

---

# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

---

Pennsylvania Office of Developmental Programs

Addus Healthcare Inc.

November 27, 2017

# Table of Contents

## 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.

This year, the focus areas for Quality Assessment and Improvement are:

- Employment
- Quality Improvement
- Communication

## QA&I Summary

Each year, all providers will complete a self-assessment tool. The tool will be submitted online and the supporting documentation will be submitted electronically to the Provider's Assigned Administrative Entity.

Every three years, providers will participate in an on-site review. The on-site review consists of a review of the following areas:

- Quality Management Plan
- Policies and procedures
- Staff training records
- Individual record review
- Staff interview
- Individual interview

The onsite review is completed by the provider's assigned AE only. The review of Addus Healthcare Inc. encompassed the following:

- The onsite review consisted of a sample of 2 individuals. Both individuals receive base funding.
- One staff was interviewed
- Both individuals declined to be interviewed

## Data Analysis and Performance Evaluation

During completion of the onsite review for Addus Healthcare Inc., the following information was noted:

- Policies and Procedures were well written and organized.
- Focus areas
  - Employment
  - Quality Improvement – there are many areas noted on your QM plan. However, most of the areas noted relate to OLTL programs, not ODP.
  - Communication
- Recommendations
  - Documentation of services provided is currently not being completed. I recommend using the standardized Monthly Progress Report template, in addition to daily documentation, to meet this requirement.
  - The QM Plan needs to be revised to capture ODP areas for improvement – not just OLTL.
  - Training requirements for ODP were not always being met – OLTL policies were used in place of ODP policies. Please make sure that ALL training requirements are incorporated into your annual training, in order to meet the requirements for all agencies.
- Self-assessment results varied considerably from the on-site review. There were several questions that were answered “yes” on the self-review, but these could not be substantiated during the on-site review. There is also some confusion relating to the staff reviewed – this should only be staff working in ODP programs; not OLTL staff. It is recommended that a more thorough review of the questions and guidelines is completed when doing the self-review.
- There are eight items requiring remediation within 30 days – please see attached CAP for specific information.
- There are six items that fall below 86% of compliance. These items will need to include a plan to prevent recurrence, which will include changing policies/procedures to meet the requirements. Please see attached CAP for specific information.

## Appendices

Attachment #1 – Corrective Action Plan