
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Aegis Residential Services

11/16/17

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. As part of ODP's quality management strategy, the QA&I process has been designed to be comprehensive standardized and measurable. This gives providers applicable information for making decisions regarding service delivery and provides them the opportunity to make systemic changes in their organization that will improve the quality of their services.

The mission of ODP is to support Pennsylvanians with developmental disabilities achieve greater independence, choice and opportunity in their lives. This includes continuously improving an effective system of accessible services and supports that are flexible, innovative and person-centered. The QA&I process is designed to accomplish this. It is a continuous process that includes the Provider's Self- Assessment > Desk review > Onsite Review > Comprehensive Report > Corrective Action and Quality Improvement > Technical Assistance > Self- Assessment. The goal is to continuously improve the quality of services.

Quality services include:

- Ensuring Individuals have Choice, control in their lives regarding who they live and socialize with, where they work,
- Assuring effective communication
- Increasing employment
- Increasing community participation
- Ensuring ISPs are updated timely when there is a change in need
- Ensuring individuals are free from abuse, neglect and exploitation
- Ensuring people with complex needs have supports they need (Behavioral and mental health supports, adaptations in their environment so they can access what they need and want.
- Quality services that provide services that will meet their needs with dignity and respect.

This QA&I Comprehensive report summarizes the findings from the provider's self-assessment, onsite review, and interview/s with the consumers and staff.

QA&I Summary

Aegis Residential Services was qualified as a provider in 12/2015. The QA&I on site was held on 10/17/17 and 10/18/17 at their Lansdowne office located on 25 N. Lansdowne Avenue. Present for the entrance interview was, Samantha Longdin, Chief Operating Officer and Kadi Kamara, Program Manager. Aegis is currently providing Residential and Community Participation, and Supplemental Habilitation services for 4 consumers in Delaware County. The Provider Self-Assessment and the desk review, which included a copy of the Quality Management Plan, Restrictive Intervention Policy and the Annual Training Curriculum, were submitted on 9/26/17, which was after the 8/31/17, due date. Currently, Aegis Residential Services has a total of 16 employees.

At the entrance interview, the following was discussed and a 4-page handout of the information below, including a flow chart, timeline and the website for the QA&I survey, was distributed to Samantha:

- The purpose of the QA&I process, a review of the process and the timelines
- Summary of ODP's missions and vision
- The Quality improvement priorities
- Website for the QA&I survey

Three of the four Delaware County consumers, reside together in a CLA. The three individuals were interviewed on 10/18/17, at their residence. One of the three individuals, was not able to answer some of the questions, due to lack of understanding the questions, so the interview was not conclusive. All three individuals stated they were happy, with their home, staff and services they receive. They stated they engage in many activities of their choice in the community. It was evident that they have a good relationship with one another. They each stated they like living with their roommates and they do not have any needs at this time that are not being addressed.

Data Analysis and Performance Evaluation

The exit interview was held, on 10/17/17, with Samantha. The following was discussed:

- It was evident that Aegis has a comprehensive approach to delivering services. This includes, providing needed services for physical, intellectual and behavioral needs.
- In addition, Aegis, is proactive in regards with consumers' health and safety. This includes, providing 1:1 staff ratios to keep individuals safe, implementing behavior plans and providing Behavioral supports.
- Aegis prides itself in providing opportunities for their consumers to engage in community activities of their choice.

- The 3 consumers, who were interviewed, stated they were very happy with where they live. They engage in many activities they enjoy, both in the home and in the community. They seemed to have a very good relationship with each other and the staff who were present during the interviews. The COO, Samantha, and the program Manager, Kadi, demonstrated that they have a great knowledge of their consumers.

The QA&I includes reviewing the Providers' policies (including implementation of the policies), consumers' records, and staff training records. The following are the results:

Policy: (Questions – 7, 8, 9, 10, 11, 12, 16, 23, 39, 43, 44, 45, 47)

Some of the policies reviewed, did not meet ODP requirements and need to be revised accordingly.

#7 – Quality Management plan – The policy requires some revision. The plan does not state that the plan will be updated at least every 2 years. Objectives need to be measurable and the data that will be used to evaluate progress towards meeting the objective needs to be specified. If applicable baseline data needs to be included. Please add goal for; Incident management – analyzing incidents quarterly and conducting peer reviews of incidents including implementation of recommendations.

#8 – The provider reviews and evaluates performance data for the QMP - There was not any documentation that showed the QM plan was developed using performance data. Please use the results from the QA&I and incident management reviews to revise your QM plan.

#10 – Implements a procedure to screen employees and contractors - The policy needs to state that the screenings will be done prior to hiring and monthly thereafter. There were 16 employees that were reviewed and all the documentation for each of the 3 data bases was available and complete for the reviewed months. Aegis should continue to screen the new hires and current staff, and maintain the documentation of the screening efforts as required.

#12 – Policy on Restrictive Interventions - The policy did not address all the following: 1 - The uses of allowable restrictive interventions 2 - Prohibited restrictive interventions 3 - Reporting misuse of restrictive interventions.

#16 – Annual training plan - The training curriculum needs to be expanded and specify all the required training areas. Any trainings that are combined need to have the breakdown of what will be addressed. Please explain, when the trainings will take place and explain what will be covered in each of the trainings.

#43 -Reviews and analyzes incidents at least quarterly - Documentation showing that incidents were analyzed at least quarterly, was not provided.

#44 – Conducts Peer reviews of investigations – There was not any documentation to show that peer reviews were conducted.

#45 – Provider Implements Follow-up Recommendations from the Certified Investigation peer review process – Provider did not conduct any peer reviews, so there was not any recommendations or documentation.

Training: (Questions – 12, 15, 17, 18, 19, 20, 34, 35)

All staff had the required trainings. The following policies did not address all the requirements; therefore, they will need to be revised so they meet the criteria in ODP’s guidelines. The source documents, that are in the guidelines, should be used to revise the policies.

Policies requiring revisions:

- Incident Management policy
- Responding to Individual Health and Behavioral Emergencies
- Emergency Response plan for Natural Disasters.

Record Review: (Questions – 13, 21, 22, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 36, 37, 38, 40, 41, 42, 46, 48, 49)

The records for 4 consumers from Delaware County were reviewed at the on-site visits. There are not any areas that require remediation.

- Aegis has completed all Health Care appointments, screenings and follow-up visits as recommended and/or prescribed.
- The documentation that was reviewed, supported the services and supports in the type, scope, frequency and duration specified in the Individual Support Plan.

Appendices:

MCI tracker
CAP