Housing Quality Reviews: FY26 Q1 & Q2 Trends and Documentation Training

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Agenda

- FY2026 Q1 & Q2 Housing Quality Reviews Scores & Trends
- Documenting Residential Rehabilitation Services
- Questions/Answers/Resources

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FY2026 Q1 & Q2 Housing Quality Reviews Scores & Trends

POLL

Scores have improved in *every* category in HQRs.

TRUE **FALSE**

Which category improved by over 25% since FY25.

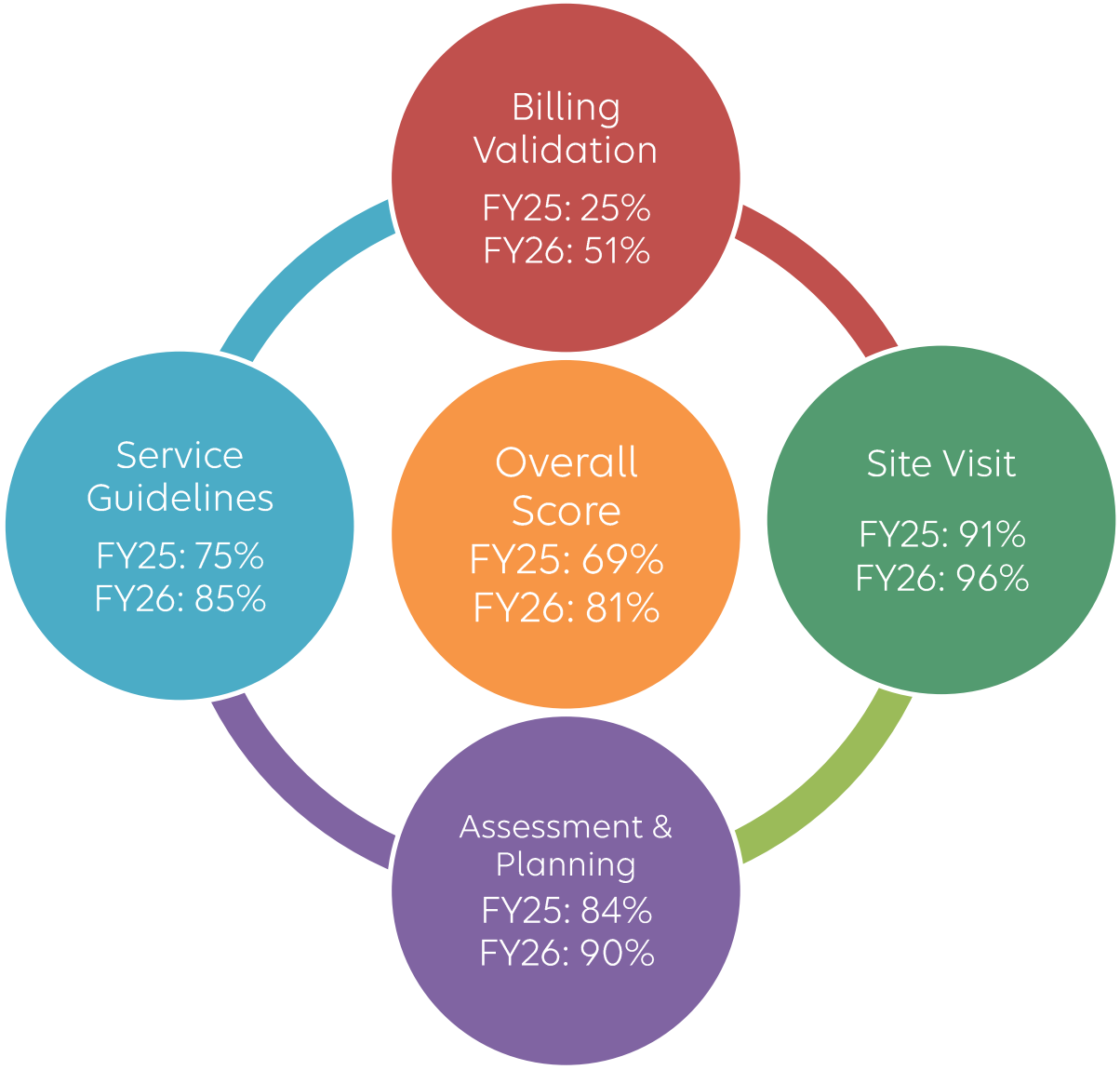
A. **Assessment & Planning**
B. **Billing Validation**
C. **Service Guidelines**
D. **Site Visits**

FY 2026 Q1-Q2

- 14 Providers
- 164 Records
- 10 HQR < 85% Overall Score
- 12 < 85% Billing Score

All scores have improved!

FY26 Q1 HQR Statewide Scores



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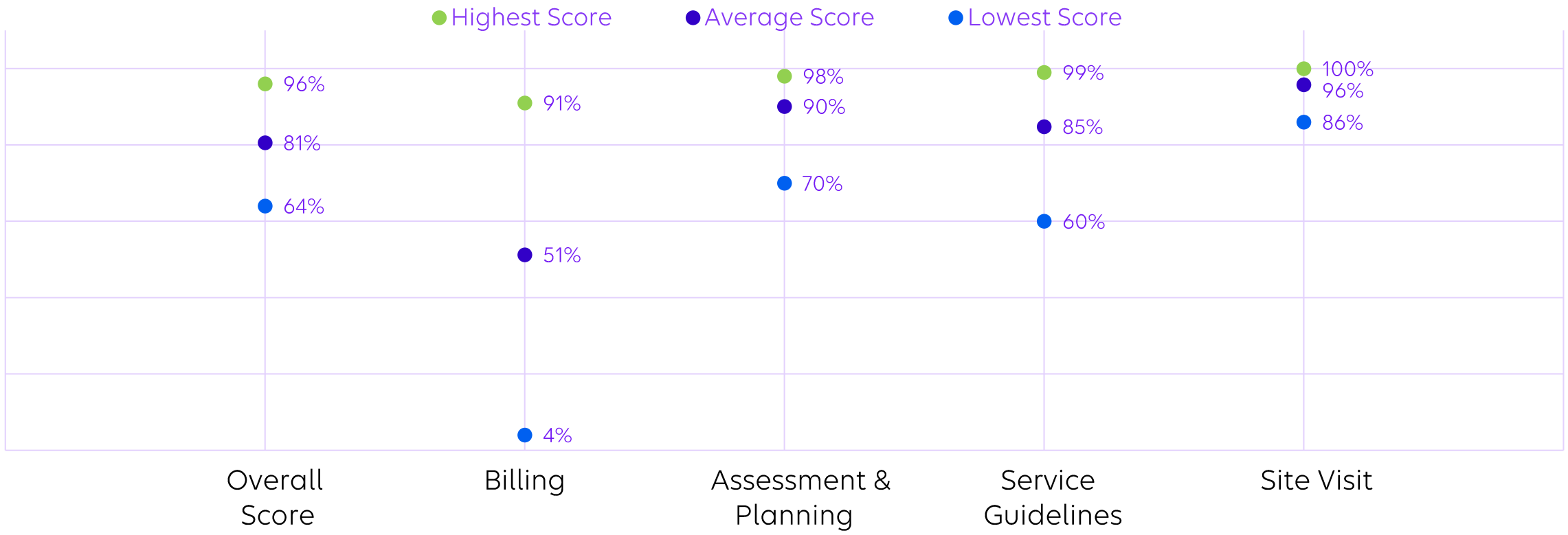
Scores Distribution

HQR Category Scores - FY2026 - 7/1/2025-12/30/2025



POLL

What is the most common billing discrepancy?

A. Missing/Incomplete Order for Service
B. Staff credential not supported by documentation
C. Content does not support units billed
D. Intervention unrelated to the IRP

Top Billing Discrepancies

#1 Content does not support units billed

#2 Missing/incomplete service order

#3 Intervention unrelated to treatment plan

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Assessment and Planning

Transition/discharge plan defines criteria

80% Met FY26 Q1 & Q2

Reminders: transition/discharge plans must include address housing, contain clinical benchmarks and a step-down service

Service Guidelines – Lowest Scoring Indicators

Documentation contains minimum hours of weekly residential rehabilitation services

CRR LI: 41% (5 hours)

CRR LIII: 29% (3 hours)

CRA: Contact was made with the individual daily for the first seven (7) days for standard CRA.

CRA: 71%

A residential functional assessment is completed within 7 days of admission.

CRR LI: 77%

CRR LIII: 77%

Documentation of the Quarterly Team Meeting with all required participants is entered into the medical record as a non-billable progress note.

CRR LI: 67%

CRR LIII: 62%

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Documenting Residential Rehabilitation Services

POLL

What is included in residential rehabilitation services?

A. Residential Skill Building
B. Community Integration Activities
C. Rehabilitative Supervision
D. Personal Services
E. A & B
F. All of the above

What are Residential Rehabilitation Services?

CRR I, II, & III

Rehabilitative Skill Building

- **Activities for daily living:** maintaining personal hygiene, proper grooming, etc.
- **Health & safety interventions:** access to/engagement with services, symptom identification & management, self-administration of medication.
- **Home management:** meal planning & preparation, cooking, housekeeping, laundry, etc.
- **Financial management:** budgeting, access to entitlements
- **Personal growth:** housing choice/preference, communication and social skills to improve interpersonal relationships

What are Residential Rehabilitation Services?

CRR I, II, & III

Community Integration Activities

- Opportunities for competitive employment & education
- Learn to access and use natural supports and community resources

CRR I, II, & III

Rehabilitative Supervision

- Monitoring and assessing response to treatment
- Adjusting the IRP when needed

CRR I, II & III

Personal Services

- Monitoring and providing assistance with daily activities
- Limited assistance with grooming, bathing, hygiene
- Assistance with self-administration of medications & treatment adherence
- Assistance with symptom identification and management

The Anatomy of a Progress Note: The Basics

- Who was there?
- When did you do it?
- What do you do?
- Is the intervention a rehabilitative service?
- How did the individual respond?
- What progress has been made?

Tips for supporting time documented

DO

- Document the specific interventions provided
- Include the time spent providing the intervention when documenting within a daily note
- Assure the intervention is a rehabilitation service
- Justify repeated interventions
- Note the client's responses to the intervention(s)
- Use clinically relevant quotes from the individual
- Tailor the time spent to the individual's need, current presentation, and tolerance
- Include staff credential with signature or printed name

Tips for supporting time documented

DON'T

- Use vague, generalized, and unclear language
- Write a transcript of the session
- Copy and paste content from a handout/worksheet
- Use "one-size fits all" terminology
- Repeat information within the same note or from note to note (unless clinically necessary)

Examples of progress notes from recent HQRs

PHI has been removed

Why is This a Good Example?

Date/Service - 4/1/2025, H0043R2

Towards Recovery Goals and Objectives :	Staff provided both skill-building interventions and supportive activities to assist the client in achieving their recovery goal of maintaining a consistent morning routine. Interventions focused on helping the client wake up at 5:30 a.m., make the bed, dress appropriately, eat breakfast, take self-administered medications, and complete morning chores. Skill-building included coaching on task sequencing, use of visual checklists, time management, and reinforcement of medication management skills. Supportive activities included verbal prompts, encouragement, assistance with meal preparation and clothing selection, and monitoring of task completion. Staff created a structured, supportive environment to promote independence and build routine-based living
Progress Towards Recovery Goals and Objectives:	Demonstrated positive progress by completing essential daily living tasks, including cleaning both bathrooms thoroughly. This involved sweeping and mopping the floors, reflecting increased motivation, improved time management, and commitment to maintaining a clean and healthy living environment. These actions support personal responsibility, independence, and ongoing recovery efforts.
Treatment Plans or Recommendations:	
Additional Comments:	
Total Skills Training Hours this Week:	~~(Weekly Summary Only)~~ 6a.m./6:25 a.m.

- Included what was coached on
- Specifies what activities needed support (meal prep, dressing, etc.)

- Specifies how progress was assessed (cleaning bathroom thoroughly)
- Supports purpose for intervention

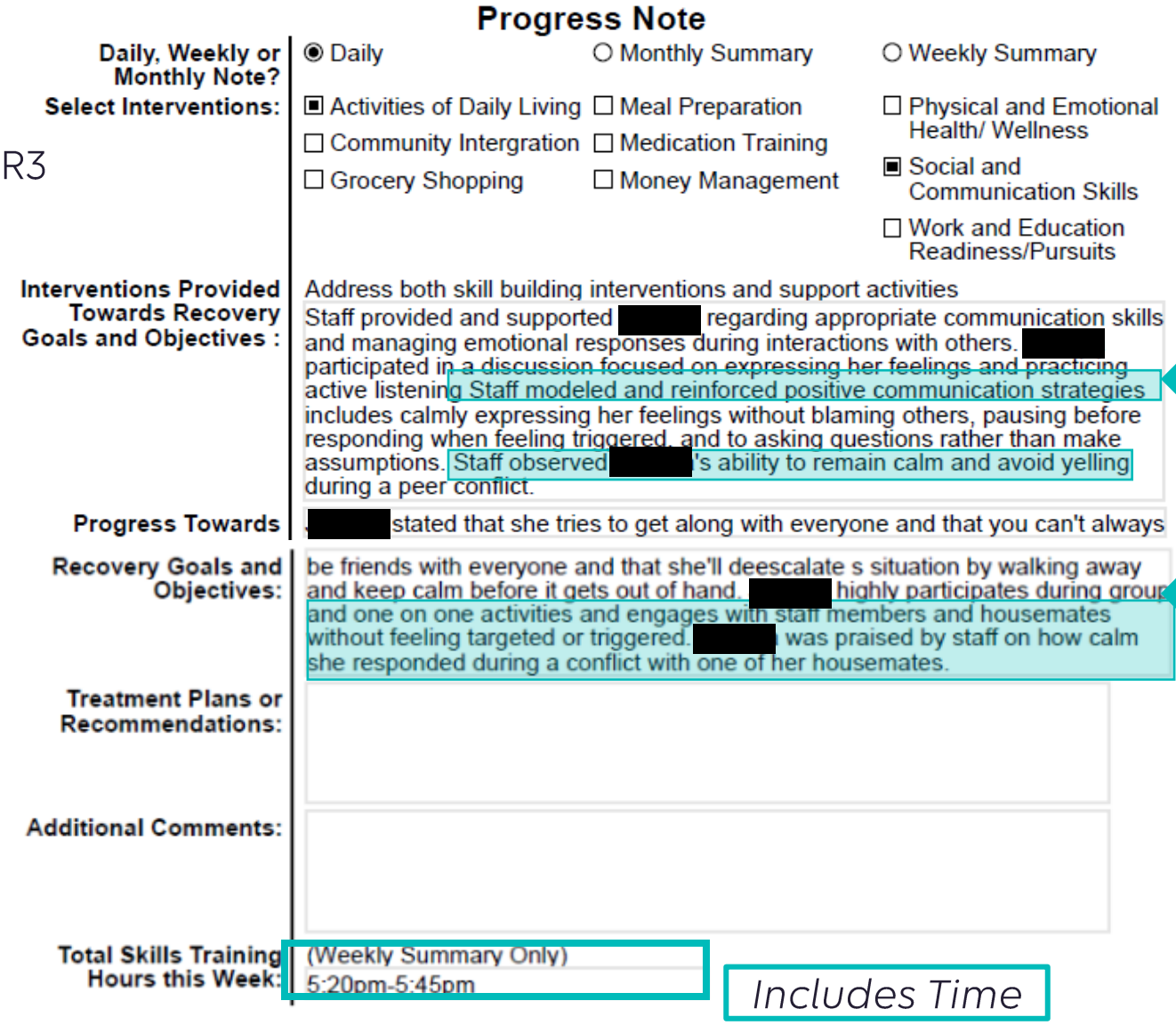
Includes Time

Are the staff interventions considered a rehabilitative service?

Signatures Monica Geller, PP; 7:00 am 4/1/2025

Why is This a Good Example?

10/13/2025, H0043R3



Progress Note

Daily, Weekly or Monthly Note? ◉ Daily ○ Monthly Summary ○ Weekly Summary

Select Interventions:

- ■ Activities of Daily Living
- ☐ Meal Preparation
- ☐ Physical and Emotional Health/ Wellness
- ☐ Community Intergration
- ☐ Medication Training
- ■ Social and Communication Skills
- ☐ Grocery Shopping
- ☐ Money Management
- ☐ Work and Education Readiness/Pursuits

Interventions Provided Towards Recovery Goals and Objectives :

Address both skill building interventions and support activities

Staff provided and supported [redacted] regarding appropriate communication skills and managing emotional responses during interactions with others. [redacted] participated in a discussion focused on expressing her feelings and practicing active listening Staff modeled and reinforced positive communication strategies includes calmly expressing her feelings without blaming others, pausing before responding when feeling triggered, and to asking questions rather than make assumptions. Staff observed [redacted]'s ability to remain calm and avoid yelling during a peer conflict.

Progress Towards [redacted] stated that she tries to get along with everyone and that you can't always

Recovery Goals and Objectives: be friends with everyone and that she'll deescalate s situation by walking away and keep calm before it gets out of hand. [redacted] highly participates during group and one on one activities and engages with staff members and housemates without feeling targeted or triggered. [redacted] was praised by staff on how calm she responded during a conflict with one of her housemates.

Treatment Plans or Recommendations:

Additional Comments:

Total Skills Training Hours this Week: (Weekly Summary Only) 5:20pm-5:45pm

Includes Time

- Support with communication skills
- Modeled
- Reinforced
- Provided examples

- What tools she intended to use
- Progress included example of using taught skills

Are the staff interventions considered a rehabilitative service?

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Chandler Bing, PP; 6:14 pm 10/13/2025

Why is This a Good Example?

11/3/2025, H0043R3

1) Identifies the purpose of session and what goal is this related to (employment/income)
2) Clearly states what was done (went over and filled out practice application).
3) Identifies the benefit of intervention (he was able to complete mock application).

☐ Medication Training ☐ Physical and Emotional Health/ Wellness ☐ Communication Skills ☑ Work and Education Readiness/Pursuits

Interventions Provided Towards Recovery Goals and Objectives :

Address both skill building interventions and support activities

Held skill support session with indiv. on how to complete an application. Discussed the importance of being able to work if you are abled bodied and stable enough to work and provide for yourself. Discussed initial step to obtaining a job which is to complete an application. Disperse pamphlet information sheet displaying a blank mock application. Went over requested information on the mock application with indiv. and prompted him to complete the information on the mock application. After completing the mock application, indiv. was prompted to reveal a few pieces of information that he wrote on mock application. [redacted] was able to write his name, address, and prior work experience on application. He did complain that he did not know how to do this; however, with assistance, he was able to complete the application.

Progress Towards Recovery Goals and Objectives:

[redacted] progressed well with this goal by interacting with group skill support by completing mock application

Treatment Plans or Recommendations:

continue to educate [redacted] on how to ready himself to apply for job

Additional Comments:

skill support completed on 8/15/25

Total Skills Training Hours this Week:

(Weekly Summary Only)

7:24 A.M. - 8:24 A.M. *Includes Time*

Are the staff interventions considered a rehabilitative service?

Phoebe Buffet, PP; 3:14 pm 11/3/2025

Why is This a Good Example?

HCPCS / CPT: H0043R3 Supported Housing (Mental Health)

Time: 21 Units: 1.00 Time - Start: 10:03 am End: 10:24 am Service Date: 08/29/2025

Chandler Bing, PP; 6:14 pm 8/10/2025

Therapeutic Interventions and Outcomes

Any new issues (i.e., changes in medical condition, mental health/behavioral symptoms, independent functioning, etc.):There were no new issues presented today

Goal/Objective(s): "I want a house of my own"

Interventions (to include skills training, personal support interventions, crisis intervention, rehabilitative skill building activities, case management activities, how health issues are being addressed, etc.):

The Community Residential Rehabilitation Level-I Director assisted [redacted] with researching the following apartments contact information below for potential placement. The CRR-I Director answered [redacted] questions and provided her with the list below.

Response (response to Interventions): [redacted] stated to the CRR-I Manager, "I want to stay in a place by myself." "I don't do well with a roommate." "I appreciate you helping me with this." "Thank you for the list." "I will call them later."

Progress (overall progress, or lack thereof, toward goals and objectives): [redacted] made progress by assisting the CRR-I Manager with selecting the potential placements and agreeing to telephone each potential; site.

1) Identifies the purpose of session and what goal this is related to (housing)
2) Clearly states what was done (researched apartments).
3) Identifies the benefit of intervention (she identified housing preferences).

Let's look at another note...

Interventions Provided Towards Recovery Goals and Objectives :	Address both skill building interventions and support activities Assisting [redacted] with developing daily living skills, including personal hygiene, medication management, and time management.
Progress Towards Recovery Goals and Objectives:	noticeable improvement in daily living skills including medication adherence and maintaining personal hygiene independently.
Treatment Plans or Recommendations:	Staff will collaborate with [redacted] to develop personalized recovery goals based on her strength, preference, and needs,
Additional Comments:	
Total Skills Training Hours this Week:	(Weekly Summary Only) 630a,645

- Topics are vague and broad.
- No specific intervention documented.
- No response.
- No supporting statement for "noticeable improvement."
- Incomplete time documentation.

Can you tell what training was provided by staff?

Progress Note

Daily, Weekly or Monthly Note?

◉ Daily ○ Monthly Summary ○ Weekly Summary

Select Interventions:

- ☒ Activities of Daily Living
- ☒ Community Intergration
- ☐ Grocery Shopping
- ☐ Meal Preparation
- ☐ Medication Training
- ☐ Money Management
- ☐ Physical and Emotional Health/ Wellness
- ☒ Social and Communication Skills
- ☐ Work and Education Readiness/Pursuits

Interventions Provided Towards Recovery Goals and Objectives :

Address both skill building interventions and support activities

[redacted] demonstrates a strong understanding of his medical routine and consistently manges his weekly appointments with confidence. This indicates continued progress in independence and self-management of healthcare needs.

Progress Towards Recovery Goals and Objectives:

Staff observed [redacted] independently navigate the doctor's office and follow all procedures related to his weekly injection without prompting or assistance. He arrived on time , checking in, and cooperated with medical staff.

Treatment Plans or Recommendations:

Continue supporting [redacted] as needed but encourage his independence with medical routines. Monitor for ongoing consistency and readiness for possible reduced staff support in furture and other appointments.

Additional Comments:

Total Skills Training Hours this Week:

(Weekly Summary Only)

8:15am-9am

Let's take a look:

Individual: Jiminy Cricket Date: 5/10/2025
Service Code: H0043R3 Location: Home Setting: Face-to-face

Intervention	Assisted Jiminy with doing his laundry. Helped separate clothes based on color and fabric. Showed him how to load the washer, how much detergent to add, and then what settings to choose. (20 minutes). Then I showed him how to load and start the dryer (10 minutes). Once clothes were dry helped him fold the clean clothes and put them up in his bedroom (30 minutes).
Response	Jiminy was able to complete 3 loads of laundry with assistance from residential staff. He needed less assistance in separating his laundry and remembers to separate darks, lights, and towels/sheets than previous weeks, but still struggles with how much detergent to use and how to turn the machines on.

Electronic signature: Johnny Faust, PP Date: 5/17/2025 7:30am

Does this note justify 30 minutes? Are these residential rehabilitation skills?

Interventions Provided: (Describe those checked above.):	Staff reminded CI to take out her medications from her Medtray to place them on her side table as she usually does as her reminder to take her medications every morning. Staff reminded CI that her nurse will be coming to her apartment today to refill her medtray for her. Staff reminded CI that she needs to make her bed and tidy her bedroom. Staff encouraged CI to have open communication with her providers about any issues she would like to address. Staff reminded CI that staff will provide CI with a community resources should she need groceries for her apartment.
Client/Collateral Response to Interventions Provided:	CI asked what day it is and what time it is? CI did not sleep well last night due to her restless legs. CI feels that she has been riding a" bicycle" all night and she is really sleepy from her lack of sleep. CI thanked staff for the medication reminders. She has plans to see a few of her CST team members today but otherwise she will be home all day. CI thinks that she has plenty of food.
Progress/Lack of Progress toward IRP Goal:	☐ 1-No Progress. ☐ 3-Moderate Progress. ☐ 5-Goal Achieved. ☒ 2-Minimal Progress. ☐ 4-Significant Progress.
Evidence/Reason for Progress Rating above:	CI identified barriers.
Plan/Planning Notes:	Staff will encourage CI to take her medications as directed by her providers. Staff will provide CI with community resources as needed for CI to support herself. Staff will encourage CI to drink herself one boost drink per day for her vitamin intake. Staff will encourage CI to keep and attend all upcoming appointments.

9/16/2025 8:46 AM - 9:16 AM H0043R2
Leslie Knope, PP 9/16/2025 9:32am

Questions?

Helpful Resources – Previous Trainings

Click the links below to access the following trainings:

- Housing Coalition Meeting 11-2025: Treatment Planning
- Housing Coalition Meeting 4-2025: Discharge Planning
- Housing Coalition Meeting 1-2025: Progress Notes
- Billing: The Anatomy of a Progress Note
- Staff Qualifications and Training

Helpful Resources

- HQR Quality Review Tools: Behavioral Health Providers | Georgia Collaborative
- DBHDD Provider Issue Resolution Form: https://dbhddapps.dbhdd.ga.gov/DBHDDPIMS/(S(iq03amzaet0yq2etflfist2z))/PIMSCases/PIRF_Ext.aspx
- DBHDD Provider Manual: https://dbhdd.georgia.gov/be-connected/community-provider-manuals
- DBHDD PolicyStat: https://gadbhdd.policystat.com/
- Subscribe to the Office of Provider Relations newsletter, send email: DBHDD.Provider@dbhdd.ga.gov
- Residential UR Form: Residential Utilization Review (UR) Form – DBHDD Office of Supportive Housing

Thank you!

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