**New York State Department of Health Early Intervention Program Quality Improvement Monitoring Review Review Preparation Checklist – Agency Provider**

 

**REFERENCES TO ASSIST IN MONITORING PREPARATION**

In your early intervention practice, you will have referred to the NYS Early Intervention regulations, memoranda documents, and your NYS Early Intervention Provider Agreement. Your thorough review of all requirements in these resources will assist you in preparing for your monitoring review. **Instructions and required forms for early intervention monitoring, including optional self-assessment**: [https://NYEIP.kepro.com/provider](https://nyeip.kepro.com/providers)s

**NY State DOH Early Intervention Program**:<https://www.health.ny.gov/community/infants_children/early_intervention/>

* **Regulations**:<https://www.health.ny.gov/community/infants_children/early_intervention/regulations.htm>
* **Guidance/Memoranda Documents**:<https://www.health.ny.gov/community/infants_children/early_intervention/memoranda.htm>
* **Health and Safety Standards**: [health\_and\_safety\_standards.pdf (ny.gov)](https://health.ny.gov/community/infants_children/early_intervention/service_providers/docs/health_and_safety_standards.pdf)
* **Training**: [http://www.health.ny.gov/community/infants\_children/early\_intervention/training.htm](%20http%3A//www.health.ny.gov/community/infants_children/early_intervention/training.htm)
**Credential Verification**:
* **NY State Licensed Professionals**:<http://www.op.nysed.gov/opsearches.htm>
* **NY State Teachers**:<http://eservices.nysed.gov/teach/certhelp/CpPersonSearchExternal.jsp?trgAction=INQUIRY> **Confidentiality**:
* **Federal law-Family Educational Rights and Privacy Act (FERPA)**<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>
* **Confidentiality and consent form – HIV/AIDS**: [http://www.health.ny.gov/forms/instructions/doh-2557\_instructions.pdf;](http://www.health.ny.gov/forms/instructions/doh-2557_instructions.pdf) <http://www.health.ny.gov/forms/doh-2557.pdf>
* **Confidentiality Attachment** – Components to Include/Describe in Written Policy and/or Procedure for Maintaining Early Intervention Records

(sent by Acentra Health in confirmation packet).

**Caring for Children with Life Threatening Allergies**: [Making the Difference - Caring for Students with Life-Threatening Allergies (ny.gov)](https://www.health.ny.gov/professionals/protocols_and_guidelines/docs/caring_for_students_with_life_threatening_allergies.pdf)

**Child Abuse/Neglect/Maltreatment**:<http://ocfs.ny.gov/main/cps/>

**Toy/Product Recalls**:<https://www.cpsc.gov/Recalls/>

**Waivers from Corporate Practice Restrictions for Early Intervention Agencies:**<http://www.op.nysed.gov/waiver-ei-info.htm>

 **Justice Center for the Protection of People with Special Needs** (information on Staff Exclusion List): [www.justicecenter.ny.gov](http://www.justicecenter.ny.gov/)

 **TB Education:** <https://www.cdc.gov/tb/publications/pamphlets/getthefacts_eng.htm>; <https://www.cdc.gov/tb/publications/faqs/default.htm>; <https://www.cdc.gov/tb/publications/pamphlets/default.htm>

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| **SEND PRIOR TO MONITORING** |
| **Staff List**: As soon as possible, no later than 2 weeks prior to review: E-mail to Acentra Health a list of all employees and contractors who currently provide early intervention services, completed according to attachment entitled, **"Instructions for Completion of Personnel List for Agency Monitoring Review."** | **Date Sent:** |
| **Quality Assurance Plan:** As soon as possible, no later than 2 weeks prior to review: E-mail to Acentra Health a scanned copy of your required Quality Assurance Plan, for each service offered by the agency, including evaluations and service coordination. | **Date Sent:** |
| **Policies and Procedures:** As soon as possible, no later than 2 weeks prior to review: E-mail to Acentra Health all written policies and procedures as outlined on page 3 of this checklist, including those on Confidentiality. | **Date Sent:** |
| **Liability Insurance:** As soon as possible, no later than 2 weeks prior to review: E-mail to Acentra Health a copy of the current agency liability insurance coverage. | **Date Sent:** |
| **NYSED Corporate Practice Waiver (NA FOR MUNICIPALITY PROVIDERS);** As soon as possible, no later than 2 weeks prior to review: E-mail to Acentra Health your corporate practice waiver for your agency's NYSDOH approved Early Intervention Agency. | **Date Sent:** |
|  **CHILD RECORDS TO BE MADE AVAILABLE** |
| *Prepare for each child on the list.* | **Yes** | **No** |
| **Child records content**: Designate someone on your team to assist with accessing client records, including hardcopies and/or navigating your Electronic Health Record (EHR) platform, from the date the child was referred to the agency to the current date or date of discharge. Ensure child records and child lists are handled in a manner that protects personally identifiable information. Please include all records, including consent forms, medical information, evaluations, progress notes, session notes, service logs, and prescriptions/orders for service. |   |   |
| **PERSONNEL RECORDS TO BE MADE AVAILABLE** |
| *For all staff on the list submitted to Acentra Health* | **Yes**• | **No** |
| **Service Coordinator qualifications**: Resumes from the time of hire must be available. |   |   |
| **Documentation** to resolve any personnel credential issues, only *if you have been notified by Acentra Health of the need to resolve an issue.* |   |   |
| **State Central Registry (SCR): SCR screening, and a Staff Exclusion List (SEL) background check through the Justice Center** completed by your agency, of all personnel who have regular and substantial contact with children. Not applicable for service coordinators, and staff who only conduct evaluations. |   |   |
| **Annual health assessment**: Documentation is present in all service coordinator, direct service provider, paraprofessional, teacher assistant, teacher aide and volunteer files. Please refer to General Standard 4 and FAQ #25 in the **Health and Safety Standards For the Early Intervention Program And Frequently Asked Questions** guidance document at [health\_and\_safety\_standards.pdf (ny.gov)](https://health.ny.gov/community/infants_children/early_intervention/service_providers/docs/health_and_safety_standards.pdf) for information and requirements for the annual health assessment.  |   |   |

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**New York State Department of Health Early Intervention Program Quality Improvement Monitoring Review Review Preparation Checklist – Agency Provider**

 

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| **PERSONNEL RECORDS TO BE MADE AVAILABLE** |
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|   | **Yes** | **No** |

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| **Confidentiality training**: Documentation of confidentiality training in each staff person's file, or if not found in each staff person's file, documentation such as training agendas, attendance rosters, memos or meeting minutes. |   |   |
|  **Other required training**: Documentation of service provider, service coordinator, and evaluator training per the Provider Agreement including annual TB education. |   |   |

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| **DOCUMENTS TO BE MADE AVAILABLE** |
|   | **Yes** | **No** |
| **MDE health assessment capacity**: Documentation: An agreement with a medical professional to provide a supplemental evaluation performed by a physician, physician assistant or nurse practitioner, if needed, for the child's health assessment component of the MDE. |   |   |
| **Parental consent form** to use unencrypted email, if applicable. |   |   |
| **Document used for child record access** (access log). |   |   |
| **Document provided to parents** describing the process they must follow to inspect and review their child records. |   |   |
| **Document used for parental consent for release of information**. |   |   |
| **Behavior management plans** that have been developed for any child within the past year, regardless if the child's file is reviewed. |   |   |
| **Document that informs parents of sick day policy and procedures**. |   |   |
| **Incident reporting:** Documentation, including incident reports, of all health and safety related incidents or injuries that occurred while children were receiving services. |   |   |
| **Written parent permission** for administration of medication; documentation of medication administration and documentation of credentials or training for staff administering medication. |   |   |
| **JCAHO Accreditation**, if applicable. |   |   |
| **Current Daycare License**, if applicable. |   |   |
| **Fire inspection**: Most recent fire inspection by local government authority or current Day Care License; within 1 year, if facility-based. |   |   |
| **Evacuation drill records**, if facility-based. |   |   |
| **Allergy plans** for children who have or have had a plan in the past 2 years, if facility-based. |   |   |
| **Child emergency consents and parental contact information**: If using a community site and parent is not present. |   |   |

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**New York State Department of Health Early Intervention Program Quality Improvement Monitoring Review Review Preparation Checklist – Agency Provider**

 

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| **WRITTEN POLICIES TO SEND PRIOR TO MONITORING** |
| *Submit all written policies at least 2 weeks prior to your review. The Confidentiality Attachment sent with your confirmation packet, and the Health and Safety Standards located on the DOH website will assist you to ensure your policies are complete.* | **Yes** | **No** |
| Procedure to ensure records containing personally identifiable information are maintained in secure locations and disposed of properly [PI-42B]. |   |   |
| Procedure to ensure records containing personally identifiable information are maintained securely and disposed of properly when stored off-site, if applicable [PI-42C]. |   |   |
| Procedure to ensure information on computers is protected and if removable storage devices are used how they are secured [PI-42E]. |   |   |
| Procedure for use of email [PI-42F]. |   |   |
| Procedure to ensure confidentiality of faxed information containing personally identifiable information is maintained [PI-42G]. |   |   |
| Procedure to ensure confidentiality is maintained when lists contain record of access for multiple children [PI-42I]. |   |   |
| Procedure for parental notification of process to review their child's record [PI-42J]. |   |   |
| Procedure for ensuring parental access to their child's record [PI-42K]. |   |   |
| Procedure to amend a child's record [PI-42M]. |   |   |
| Procedure to obtain consent to release information [PI-42O]. |   |   |
| Procedure to protect records containing sensitive information and HIV related information [PI-42Q]. |   |   |
| Procedure to keep staff informed of confidentiality requirements [PI-42T]. |   |   |
| Procedures to ensure employees and contractors have current licensure, certification, or registration and are qualified to deliver EIP services, including service coordination [PI-45]. |   |   |
| Procedure to screen employee and subcontracted individuals through the New York State (NYS) Central Register of Child Abuse and Maltreatment (SCR) and the NYS Justice Center for the Protection of People with Special Needs [PI-46]. |   |   |
| Procedure to report suspected child abuse and maltreatment [PI-47]. |   |   |
| Procedure to address behavior injurious to the child or others and use of corporal punishment and aversive interventions [PI-50]. |   |   |
| Procedure to address child and provider illness and emergencies [PI-52]. |   |   |
| Procedure to address unsafe conditions encountered in the home environment [PI-81]. |   |   |

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**New York State Department of Health Early Intervention Program Quality Improvement Monitoring Review Review Preparation Checklist – Agency Provider**

 

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| **DOCUMENTS TO BE MADE AVAILABLE** |
|   | **Yes** | **No** |
| Procedure to ensure implementation of the Quality Assurance Plan including the role of the Quality Assurance Professionals [PI-83]. |   |   |

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