
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Entity Name: King Family Enterprise, LLC

Date of Review: October 10, 2017-October 12, 2017

Date of Report: November 10, 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 King Family Services, 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 (AE), 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 the AE's, 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 P/FDS 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

All qualified providers that offer base funded services or services through the Consolidated and/or the P/FDS waivers participate in the ODP QA&I process on an annual basis. All providers are selected for on-site review by ODP once during the three-year QA&I cycle, based on the last digit of their Master Provider Index (MPI) number. The steps of the ODP QA&I process are inclusive of the following procedures:

Self-Assessment:

All providers must 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. King Family Enterprise, LLC selected a sample of five individuals from the total number of individuals they are currently supporting. King Family Enterprise, LLC successfully completed their self-assessment on time, before the deadline prescribed by ODP. See the data analysis section of this report for a review of their results compared to our findings onsite.

Desk Review of Providers:

The assigned AE conducts 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. King Family Enterprise, LLC submitted the provider checklist along with the required documentation in advance for the desk review. The provider desk review results are as follows:

- **Quality Management Plan:** Provider's Quality Management Plan does not meet criteria. The provider's quality management plan does not contain a goal or outcome that reflects ODP's mission, vision and values. The QM plan also did not include a S.M.A.R.T. Target objective.
- **Restrictive Intervention Policy:** Provider's Restrictive Intervention Policy meets criteria.
- **Annual Training Plan:** Provider's Annual Training Plan submitted was a list of training's not an actual plan. However, while onsite I was able to see the actual training curriculum. The curriculum did not include components on Documentation and Department Issued Procedures.

AE Onsite Review of Providers:

Philadelphia IDS conducted the onsite review of King Family Enterprise, LLC from October 10, 2017-October 12, 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.

A total of 5 individuals were selected as a part of this provider's sample, and of those sample individuals, 4 interviews were conducted during the onsite review. One individual and their family did not respond to requests to participate in the process and were not interviewed (510129299).

It was a pleasure meeting the individuals and families being supported by the staff of King Family Services, LLC. The individuals interviewed were greatly satisfied with services received by the organization. Also, the staffs were well versed in the plans and lives of the individuals being supported. Here are a few highlights from all 4 of the interviews conducted:

MCI# 650129226: The individual appears to be extremely satisfied with the services provided by King Family Services. The individual and their staff take full advantage of the hours received to ensure that the individual has opportunities to access the community. The individual has a consistent schedule that allows for particular activities to take place when and how they like it.

MCI# 060123912: The individual receives In-home and community supports 4 times per week for a total of 20 hours per week. The individual is very active in and a part of the community in which they live. The individual is very talented, so much so the individual aspires to become a music artist. To date, the individual has performed at many local events throughout Philadelphia. Both the individual and their caregiver spoke highly of the supports received from King Family services.

Both MCI# 380184862 and MCI#310137083 are supported residentially by King Family Enterprise, LLC. They both were eager to share their experiences and accomplishments since living with King Family. MCI#380184862 spent a lot of time discussing how the provider has helped him learn new strategies to have a healthy relationship with their significant other. MCI#310137083 looks to the owners of the provider as their family. The individual stated that their choices are respected and they have opportunities to participate in varied activities in the community. Lastly, both individuals are working on developing skills of independence in an effort to live the lives they desire and need.

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. King Family Enterprise, LLC appreciated the feedback received throughout the QA&I process; specifically, the technical assistance and opportunities to discuss areas for improvement.

Data Analysis and Performance Evaluation

This section of the report will provide data and analysis in key areas, highlighting both good performance and areas for improvement. [Data for every QA&I question will be provided in an appendix.]

King Family Enterprise, LLC staffs are well versed in the individuals they serve. They were able to articulate their wants, needs, and desires. It is clear that the staffs are dedicated to providing quality supports and services.

The provider places an importance on ensuring individuals have opportunities to participate in and to become active members in their communities.

Analysis of performance based on focus areas

People will live with people they like and who care about them: The provider, a small family owned entity, currently has one home where two individuals are supported. While sharing similar interest in sporting activities the individuals enjoy time together and separate. Both individuals respect one another's individual choices and spaces. Also, the home décor meets the personal preferences of both individuals.

People will be physically and mentally healthy: The provider ensures that every individual served residentially are physically and mentally healthy. All regularly scheduled and follow-up appointments are maintained.

People will be connected to their community: The provider does place an emphasis on making sure the individuals they support are able to go out into the community. Individuals are able to go to places and have experiences that are consistent with their preferences and interest.

Analysis of performance for extra areas

The provider should develop a process to ensure that services are followed as per frequency and duration listed in individual authorizations. For in the individuals in the sample it was clear that while service is being delivered it is not as per frequency and duration. King Family services admitted that

there were struggles with shift coverage due to the lack of staff. During this process it was also discovered that incidents of neglect were needed to be entered into EIM due to failure to ensure supervision levels were followed for individuals MCI#380184862 and MCI#310137083.

Comparison of onsite to self-assessment results

The providers Self-Assessment was not accurate in comparison to their overall review. The Self-Assessment suggested that there were no areas of non-compliance in regards to the Quality Management plan, training and record review. The Providers QM plan did not meet criteria due to not having chosen an ODP priority, the provider also did not have documentation to prove they reviewed and evaluated performance data for the QM priorities. Provider's training curriculum did not meet the criteria due to not having all of the required components and/or corresponding policy did not meet ODP's criteria. Therefore, the staff trainings were out of compliance.

Issues from the desk review corrected while onsite

There were no issues corrected while onsite or following desk review.

Items requiring remediation within 30 days

- Q#7: The Provider did not have a Quality Management Plan (QMP).
- Q#8: The Provider did not review and evaluates performance data for the QMP.
- Q#9: The Provider did not have supporting documentation to show that they analyze and revise the QMP every 2 years.
- Q#10: The Provider's policy did not include process to conduct self-audits. The provider did not screen employees for DHS's Medichex.
- Q#11: The Provider's grievance policy did not include a process to review procedures annually to determine number of grievances and their disposition.
- Q#13: The provider did not have the signed department-approved room and board contract on file for individual MCI#310137083
- Q#16: The provider does not have an Annual Training Curriculum that meets all the requirements. The provider's training curriculum is missing the component on Department-Issued Procedures.
- Q#17: 0% of the provider's staff completed all components of the Annual training plan as required.
- Q#21: The Provider did not participate in the development of the ISP's for the following individuals: MCI#060123912, MCI#650129226 and MCI#510129299

- Q#22: The Provider failed to document delivery of services/supports in the type, scope, amount, frequency and duration specified in the Individual Support Plan (ISP) for all 5 individuals in the sample.
- Q#24: MCI# 510129299 progress notes indicated lack of progress in achieving an outcome; the Provider did not indicate what actions have been taken.
- Q#34: The provider failed to ensure that one or more of the Providers administrative staff have viewed ODP's webinar.
- Q#35: The provider failed to ensure that staff who serve a deaf waiver (participant) have viewed ODP's webinar.
- Q#42: The provider failed to report critical incidents for MCI#380184862 and MCI#310137083.
- Q#43: The Provider does not review and analyze incidents at least quarterly.

All areas of non-compliance require remediation within 30 days of receiving the Comprehensive Report. King Family Enterprise, LLC should respond with proof of remediation, CAP responses, and the Plan to Prevent Recurrence (PPR) for the areas of non-compliance.

Recommendations for entity's system improvement, including those things that rise to the level of needing attention at a broader level including those areas that fall below 86% of compliance

A plan to prevent recurrence of non-compliance (PPR) is required for the following questions, because two or more instances of noncompliance were identified within the sample: Q13, Q21, Q#22, Q#24, Q#34, Q#35 and Q#42. Additional system improvement recommendations are bulleted below:

- Provider should create a structure that meets ODP's regulations; one that allows for oversight of effective program delivery. This will ensure quality assurance of supports and services for individuals supported by King Family Enterprise, LLC.
- The provider will ensure that someone in the administration team is thoroughly reviewing all progress notes. There were several progress notes where frequency and duration was not met for the individual services and supports.
- Provider will ensure that the training curriculum meets ODP's requirements.

Appendices

Appendix A: Corrective Action Plan

Appendix B: Entrance Signature Sheet

Appendix C: Exit Signature Sheet

Appendix D: MCI Review Spreadsheet