
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

A+ Home Health Care LLC

October 2, 2017

Table of Contents

Introduction

The Quality Assessment & Improvement (QA&I) Process is a way for ODP to evaluate our current system and identify ways to improve it for all individuals. Focus areas of the QA&I process include staff training, communication (including deaf services), policies and procedures, employment, incident management, and quality management. The purpose of this report is to detail the results of the QA&I process. This report is provided as a means of describing the areas in which they have excelled, and document any areas of non-compliance that will require remediation.

QA&I Summary

A+ Home Health Care completed the self-assessment and sent it to the AE on August 31, 2017. The onsite review took place on September 12, 2017. The AE staff Meagan Smolsky and Lauren Foell met with Danielle Young, Danielle Lawrence, and Sean Lawrence of A+ Home Health Care. The AE reviewed records for three individuals as well as all relevant policies and procedures. Findings were discussed at the end of the onsite interview. Highlights from the entrance and exits discussions include:

- Strengths of review
- Findings of noncompliance
- QA&I Satisfaction survey – <http://qaic1y1feedback.questionpro.com>

One staff and one individual (MCI#850167291) were interviewed on September 21, 2017 at the individual's home by AE staff Meagan Smolsky.

Data Analysis and Performance Evaluation

Of the three individuals reviewed, one individual is currently receiving services with A+ Home Health Care. The other two individuals left the agency by choice and satisfaction surveys were completed upon exit. The agency maintained all needed records. The agency has strong policies and procedures in place. They do not provide employment services. No one in the sample needs additional communication supports. The agency's self-assessment differed from questions out of compliance. Questions out of compliance were:

- Q22: The Provider documents delivery of services/supports in the type, scope, amount, frequency and duration specified in the Individual Support Plan (ISP).

- Q14: Staff receive training to meet the needs of the individual they support as identified in the current, approved Individual Support Plan (ISP) before providing services to the individual.
- Q17: Provider staff receive annual incident management training on preventing, recognizing, reporting and responding to incidents and assuring a participant is safe.
- Q18: Provider staff receive annual incident management training on preventing, recognizing, reporting and responding to incidents and assuring a participant is safe.
- Q19: The staff receive training on the Provider's policy/procedure on how to respond in cases of individual health, behavioral emergencies and crises.
- Q20: The staff receive training on the Provider's Emergency Disaster Response plan that addresses individual's safety and protection, communications and/or operational procedures.

Question 22 was out of compliant for 2 individuals. Staff trainings were found to be noncompliant for one staff, who is the family member of an individual that is no longer served. Additionally, accurate billing and behavioral emergencies are missing from the training sign off, even though they are listed in the annual training policy. The provider was receptive to feedback and stated they have a training scheduled in October. Staff will be trained on missing components at this time.

During the interview, the individual indicated he is very happy with his services through A+ Home Health Care. His staff knows him well and it was clear they enjoy each other's company. All responses to the interview questions were answered with satisfaction.

Because several staff training questions are out of compliance, it is recommended the provider update their Quality Management plan and follow-up with the AE.

Appendices

See CAP attached in email

See MCI Review attached in email