
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Community Connections of Clearfield/Jefferson Counties

September 6, 2017

Introduction

The Quality Assessment and Improvement (QA&I) Comprehensive Report has been developed to provide you with both information and data that has been collected during the self-assessments you have completed, the review of the core sample that has been selected for your organization, and information both gathered and shared during the on-site portion of the process. As we discussed during your onsite visit, this year's focus areas included ensuring everyone has an Everyday Life, and promoting the following ISAC recommendations: Improve Quality, Employment and Communication.

Summary of Community Connections of Clearfield/Jefferson Counties

Community Connections of Clearfield/Jefferson Counties (hereafter referred to as CCCJ) is located in DuBois, PA at 375 Beaver Drive, Suite 100.

As of July 1, 2017, CCCJ is serving nearly 500 people from the Clearfield/Jefferson area.

According to their website: www.ccc-j.com

“The Clearfield-Jefferson Mental Health/Mental Retardation Program was established in July 1969. The purpose of the Program, as an office of County Government, is to assure services for those individuals with behavioral health, intellectual and developmental disabilities, and early intervention needs are available to residents of Clearfield and Jefferson Counties regardless of the individual’s or family’s ability to pay.

Since 2009 the Program has undergone significant changes. Through a strategic planning process, the Program has changed our name to **Community Connections of Clearfield/Jefferson Counties**, revised our mission, and moved our offices to DuBois. The mission of Community Connections is to provide the people of its communities with the resources needed to live meaningful lives.

The mission of the Intellectual Disabilities Program is to create, promote and enhance the services and supports available to individuals with Intellectual Disabilities. The supports will foster choices, meaningful personal relationships, community participation, and dignity and respect as valued citizens. The Program achieves this mission by collaborating with other agencies that provide the needed supports and services.

The Program plans, administers, monitors, and coordinates supports to persons with Intellectual Disabilities and their families in order to enhance their opportunities to lead meaningful lives in their communities.

The following are some of the supports available:

- Eligibility determination
- Support coordination
- Family support
- Residential programs
- Life Sharing
- Supported employment and day habilitation
- Specialized Therapies
- Home and Community Habilitation supports and respite

- Adaptive aids
- Minor home/vehicle modifications “

Additionally, during the onsite visit, CCCJ was given an opportunity to provide information to ODP on their accomplishments:

- CCCJ reports that their Quality Management Plan focuses on IM4Q data, specifically around safety in the community. They are working collaboratively with the provider of services community to secure identification cards for everyone who doesn't already have one, and to address safety in the community, in the event of an emergency.
- Currently the AE has 55 people competitively employed, and plans to add at least one more per year.
- This organization has participated in Crisis Intervention Training. This is a process by which CCCJ work with local law enforcement agencies (including school enforcement) to educate them on both intellectual disabilities and autism.

QA&I Summary

CCCJ completed a self-assessment in FY 17-18, which was finalized on August 24, 2017. The self-assessment sample included 4 people who are enrolled in the waiver, 2 people who are not, and a review of CCCJ's data and policies as well.

The Office of Developmental Programs pulled a core sample of 9 people for their review. The names of those selected in the core sample were shared with CCCJ on August 23, 2017.

All 9 people in the Core Sample were offered the opportunity to participate in a face to face interview with ODP staff. The purpose of this activity was to evaluate overall satisfaction, and to provide an opportunity for people to comment on recommendations for system improvement. Two people chose not to participate,

but the other 7 agreed to, and had their interview completed by August 9, 2017. On September 6, 2017, the onsite portion of the QA&I process was completed at the CCCJ offices with Intellectual Disabilities staff.

Data Analysis

CCCJ's self-assessment was completed in August, 2017. The data from that activity has been reviewed, and CCCJ's performance has been evaluated. Of the sample selected, one person was identified as being enrolled between the dates of July 1, 2016 and June 30, 2017. This person is considered newly enrolled for the purposes of the Self-Assessment. Based on the review, CCCJ demonstrates quality oversight of both eligibility for waiver documentation, and ensures that services start within 45 days of the eligibility determination. Additionally, CCCJ has shown exceptional governance in the area of consumer records, including but not limited to: Individual Support Plan content and quality, incident management and timeliness. That level of quality work is reflected in the scores in the self-assessment. The Quality Management Plan, which is developed to help either improve areas that are sub-standard, or to promote initiatives (ex: Employment) has been reviewed multiple times by the Western Regional Office, and found to be acceptable.

On September 6, 2017, ODP staff met with CCCJ Intellectual Disabilities staff to complete the final step of the QA&I process, which was the onsite visit. Prior to the onsite, a desk review of the aforementioned core sample participants was completed. During the on-site visit, documentation was reviewed that is at the office, and ODP spoke with Intellectual Disabilities staff about certain activities which are contractually required to be completed every year, and assessed the performance for those activities.

An exit conference was conducted when onsite activities were completed. During that conference, the results of the entire QA&I process were shared with CCCJ. The results are as follows: Overall, CCCJ demonstrates strength as an organization both procedurally, and communally. Community resources, community access, health and wellness, and everyday lives are strongly promoted by CCCJ. The

organization has very little staff turnover, which provides for a stable, knowledgeable staff base. This depth of knowledge is evidenced in the QA&I process by the 100% showing on the self-assessment, as well as the strong performance exhibited with the core sample.

When speaking with the 7 people who chose to complete a face to face interview, almost everyone expressed high satisfaction with their lives. One occurrence where someone expressed a mild dissatisfaction with their job, emails were sent by CCCJ to follow up with the Team within an hour of being notified of the consumer comment. It was documented during the follow up from ODP that CCCJ ensured alternate solutions were available to, and being actively discussed to determine a solution. This organization is highly responsive to consumer input, and extremely invested in providing quality services every day to everyone.

Results and Performance Evaluation

Finally, the comprehensive review of CCCJ reveals that the results of the QA&I completed by ODP, and the self-assessment are almost identical. Using the focus areas identified in the Introduction, and applying those to the results of both assessments, it is clear that CCCJ is providing a quality service to those supported by your organization. The Quality Management plan addresses several of the ISAC recommendations directly (i.e. employment and quality improvement). The scope of the rest of the work addresses others, for example promoting health and wellness by utilizing the HCQU as a valuable resource and routinely sharing that resource with others.

Finally, both assessments were reviewed for any systemic concerns that may need an improvement plan. You are required to complete an improvement plan for incorrectly executing the Reserve Capacity Bulletin. That document is attached.

Thank you to both you and your team for your ongoing support during this process, and for the quality work you do every day.

Appendices

Appendix A: AE Self Review Score and Detail Reports

Appendix B: QA&I Core Sample Score and Detail Reports

Appendix C: Corrective Actions and Plan to Prevent Recurrence form

Appendix D: CAP Instructions

