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# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Service Access & Management, Inc. Berks

Support Coordination Organization

*November 22, 2017*

## 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. The focus of this process is on quality assessment and improvement as it relates to the participants' experience with services and supports.

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. The office seeks to continuously improve an effective system of accessible services and supports that are flexible, innovative and person-centered. In keeping with the mission and vision, the QA&I process integrates Everyday Lives Values in Action, ISAC recommendations, and the Consolidated and/or Person/Family Directed Support (P/FDS) waiver performance measures.

The QA&I process is accomplished by using a combination of self-assessment, desk review, onsite review and corrective action and quality improvement plans. The Quality Assessment and Improvement Comprehensive Report has been developed to provide you with both information and data that has been collected during the self-assessment you have completed, the review of the sample that has been selected for your organization, and information both

gathered and shared during the on-site portion of the process. As we discussed during your on-site visit, this year's focus areas include ensuring everyone has an Everyday Life, and promoting the ISAC recommendations specifically; assure effective communication, increase employment, and improve quality.

## Summary of Service Access & Management, Inc. Berks

### Support Coordination Organization

Service Access & Management (SAM Inc) is a provider of human services and management services throughout Pennsylvania and New Jersey. Incorporated in 1997, SAM Inc is currently celebrating their 20th year of providing support coordination services. They are accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the National Association of Dural Diagnosis (NADD) and is recognized by the Non-Profit Times as one of the top 100 Non-profit organization to work for in the USA. The organization's support coordination service area consists of 48 counties within Pennsylvania including Berks county located in the Northeast region. This Comprehensive Report represents the review of Service Access & Management Inc. Berks which serves Berks County (hereafter referred to as SAM Inc - Berks). "The mission of Service Access & Management, Inc. is to help people throughout our service area enhance the quality of their lives by effectively and efficiently managing and/or providing needed, accessible and individually satisfying human services." Their new vision statement is "Everyone we meet, we leave better off."

SAM Inc – Berks provides SC services to approximately 1700 participants supported by 42 support coordinators, 7 supervisors and 5 additional support staff. SAM Inc – Berks employs seven bi-lingual/Spanish speaking support coordinators and 2 supervisors.

SAM Inc – Berks was represented by Jim Schu, Corporate Director of Supports & Service Coordination, Rachel Bernini, Deputy Director of Supports & Service Coordination and Shara Garipoli, Director of Support Coordination Services – Berks.

### QA&I Summary

SAM Inc - Berks completed a self-assessment during the QA&I Cycle 1 Year 1. The Self-Assessment was submitted to ODP via Question Pro on August 16, 2017. The sample consisted of ten records, three Consolidated, three PFDS, two Base and two SC services only.

ODP drew a sample consisting of thirty-one records, four Base, twelve Consolidated and fifteen P/FDS Waiver records. Interviews were conducted prior to and after the SCO onsite review.

Twenty-six interviews were completed, ten interviews were completed by ODP, and sixteen interviews by the local IM4Q Program.

The names of those selected in the sample was shared with SAM Inc - Berks on October 11, 2017. The onsite review was completed on October 25, 2017. The last interview was completed on October 25, 2017. The ODP QA&I team consisted of Rachel Toman QA&I Regional Coordinator, and Jessica Lopez Record Reviewer.

### Data Analysis

SAM Inc - Berks self-assessment was reviewed. The self-assessment as reported by the SCO demonstrations solid performance in many areas including training, case notes meeting quality standards, and incorporating risk mitigation strategies into the ISP, etc.

The SCO submitted their self-assessment in a timely manner and although many areas show compliance, the SCO did report non-compliance in a few areas. The SCO reported improvement is needed in submitting the annual ISP for approval and authorization in a timely manner, monitoring at the required location and providing information including reporting abuse, neglect and exploitation to the participant and or families.

The Self-Assessment and ODP review were consistent; producing similar results for most areas. Strong performance is noted in both onsite and record review. The following areas are noted by ODP as areas requiring a Plan to Prevent Reoccurrence:

*Question # 15 - If an individual is deaf, the SCO ensures that when an SC gets an individual who is deaf on their caseload, the SC is trained in all required training within 30 days of the individual being added to the SC's caseload.*

The SCs took all Harry M training that were mandated by ODP at the inception of the Harry M lawsuit however, they did not repeat the training within 30 days of the individual being added to their caseload as per the Harry M. Settlement Agreement.

*Question # 36 – The SC documents follow-up on issues identified*

The reviewer determined that the SC did not document follow-up on a few issues based on a review of the service note, monitoring tools and or the ISP.

*Question #67 - Abuse, neglect, and exploitation information provided*

It is the responsibility of the SC to explain annually to individuals receiving services, the right to be free from and to report abuse. SCs are to review and complete this handout annually with all individuals and record the action in a Service Note and on the ISP Signature Form during the individual's annual ISP meeting. All records reviewed did not document the information was reviewed at a meeting other than the annual ISP meeting.

*Question # 69 – If the record describes a reportable incident, including critical incidents, there is an incident report entered into EIM.*

Based on the review of service notes, ISPs and face to face interviews, the reviewer identified three reportable incidents which were not recorded in EIM by the provider. The SCO/SC did not notify the provider of the need to enter the report.

### Results and Performance Evaluation

Using the focus areas identified in the Introduction, and applying those to the results of both assessments, SAM Inc. - Berks overall performance aligns with the ISAC recommendations, Everyday Lives Value in Action, and CMS Assurances.

Twenty-six personal interviews were conducted with individuals to obtain firsthand knowledge of the participants' experience with services and supports received. The person was free to invite anyone they would like present for the interview and many of the interviews were conducted in personal homes and included family members and support coordinators. In addition, staff reporting, and reviewer observation were used to gain insight into the participants' experience. Overall, the participants are very satisfied with their services and/or supports. The families and participants spoke very highly about their support coordinators. Positive interaction between the SC and participant/family was observed during the interview phase. This positive connection with families was also well documented in case notes. There was evidence of SCs partnering with families to achieve the outcomes for their family members. The SCO representatives were knowledgeable of the principles and values of Everyday Lives. They promoted the values of community participation, control over services, and assuring health and safety through their interactions with participants, family members and provider staff.

SAM Inc - Berks reported that the average longevity for a SCs is seven years with fourteen SCs being employed by SAM Inc – Berks for more than ten years. SCs are completely mobile spending most of their time on the road. Support coordinators and supervisors are recognized through Master Case Manager, Master Supervisor and Innovation in Case Management awards. The Master Case Manger is open to current support coordinators willing to complete a case review and prepare a presentation to corporate staff. The Master Supervisor must be nominated by a peer.

SAM Inc - Berks is committed to the provision of quality services. Completion of training as required for both SCs and supervisors is well documented. The average number of training hours for SCs is approximately fifty-eight hours per year. The average number of training hours for a supervisor is fifty-five hours. The number of hours completed exceeds ODP requirements.

SAM Inc – Berks have recently completed Life Course Framework training. Training modules reflect ODP Priorities and SCs appear knowledgeable regarding ODP initiatives and philosophy.

The action plan and outcomes selected and prioritized in the Quality Management Plan are aligned with the ISAC recommendations and Every Day Lives Values in Action. SAM Inc does have an ODP QM Certified staff member however that staff person is not located at SAM Inc – Berks. SAM Inc- Berks is responsible to submit data quarterly.

The QA&I Process includes some questions which are designed to be probing and or exploratory in nature and are not measured for compliance. These questions are included in the process to promote discussion and to assist organizations in preparing for upcoming changes in regulations, and to promote ODP initiatives. The exploratory questions, those question not included in the score, especially the question related to offering information to the family require further discussion by the organization.

Remediation and a Plan of Correction needs to be submitted within 30 days to address the areas of non-compliance noted on the attachments. Please refer to the Excel spreadsheet for additional details. Remediation is to be submitted via the attached Excel spreadsheet.

Thank you to you and your team for your ongoing support during this process, and for the quality work you do every day.

#### Appendices

Appendix A: QA&I Core Sample Score and Detail Reports

Appendix B: Corrective Action Plan

