
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

McDade, Sandra

11/15/17

Table of Contents

Introduction

The purpose of the Comprehensive report is to compile the official findings from the desk and onsite reviews, face-to-face interviews and self-assessments, as applicable, that were completed for your agency as part of ODP's QA&I Process. This report will:

- Highlight those areas where the Provider is doing well related to person-centered services delivery and promising practices;
- Analyze performance in ODP's quality focus areas for the current QA&I cycle;
- Compare results of the desk and onsite reviews with the entity's self-assessment;
- Summarize those instances of non-compliance that were remediated during the onsite review;
- Outline issues of non-compliance expected to be remediated within 30 calendar days of report receipt;
- Recommend PPRs where compliance is below established thresholds of 86%; and
- Recommend improvement activities to be addressed during the remainder of the QA&I cycle, including systemic quality improvement projects to incorporate into QM Plans.

The mission of the Office of Developmental Programs (ODP) is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice and opportunity in their lives.

ODP's vision is to continuously improve an effective system of accessible services and supports that are flexible, innovative and person-centered.

The Quality Assessment & Improvement Process is a way for ODP to evaluate our current system and identify ways to improve it for all individuals.

QA&I Summary

In following the Quality Assessment and Improvement process set forth by the Office of Developmental Programs, a yearly self-assessment was completed by **McDade, Sandra** and forwarded to and received by the assigned AE on 7/25/17. This document was included in the desk review. The On-Site review portion was scheduled and occurred on 11/6/17. During the entrance discussion, the AE reviewed ODP's focus on Quality Management, Restrictive Procedure Policy compliance and emphasis on Staff Training. Also noted was the change that the AEs were no longer reviewing the specific service billing history of the

provider and On-Site is to occur on a 3-year cycle. The AE outlined what would be reviewed during the On-Site and potential timeframes for completion of the QA&I process.

Data Analysis and Performance Evaluation

During the On-Site review portion of the QA&I process, **McDade, Sandra** made available all information needed.

Highlights and Provider Strengths:

- **McDade, Sandra** had all policies and procedures ready and in place for review.
- Training was up to date and there was extensive specialized amount for the nursing service.
- Quality Management Plan strongly reflected goal and mission of ODP.

Areas for Corrective Action:

- No Findings

Recommendations:

- Continue to update the waiver requirements and remain active for possible future authorizations.

Appendices

- **McDade, Sandra - QA&I Tool**
- **McDade, Sandra - Corrective Action Plan (CAP)- No Findings**