
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Residential Habilitation Consultants

November 28, 2017

Review of Findings

Introduction

The purpose of this report is to provide the results of the 2017 QA&I Provider Onsite Review that occurred from October 23, 2017 through November 20, 2017.

The Quality Assessment and Improvement Process has been designed to provide oversight to provider agencies under the Office of Developmental Programs. The focus areas for this review include quality management, incident management, and promoting employment.

QA&I Summary

The organization was included in this review based on your MPI number. The organization submitted the provider self-assessment on time and submitted required policy documents prior to the onsite review which included the agency's quality management plan, restrictive interventions plan and annual training curriculum. The day of the onsite review you were audited by Lauren A. Smoyer, Intellectual Disabilities Supervisor for the Chester County Office of Mental Health and Developmental Disabilities. The onsite review of policies and procedures, staff training and client record review took place on the first day of the review and the interviews were completed on November 8, 2017 and November 20, 2017.

Five consumer records were chosen for review and five staff training records were audited for compliance. Two consumer interviews were completed, and two staff were interviewed for the purposes of assessing the consumer's satisfaction with services and staff's knowledge on the consumers they work to support.

Data Analysis and Performance Evaluation

Residential Habilitation Consultants did not have a quality management plan that met regulatory requirements or reflected ODP's mission, vision and values. The provider is not reviewing performance data on a quarterly basis as required by the department. The provider is not updating the quality management plan at least once every two years.

The grievance procedure is missing instructions on how consumers and their families can obtain help in filing a grievance.

The restrictive procedures policy is missing allowable and prohibited restrictive interventions.

The provider was cited for staff trainings being incomplete due to the quality management plan and grievance procedure not meeting regulatory standards.

It is required that staff training be remediated within 30 days.

The consumer interviews were conducted by Julie Moyer and Lauren Smoyer of the Chester County AE. Both consumers interviewed were emphatic about their satisfaction with services. When asked if he likes working with his staff through Residential Habilitation Consultants the consumer had a wide smile and enthusiastically said “yeah!”.

The staff were able to articulate the areas of support their individuals need while still promoting their desire for independence.

The agency should look to focus efforts on building a strong quality management program, and consider attending the quality management certification class when it is available in the area.

Appendices

- Corrective Action Plan (CAP)
- MCI tracker