
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Tender Loving Home Health Care Inc

11/30/17

Table of Contents

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

In following the Quality Assessment and Improvement process set forth by the Office of Developmental Programs, a yearly self-assessment was completed by ***Tender Loving Home Health Care Inc*** and a confirmation e-mail was forwarded to and received by the assigned AE on 8/31/17. The Provider Checklist Documents were submitted before the on-site review took place. These documents, the self-assessment, MCI review and the ISPs of the individuals in the sample were included in the desk review. The On-Site review portion was scheduled and occurred on 11/14/17. During the entrance discussion, the AE reviewed ODP's focus on Quality Management, Restrictive Procedure Policy compliance and emphasis 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 sample reviewed was 5 individual records. The associated staff training records reviewed included 12 files. One individual interview was also completed.

Data Analysis and Performance Evaluation

During the On-Site review portion of the QA&I process, **Tender Loving Home Health Care Inc** made available all required records and arranged for the one individual to be interviewed. The process went well as **Tender Loving Home Health Care Inc** retrieved all additional information or clarification needed as identified by the AE.

Highlights and Provider Strengths:

- **Tender Loving Home Health Care Inc** records were organized and all administrative staff were very helpful in explaining the organization of the training and individual records.
- The training records were organized per each staff individual and within contained a clear structure. It was evident that on-going training is occurring for **Tender Loving Home Health Care Inc's** staff.
- Quality Management Plan strongly reflected goal and mission of ODP.
- One individual was interviewed by the AE as part of the QA&I process. He was with his staff and at the end of his day at the ATF. He was very friendly with lots of smiles. It was apparent that he was happy with his services.

Areas for Corrective Action:

Question # 14: Staff receive training to meet the needs of the individual they support as identified in the last approved Individual Support Plan (ISP) for the period being reviewed before providing services to the individual? **Specific Findings:** 09 of 23 staff did not receive training to meet the needs of the individual they support as identified in the current, approved ISP for the period being reviewed before providing services to the individual. (12 provider staff are counted more than once in the numbers due to providing services to multiple individuals across multiple services. These 9 were the staff for the residential services for the 2 in the sample reviewed.)

Recommendations for system improvement:

- Creating training reviews to ensure all requirements are met across all services.

- Increased utilization of MYODP and other communication modalities to keep current with changes through announcements, bulletins and other information systems.

Appendices

- *Tender Loving Home Health Care Inc - QA&I Tool*
- *Tender Loving Home Health Care Inc - Corrective Action Plan (CAP)*