QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Entity Name: Creative Supports Institute LLC.

Date(s) of Onsite Review: October 16, 2017 through October 18, 2017

Date of Report: November 13, 2017

Onsite Review conducted by Philadelphia IDS

Name(s) of QA&I Review Team: Lillie Jefferies, Public Health Program

Analyst

Table of Contents

Introduction:	3
QA&I Summary:	4
Data Analysis and Performance Evaluation:	6
Appendices:	7

Introduction

This comprehensive report contains a detailed analysis of the Office of Developmental Programs (ODP) Quality Assessment & Improvement (QA&I) process for Creative Supports Institute LLC. _This report will include the official findings of the desk review and on-site review processes conducted earlier this year by your assigned administrative entity, Philadelphia Intellectual disAbility Services.

The ODP QA&I Process for providers, which replaced the ODP Provider Monitoring process on July 1, 2017, is one piece of a comprehensive quality management review designed to evaluate the supports and services offered by county Administrative Entities, Supports Coordination Organizations, and Provider agencies across the Commonwealth of Pennsylvania. The purpose of the revised process, as stated by ODP, is to eliminate unnecessary duplication across Commonwealth and county review procedures, to allow more time to focus on individual experiences and quality improvement, to improve methods of collecting and reporting useful data in a timely manner, and to foster collaborative partnerships and opportunities for technical assistance and shared learning.

Upon completion and approval of this comprehensive report, the results are shared with ODP in order to assist with the evaluation of the current system of supports, and to identify ways to improve the system for all individuals and key stakeholders. Additionally, QA&I assists with data collection that measures Consolidated and Person/Family Directed Support waiver performance measures, compliance with Title 55 PA Code Chapter 51 regulations, and compliance with the Medicaid Waiver Provider Agreement.

ODP's focus areas for this year's statewide QA&I review are consistent with the desired outcomes of the 2017 waiver renewals and the ODP quality management strategy. These focus areas include but are not limited to the following:

- Families with infants and toddlers and people with Autism get the support they need
- People will be connected with their community and increase community participation
- People will live with people they like and who care about them
- People will be physically and mentally healthy
- Assuring effective communication
- Increasing employment
- Ensuring individuals are free from abuse, neglect, and exploitation
- Ensuring that people with complex needs have the support they need

Quality Assessment & Improvement Summary

The steps of the ODP QA&I process are inclusive of the following procedures:

Self-Assessment:

Creative Supports Institute LLC successfully completed their self-assessment on time, before the deadline prescribed by ODP. The reviewer's findings were inconsistent with that of Creative Support Institute's findings reported in the self-assessment. However; it was acknowledged by the CSI management that an error was made in documenting the answers for the following questions. Q36. If an individual's back up plan is not implemented as designed, an incident report of neglect was submitted and Q37. The provider ensures the replacement of an individual's lost or damaged property in accordance with regulations. Q39. The Provider offered victim's assistance to the individual as appropriate. Q40. The Provider implemented the corrective action for each individual's incidents. Q41. The Provider reported all critical incidents. All questions were answered indicating the #5 however; the agency experienced no reportable incidents, all answers should reflect 0. No incident reports were required.

Desk Review of Providers:

The assigned Administrative Entity will conduct a desk review of providers that are assigned for on-site review prior to the date of on-site. This desk review includes an analysis of the provider agency's Quality Management Plan, the Annual Training Plan, and the Restrictive Intervention Policy, which are submitted to the AE by the provider upon completion of the self-assessment. The desk review also consists of a review of data collected from Home & Community Services Information System (HCSIS), the Enterprise Incident Management system (EIM), and the Individual Support Plans (ISPs) of the individuals selected by the assigned AE for the onsite review sample. CSI sent all required documentation for the desk review timely. During the desk review, it was determined that all of the requested documents met criteria and needed no revisions. The Creative Supports QM plan was recently revised in order to better meet ODP departmental QM priorities. Outcomes they are working towards in the QM plan directly respond to previous provider monitoring areas of concern, with regard to implementation of back-up plan procedures, progress note documentation, and ensuring service delivery consistent with ISP outcomes.

AE Onsite Review of Providers:

Philadelphia IdS conducted the review of Creative Support Institute LLC at the IDS office located at 701 Market Street, from October 16, 2017 through October 18, 2017. The process began with an Entrance meeting, held on the first day of the scheduled onsite review. A copy of the Entrance meeting signature sheet documenting all attendees is included in the appendices of this report. Discussion during the entrance meeting included introductions, a general overview of the QA&I process, including the mission, vision and quality improvement priorities of ODP, IdS, and the reviewed provider, and a discussion of the specific details of the onsite process. The overall experience with CSI was extremely positive because they were well versed on the new QA&I process and regulatory changes. All of CSI's QA&I materials were organized efficiently and ready for the review. The entrance and exit meetings were both informative, and discussed the new QA&I process in depth. Throughout the course of the review, it was evident that CSI had developed longstanding meaningful relationships with other provider agencies and the individuals that they had been supporting. The provider also excels with being proactive by maintaining knowledge regarding all relevant ODP bulletins and memos. The provider ensured that all interviews were scheduled ahead of time, and that the necessary CSI staff persons were available in support of each interview. The provider also attends ISP and team meetings for the individuals as needed.

A total of 5 individuals were selected as a part of this provider's sample, and of those sample individuals, only 4 interviews were conducted during the onsite review. One interview was unable to be conducted because the individual was hospitalized. The provider provides Behavioral Supports for each of the individuals in the sample. All of the individuals within the sample lived in Community Living Arrangements (CLA). For 3 of the individuals within the sample, the interviews were conducted in their homes while the other was conducted at the individual's day program. Each of the individuals reported satisfaction with the supports they were receiving and spoke highly of the staff supporting them. There were no family members that were interviewed for the individuals that were within the sample. Direct Support Professionals that were also present for the 3 sample interviews expressed how much the individuals have grown socially as a result of the individuals receiving Behavior Supports from the Creative Behavioral Supports specialist.

On the final day of the onsite review, an Exit meeting took place. A copy of the Exit signature sheet documenting all attendees is included in the appendices of this report. Topics of discussion during the Exit meeting included introductions, an overview of the process from the perspective of the reviewer and the reviewed provider, an overview of the findings documented during the review, and an overview of the comprehensive report and the corrective action process. As a result of the new changes with Behavior Support services being placed within the residential rate, CSI wanted to ensure that it was noted that not all providers of this service was aware that team process was supposed to be followed as individuals were transitioned to new specialist. As a result of this, CSI is extremely concerned that

individuals that are not allowed to transition from one specialist to another one properly will suffer setbacks, both socially and emotionally.

Data Analysis and Performance Evaluation

This section of the report will provide data and analysis in key areas, highlighting both good performance and areas for improvement. [Data for every QA&I question will be provided in an appendix.]

CSI staff was well versed on each individual that was being interviewed. The individuals interviewed spoke extremely positive about the staff and how having them as part of their team has afforded them the necessary supports that was needed to help them in their lives. CSI are able to hire highly skilled staff, including staff that specialize in areas that are critical to provide thorough and complete behavioral supports to individuals in the intellectual disability service system in Pennsylvania. This provider has the ability to offer staff that are specially trained and educated in areas with which individuals may need specific supports, including sexuality and deviant sexual behaviors, and socialization disorders.

There were no issues discovered and remediated on site, and there were no areas of remediation required. The provider did not receive a corrective action plan.

Appendix A: Corrective Action Plan

Appendix B: Entrance Signature Sheet

Appendix C: Exit Signature Sheet

Appendix D: MCI Review Spreadsheet