
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

RMPC Habilitatize

September 20, 2017

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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

Per ODP's requirement, RMPC Habilitate completed and forwarded to the Administrative Entity (AE) their Self-Assessment on August 16, 2017. Additionally, as required, RMPC submitted their Quality Management, Restrictive Procedure and Annual Staff Training policies to the AE. These policies and the completed provider Self-Assessment were reviewed by the AE as part of the desk review. The On-Site review portion was scheduled and occurred on September 12, 2017.

One administrator of RMPC Habilitate was present for the entrance meeting which commenced at 9:00am. During the entrance discussion, the AE reviewed ODP's focus including Quality Management,

Restrictive Procedure Policy compliance and increased focus 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. The provider arranged for the individual interview portion to occur at approximately 11:00 am at RMPC Habilitate's administrative office where the On-Site review took place. The provider sample reviewed was five individual records. The associated staff training records reviewed included twenty-five files. One individual interview and a brief staff interview was also completed.

Data Analysis and Performance Evaluation

During the On-Site review portion of the QA&I process, RMPC Habilitate made available all required records as well as arranged for the one individual to be interviewed. The process advanced without delays as RMPC was able to retrieve all additional information needed and clarify any questions as identified by the AE.

Findings:

Highlights and Provider Strengths:

- RMPC was fully prepared for the On-Site review with organized binders and carefully labeled agency policies and files. All RMPC personnel were very knowledgeable of the participants they serve, the organizational flow of their charts and their agency practices. This made it easy to locate the necessary information to determine compliance with the QA&I tool.
- RMPC's staff training records demonstrated a comprehensive staff orientation and annual training program. RMPC ensures their staff are aware of the unique needs of each individual with whom they work as well as of the required trainings per regulatory entities.
- RMPC has implemented an impressive Incident Management system which ensures that reported incidents are reviewed thoroughly, by several RMPC administrators and that corrective actions are implemented and followed.
- The feedback from the individual that was interviewed as part of the On-Site review was positive. The person was quite happy with her new home and the RMPC staff.
- Despite the short time one participant has been receiving services from RMPC, the direct support staff was able to demonstrate a great deal of knowledge about that participant's strengths and needs during a brief interview with the AE.

Areas for Corrective Action:

- **Question #9: The Provider analyzes and revises the QMP every 2 years pertaining to their target objectives and performance measures/data sources.** RMPC's QMP includes several target objectives, some of which have not been analyzed for progress since being identified and implemented.
- **Question #11: The Provider has a policy that addresses restrictive interventions.** While RMPC does have a policy, it does not list the allowable restrictive intervention or the prohibited restrictive interventions. Including these components will provide staff a better understanding of the expectations.
- **Question #38: The Provider finalizes incidents within 30 days.** The desk review revealed that there were seven incidents for which RMPC did not file an extension nor finalize within 30 days.
- **Question #22: The Provider documents delivery of services/supports in the type, scope, amount, frequency and duration specified in the Individual Support Plan (ISP).** It was determined that two participants did not receive a service for which RMPC was authorized to provide.

Additionally, one participant's progress notes revealed that RMPC was providing a service at a greater frequency and duration than was specified per the participant's ISP.

Suggestions for consideration of improvement:

- While reading one of the participant's ISPs during the desk review, it appeared to the AE that the participant was being restricted in regards to how many cigarettes he could smoke each day without evidence of an approved Restricted Intervention Plan. However, after viewing the participant's chart at RMPC and speaking to the provider, it was apparent that the individual is not being restricted. The AE recommends that RMPC contact the participant's Supports Coordinator to change the wording in the ISP to reflect their practice.
- RMPC currently has a place for physicians to sign on their medical appointment paperwork after seeing participants for medical treatment. The AE recommends adding a place for the physicians to print their name as well. This will help to clarify which physician was treating the participant.
- Although not a critical incident, the AE did note one reportable incident that was not reported in HCSIS. On July 1, 2017, a participant was treated in an emergency room for an illness. However, the incident was not entered into HCSIS until the day of the On-Site review.

Appendices

- RMPC Habilitate QA&I Tool
- RMPC Habilitate CAP