
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Caregivers America LLC

April 6, 2018

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Introduction

The QA&I process is designed to conduct a comprehensive quality management review of county programs, Administrative Entities (AE), Supports Coordination Organizations (SCO) and Providers who deliver services and supports to individuals with intellectual disabilities and autism spectrum disorders. While compliance with requirements is a part of the QA&I process, the main focus is to emphasize quality and quality improvement. ODP's focus areas for QA&I process for 2017 are quality, employment, and communication. This was the first year of the newly established QA&I process for all providers.

QA&I Summary

The Provider Self-Assessment, expected to be completed annually, is the first phase of the QA&I process and is designed to measure performance on the provision of services and supports based on key quality metrics and implementation of the “*Everyday Lives: Values in Action.*” The provider is expected to use the self-assessment results to inform and build quality improvement activities and monitor their performance. The provider completed the self-assessment prior to the required deadline as well as submitted the MCI Tracker Tool for review prior to the scheduled on-site review. During the onsite 2 individual records were reviewed as well as the employment and training records of the 2 support staff working with the individuals and in addition, a review of data and policy. The onsite review was completed on April 6, 2018.

Data Analysis and Performance Evaluation

The self-assessment submitted by Caregivers America was reviewed, and the performance of the provider was evaluated. Results of the validation of the self-assessment demonstrate compliance in all areas with particular strengths with regard to the areas of staff documentation and staff training. Therefore upon completion of the AE desk and onsite review results were considered to be reliable and nearly identical. There were no issues discovered that required correction while onsite or during desk review. There were no items requiring remediation within 30 days. For instances where results fall below 86%, the provider would be responsible for evaluating the need for systemic improvement and prioritize these areas in their Quality Management Plan, as appropriate as part of the Corrective Action Plan process. There was no Corrective Action Plan required or needed for this provider.

The provider achieved 100% compliance in all areas most notably including provider participation in the ISP, provider documentation of the delivery of services and staff training. In addition, the provider produces and implements a Quality Management Plan that not only reflects ODP's Mission, Vision and Values, but is designed through the efforts of a regularly

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meeting Performance Improvement Committee encompassing a committed group of employees at all levels within the agency from direct care to the president of the organization.

In support of ODP's focus area for the QA&I process on quality, the Quality Management Plan for this provider includes safeguards with a desired outcome of ensuring the health, safety, and rights of the individual receiving services through the review and finalization of incidents submitted in HCSIS. It also includes a focus on participant safeguards with a desired outcome of the individuals receiving services being treated with dignity and respect and being free of restraints. A definite strength of this provider is a clearly defined restrictive procedures, interventions and restraints policy. Finally, the current plan includes the focus area of review of complaints and grievances with a desired outcome of individuals and family members experiencing satisfaction in having complaints and grievances addressed promptly and fully.

It is evident that Caregivers America LLC is not only committed to the provision of quality services, but in addition makes the responsibility of implementing ODP Policies a high priority within their organization. Management staff is competent, responsive and very knowledgeable about the requirements set forth by ODP and the importance of the implementation of policies and practices that produce caring employees who are committed to providing quality supports. The implementation of training for key administrative staff prior to the QA&I Self-Assessment process was vital in improving comprehension of the self-assessment process as well as accurate completion of submitted reports and participation in the onsite review.

The therapy staff for the gentlemen reviewed has remained the same from the past several previous monitoring reviews and each of the two staff persons act as back up if needed for the other. The 2 individual families that were included were also selected in several recent rounds of monitoring and expressed a high level of satisfaction with the therapy supports received by their family members and of the provider agency as a whole. A review of the service notes, confirm the family's satisfaction.

Recommendations for the provider's system improvement include continuing to implement their obviously well working structure of Quality Management with a continued focus on staff training. While not required, it may be beneficial in the future to identify a least one key staff to make the commitment to the Quality Management Certification Process. Since the provider's Quality Management structure is already very well established and producing desired results, it seems like a logical next step in order to enhance the already high standard of quality exemplified by this Provider.

Appendices

Provider MCI Tracker Tool