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# QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

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Pennsylvania Office of Developmental Programs

Service Access and Management, Inc. (Clarion)

*September 21, 2017*

## Introduction

The Quality Assessment and Improvement (QA&I) Comprehensive Report has been developed to provide both information and data collected during the self-assessment Service Access and Management completed, review of the core sample that ODP selected for Service Access and Management, and information gathered and shared during the on-site portion of the process. As discussed during Service Access and Management's onsite visit, this year's focus areas have been related to ODP's mission, vision and values to promote and achieve an Everyday Life for everyone. Additionally the QA&I examined more closely the efforts Service Access and Management demonstrates to promote 3 of the recommendations the Information Sharing Advisory Committee (ISAC) made, also included in ODP's Everyday Lives Values in Action: Improve Quality, Employment and Communication.

Summary of Service Access and Management, Inc., a Supports Coordination Organization:

Service Access and Management, Inc. (hereafter referred to as SAM) is located in Clarion, PA, at 30 Pinnacle Drive, Suite 302.

According to their website: [www.sam-inc.org](http://www.sam-inc.org)

**Mission**-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.

**Vision**-Everyone we meet, we leave better off.

Additionally, Mandy Fleming who is the Clarion County Director of Supports and Services, as well as the Associate Director of Operations for SAM provided the following information:

- Supports Coordinators (SC) have longevity with SAM, Inc. and historically transition to other positions because of what they have learned as an SC.
- SAM consists of a cohesive team, which lends to the support and advocacy that directly impacts the consumers and families served.
- As a company, SAM is constantly re-evaluating quality standards, as regulations change and evolve, in order to best serve people with developmental disabilities in the community.

### QA&I Summary

SAM completed a self-assessment in FY 17-18, which was finalized on August 23, 2017.

Additionally, the Office of Developmental Programs pulled a core sample of 4 people for their review. The names of those selected in the core sample were shared with SAM on September 7, 2017.

On September 21, 2017, the onsite portion of the QA&I process was completed at the SAM offices with Mandy Fleming and Melissa Ford, SC Supervisor.

### Data Analysis

SAM's self-assessment was completed in August, 2017. The data from that activity has been reviewed, and SAM's performance has been evaluated.

For the Core sample, a desk review of the sample participants was completed by the ODP Record Reviewer. Then on September 21, 2017, ODP staff met with SAM staff to complete the onsite visit.

Finally, an exit conference was conducted on September 21, 2017 once onsite activities were completed. The results of the entire QA&I process were shared with SAM during the exit conference.

See [Results and Performance Evaluation](#) section of this report.

## [Results and Performance Evaluation](#)

Applying the three ISAC (Information Sharing Advisory Committee) focus areas discussed in the [Introduction](#) section to SAM's performance revealed the following results:

### Focus Area #1: Improving Quality

SAM is a large organization, and serves 48 counties in Pennsylvania. SAM Clarion is promoting one of the ISAC recommendations: Develop and Support Qualified Staff, by focusing on internal quality standards. SAM is working on "having competent and knowledgeable SC's that efficiently and effectively provide quality services that meet customer satisfaction". This Quality Management (QM) goal, as well as all others are reviewed quarterly by SAM Clarion supervisory staff, but also by corporate staff on a regular basis. The results of the core sample desk review support SAM's work, in that the results show the SC's are person centered and pro-active. SAM reports a robust relationship with community business partners and Clarion Administrative Entity (AE). Ironically, SAM's review revealed a number of ISP's were submitted late. During discussions about this issue, SAM reported that this was in fact a conscious decision to submit late. Due to a change

in leadership at Clarion AE, SAM purposely held off submitted ISP's for a short period of time to allow Clarion AE time to adjust to the change. While this practice should not be repeated, it speaks to the awareness that SAM has that in order to support people, they must all work together.

### Focus Area #2: Employment

This is a priority for SAM. In their self-assessment, SAM reports that "employment is covered as a topic at all annual meetings and is documented in the annual meeting note". There are also meetings twice a year with the transition council meetings at the local Intermediate Unit. SAM reports that the Office of Vocational Rehabilitation (OVR) is usually in attendance. Additionally, SAM is working on a target objective in their QM Plan, which states that SAM intends to "increase competitive, integrated employment to 10% by 6/30/18".

### Focus Area #3: Communication

In the area of Communication, SAM has a contract with a sign language interpreter to provide services as needed. Currently, SAM is working on ensuring that any communication assessments that are completed for people, are not only reflected in the Individual Support Plan (ISP), but are implemented.

Finally, there are a few areas in QA&I that are in development, as they are new requirements. They are not being measured in this report, but reviewed to ensure there is a plan in place with SAM to execute. An example of that is promoting Everyday Lives by having SC's facilitate conversations about community activities of the person's choice and ensuring that SAM is promoting information sharing of community resources with individuals, families, and providers of service. All of the

records in the core sample demonstrated that both of these areas are already being addressed. This further supports SAM's pro-active approach, and quality performance.

Both assessments were reviewed for any systemic concerns that may need an improvement plan. SAM is required to complete remediation for the QA&I core sample. Reflecting a strong performance in both the self-assessment, and core sample, there is only one area that has been identified as systemic, requiring a Corrective Action Plan, and a Plan to Prevent Reoccurrence. See Appendix B. Systemic is defined as an aggregate score of 87% or below, or two occurrences if the sample is less than 9. SAM's sample was 4. That area is:

- Providing information to participants about reporting abuse, neglect and exploitation at a time OTHER than a monitoring visit or meeting is a vital change, as this ensures a potential abuser is not in the room. SAM is not implementing that change in a consistent manner. Because this is a health and safety concern, SAM must immediately correct their process, and complete a Plan to Prevent Recurrence to ODP.

Thank you for your positive attitude during this process and for the quality work you do every day.

## Appendices

Appendix A: QA&I SAM Cycle 1 Year 1 SCO spreadsheet

Appendix B: Corrective Actions and Plan to Prevent Recurrence form

