

**New Hampshire Department of Health and Human Services
Bureau of Developmental Services
Governance Desk Audit Findings 2015**

Statewide Summary – October 9, 2015

A Governance Desk Audit was conducted in the summer of 2015 as part of an evolving annual quality review process developed by the Bureau of Developmental Services (BDS) to monitor compliance with administrative requirements outlined in RSA-171-A:18, He-M 505 Establishment and Operation of Area Agencies, and the requirements of the Area Agency contract with the Department of Health and Human Services.

The Governance Desk Audit is the first step in re-establishing a schedule for redesignation, [referred to as the reapproval process in statute]. As required by statute and administrative rule, this process must be completed every five years with two Area Agencies being reapproved each year on a rotating schedule. In the fall of 2015, Lakes Region Community Services Council and Gateways Community Services will undergo the formal redesignation process.

As part of this process, the Bureau has implemented a Governance Desk Audit of all 10 Area Agencies. This audit was completed to ensure compliance with critical requirements for the operation of Area Agencies and regional service delivery. It is also an important first step in rolling out a new Redesignation process designed to utilize information from the annual quality review of each Area Agency along with many of the traditional elements of what has been known as the redesignation process.

Elements of the Governance Desk Audit Included:

1. Current Board Composition
2. Executive Director Qualifications
3. Current Area Agency Board of Directors By-laws
4. Current Board policies and procedures
5. Current Area Plan and any amendments
6. A review of the Board of Director's minutes for the last 12 months
7. A review of membership, agendas and minutes of the Human Rights Committee
8. How does the Board of Director's involve itself in assuring that consumers, the regional Family Support Council, the general public residing in the area and generic service agencies are involved in the planning and provision of and satisfaction with services for individuals with developmental disabilities and acquired brain disorders? Details were requested to describe the process used for capturing feedback and input from individuals, families and other stakeholders.
9. How does the area agency communicate to its provider agencies information concerning changes in policy, funding, or statewide issues such as quality initiatives, audit results, etc.
10. What are the area agency's ongoing quality assurance activities, especially concerning measuring outcomes relative to the Area Plan?
11. What steps has the agency taken to be prepared to ensure that people with Limited English Proficiency (LEP) have meaningful access to its programs?

BDS reviewed all of the information submitted and rated each element as Substantially Met, Met, or Needs Improvement. In 8 of the 11 elements reviewed, all 10 Area Agencies either met or substantially met the requirements.

Positive Practices Identified:

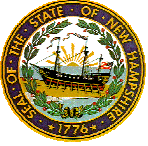
1. Two area agencies demonstrated a strong commitment to individual and family involvement: Community Crossroads with 66% of Board membership being individuals and families, and Lakes Region Community Services with 57% of Board membership being individuals and families.
2. Five regions demonstrated excellence in the development, monitoring and methods for implementing their Area Plan. These regions are: Pathways of the River Valley, Gateways Community Services, One Sky Community Services, Community Partners, and Community Crossroads.
3. Two regions, Pathways of the River Valley and Community Bridges, demonstrated excellence in the composition of their Human Rights Committees including clinical and non-clinical representatives. Additionally, Pathways has a strong tie between the Human Rights Committee and Risk Management Committee.
4. Three regions demonstrated very robust efforts in the area of gathering stakeholder input: Community Bridges, Gateways Community Services and One Sky Community Services. Of particular note was the Community Bridges Board of Director's utilization of a Balanced Score Card.
5. Three regions have very comprehensive communications and operational policies and practices in their relationship with subcontract agencies. These regions are: Community Bridges, Monadnock Developmental Services, and Community Crossroads. Of particular note was Community Bridges with a clear policy in place; regularly scheduled meetings; and a provider agency template with performance data in key areas.
6. Three regions have exemplary quality assurance processes in place: Community Bridges, Moore Center Services and Community Crossroads.

Areas Requiring Corrective Action:

1. Five Area Agencies received a rating of “did not meet” the administrative and legislative requirements for the development, review and amendment of the Area Agency Area Plan as outlined in He-M 505.03(t)(u).
2. Two Area Agencies received a rating of “did not meet” the requirements for stakeholder involvement in the development of the area plan as outlined in He-M 505.03(t)(u).
3. Two Area Agencies received a rating of “needs improvement” with regard to their ongoing quality assurance activities, especially concerning measuring outcomes relative to the Area Plan, as outlined in He-M 505.08(e)(5).

Each agency that was rated a “needs improvement” in any category, must submit a plan of correction identifying how the agency will improve its efforts in those specific areas.

BDS would like to thank each area agency for their responsiveness to and patience with this first Governance Desk Audit. Your cooperation is a key element in our long standing and fruitful partnership.



**New Hampshire Department of Health and Human Services
Bureau of Developmental Services
Governance Desk Audits 2015 - Statewide Tally**

Question #	Indicator	Rule citation	Substantially Met	Met	Needs Improvement
1	Current Board Composition	171A:18; He-M 505.03(m)	2	8	0
2	Executive Director Qualifications	171A:18; He-M 505.03(q)	0	10	0
3	Current AA/BOD bylaws	He-M 505.03 (h)	0	10	0
4	Current Board policies and procedures	HeM-505.03(e)	0	10	0
5	Current Area Plan and any amendments	171A:18; He-M 505.03(t)(u)	4	1	5
6	Last 12 mos of BOD minutes		0	10	0
7	Human Rights Committee a. Committee Members b. Agendas for past 12 months c. Meeting Minutes for Past 12 months	RSA 171 A:17	2	8	0
8	How does the BOD involve itself in assuring that consumers, the regional Family Support Council, the general public residing in the area and generic service agencies are involved in the planning and provision of and satisfaction with services for individuals with developmental disabilities and acquired brain disorders? Please describe your process for capturing feedback and input from individuals, families and other stakeholders.	171A:18, HeM 505.03(u); He-M 505.08(f)	3	5	2
9	How does the area agency communicate to its provider agencies information concerning changes in policy, funding, or statewide issues such as quality initiatives, audit results, etc.	He-M 505.03(ac); He-M 505.08(e)(6)	3	7	0
10	What are the area agency's ongoing quality assurance activities, especially concerning measuring outcomes relative to the Area Plan?	He-M 505.08(e)(5)	3	5	2
11	What steps has the agency taken to be prepared to ensure that people with Limited English Proficiency (LEP) have meaningful access to its programs?	(Contract, Exhibit A, Amendment 1: 3.1) (Contract Exhibit C, Amendment 1: 17.)	0	10	0