
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Entity Name: Ori Homecare

Dates on-site: November 13 & 14, 2017 & December 4, 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 ORI Homecare. 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. ORI Healthcare successfully completed their self-assessment on time, before the deadline prescribed by ODP.

- ORI Healthcare did not have documentation that staff were trained on how to handle a medical or behavioral health emergency/crisis.
- ORI Healthcare stated they attended the ISP for 28100681 but did not have documentation or the ISP sign in sheet. The reviewer recommended that ORI Healthcare create their own attendance sheet.
- ORI Healthcare did not render services with frequency and duration as indicated in the ISP. ORI Healthcare reported that the staff who is a family member must provide service when the nurse does not show up for their shift.

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.

- ORI desk review of the Training Curriculum, Quality Management Plan and Restrictive Intervention Policy were in compliance with Chapter 51 regulation.
- The reviewer instructed ORI to remove the word "patient" from some of their policies and documentation to reflect the philosophy of ODP and the Everyday Lives values and principles.

AE Onsite Review of Providers:

Philadelphia IDS conducted the onsite review of ORI Healthcare on November 13-14 and December 4, 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.

- ORI Healthcare files were well organized and the records were easy to review.
- The Director of ORI Healthcare has taken the initiative to participate in the many trainings and webinars offered by ODP. For instance, the provider does not serve anyone that is deaf; however, they participated in the webinar and training and received a certificate.
- The Director is very informed about the ID system and the individuals that are served by ORI Healthcare.
- The Director accompanied the reviewer to every interview because the sample of 5 individuals and the families were Spanish speaking. The Director was present during the interviews to interpret for the reviewer.

A total of five individuals were selected as a part of this provider's sample, and of those sample individuals, four interviews were conducted during the onsite review.

- Out of the 4 individuals that were interviewed, no one could respond to the interview questions.
- The family were very verbal. Spanish was the first language for the individuals and the families; thus, the Director accompanied the reviewer to the interviews and was there to interpret. However, some of the family members limited in their English but could communicate and respond to questions.
- Family members reported they feel very safe with ORI and that this provider cares for their family member who is receiving service. ORI could communicate some of the concerns family member had. One family member wanted to have her brother receive additional service because of his declining health. Another family expressed frustration with a nursing agency that was not reporting for their shifts and the family had to provide the service.
- All the individuals appeared to have family members that love and care for them. The family members were very grateful for the services and for ORI.

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.

- ORI Healthcare continues to increase their knowledge and changes of the ID service system by participating in webinars and attending training.
- ORI has a copy of the Pennhurst History video which is included in the training curriculum. ORI shows this video so that staff can understand why the philosophy of Everyday Lives is so important to individuals and their families.
- Many of the individuals supported by ORI Healthcare are Spanish speaking and it is good to have the Director of ORI who knows the culture and language of the individuals receiving service. A family member told a story of how they took their family member on a doctor's appointment and how difficult it was to explain why they were there. ORI then assisted the family with finding a doctor to meet the needs of the individual.

Data Analysis and Performance Evaluation

- ORI Healthcare will provide training for their staff on how to handle a medical and behavioral health emergency/crisis within 30 days.
- ORI Healthcare will schedule team meetings to revise the ISPs to reflect the frequency, duration of service needed by individuals. In the event a family member had to cover another agency's shift because staff are not showing up, this information should be included in the individual's ISP and SC service notes.
- ORI Healthcare will revise any policy, procedure, or documentation that uses the word "patient" and change the documents to reflect ODP philosophy and the Everyday Lives values and principles.
- ORI Healthcare demonstrates their commitment for individuals to receive the supports they need by advocacy, increasing their knowledge of the system, learning the new service definition and new services that are being made available.
- ORI Healthcare staff are very engaging with the individual. The staff are very knowledgeable and demonstrate they have been trained in the ISP of the person they are supporting and are assuring effective communication and ensuring the individuals are safe.
- ORI Healthcare reported that they give an annual written test for the topics in the training curriculum to ensure the staff are retaining the information.
- ORI Healthcare has two certified investigators which can enhance training for staff and ultimately ensure individuals are safe from abuse, neglect and exploitation.
- ORI Healthcare will revise the ISP training sheet to include the date of the training. In addition, ORI will create their own sign in sheet for the ISP meetings.
- The reviewer recommending separating training records to include content of training and each staff have their own training files.

Appendices

Appendix A: Corrective Action Plan

Appendix B: Entrance Signature Sheet

Appendix C: Exit Signature Sheet

Appendix D: MCI Review Spreadsheet