
6. During the site visit, the review team will inspect the physical plant for health and safety, as well the general living conditions of the facility. If, in the judgment of the review team, photographs would better document physical plant conditions, safety hazards or general living conditions, photographs of the physical plant may be taken.
7. The site visits will be conducted in a professional manner that is respectful to clients and staff. The reviewers will strive to minimize any disruption in services and unnecessary disturbance of clients.
8. The reviewers shall preserve the confidentiality of all clients. The reviewers will not interview or review the files of youth who are not clients of the Department.
9. Any evidence of child abuse or neglect shall be reported to the State Central Register (SCR) as required by the Abused and Neglected Child Reporting Act. In the case of out-of-state facilities, the report shall be filed with the appropriate public agency in that state.
10. Within 48 hours of commencing the review field work, the Deputy Director of Operations and Community Services, or his or her designee, will contact the senior administrator who is responsible for the management of the facility or program and provide him or her a tentative schedule for the review, including an estimated completion date.
11. When the initial field work has been completed, the review supervisor will conduct an exit interview with the senior administrator who is responsible for the management of the facility or program. Preliminary findings and observations will be shared at that time. The review leader will explain the time frame for the distribution of the draft review report and the facility's right for reconsideration of the findings in the draft review report (as specified below.)

**D. Reporting and Reports**

1. As the Director's designee, the Deputy Director of Operations and Community Services shall receive reports and recommendations regarding IURs. The distribution of draft reports will be limited to the private agency and designated senior Department managers. A report will not be considered to be final until the process listed below has been completed and any necessary compliance plan has been developed and agreed upon.

2. When the review team identifies serious deficiencies or urgent problems such as situations where child(ren) and youth have suffered actual physical or psychological harm because of substandard care or treatment or are at imminent risk of harm, the team leader shall immediately notify the State Central Register, the Deputy Director of Operations and Community Services and the agency executive director or senior administrator who is responsible for the management of the facility of the situation. Under such circumstances, the Department will take immediate and authoritative steps to protect the children and youth involved. Such steps may include placing a “hold” on placing additional child(ren) at a facility or program, or the removal of child(ren) currently in the facility or program and/or notification of responsible authorities when the review involves an out-of-state facility or program. The placement hold will be implemented by the Deputy Director of Operations and Community Services. The placement hold will remain in effect until the Department is satisfied that the agency has implemented sufficient changes to assure the safety and adequate programing for the child(ren) currently in the facility or program.
3. The IUR project manager will transmit a draft report to the Deputy Director of Operations and Community Services, with a copy to the Department Director, within ten working days after the completion of IUR field work.
4. Within five working days after receiving the draft report, the Deputy Director of Operations and Community Services will transmit one copy of the draft report to the Executive Director and President of the governing body of the facility or program. The facility or program will be asked to explain how it plans to resolve and remediate any deficiencies and findings noted in the draft report.
5. Within ten working days after receiving the written report, the facility or program representatives will submit a written response to the Deputy Director of Operations and Community Services. In its response, the reviewed entity may also cite its disagreement with any of the deficiencies or findings noted in the draft report and provide justification for its disagreement.
6. The Deputy Director of Operations and Community Services and the review leader will meet with the facility or program representatives within ten working days after receipt of their response to the draft report. The private facility or program representative may request that a member of the Professional Advisory Committee attend the meeting. At this meeting, the Department and the private facility or program representatives will strive to achieve agreement on a corrective action plan and to resolve any disagreements regarding the findings and recommendations of the draft

report. In the event that there are remaining disputes concerning the deficiencies and findings noted in the draft IUR report or the proposed corrective action plan, and the issues cannot be resolved between the private agency and the Deputy Director of Operations and Community Services, the matter will be referred to the Professional Advisory Committee.

7. In the event that the IUR identifies deficiencies or findings regarding the functions and actions of the Department and/or Department staff, the Deputy Director of Operations and Community Services will supervise the development of a corrective action plan to correct and remediate those items noted in the report relayed to the Department and/or Department staff. The corrective action plan will be submitted to the Director within ten working days after receipt of the draft IUR report.
8. If there is agreement between the Department and the facility or program, the Deputy Director of Operations and Community Services will finalize the IUR report and corrective action plan, if applicable, and submit to the Director for final approval. Copies of the final document(s) will be distributed to the facility or program, the Professional Advisory Committee and appropriate DCFS personnel. Any further distribution shall be authorized by the Director.

#### **E. Dispute Resolution and Finalization**

1. In the event that issue(s) remain in dispute following the meeting called for in item III.D.6 above, the facility or program and the Deputy Director of Operations and Community Services will file a report with the Director stating their position(s) and requesting the convening of the Professional Advisory Committee. Whenever practicable, the report from the Deputy Director of Operations and Community Services will be accompanied by a draft of the final IUR report and corrective active plan with the disputed issue(s) identified. The reports will be filed within ten working days after the meeting described above.
2. Within ten working days after the report and request for review, the Director or designee will convene a meeting of the Professional Advisory Committee. At that time, facility or program representatives, the IUR review supervisor and Department representatives will present documentation and oral arguments.
3. Within ten working days after the review meeting, the person who chaired the Professional Advisory Committee meeting, if other than the Director,

will issue a report and recommendation to the DCFS Director regarding the issue(s) in dispute.

4. The DCFS Director will make the final decision on the items in dispute and notify the facility or program representatives and the Deputy Director of Operations and Community Services of the decision within ten working days.
5. The facility or program representatives and the Deputy Director of Operations and Community Services will then proceed with the development of the corrective action plan.
6. The Deputy Director of Operations and Community Services will finalize the IUR report and corrective action plan, if applicable, and submit to the Director for final approval.
7. Copies of final IUR reports and corrective action plans will be distributed to the facility or program and appropriate DCFS personnel for implementation, and to the Professional Advisory Committee. Any further distribution shall be authorized by the Director.

#### **IV. AVOIDING CONFLICTS OF INTEREST**

No one involved in the IUR process regarding a specific facility or program shall receive a contract to perform, consult or assist with compliance of any Corrective Action Plan or compliance plan resulting from the IUR process. This does not preclude the Department from amending the contract of a facility or program to reflect the cost of additional staff or provisions of a Corrective Action Plan.

#### **V. FILING INSTRUCTIONS**

Place this Policy Guide immediately after white pages Part 434 - Audits, Reviews and Investigations in your volume of rules and procedures.



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