
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Centre County AE

November 15, 2017

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Introduction

The purpose of this report is to review and compile a written summary of the official findings from the desk review, interviews and onsite visit conducted by the Administrative Entity. The focus areas of Cycle 1 of the Quality Assessment and Improvement Process are employment, quality improvement and communication.

QA&I Summary

The Penn State University Psychological Clinic submitted their self-assessment and supporting documentation on August 30, 2017. The Administrative Entity reviewed the self-assessment and supporting documentation then completed the identification of review sample on September 13, 2017. The 2 week notification letter/email was sent to the provider on September 21, 2017, scheduling the onsite visit for October 4, 2017. The participant face-to-face interview occurred on October 16, 2017 and the staff interview occurred the day of the onsite visit. The entrance interview, onsite visit and exit interview all occurred on October 4, 2017.

The entrance interview focused on the changes from the AEOMP process (Administrative Entity Oversight Monitoring Process) to the new QA&I Process (Quality Assessment and Improvement Process). The exit interview included discussion of the changes in Behavior Support Services as a result of the new waiver implementation and the impact it would have on the provider's service delivery as the only service they provide is BSS. The provider has begun to review current services and is in the process of meeting with residential providers in anticipation of the service definition changes.

The Director of the Psychological Clinic is an active member of the current Human Rights Committee and there was discussion during the exit interview of how the changes to the Administrative Entity Operating Agreement and the proposed Chapter 6100 regulations will impact the current process.

The review sample was 5 with one staff member and one individual in services interviewed. The interviews were positive but garnered no significant information.

Data Analysis and Performance Evaluation

The current quality plan addresses the unique needs of the provider. The Penn State University Psychological Clinic provides behavior support services only and faces the challenges of being one part of a very large entity which is not based in the Office of Developmental Programs system. The quality plan addresses the need to monitor and implement ODP directives in addition to training behavior support specialists and providing training/support to individuals and their teams.

The provider recognizes the changes in behavior support services and has discussed changes with the Administrative Entity as well as having discussions with residential providers related to current services and service delivery after January 1, 2018.

There is one item that will appear on the Corrective Action Plan (CAP) and require a Plan to Prevent Reoccurrence (PPR). Historically, this provider underutilizes and does not address the issue or request a review of the service. Two of five records were not in compliance in relation to the type, scope, amount, frequency and duration of services as specified in the Individual Support Plan (ISP). One issue is the fact that Behavior Support Services (BSS) are provided on an intermittent basis, with more units needed at the start of the service (for plan development and staff training) then leveling out once the plan is developed and implemented. The provider is open to discussions regarding frequency and duration as it relates to BSS and individual needs. The focus of the PPR should be on the monitoring of the utilization and the follow through of appropriately updating the ISP as necessary. A comparison of the self-assessment to the onsite review indicated that this was the only area that the provider and the reviewing entity did not concur.

Appendices

See attachments: Corrective Action Plan (CAP) and MCI tracker