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# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Austin's Place

*12/12/2017*

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## **Introduction**

The purpose of the Comprehensive report is to compile the official findings from the desk and onsite reviews, face-to-face interviews and self-assessments, as applicable, that were completed for your agency as part of ODP's QA&I Process. This report will:

- Highlight those areas where the Provider is doing well related to 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 entity's self-assessment;
- Summarize those instances of non-compliance that were remediated during the onsite review;
- Outline issues of non-compliance expected to be remediated within 30 calendar days of report receipt;
- 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 mission of the Office of Developmental Programs (ODP) is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice and opportunity in their lives.

ODP's vision is to continuously improve an effective system of accessible services and supports that are flexible, innovative and person-centered.

The Quality Assessment & Improvement Process is a way for ODP to evaluate our current system and identify ways to improve it for all individuals.

## **QA&I Summary**

Per ODP's requirement, Austin's Place completed and forwarded to the Administrative Entity (AE) their Self-Assessment on August 17, 2017. Additionally, Austin's Place submitted their Quality Assurance and Management Policy, Restrictive Procedure Policy and Incident Management Policy. As part of the QA&I Process providers were required to submit their Quality Management Plan, Annual Training Curriculum and Restrictive Intervention Policy. Their Restrictive Procedure

Policy and Self-Assessment were reviewed as part of the desk review. The On-Site portion occurred on December 7, 2017 as scheduled.

The Program Director was present for the on-site review and the entrance meeting. During the entrance meeting the changes to the QA&I process were discussed. The AE reviewed ODP's focus areas of Quality Improvement, Employment and Community Participation. Also noted was the change that the AEs were no longer reviewing the specific service billing history of the provider and On-Site is to occur on a 3-year cycle. The AE outlined what would be reviewed during the On-Site and potential timeframes for completion. The provider had arranged for the individual interview portion to occur. The provider sample was five individual records. There was a total of twenty-two staff records reviewed, twenty of which were newly hired. The Program Director explained that when Austin's Place moved to its new location in Butler County they had lost most of their employees due to the location.

### **Data Analysis and Performance Evaluation**

During the desk review it was noted that the Quality Management (QM) policy that was submitted was not the QM Plan. In addition, the Annual Training Curriculum was not submitted. During the on-site review, both documents were presented to the AE and are in compliance with ODP's requirements.

The provider had information needed for the on-site review ready and in an organized fashion. The Program Director was available to the AE to answer any questions or obtain additional information that was needed.

### **Findings:**

Highlights and Provider Strengths:

- The Program Director gave the AE a tour of their new facility. The ranch setting is a unique environment for a day program. The individuals that the AE met and observed were participating in activities and appeared to be happy.
- The daily documentation of service was very thorough. Each note reviewed in the sample included such detail that the AE could have a clear picture of what occurred with that individual while working on each outcome. This information was then developed into a well written monthly progress note.
- The individual interviewed as part of the on-site review went well. The individual used his I-Pad to answer the questions. His staff gave him a verbal cue to use the device initially

then he continued independently. He expressed his satisfaction with the program and his staff.

Recommendations for improvement:

- There were some of the ISP's reviewed that had some misinformation in the plan. For example one indicated that Austin's Place was responsible for a Health Promotion by assisting an individual with daily therapy exercises to walk in order to maintain muscle strength. However documentation that was reviewed showed that completing this had become unsafe for the individual and staff. According to the provider there was a verbal conversation about this with the team, however the plan had not been updated. The AE suggested sending an email to the Supports Coordinator to have the information corrected in the ISP. The email could then be filed with the ISP until the changes are made.
- Austin's Place has documentation of ISP training for each individual completed by each staff. The AE suggested adding to the training record some specific information regarding specific diagnosis or needs of the individual. For example, "soft food dietary need, GERD, etc.

Areas for Corrective Action:

- Austin's Place had not been following their policy in regard to screening employees to ensure they are not on any exclusion lists.
- Austin's Place was not able to verify the qualification for a Certified Investigator that they had contracted with.

Appendices

Austin's Place QA&I Tool

Austin's Place Corrective Action Plan (CAP)