
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

UCP of Northeastern PA

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Introduction

The Office of Developmental Programs (ODP) Quality Assessment and Improvement (QA&I) process is designed to conduct a comprehensive quality management review of county programs, Administrative Entities (AE), Supports Coordination Organizations (SCO), and Providers delivering services and supports to individuals with intellectual disabilities and autism spectrum disorders. The focus of this process is on quality assessment and improvement as it relates to the participants' experience with services and supports.

The mission of the Office of Developmental Programs (ODP) is to support Pennsylvanians with developmental disabilities to achieve greater independence, choice of opportunity in their lives. The office seeks to continuously improve an effective system of accessible services and supports that are flexible, innovative, and person centered. In keeping with the mission and vision, the QA&I process integrates Everyday Lives Values in Action, ISAC recommendations, and the Consolidated and or Person/Family Directed Support (P/FDS) waiver performance measures. ODP delegates the authority to carry out the Provider QA&I to the AEs, to validate that Providers comply with the current Provider Agreement for Participation in Pennsylvania's Consolidated and P/FDS Waivers.

QA&I Summary

UCP of Northeastern PA completed a self-assessment during the QA&I FY 17-18 consisting of five individuals, data review, and internal policies. The Lackawanna Susquehanna BH/ID/EI Program received notice that UCP completed a self-assessment on 8/30/2017 and received a copy of UCP of Northeastern PA's self-assessment on 1/3/2018.

The Lackawanna-Susquehanna BH/ID/EI Program reviewed a sample of one BASE, two P/FDS, and two Consolidated records, data reviews, and internal policies. One interview was conducted with a consumer from the sample. The Lackawanna-Susquehanna BH/ID/EI Program was on-site with UCP of Northeastern PA on 12/12/2017 and 12/13/2017 completing the on-site record review. As a matter of convenience for the Consumer, the individual interview was conducted at their Community Participation Support Program on 12/13/2017.

Data Analysis and Performance Evaluation

UCP of Northeastern PA's mission is to provide opportunities and resources to individuals with disabilities as they build and lead their lives in the community. They do this through advocacy, home and community supports, and education. The vision of UCP of Northeastern PA is to respect each person, their choices, and contributions.

The Provider is well connected to the community; they participate in community activities and connect with the community towards their mission via charitable activities, equipment donations, and fundraising.

UCP of Northeastern PA feels that their small size is a strength; their Executive meets with managers daily, and there is constant communication across service areas within the organization. Because of these strengths, the provider feels confident and competent to support individuals with complex medical needs to remain in their homes for as long as possible.

Recommendation was made that the Provider enhance its documentation to demonstrate the good work they are doing during service delivery. One additional recommendation was that the provider standardize their training year across all services.

The following areas of strength related to this review are as follows:

- UCP of Northeastern PA demonstrates a person-centered approach to supporting individual needs.
- The Provider is in the process of hiring additional staff to supplement their Community Participation Support program.
- The provider seeks out CPS activities which participants feel are rewarding, including volunteerism, recreation, and socialization.

Analysis of performance based on focus areas

- UCP of Northeastern PA complies with incident management policies and procedures.
- Provider reviews and evaluates practices to ensure individuals receive the most inclusive and least restrictive services and supports.
- Provider diverts individuals from requiring higher levels of care and/or nursing facility care.

Comparison of onsite to self-assessment results

- Provider record found no areas of non-compliance.
- Sample reviewed by AE found two areas of non-compliance in the individual record review; and two areas of non-compliance in the training record review.

Issues discovered and corrected while onsite or during desk review

- One staff did not have training documentation in their file. Documentation was located and filed in the appropriate file.

Items requiring remediation within 30 days

- Q8 The Provider reviews and evaluates performance data in selecting priorities for the QMP.
- Q13 In residential habilitation, the individual has a signed department-approved room and board contract on file.
- Q15 If a Provider has any new hire staff, the new hire staff received training to meet the needs of the individual they support as identified in the current, approved Individual Support Plan (ISP) before providing services to the individual.
- Q20 The Staff receive training on the Provider's Emergency Disaster Response plan that addresses individual's safety and protection, communications, and or operational procedures.
- Q24 If a progress note indicates lack of progress in achieving an outcome, the provider progress note indicates what actions have been taken.

Recommendations for entity's system improvement, including those things that rise to the level of needing attention at a broader level including those areas that fall below 86% of compliance.

- The Provider develops and implements a process that ensures that performance data is reviewed and evaluated in selecting priorities for the QMP.
- The Provider implements a process for ensuring all room and board contracts are signed by individuals receiving residential services or their legal guardian.
- Provider staff is retrained as appropriate on addressing the needs of the individual when rendering services, prior to service delivery.
- Provider staff is retrained as appropriate on the Provider's Emergency Disaster Response Plan.
- Provider staff is retrained as appropriate on achieving outcomes and how to document such progress for an individual.

Appendices

- MCI Review Spreadsheet
- CAP