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# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Name of Reviewed Entity: Jami Residences LLC

Date of Onsite Review: November 30, 2017

Date of Report: December 29, 2017

Onsite Review conducted by Philadelphia IDS

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## Introduction

This comprehensive report contains a detailed analysis of the Office of Developmental Programs (ODP) Quality Assessment & Improvement (QA&I) process for Jami Residences LLC. This report will include the official findings of the desk review and on-site review processes conducted earlier this year by your assigned administrative entity, Philadelphia Intellectual disAbility Services.

The ODP QA&I Process for providers, which replaced the ODP Provider Monitoring process on July 1, 2017, is one piece of a comprehensive quality management review designed to evaluate the supports and services offered by county Administrative Entities, Supports Coordination Organizations, and Provider agencies across the Commonwealth of Pennsylvania. The purpose of the revised process, as stated by ODP, is to eliminate unnecessary duplication across Commonwealth and county review procedures, to allow more time to focus on individual experiences and quality improvement, to improve methods of collecting and reporting useful data in a timely manner, and to foster collaborative partnerships and opportunities for technical assistance and shared learning.

Upon completion and approval of this comprehensive report, the results are shared with ODP in order to assist with the evaluation of the current system of supports, and to identify ways to improve the system for all individuals and key stakeholders. Additionally, QA&I assists with data collection that measures Consolidated and Person/Family Directed Support waiver performance measures, compliance with Title 55 PA Code Chapter 51 regulations, and compliance with the Medicaid Waiver Provider Agreement.

ODP's focus areas for this year's statewide QA&I review are consistent with the desired outcomes of the 2017 waiver renewals and the ODP quality management strategy. These focus areas include but are not limited to the following:

- Families with infants and toddlers and people with Autism get the support they need
- People will be connected with their community and increase community participation
- People will live with people they like and who care about them
- People will be physically and mentally healthy
- Assuring effective communication
- Increasing employment
- Ensuring individuals are free from abuse, neglect, and exploitation
- Ensuring that people with complex needs have the support they need

### Quality Assessment & Improvement Summary

The steps of the ODP QA&I process are inclusive of the following procedures:

#### Self-Assessment:

All providers complete the self-assessment on an annual basis. Providers are expected to remediate issues that are discovered during their self-assessment within 30 days, and to engage in quality improvement activities based on the results of self-assessment. Jami Residences LLC successfully completed their self-assessment on time, before the deadline prescribed by ODP. However, the self-assessment and the onsite QA & I review contradicted each other. During the QA & I onsite the following discrepancies were discovered:

- Question # 10 - Jami did not demonstrate that the exclusion list was being checked monthly. In addition, Jami was only checking the Medichex data base.
- Question # 12 – Jami’s Restrictive Intervention Policy did not include all the unallowable restraints and a **process** to report misuse of restrictive procedure was not included in the policy.

#### Desk Review of Providers:

The assigned Administrative Entity will conduct a desk review of providers that are assigned for on-site review prior to the date of on-site. This desk review includes an analysis of the provider agency’s Quality Management Plan, the Annual Training Plan, and the Restrictive Intervention Policy, which are submitted to the AE by the provider upon completion of the self-assessment. The desk review also consists of a review of data collected from Home & Community Services Information System (HCSIS), the Enterprise Incident Management system (EIM), and the Individual Support Plans (ISPs) of the individuals selected by the assigned AE for the onsite review sample.

- Jami did have a QM plan to reflect the Everyday Lives principles and philosophy of ODP. However, during the time of the self-assessment when the QM plan was created the provider did not support any individuals. The provider has since begun to support one individual and will revise the QM plan to reflect the current goals and priorities of the agency.
- Jami’s Restrictive Intervention Policy did not include all the unallowable restraints and a **“process”** to report misuse of restrictive procedure.
- Jami’s Training Curriculum was in compliance with Chapter 51 Regulations.

### **AE Onsite Review of Providers:**

Philadelphia IDS conducted the onsite review of Jami Residences LLC on November 30, 2017. The process began with an Entrance meeting, held on the first day of the scheduled onsite review. A copy of the Entrance meeting signature sheet documenting all attendees is included in the appendices of this report. Discussion during the entrance meeting included introductions, a general overview of the QA&I process, including the mission, vision and quality improvement priorities of ODP, IDS, and the reviewed provider, and a discussion of the specific details of the onsite process.

- Jami's office is housed in a very unique space. During the tour of the building the provider verbalize the plans to utilize the building for individuals to come for cooking classes in the kitchen, movie night in one room, computer lessons in another room, and more. There is a tremendous amount of space in this building and the provider is thinking outside of the box to be able to meet the needs of the individuals they support.
- Jami CEO has taken the initiative to attend various trainings and webinars offered by ODP to become familiar with ID service system.
- Jami's now serves one individual with complex needs; however, the provider is demonstrating community connection for this individual by connecting him with a place of worship, helping him find employment, and choosing where he wants to live.

A total of zero individuals were selected as a part of this provider's sample, and of those sample individuals, zero interviews were conducted during the onsite review. Jami did not support any individuals during the time of the self-assessment. However, since that time, Jami now provides Residential Services to one individual. I met the individual who was recently transitioned to Jami from another provider. It appears that Jami is meeting the needs of this individual who has some challenging behaviors. The provider has made it a priority to connect this individual to a place of worship which is very important to this individual.

On the final day of the onsite review, an Exit meeting took place. A copy of the Exit signature sheet documenting all attendees is included in the appendices of this report. Topics of discussion during the Exit meeting included introductions, an overview of the process from the perspective of the reviewer and the reviewed provider, an overview of the findings documented during the review, and an overview of the comprehensive report and the corrective action process.

- Jami's CEO indicated that the agency committed to learning as much as they can about the ID service system. This was evident during the QA & I on-site review when the CEO shared various documentation of the numerous training and webinar they attended.
- Jami's files were well organized and the policies and procedure were specific to their agency. It was not a mere cut and paste job.

- The provider is only qualified for Residential services and at the present time Jami does not want to add any other service. Jami wants to become proficient with the one service before additional services are added.
- The recommendation was made for Jami to revise their training attendance sheets to accurately reflect the content, duration, instructor, etc.

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

During the time of the self-assessment Jami did not have any service authorization; thus, there was no data to review at this time. However, the provider was reminded not to begin supports or services for any individual until the authorization has been added to the ISP.

### **Appendices**

Appendix A: Corrective Action Plan

Appendix B: Entrance Signature Sheet

Appendix C: Exit Signature Sheet

Appendix D: MCI Review Spreadsheet