
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Alleghenies Unlimited Care Providers

October 16, 2017

To: Karen Fedorko, Sarah Misosky and Scott Maust - AUCP

From: Mary Ann Arnone and Heather Bond – Cambria County

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Introduction

The Comprehensive Report provides an overview of the results of your agency's Quality Assurance and Improvement Self Assessment, Desk Review and On-site audit which occurred on September 22, 2017. It also contains a summary of the findings from the interview held on October 2, 2017. This report highlights areas where your agency is doing well regarding person centered services delivery and promising practices; analyze performance in ODP's quality focus areas for the current QA & I cycle; compare results of the desk and onsite reviews with the self assessment; summarize instances of non-compliance that were remediated during the onsite review, if applicable; outline non-compliances, if applicable; recommend PPRs where compliance is below established thresholds of 86% and recommend improvement activities to be addressed during the remainder of the QA & I cycle including systemic quality improvement projects to incorporate into QM plans.

The focus areas for the year's review statewide include positive practices and employment. Services should be accessible, flexible, innovative and person-centered.

QA&I Summary

Alleghenies Unlimited Care Providers submitted their self assessment on August 15, 2017 along with the required documents – Quality Management Plan, Restrictive Intervention Policy and their Annual Training Plan. The self assessment was completed on 5 individuals. No non-compliances were noted on the self assessment. The required documentation for the residential program met the established criteria as outlined in ODP's QA & I guidelines. The in-home program's annual training curriculum did not include all the required topics. The following topics were not listed on the in-home annual training curriculum – "Department policy on intellectual disability principles and values", "Training to meet the needs of a participant as identified in the ISP" and "Department issued policies and procedures."

The onsite audit was conducted on September 22, 2017. Karen Fedorko and Sarah Misosky were present for your agency. Mary Ann Arnone and Heather Bond were the QA & I Leads for Cambria County. Five individuals were selected for the on-site audit sample. All the individuals are enrolled in the Consolidated Waiver. Three individuals are authorized to receive residential services, and two receive in-home and community support, companion and/or respite.

Alleghenies Unlimited Care Providers residential program was very well prepared for the onsite audit. A binder was created which contained all the information needed for the review. Everything was tabbed and highlighted which made the review go quickly. All documentation for the residential part of the agency was readily available for review. Additional documentation for the individuals receiving In-home and community supports was submitted to this reviewer after the on-site.

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AUCP's QM plan's focus areas centered on consumer care/satisfaction, billing integrity, Incident management, licensing compliance, staff retention, and individual finance integrity and individual file integrity. AUCP reviews the performance data on a quarterly basis. The data for the focus areas is derived from the residential program. It was recommended that data also be obtained for those individuals receiving in-home and community supports, companion and/or respite.

AUCP staff receives training on the individuals' ISP prior to working with them. The residential program has a form that is signed by the staff documenting the receipt of the ISP training. The in-home program utilizes a similar form however; it was recommended the in-home supports program utilize the same form. All staff reviewed participated in the required annual trainings. However, as noted above, the in-home staff's annual curriculum did not contain all the required topics.

There was documentation to support the provider's attendance at the ISP annual review meetings. Compliance was noted with progress notes. It was recommended to utilize the calendar on the progress note template to document days and specific hours of service rendered for the in-home program. This would make it easier to differentiate the amount of service specific to each rendered service.

AUCP is not an employment provider. No one in residential is competitively employed. As noted in our discussion on employment, if an individual would express an interest in competitive employment the SC would be notified and options would be explored.

One individual in the sample uses a dynavox to communicate. In-home staff works with her and documentation was present to verify the Provider's staff training on the communication device.

One individual in the sample was interviewed at the residential home. She answered all questions asked of her and reported no issues or concerns with the services she receives from AUCP. Her room is nicely decorated and personalized. She attends community participation supports five days a week through another provider agency. She has the ability to participate in community activities with her residential provider but at times, this is dependent on staff availability.

Data Analysis and Performance Evaluation

As stated in the previous section, Alleghenies Unlimited Care Providers submitted the self assessment and supporting documentation as required by ODP. They were well prepared for the on-site audit which occurred on September 22, 2017 with an interview being conducted on October 2, 2017. AUCP's Quality Management plan has good focus areas that pertain to various topics individual choice, access and satisfaction with services. Staff training records document all staff are trained prior to providing services.

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Recommendations include –

1. Include data for individuals receiving in-home community supports, companion and/or respite to the QM plan.
2. In-home program should utilize the same form to document training of ISPS that is being used by the residential program.
3. In-home program should utilize calendar on progress note template to document days and specific hours of service rendered

Based on the results of the on-site audit, a Corrective Action Plan is being issued due to the in-home program's annual training curriculum missing required topics. See attached template. The CAP needs to be completed and returned to me within 30 calendar days of this letter. **The completed CAP is due November 16, 2017.**

Appendices

The QA & I MCI review spreadsheet is attached for your review.

****Alleghenies Unlimited Care Providers completed and returned the CAP on November 2, 2017. Supporting documentation to verify CAP activities was submitted. AUCP also addressed the recommendations that were included on the CR. AUCP's CAP was approved and validated on November 3, 2017.**