QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Blair County

Southern Alleghenies Service Management Group

Administrative Entity

November 20, 2017

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 and 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. Additionally, the QA&I process collects data and validates that AEs comply with the AE Operating Agreement.

The QA&I process is accomplished by using a combination of self-assessment, desk review, onsite review, corrective action, and quality improvement plans. The Quality Assessment and Improvement Comprehensive Report has been developed to provide you with both information and data that has been collected during the self-assessment you have completed, the review of the core and level of care sample that has been selected for your organization, and information both gathered and shared during the on-site portion of the process. This year the QA&I process focused included ensuring everyone has an Everyday Life, and promoting the following ISAC recommendations: Improve Quality, Employment and Communication.

Summary of Entity

Southern Alleghenies Service Management Group is responsible for coordinating and assuring the quality of

Early Intervention and Intellectual Disability services throughout Blair County.

http://sasmg.org/

The Southern Alleghenies Service Management Group was established and subcontracted in July 2009 to perform administrative functions for the Intellectual Disabilities (ID) programs and Infant/Toddler Early Intervention (EI) Programs of Blair County. This agency fulfills the obligations on behalf of the County of Blair as outlined in the agreement between the State of Pennsylvania and the County. As the per the terms of the agreement, SASMG is responsible for assuring the quality of these programs through service delivery oversight, which is conducted by our small group of knowledgeable and experienced staff. All oversight and completion of administrative functions is conducted within the rules, regulations, and guidelines set forth by the Pennsylvania Department of Human Services.

QA&I Summary

SASMG completed a self-assessment. Their self-assessment sample included 5 individual records. 2 Base, 2 PFDS and 2 Consolidated. The self-assessment also included a review of data and policy. The self-assessment was finalized and submitted to ODP by the established deadline of August 31, 2017.

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The onsite review began October 25, 2017. Jim Hudack, Blair County Administrator; Jamie Henry, ID Coordinator (SASMG); Melissa Gordon(SASMG), Jeanna Bilek(SASMG), Elizabeth Hogue (SASMG), and Steven Karns (SASMG), were present for the entrance and exit meeting. The Office of Developmental Programs pulled a core sample of 19 individual records, 13 Level of Care and a review of data and policy. The Core and Level of Care sample was shared with SASMG on October 10, 2017. All participants in the Core sample was offered an opportunity to participate in face to face interviews with ODP staff. 10 individuals of the core sample completed Individual that concluded on October 26, 2017.

Data Analysis

SASMG completed a self-assessment that included 10 individual records and a review of data and policy. Results were reviewed and evaluated. SASMG self-evaluation results match the results of onsite review completed by the department with the exception of "the AE reviews and authorizes plans that have evidence that the individual is provided with on-going opportunities and support necessary to participate in community activities of the person's choice, and The ISP addresses all needs through waiver funded sources. SASMG continues to improve performance in the areas of ISP review and approval, Incident Management and Employment. SASMG has made changes to current policies and

procedures along with their Quality Management plan based on the results of their self-assessment and past monitoring process.

The onsite review was completed on October 24, 2017. SASMG was well prepared and organized. All records and supporting documentation was prepared and organized for the onsite review. All AE Staff subject matter experts were available throughout the onsite as needed. During the exit meeting results of the QA&I process was reviewed and shared with Jim Hudack Blair County Administrator and SASMG AE staff. During the exit meeting the results were shared and recommendations were made in the areas of Level of Care, and Fair hearing. 10 Individuals from the Core Sample participated in face to face interviews. All interviews concluded that they are satisfied with the current support they receive from providers, SCO, and the AE of Blair County.

Results and Performance Evaluation

The self-assessment results and onsite review results are identical to show that SASMG scored 100% in most areas of the review. ISAC recommendations to Improve Quality, Employment, and Communication are also focus points of this AE and is reflected in their current Quality Management plan and current initiatives. SASMG has an Employment Initiative for 2017 and a Dual Diagnosis Initiatives:

Employment Initiatives for 2017

- Continues to support memorandum of understanding with local OVR office.
 The MOU assures SASMG will prioritize base funds for follow along services after OVR assessment period.
- Expanded summer employment program for the 3rd year in a row. This year 25 students receive support to have a summer work experience
- Participation and support of the Blair County Transition Council. Acting as a co-sponsor of Pathways to Transition Expo on October 31, 2017. With 200 registrants for this information sharing session with 32 local vendors.

Dual Diagnosis Initiative:

- Participation on the DDX steering committee meets every other month to determine objectives for the system
 - Funds Certified Nurse practitioner to manage 20 of the most complex individuals with DDX.
- DDX Navigator is funded through SASMG to facilitate communication on all complex teams

- Crisis workgroup to collaborate on continually of care when people need emergent mental health treatment.
- Technical Assistance Support Team (TAST) as an intervention prior to a higher referral.

Remediation is required for the Core Sample and available in the AE database. Remediation is also required for the level of care of sample and will sent as an attachment to this report. The score report highlights areas that require systematic improvement and are identified on the CAP. The data collected during the self-assessment, desk review, onsite review, and individual interviews shows the quality of work Blair County and SASMG provides to individual and families, and their commitment to ensure everyone has an Everyday Life.