
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Entity Name: Philadelphia AE

Dates of Onsite Review: December 6, 8 & 20, 2017

Date of Report: January 18, 2018

Onsite Review conducted by Philadelphia IDS

Name of Review Team: Lynette Pinckney McMillan, Manager

Table of Contents

<i>Introduction:</i>	<u>3</u>
<i>QA&I Summary:</i>	<u>4</u>
<i>Data Analysis and Performance Evaluation:</i>	<u>6</u>
<i>Appendices:</i>	<u>7</u>

Introduction

This comprehensive report contains a detailed analysis of the Office of Developmental Programs (ODP) Quality Assessment & Improvement (QA&I) process for **Outstanding Homecare Solutions**. 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. Outstanding Homecare Solutions successfully completed their self-assessment on time, before the deadline prescribed by ODP.

It should be noted that IDS did not receive a copy of Outstanding Homecare Solutions self-assessment.

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.

- Outstanding Homecare Solutions did not submit any documentation for the desk review.

AE Onsite Review of Providers:

Philadelphia IDS conducted the onsite review of Outstanding Homecare Solutions on December 6, 8, & 20, 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.

- The entrance interview was conducted with the reviewer and the director of Outstanding Homecare Solutions.
- The provider did not have copies of the Quality Management Plan, Restrictive Procedure policy or Training Curriculum on site for review.
- The director accompanied the reviewer to the interviews.

- The provider was not organized. The director had to print policies and look for progress notes during the on-site review.

A total of four individuals were selected as a part of this provider's sample, and of those sample individuals, two individuals were interviewed because the provider stated service was never rendered to the other two individuals in the sample.

- One of the individuals MCI # 630136244 could not respond to the interview questions. However, the staff person assigned to work with the individual was very familiar with the individual. The staff person demonstrated that they had read MCI# 630136244 ISP.
- MCI # 001470169 could respond to the interview questions. The individual stated that they were very happy with the services they were receiving from Outstanding Homecare Solutions. The mother of the individual also expressed her satisfaction with the services. Finally, the staff assigned to work with MCI # 001470169 could demonstrate that they had read the ISP.

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.

- During the exit interview, there were several recommendations made by the reviewer.
- A system is needed to review progress notes on a regular basis because progress notes were missing staff signatures, progress notes were incomplete and unorganized.
- The reviewer recommended filing each individual's progress notes separately. All the progress notes were in one folder.
- The progress notes should be revised to include ample space for the staff to write the activity and outcome of the goals that occurred during their shift.
- The provider need to become familiar with the current changes to the waiver such as new services added, change in service definitions, etc.

Data Analysis and Performance Evaluation

- Outstanding Homecare Solutions training records were incomplete.
- Outstanding Homecare Solutions did not have a Quality Management Plan in accordance to the ODP QA & I guidelines.
- Outstanding Homecare Solutions did not have a Restrictive Procedure Policy.
- Outstanding Homecare Solutions progress notes did not have signatures and notes were incomplete.

- Outstanding Homecare Solutions staff were very intentional in getting individuals out into the community.
- The review team recommends that the provider agency become more familiar and compliant with the ODP Quality Assurance and Assessment process. The provider did not comply with the submission of the Provider Submission Checklist, the required documentation for desk review, and did not share the results of the self-assessment with their assigned AE as required following their submission to ODP.
- The following questions meet ODP criteria for the requirement of a Plan to Prevent Recurrence (PPR): Q 17,19, 20, & 22 The PPR should document systematic changes made agency wide that ensure noncompliance for each individual question does not recur.

Appendices

Appendix A: Corrective Action Plan

Appendix B: Entrance Signature Sheet

Appendix C: Exit Signature Sheet

Appendix D: MCI Review Spreadsheet