# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

SDS Cares, Inc.

November 16, 2017

Revised December 21, 2017

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#### **Introduction**

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. ODP's focus areas for this year's review are Employment, Quality Improvement and Communication.

The comprehensive report is a packet of information compiled from your agency's self-assessment, desk reviews, individual interviews and an onsite review. SDS Cares, Inc. was reviewed on October 12, 2017 and 2 individuals receiving services were interviewed on October 23 and November 6, 2017. This report includes findings from your agency's review along with the MCI tracker.

#### **QA&I Summary**

SDS Cares, Inc. is currently delivering services/supports for a number Bucks County individuals receiving ID services/supports through ODP. They have developed all required policies and have a training curriculum in place.

SDS Cares, Inc. submitted their self-assessment on 8/31/2017.

Entrance interview discussion involved review of their self-assessment, the 2018 Self-Assessment will be due 7/1/18-7/31/18 and recommendation that their agency review ODP's Quality Management Certification training and ODP's Deaf Services for Provider Administrators and Agencies. Exit interview discussion involved review of the findings and a recommendation to review Chapter 6100s.

Review Process Summary: 5 Bucks County individual's records were reviewed and 2 Bucks County individuals were interviewed. One individual is competitively employed. The individual got the job on his own and does not have a job coach. He has belonged to the local fire company for 37 years. He is satisfied with his staff, which show up on time and come when scheduled. The other individual's family stated that this agency has very good communication and they provide staff with gloves. The agency seems to get quality staff with experience and they are long term staff. Both individuals and their families are satisfied with their services through SDS Cares, Inc.

#### Data Analysis and Performance Evaluation

This section of the report will provide data and analysis in key areas, highlighting both good performance and areas for improvement.

POLICY -- The following numbers represent the correlating questions from the Onsite Question Tool for Providers (Q's 7, 8, 9, 10, 11, 12, 16, 23, 39, 43, 44, 45, 47)

SDS Cares, Inc. was compliant with the following regarding policies:

- 7-9) Provider has a Quality Management Plan which is analyzed and evaluated quarterly and updated every 2 years
- 10) Provider implements policy to screen employees and contractors
- 11) Provider has a grievance policy but has not had to implement it
- 12) Provider has a policy that addresses restrictive procedures
- 16) Provider has an annual training plan that meets all requirements
- 23) Provider continued to provide the authorized services to ensure continuity of care during transition.
- 43) Provider reviews and analyzes incidents quarterly but has not had any incidents for Bucks County individuals in the past 6 months.
- 44-47) Provider has a peer review procedure and ensures that recommendations from the Certified Investigation peer review process are followed-up and ensures all required investigations are completed by a Department certified incident investigator. Provider did not need to implement this process for the past 6 months since there were no investigations conducted for Bucks County individuals in the past 6 months

SDS Cares Inc. was non-compliant in regards to the following policies:

39) Provider did not ensure all incidents were finalized within 30 days

Provider Remediation: Agency will place calendar reminder in master calendar shared between owner and director of operations, every 30 days, to ensure incidents are closed out on time.

RECORD REVIEW— The following numbers represent the correlating questions from the Onsite Question Tool for Providers (Q's 21, 22, 31, 32, 36, 38, 40, 41, 42)

SDS Cares, Inc. has compliance with the following record review questions:

- 21) Participated in the development of the ISP, (100%)
- 31-32) Individuals do not have formal communication plans, however provider works with individuals to maintain communication abilities

- 36) Implements individual's back-up plan as specified in the ISP, (100%)
- 38) Provider has a policy to ensure the replacement of an individual's lost or damaged property in accordance with regulation but has not had to implement it.
- 40-42) Provider did not have any incident reports for Bucks County individuals in the sample for the past 6 months

Provider was non-compliant for the following:

22) Documents delivery of services/supports in the type, scope, amount, frequency and duration specified in the ISP, (40%)

Provider Remediation: Agency will maintain client specific documentation and provide at the time of audit, to ensure any deviation from the ISP services/supports in the amount, frequency and duration specified, will be immediately available.

## TRAINING— The following numbers represent the correlating questions from the Onsite Question Tool for Providers (Q's 14, 15, 17, 18, 19, 20, 34, 35)

SDS Cares, Inc. has compliance for the following regarding staff trainings:

- 14) Staff receive training to meet the needs of the individual they support as identified in the current, approved Individual Support Plan (ISP), (100%)
- 15) Newly hired staff received training to meet the needs of the individual they support as identified in the current, approved, Individual Support Plan (ISP), (100%)
- 19) Staff receive training on Provider's policy/procedure on how to respond in cases of individual health, behavioral emergencies and crises, (90.91%)
- 20) Staff receive training on Provider's Emergency Disaster Response plan that address individual's safety and protection, communications and/or operational procedures, (100%).
- 34) Provider ensures that one or more of the Provider's administrative staff have viewed ODP's webinar ensuring staff understand the needs of individual's in the deaf culture (100%)
- SDS Cares was non-compliant for the following regarding staff trainings:
- 17) Provider and Provider's staff completed all components of the annual training plan, (40.91%)

Provider Remediation: Training Policy will be updated to include this check-list/sign-off sheet for annual confirmation of the "Annual Training Plan as required".

18) Staff receive annual incident management training on preventing, recognizing, reporting and responding to incidents and assuring a participant is safe, (40.91%)

Provider Remediation: Training Policy will be updated to include this check-list/sign-off sheet for annual

confirmation of the "annual incident management training on preventing, recognizing, reporting and

responding to incidents and assuring a participant is safe.

35) Provider ensures that Provider staff who serve a deaf waiver participant(s) have viewed ODP's

webinar.

Provider Remediation: Agency will include sign-off for ODP Webinar with it's training policy for specific

clients to ensure completion of the "ODP Deaf Services for Provider Staff", and put certification of

completion in client and employee file.

**Appendices** 

SDS Cares, Inc. AE Tool

SDS Cares, Inc. AE MCI Tracker