
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

(Lawrence)

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Introduction

The purpose of this report is to compile the official findings from the desk review and onsite review, face-to face completion of ODP's Quality Assessment and Improvement Process (QA&I). The focus areas in the QA&I for fiscal year 2017-2018 are the following: Quality Management, Person Centered Planning, Service Delivery & Outcomes, Qualified Providers, and Health and Welfare. Onsite review was conducted by the Director of Lawrence County Developmental Services in representation of the assigned AE and the Director of Intellectual Service with Don Services.

QA&I Summary

Don Services, MPI# 101911851 completed and submitted the agency's self-assessment prior to the onsite review within the required timeframe. The onsite entrance conference was held on October 26, 2017 at 9:30am at 831 Harrison Street, New Castle, PA utilizing the Entrance Agenda provided by ODP with introductions, overview of the process, organizational overview and the onsite review. The AE selected 1% of participants or 5 individuals who are registered with the Lawrence County Developmental Services and authorized and actively receiving services with Don Services. This included a cross section of individuals served, funding/program types, and locations and types of services, which included the following: 3 Consolidated Waiver and 2 Person Family Directed Supports Waiver. This agency does not serve any individuals with Base funds. Lawrence County Developmental Services completed 1 face to face interview with a participant receiving Consolidated Waiver funding. As part of this review, Lawrence County Developmental Services also completed a desk review utilizing HCSIS, EIM and IM4Q and identified evidence of key performance and quality outcomes for individuals, which included implementation of "Everyday Lives". During the on-site portion of the review, Lawrence County Developmental Services focused on the use of the QA&I required tool and review of quality improvement and compliance evidence related to the sample of participants and other organizational responsibilities.

Data Analysis and Performance Evaluation

There was evidence that Don Services has a Quality Management Plan that reflects ODP's Mission, Vision and Values. Don Services reviews and evaluates performance data in selecting priorities for their Quality Management Plan. It is an active plan in which Don Services analyzes and revises as needed by not less than every 2 years as required. This provider has and implements a policy/procedure to screen employees and contractors. The provider documents grievances in accordance with regulation and reviews as a part of their Quality Management practices. Don Services has a policy that addresses restrictive interventions. Staff receives training to meet the needs of the individuals they support as identified in the current approved ISP before providing services, which includes all new hired staff. This

provider documents Annual training plan that meets all the requirements and completed all components of the Annual training plan as required. Don Service's staff received annual Incident Management training preventing, recognizing reporting and responding to incidents and assuring participants are safe. The staff received training on the provider's policy/procedure on how to respond in cases of individual health, behavioral emergencies and crisis; however the AE representative did make a recommendation upon learning that the provider's management staff has accreditation for CPI training that all staff at the agency should be trained equally in the area behavioral emergencies and crisis. This provider's staff did receive training on the provider's Emergency Disaster Response Plan that addresses individual's safety and protection, communications and/or operational procedures. Don Services participates in the development of the ISP. Don Services also documented delivery of services/supports in the type, scope, amount, frequency and duration specified in the ISP. Don Services implemented the individuals' back up plan as specified in the ISP and documents this well. This provider finalized incident within 30 days, offered victim assistance when necessary and implemented corrective action when necessary. Don Services peer review process was not applicable due to any incidents within the review time period; however the AE noted no existence of the establishment of the peer review committee. This was noted to the agency and corrected on site prior to the conclusion of the review. All required investigations were completed by a Department certified investigator. The AE also provided feedback to the provider on the thoroughness of the agencies online documentation of service delivery for nursing services.

Lawrence County Developmental Services found a discrepancy only in one area between Don Service's self-assessment and the on-site review which was documented previously in this report on the provider's peer review process.

Appendices:

In conclusion of the Fiscal Year-2018 ODP on Site Quality Assessment and Improvement Process there is no corrective action needed and no CAP is necessary. Please find attached the MCI Review Spreadsheet.