
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

EIHAB Pennsylvania, Inc.

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Introduction

The Office of Developmental Programs (ODP) Quality Assessment and Improvement (QA&I) process is designed to conduct a comprehensive quality management review of county programs, Administrative Entities (AE), Supports Coordination Organizations (SCO), and Providers delivering services and supports to individuals with intellectual disabilities and autism spectrum disorders. The focus of this process is on quality assessment and improvement as it relates to the participants' experience with services and supports.

The mission of the Office of Developmental Programs (ODP) is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice of opportunity in their lives. The office seeks to continuously improve an effective system of accessible services and supports that are flexible, innovative, and person centered. In keeping with the mission and vision, the QA&I process integrates Everyday Lives Values in Action, ISAC recommendations, and the Consolidated and or Person/Family Directed Support (P/FDS) waiver performance measures. ODP delegates the authority to carry out the Provider QA&I to the AEs, to validate that Providers comply with the current Provider Agreement for Participation in Pennsylvania's Consolidated and P/FDS Waivers.

QA&I Summary

EIHAB Pennsylvania, Inc. completed a self-assessment during the QA&I FY 17-18 consisting of five (5) individuals, data review, and internal policies. The Lackawanna Susquehanna BH/ID/EI Program received a copy of EIHAB Pennsylvania, Inc. self-assessment on 08/30/2017.

The Lackawanna-Susquehanna BH/ID/EI Program reviewed a sample of two (2) Consolidated records, data reviews, and internal policies. One (1) interview was conducted with a consumer from the sample. The Lackawanna-Susquehanna BH/ID/EI Program was on-site with EIHAB Pennsylvania, Inc. on 11/17/2017 and 11/29/2017 completing the on-site record review. As a matter of convenience for the Consumer, the individual interview was conducted at their Residential Habilitation setting on 11/29/2017.

Data Analysis and Performance Evaluation

EIHAB Pennsylvania, Inc. mission statement indicates every human deserves the opportunity to succeed. In delivering high quality compassionate care, they aim to help individuals with disabilities lead fulfilling and productive lives.

The Provider values fall in line with ODP's Everyday Lives vision which includes; the right to self-determination and choice, Individual right to receive services in the least restrictive environment, individual empowerment, continual availability of supports and services, and utilization of community resources.

EIHAB Pennsylvania, Inc. currently has six (6) residential group homes; three (3) in the Lehigh Valley, and three (3) in Tunkhannock, Wyoming County. The Provider has recently hired many new staff for their residential programs in accordance with their value of delivering services in accordance with the highest standards of professional conduct.

Two individuals receiving residential services through EIHAB fall under the oversight of the Lackawanna-Susquehanna BHID/EI Program. Both individuals were included in the record review.

EIHAB Pennsylvania, Inc. acknowledges the importance of ongoing staff training. They have developed a proactive approach to staff training. The provider currently has two (2) medication trainers and they have expanded the number of certified investigators.

EIHAB Pennsylvania, Inc. develops relationships within the community to foster inclusion within the community and broaden opportunities for all individuals to form social relationships. Individualized attention is demonstrated as they work to support the needs of each individual they serve.

The following areas of strength related to this review are as follows

- The Provider's daily progress documentation is detailed and comprehensive.
- The Provider is dedicated to supporting the dignity and respect of the individuals they support.
- The Provider works to increase opportunities for community activities and inclusion for individuals receiving residential supports.
- Residential programs are fully staffed, the Provider has ensured that the local residential facilities possess qualified and appropriate staff.
- The Provider matches newly hired staff with consumers based on staff strength and individual needs.

- Current residential program specialist has a strong focus on person centered-practices and improving staff training.
- The Provider tracks incidents and is dedicated to finalizing incidents within a 30-day timeframe.

Analysis of performance based on focus areas

- EI HAB Pennsylvania, Inc. achieves compliance with incident management policies established and reviews incidents in accordance with ODP Policy. The only required remediation to their current process is to run and review the target report. The provider reviews target information from individual incident reports (due to the small number of individuals served) but is not currently running the report via EIM.
- The provider continually reviews and evaluates of practices to ensure each individual receives the most inclusive, least restrictive services and supports.
- Both individual consumers reviewed have a history of frequent psychiatric hospitalizations prior to receiving services through EI HAB Pennsylvania, Inc. The Residential service provided by EI HAB Pennsylvania, Inc. has been successful in diverting additional psychiatric hospitalizations for both individuals.

Issues discovered and corrected while onsite or during desk review

- No issues were corrected while on-site.

Items requiring remediation within 30 days

- Q24 If a Progress note indicates lack of progress in achieving an outcome, the Provider progress note indicates what actions have been taken.
- Q43 The Provider reviews and analyzes incidents at least quarterly to include running and reviewing target reports.
- Q46 The Provider completes all health care appointments, screenings, and follow-up as prescribed.

Recommendations for entity's system improvement, including those things that rise to the level of needing attention at a broader level including those areas that fall below 86% of compliance.

- Provider Staff is retrained as appropriate on achieving outcomes and how to document such progress for an individual.

- Provider develops and implements a tracking system that ensures that all health care appointments, screenings, and follow-ups are scheduled as needed, and completed accordingly.

Appendices

- MCI Review Spreadsheet
- CAP