
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Personal Health Care

December 6, 2017

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Introduction

The Quality Assessment & Improvement (QA&I) Process is a way for ODP to evaluate our current system and identify ways to improve it for all individuals. Focus areas of the QA&I process include staff training, communication (including deaf services), policies and procedures, employment, incident management, and quality management. The purpose of this report is to detail the results of the QA&I process. This report is provided as a means of describing the areas in which they have excelled, and document any areas of non-compliance that will require remediation.

QA&I Summary

Personal Health Care completed the self-assessment and sent it to the AE on August 30, 2017. The onsite review took place on December 4, 2017. The AE staff Amber Wallace and Lauren Foell met with Cindy Vance and Laurie Conbeer of Personal Health Care. The AE reviewed records for five individuals as well as all relevant policies and procedures. Findings were discussed at the end of the onsite interview. Highlights from the entrance and exits discussions include:

- ODP Quality Management Plan templates and data expectations
- Strengths of review
- Findings of noncompliance
- QA&I Satisfaction survey – <http://qaic1y1feedback.questionpro.com>

One staff (MCI#820129252) was interviewed on December 5 by AE staff Lauren Foell. The individual this staff works with is unable to answer interview questions.

Data Analysis and Performance Evaluation

Personal Health Care was very organized and accommodating during the onsite review. Documents were readily available and easy to locate. Most questions met quality compliance expectations. All required training records were available for all staff reviewed. The provider has not had any grievances, but has a strong policy in place, should an individual or family feel the need to express a grievance. Additionally, a policy is also available for staff grievances. The provider did not have any incidents in the last 6 months, but a review of internal concerns occurs quarterly as a part of their quality management review. Communication assistance was provided as noted in the ISP for individuals who require assistance. Questions on the provider self-assessment varied where the AE found questions of noncompliance during the onsite review:

Q8. The Provider reviews and evaluates performance data in selecting priorities for the QMP.

Q22. The Provider documents delivery of services/supports in the type, scope, amount, frequency and duration specified in the Individual Support Plan (ISP).

Q36. The Provider implements the individual's back-up plan as specified in the ISP.

Personal Health Care conducts quarterly analyses, but a complete report was not consistently available for all quality management goals. Graphs and data are analyzed at meetings, but are not a part of the formal quarterly report documents. Two out of the five individuals had low, inconsistent utilization. The provider reports this was mostly due to family cancellations. Because documentation was not always available regarding why shifts were ended early or missed, it was unclear if the backup plan was utilized. Personal Health Care has identified utilization as a part of their record review, which is a goal of the quality management plan. The agency does have a strong quality management plan in place that clearly reflects ODP's mission, vision, and values. The AE will provide guidance for the agency to write clearer, data-driven goals, objectives, action plans, and quarterly reports.

The staff interviewed has been working with the individual for several years. She clearly knows him well and understands the supports he needs.

Appendices

See CAP attached in email

See MCI Review attached in email