
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Next Step Care Inc.

December 8, 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 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. This QA&I process is one of the tools that ODP uses to evaluate the current system of supports and identify ways to improve it for all individuals.

The QA&I process is accomplished by using a combination of self-assessment, desk review, onsite review and corrective action and quality improvement plans. This QA&I Comprehensive Report is compiled by the Assigned AE and consisted of the official findings from desk review and on-site review, face-to-face interviews, and self- assessments, as applicable.

Next Step Care Inc. offers Residential Habilitation and Behavioral Supports services.

QA&I Summary:

Next Step Care Inc. completed the QA&I provider self-assessment. The self-assessment was finalized and submitted to ODP by the established deadline of August 31, 2017. The onsite review began November 8, 2017 and was completed November 9, 2017. Sean Rogers and Troy Kline were present for the entrance and exit meeting. Bedford-Somerset, as the Assigned AE, pulled a sample of five individuals and participated in a face-to-face interview with one individual and an assigned staff for Residential Habilitation. The focus areas of Quality Improvement, Person Centered Planning, Service Delivery & Outcomes, and Health & Safety were reviewed.

Data Analysis and Performance Evaluation:

According to the self-assessment completed by Next Step Care Inc., six individual records were reviewed. The onsite review began November 8, 2017 and was completed November 9, 2017. Next Step Care Inc. was prepared and organized. All supporting documentation was labeled and nicely organized in binders. Staff was available to assist as needed. During the exit meeting results of the QA&I process were reviewed and shared with Sean Rogers and Troy Kline. The interview, which occurred on November 8, 2017, concluded that the individual is satisfied with the current support received by Next Step Care Inc.

Question 14 - Staff receive training to meet the needs of the individual(s) they support as identified in the current, approved ISP before providing services to the individual(s). Next Step Care Inc. did not have supporting documentation that one staff received the necessary training on the current, approved ISP prior to working with the individual(s). Remediation is required for this question. The Assigned AE made a recommendation regarding the re-hiring of staff and that it would be best practice to have the staff re-trained if the dates of hire/re-hire were within 12 months.

A recommendation was made for Question 16 related to the Annual training. The material used to train staff on accurate billing and documentation of HCBS delivery, should include Bulletin 00-17-02 and ODP Communication #118-17. A recommendation was also made to ensure daily documentation contains more comments to assist with the writing of Progress Notes. Furthermore, Next Step Care Inc. was reminded to ensure Progress Notes document the Outcome Statement and not the Outcome Phrase.

Question 24 – If a progress note indicates lack of progress in achieving an outcome, the Provider progress note indicates what actions have been taken. The progress note for one individual documented a lack of progress; however, there was no documentation of how the lack of progress was addressed. One record requires a corrective action for remediation.

Question 30 – Staff are trained on an individual’s communication plan and/or formal communication system. One ISP identified communication supports and services the individual

needs; however, there was not at least one assigned direct support staff trained on the communication plan. One record requires a corrective action for remediation.

Question 41 – The provider implemented the corrective action for each individual’s incidents. Two records in the sample did not contain supporting documentation that staff were trained based on the Corrective Action description. Remediation is required.

Question 43 – The provider reviews and analyses incidents at least quarterly. There was no documentation of a review and analysis of incidents for the last 12 months. Remediation is required.

Questions 44 & 45 relate to the peer review process and the follow-up of recommendations from the reviews. The provider did not complete any peer reviews; therefore, remediation is required for both questions.

Question 46 – The provider completes all health care appointments, screenings and follow-up as prescribed. One individual did not receive Occupational Therapy for approximately 2 months and there was no documentation as to why the individuals did not receive the service. One record requires a corrective action for remediation.

The data collected during the self-assessment, desk review, onsite review, and the individual interview shows the quality of work Next Step Care Inc. provides to individuals, and their commitment to ensure everyone has an Everyday Life.