
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

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Introduction

The purpose of this report is to provide the results of the 2017 QA&I Provider Onsite Review that occurred from September 28, 2017 through September 29, 2017.

The Quality Assessment and Improvement Process has been designed to provide oversight to provider agencies under the Office of Developmental Programs. The focus areas for this review include quality management, incident management, and promoting employment.

QA&I Summary

Your organization was included in this review based on your MPI number. Your organization submitted the provider self-assessment on time and submitted required policy documents prior to the onsite review which included the agency's quality management plan, restrictive interventions plan and annual training curriculum. The day of the onsite review you were audited by Lauren A. Smoyer, Intellectual Disabilities Supervisor for the Chester County Office of Mental Health and Developmental Disabilities. The onsite review of policies and procedures, staff training and client record review took place on the first day of the review and the interviews were completed on the second day.

Five consumer records were chosen for review and five staff training records were audited for compliance. One consumer interview was completed, and two staff were interviewed for the purposes of assessing the consumer's satisfaction with services and staff's knowledge on the consumers they work to support.

Data Analysis and Performance Evaluation

Your organization demonstrated promising practices in the areas of developing prevocational skills into abilities that can eventually lead to gainful, competitive employment.

Incident management is handled well within the organization. There were zero late incident reports entered into EIM and all corrective action was implemented per the incident reports. One incident specifically warranted more follow up and the program made modifications to an individual's work area to make it safer.

Your agency indicated you had a grievance procedure that met chapter 5100 requirements, but during the onsite review it was determined that there were elements missing from the policy.

Your agency indicated you had one new hire staff and that new hire staff was trained on individual's ISPs, but during the onsite review it was determined there were three new hire staff and only two were trained on individual's ISPs.

Your agency indicated you complete the peer review process, but during the onsite review it was determined that a quality review of certified investigations is not currently taking place.

No areas of non-compliance were remediated during the onsite review for your agency.

Staff trainings will need to be remediated within 30 days of the date of receiving this report.

Your agency should focus on staff training, and include this as an area of focus within you quality management plan.

Appendices

QA&I MCI tracker

QA&I Corrective Action Plan