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# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Erdos, Philip J.

*11/29/2017*

## Introduction

The QA&I process is one of the tools that ODP uses to evaluate the current system of supports and identify ways to improve it for all individuals. This process has been designed to be comprehensive, standardized, and measurable. The QA&I process is intended to:

- Follow an individual's experience throughout the system;
- Measure progress toward implementing "*Everyday Lives: Values in Action*";
- Gather timely and useable data to manage system performance; and
- Use data to manage the service delivery system with a continuous quality improvement approach.

This Comprehensive Report will compile the official findings from desk review and on-site review, face-to-face interviews, and self-assessment, as appropriate for the reviewed entity. It will also include a performance analysis of ODP's statewide focus areas, identified as Employment, Quality Improvement, and Communication.

## QA&I Summary

Erdos currently serves 21 individuals with direct support and another 39 with transportation only services for Mercer County individuals. Erdos services include Community Participation Support (CPS), Companion, In-Home & Community Support (IH&CS), Nursing, Respite, and Transportation.

Erdos's self-assessment was completed on time and was received by Mercer County representatives on August 31, 2017.

A desk review was completed prior to the on-site visit which began on November 20, 2017. The entrance interview was attended by Luke Erdos, Director of Operations; Jodi Royer, Office Manager; Stephanie Skladanek, Administrative Assistant; Pam Erdos, Director of Programs; Dana Erdos, Program Coordinator; Dan Moffett, Transportation /Business Manager; Eric Hart, General Manager; Ilana Ialongo, Activities Coordinator; Sue Formichella and Paula Phillips, Mercer County QA&I Designees. The purpose of the review was discussed.

The exit interview was conducted on November 21, 2017 and was attended by the same participants listed above.

Erdos does not provide residential habilitation services, currently does not serve deaf individuals, is not designated with health care responsibilities, and none of the individuals in the selected sample received employment supports from the provider. Therefore, their scoring was not applicable (N/A) in several areas of the QA&I tool.

Five individuals were selected for the sample size. Three individuals receive Consolidated Waiver funding, one individual receives P/FDS Waiver funding, and one receives Base funding. Services received included In-Home and Community Supports, Companion Services, Respite Services, and Transportation. Interviews were conducted with 3 individuals and 3 staff members.

### Data Analysis and Performance Evaluation

The overall review was very positive. All employees were accommodating. Interviews with individuals indicated that they were very happy with their workers, their services, and the provider. The staff interviewed were very knowledgeable of the individuals they served and interactions were supportive and appropriate.

The following touches on Erdos's performance, per each Quality and Assessment Improvement key area.

#### Quality Management:

- The provider has a very thorough Quality Management Plan that addresses 11 ODP priority areas including expanding transportation services for individuals currently employed, incident management, communication assistance, and satisfaction surveys.
- The plan was analyzed and reviewed every 2 years.
- There was evidence that the provider reviews and evaluates performance data for the QM Plan.
- Quarterly reviews were present. They were very detailed, nicely done and included graphs/charts.
- Provider has developed a QI Team that is comprised of a diverse group on stakeholders which include a consumer and a parent, to provide multiple perspectives to achieve a well-rounded view of each objective.

#### Person-Centered Planning: Service Delivery & Outcomes-The system of supports is straight forward:

- The provider has a policy/procedure to screen employees and contractors using the LEIE, Sam and Medichex systems. They did provide verification that this is completed upon hire and every month thereafter. This was organized into an ongoing spreadsheet that was very easy to follow to ensure that the checks were completed.
- The provider has a policy/procedure to address grievances in accordance with regulation.
- The provider has a policy to address restrictive interventions that is inclusive of all ODP requirements.

#### Qualified Providers: Training Requirements:

- Documentation shows that employees are cross-trained for all individuals and each individual's ISP. During interviews with employees it was evident that they knew the individuals very well and had good relationships/interactions with the individuals.

- The provider has an annual training plan that meets all requirements. The ODP ID Waiver Staff Annual Training document is very organized and easy to follow.
- To assist the reviewers, the provider developed a comprehensive training spreadsheet for all employees hired within the past year that include all required information. The provider stated that they will incorporate and maintain this spreadsheet for all future reviews.

Person-Centered Planning: Service Delivery & Outcomes-Individual involvement in ISP development:

- The provider participated in the ISP development.
- Erdos provided all services/supports as specified in the ISP.
- Progress notes were extremely detailed and included daily activities, whether progress was being made or maintained, etc. The reviewers were able to gain a very comprehensive understanding of how the services are being provided to each individual.

Person-Centered Planning: Service Delivery & Outcomes-Communication:

- None of the individuals in the sample have a communication outcome, nor did the records indicate one was needed.
- Provider's QM Plan does include an objective to evaluate each individual during the intake process to assess each person's unique form of communication and implement a communication strategy for each individual.

Health and Welfare: Health, Safety, and Rights:

- All individuals in the sample had a back-up plan; however, none of the sample individuals had the need to utilize the back-up plan.
- The provider finalized all reported incidents within the required 30 day time frame. They provided victim's assistance when necessary. Corrective actions were identified in EIM and implemented.
- The review of all other documentation did not indicate that there were any non-reported critical incidents.
- The provider reviewed and analyzed incidents on a quarterly basis.
- There was no documentation to indicate that a peer review was completed for the two investigations reviewed.
- As there was no peer review documentation, it cannot be determined if recommendations were implemented.

The self-assessment completed by Erdos did not reveal any areas needing improvement. Mercer County's on-site review found 2 areas requiring attention as listed in the Corrective Action Plan (CAP). Both of these areas were related to Peer Reviews. It was recommended that the provider register and attend the Temple University's Peer Review training in order to perform this function as required.

Appendices

ErDOS Provider QAI MCI review for AEs C1Y1

Corrective Action Plan