
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Hempfield Behavioral Health Inc.

October 16, 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 Hempfield Behavioral Health Inc. encompassed the following:

- The onsite review consisted of a sample of 5 individuals across all funding streams (2 consolidated, 2 PFDS, and 1 base funded)
- One staff was interviewed
- One individual was interviewed

Data Analysis and Performance Evaluation

During completion of the onsite review for Hempfield Behavioral Health Inc., the following information was noted:

- All individuals are engaged and actively participating in different activities throughout the day. Staff know the individuals well. They are aware of health and safety concerns, likes and dislikes, and what works and doesn't work for each individual. Staff are interacting with all individuals and individuals are interacting with each other and learning new skills throughout the day.
- Focus areas
 - Employment – individuals are given the opportunity to participate in the pre-vocational program at the farm. In addition, the individuals who are not participating in the pre-vocational program are still learning new skills (cooking, farming, animal care, etc.) that could help them gain competitive employment at some point in the future, if this is what they choose.
 - Quality Improvement – staff are doing a good job at making sure that individuals are active and engaged throughout the day. You have developed a good assessment process in order to evaluate engagement and provide feedback to staff in order to improve in this area. You are also reviewing incidents on a quarterly basis to look for areas that could be improved in order to decrease your overall incidents.
 - Communication – daily notes are thorough and provide a good assessment of communication skills, individual goals, etc. Staff are very aware of communication styles of individuals and what works best for each person.
- Recommendations
 - Documentation of staff training needs to be more specific – there are some areas where training may have been done, but was not able to be documented.
 - Policies have been written to meet guidelines, but are not always being put into place. Please make sure that you are following all policies as written.
 - The QM Plan did not include the effective date/target date of the plan, or the when the plan was most recently revised. I recommend using the standardized QM plan template to ensure that you are meeting all requirements in this area.
- Self-assessment results varied somewhat 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. It is recommended that a more thorough review of the questions and guidelines is completed when doing the self-review.
- There are six items requiring remediation within 30 days – please see attached CAP for specific information.

- There are five 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