
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Martha Lloyd Community Services, Inc

December 6, 2017

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. The focus of this process is on quality assessment and improvement as it relates to the participants' experience with services and supports.

The mission of Bradford/ Sullivan Intellectual Disabilities Program is to “promote opportunities for persons with intellectual disabilities to be part of and participate in the same valued experiences and life events as other citizens”. We strongly support and promote the philosophy of Everyday Lives and want to ensure that all of the individuals we support achieve an everyday life.

The QA&I process is accomplished by using a combination of self-assessment, desk review, onsite review and corrective action and quality improvement plans. The Quality Assessment and Improvement Comprehensive Report has been developed to provide you with both information and data that has been collected during the self-assessment you have completed, the review of

the sample that has been selected for your organization, and the information both gathered and shared during the on-site portion of the process.

Summary of Martha Lloyd Community Services

Martha Lloyd Community Services, Inc- (hereafter referred to as Martha Lloyd) is located in Bradford and Tioga Counties in rural North Eastern Pennsylvania, where residents thrive in community settings. Programs and services are provided in close knit communities throughout the 2 counties. The main administrative offices are located in the town of Troy, PA.

Martha Lloyd Community Services provides a continuum of services: residential services, respite, supported employment, in-home and community support, community participation, and rep payee services. Martha Lloyd also offers senior services, plus health, recreational, exercise and dietary programs.

Martha Lloyd's mission statement exemplifies their philosophy: "Martha Lloyd Community Services supports people with disabilities to achieve independence and lead a fulfilled life." The individuals they support acquire skills to maximize their own potential for independent functioning, and transition to more self-reliant situations.

William Miller is the CEO of Martha Lloyd Community Services and Gretchen McClure is the Director.

QA&I Summary

Martha Lloyd completed a self-assessment during the QA&I Cycle 1 Year 1 consisting of 6 records, five were Consolidated and one was Base and there was a review of data and policy. The self-assessment was finalized on August 30, 2017.

Bradford/Sullivan AE pulled a sample of six as well. Out of those six, five were Consolidated and one was PFDS.

Bradford/Sullivan interviewed the six individuals and found that they all choose how they get to spend their day and do not want to change their provider or services. Although most of the

individuals spend most of their time with family and staff, they have recreational activities where they are with their friends from program at the movies, dances, festivals and fairs. The staff interviewed knows and understands the individuals they work with. They know the likes and dislikes of those they work with and understand their health and safety concerns as well.

The interviews took place after the onsite review and occurred on November 16, 2017. The onsite review was held on October 26 2017.

Data and Analysis

Martha Lloyd's self-assessment was reviewed and the performance was evaluated. The self-assessment displayed solid performance in each area reviewed. All areas were at 100% compliance except for:

Question 19: The staff receive training on the Provider's Emergency Disaster Response plan that addresses individual safety and protection, communications and/or operational procedures.

in which they were at 95%.

The self-assessment, desk reviews and onsite review were consistent with identical answers. 100% compliance was noted in all areas throughout the sample. Due to the random sample chosen most questions were N/A when it came to employment and communication plans.

Results and Performance Evaluation

In review of Martha Lloyd's self- assessment, onsite and personal interviews it is evident that the organization is invested in the philosophy and promoting Everyday Lives. They have specific challenges to tackle as the majority of their services are located on a campus setting. Over the last several years they have worked hard to provide more integrated services both residentially and community based.

Martha Lloyd is committed to providing quality services. They actively participate in PAR, local Positive Practices, ID Awareness Month Committee, local Transition Council Meetings, and AE Provider Meetings. Martha Lloyd sends available to staff to local trainings held by Bradford/

Sullivan County ID Program such as Healthy Sexuality, Building Social Capital, Dual Diagnosis HCQU trainings and more. Martha Lloyd now has someone certified in Quality Management as of October 2017.

They have been active team members with the AE, SCO, Mental Health, and DDTT in supporting people with complex needs who have both medical and mental health needs.

After interviewing the six individuals, the AE obtained information on how the individuals' view their quality of life. All are satisfied with their supports and services. It is evident that all interviewed spend most of their time with only family and staff. Martha Lloyd has worked hard to integrate individuals into the local community of Troy but rarely are relationships cultivated. Two individuals are members of local churches. One of the individuals does spend time with a friend at each other's houses, to the mall and camping. The one question in the interview regarding Supporting Families Throughout the Lifespan, no individual had knowledge on that topic. This is an area that the AE identifies as an area to address with all providers.

One of the most important areas for improvement is increasing CPS. Currently the majority of individuals are authorized for less than 25%. Again Martha Lloyd has a unique challenge because of their campus based setting requiring them to have 5 licensed day programs on campus. Martha Lloyd is invested in exploring ideas on how to tackle this issue.

One of their focus areas in the Quality Plan is to expand their Lifesharing program and is working with the Bradford/Sullivan AE to get information to the public to raise awareness. They plan to get articles in the paper and hold forums with the help from the AE.

There were no remediations or plans of correction identified during this year's onsite review.

Table of Contents

Introduction

This section will provide an overview of the report purpose and its contents. It will also briefly describe the focus areas for the year's review statewide.

QA&I Summary

This section will briefly describe the steps of the entity's QA&I review, from the organization's submission of the self-assessment to the onsite review. The onsite review description will note highlights from the entrance and exit discussions. The statistics of the entity's review process will be summarized including number of records, number of interviews, etc.

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.]

The following information should be considered for inclusion:

- At least one promising practice in which the entity excels
- Analysis of performance based on focus areas
- Analysis of performance for extra areas
- Comparison of onsite to self-assessment results
- Issues discovered and corrected while onsite or during desk review
- Items requiring remediation within 30 days
- 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.

Appendices

This section will include the entity's QA&I review results. The Corrective Action Plan document will sit within its own Appendix.