
QUALITY ASSESSMENT AND IMPROVEMENT:
COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Values into Action

12/4/17

Introduction

The Office of Developmental Programs (ODP) Quality Assessment and Improvement (QA&I) process is designed to conduct a comprehensive quality management review of county programs, Administrative Entities (AE), Supports Coordination Organizations (SCO) and Providers delivering services and supports to individuals with intellectual disabilities and autism spectrum disorders. As part of ODP's quality management strategy, the QA&I process has been designed to be comprehensive standardized and measurable. This gives providers applicable information for making decisions regarding service delivery and provides them the opportunity to make systemic changes in their organization that will improve the quality of their services.

The mission of ODP is to support Pennsylvanians with developmental disabilities achieve greater independence, choice, and opportunity in their lives. This includes continuously improving an effective system of accessible services and supports that are flexible, innovative, and person-centered. The QA&I process is designed to accomplish this. It is a continuous process that includes the Provider's Self- Assessment > Desk review > Onsite Review > Comprehensive Report > Corrective Action and Quality Improvement > Technical Assistance > Self- Assessment. The goal is to continuously improve the quality of services.

Quality services include:

- Ensuring Individuals have Choice, control in their lives regarding who they live and socialize with, where they work,
- Assuring effective communication
- Increasing employment
- Increasing community participation
- Ensuring ISPs are updated timely when there is a change in need
- Ensuring individuals are free from abuse, neglect, and exploitation
- Ensuring people with complex needs have supports they need (Behavioral and mental health supports, adaptations in their environment so they can access what they need and want.
- Quality services that provide services that will meet their needs with dignity and respect.

This QA&I Comprehensive report summarizes the findings from the provider's self-assessment, onsite review, and interview/s with the consumers and staff.

QA&I Summary

Values into Action is a provider, that provides services to individuals registered with the Office of Developmental Programs. Values into Action is currently providing, In-home and Community Supports, Residential Habilitation, Supports Broker, Companion, and Unlicensed Respite for individuals offering services in 48 Counties in Pennsylvania. The Provider Self-Assessment and the desk review, which included a copy of the Quality Management Plan, Restrictive Intervention Policy, and the Annual training curriculum, were submitted on August 30, 2017, which was prior to the 8/31/17, due date.

The onsite QA&I review was conducted on 10/24/17 at Values into Action located in Media, Pa. The entrance interview was conducted with, the following was discussed:

- The purpose of the QA&I process, a review of the process and the timelines
- Summary of ODP's missions and vision
- The Quality improvement priorities
- Website for the QA&I survey

An individual receiving services from Values into Action, was conducted on 11/8/17. The individual and two staff persons were interviewed. Both Staff persons had excellent rapport with the consumers and seemed to know the individual very well. They could recall pertinent information from their ISP's. The individual stated that she was happy, felt safe and that her needs were being met.

Data Analysis and Performance Evaluation

The exit interview was held, on the same day, 10/24/17, with VIA staff. The following was discussed:

- Values into Action (VIA) documentation is very well organized and accessible. Their training curriculum is excellent. VIA's priorities include, creating a safe environment by training staff in positive approaches and implementing proactive practices.

Policy: (Questions – 7, 8, 9, 10, 11, 12 ,16, 23, 39, 43, 44, 45, 47)

Providers QM plan, Incident Management Plan, and Restrictive Plan were in accordance with OPD requirements. There were no grievances filed and no incident reports for the individuals in

the sample for the period reviewed.

44-45 VIA did not have a formal Peer Review process for all incidents requiring investigations

Suggested corrective actions: Develop a Peer Review and follow-up recommendations process. Include the Peer Review process in VIA's Quality Management Plan and review quarterly to ensure it is being implemented.

Training: (Questions – 12, 15, 17, 18, 19, 20, 34, 35)

Trainings for 45 staff persons were reviewed. All staff trainings were completed - 100% compliance.

Record Review: (Questions – 13, 21, 22, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 36, 37, 38, 40, 41, 42, 46, 48, 49)

Values into Action services were reviewed for individuals registered in Delaware County
The review showed 100% compliance for all applicable questions.

Other attachments:

MCI tracker

CAP