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QUALITY ASSESSMENT AND IMPROVEMENT:  
COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Empowering Individuals for Success

12/28/17

## **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**

EI4S is a provider, that provides Residential Habilitation Services to individuals registered with the Office of Developmental Programs. 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 prior to the 8/31/17, due date.

The onsite QA&I review was conducted on 12/5/17 at EI4S in Phoenixville, Pa. The entrance interview was conducted with the CEO, the following was discussed:

- 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

### **Data Analysis and Performance Evaluation**

The exit interview was held, on the same day, with EI4S staff. The following was discussed:

- EI4S's documentation is very well organized and accessible.
- The need to use of new forms for fiscal requirements.
- The need to add Incident and Peer Reviews to agency Quality Management Plan
- The need to keep all back up documentation from LEIE, SAM and DHS MEDICHECK

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

Providers QM plan, Incident Management Plan and Training Curriculum were in accordance with OPD requirements. There were no grievances filed.

- **#10 No documentation available to prove employees and sub-contractors were screened monthly on LEIE, SAM and DHS's Mediceck**
- **#43 No documentation for quarterly incident reviews/analysis**
- **#44 No documentation of Peer reviews**
- **#45 No peer review follow up recommendation documentation**

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

Trainings for six staff persons were reviewed. All trainings were complete. 100%

**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)**

All record review questions for one individual in sample were correct. 100%

**Other attachments:**

MCI tracker

CAP