
QUALITY ASSESSMENT AND IMPROVEMENT: COMPREHENSIVE REPORT

Pennsylvania Office of Developmental Programs

Family Counseling Center DD

October 12, 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 Family Counseling Center (FCC) completed, review of the core sample that ODP selected for FCC, and information gathered and shared during the on-site portion of the process. As discussed during FCC'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 FCC demonstrates to promote 3 recommendations the Advisory Committee (ISAC) made, also included in ODP's Everyday Lives Values in Action: Improve Quality, Employment and Communication.

Summary of Family Counseling Center, a Supports Coordination Organization

Family Counseling Center is located in Kittanning, PA, at 300 South Jefferson Street.

According to their website: www.fccac.org

"It is the aim of the Family Counseling Center to provide respectful and courteous service to the public, to enhance each person's sense of value and self-esteem, and to foster self-acceptance, self-reliance, empowerment and recovery..."

With services spanning six decades, the Family Counseling Center of Armstrong County has been providing mental health and intellectual disability services to residents of our community for 56 years. The center received its state charter in 1961, incorporated under the name of Mental Health Clinic of Armstrong County, and began offering services from its first location at 301 South Jefferson Street in Kittanning on Tuesday, May 01, 1962.

In 1970 the center changed its name to the Family Counseling Center of Armstrong County and in 1977 moved to 150 South Jefferson Street, Kittanning.

In January 2003, faced with the need for additional office space as new programs were developed and existing programs expanded, the Board of Directors authorized the construction of a new 32,000 space foot office building. The center opened for business at its new location of 300 South Jefferson Street on December 31, 2005.

QA&I Summary

FCC completed a self-assessment in FY 17-18, which was finalized on August 16, 2017.

Additionally, the Office of Developmental Programs pulled a core sample of 3 people for their review. The names of those selected in the core sample were shared with FCC on September 28, 2017.

On October 12, 2017, the onsite portion of the QA&I process was completed at the FCC offices with Amy Frankhouser, ID Unit Supervisor.

Data Analysis

FCC's self-assessment was completed in August, 2017. The data from that activity has been reviewed, and FCC'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 October 12, 2017, ODP staff met with Amy Frankhouser, ID Unit Supervisor to complete the onsite visit.

Finally, an exit conference was conducted on October 12, 2017 once onsite activities were completed. The results of the entire QA&I process were shared with FCC during the exit conference.

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

Results and Performance Evaluation

Using the focus areas identified in the Introduction in connection with ODP's review of the results of both the self and ODP assessment, it is concluded that FCC is providing a quality service to those supported by FCC organization.

Focus Area #1: Improving Quality

Information gathered and provided demonstrates that FCC consistently develops Individual Support Plans (ISP) that are person centered and support personal goals (outcomes) throughout the ISP. FCC is also focused on health and safety issues in the ISP. This is evidenced by the consistent documentation of risks, and risk mitigation strategies as appropriate. Additional risk mitigation activity is identified in FCC's strong focus on incident management. This includes proper documentation and review of reportable incidents. In addition FCC consistently provides information to participants on abuse, neglect and exploitation at times other than a meeting or monitoring. This practice ensures people are not influenced by a potential abuser who may be in the room. This is a new requirement from ODP. It is a vital change, and is being consistently implemented by FCC.

Focus Area #2: Employment

Per FCC's self-assessment, "Opportunities for employment (competitive, supported employment, referrals to the Office of Vocational Rehabilitation) are explored with individuals at monitoring visits, IEP meetings, and annual ISP meetings as applicable". FCC also reports in their self-assessment, "Employment meetings are facilitated quarterly which includes Armstrong/Indiana ID office, local providers, OVR and school districts. FCC participates in the area IU Transition Council meetings, a collaboration with area school districts, Intermediate Unit and AE. Supports Coordinators attend IEP meetings as invited

by the school district or individuals/families”. FCC has included Employment in their Quality Management Plan for 17-19 and will focus on students who are graduating from school.

Focus Area #3: Communication

In the area of Communication, FCC reports that they will contract with the Armstrong/Indiana BDHP office for interpreter services with agencies such as, The Center for Hearing and Deaf Services when sign language or interpreter services are needed.

At the time of the self-assessment in August 2017, results indicated that 3 Supports Coordinators (SC) serving participants with hearing deficits had not received the required Hearing and Deaf Services training within 30 days of assignment. At the time of the ODP onsite visit on October 12, 2017, this training had not been received. At the QA&I exit meeting because one of the three SC's had subsequently resigned, FCC was required to complete that training immediately for the remaining two SC's. Documentation that it was provided to the SC's was accepted as remediation. The SCO is encouraged to correct items identified annually during the self-assessment phase and maintain a record of it.

There are items contained in the QA&I questions that are under development, as they are new requirements and are not being measured at this time. They are reviewed to ensure each organization is familiar with these changes and there is a plan in place to implement. An example of this is promoting Everyday Lives by having SC's be prepared and able to facilitate conversations about integrated community activities related of the person's interests and choices. Also to assure that FCC promotes connecting individuals with their community by sharing information about community resources with individuals, families, and providers of service.

There is one area for FCC to consider including in the organization's Quality Management Plan, and/or strategizing a plan to prevent recurrence. That area is staff training.

Finally, both assessments were reviewed for any systemic concerns that may need an improvement plan. While there were a few areas that were less than 100%, only staff training has been identified as systemic. Consequently, FCC is required to complete a Corrective Action Plan on the attached Appendix B.

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

[Appendices](#)

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

Appendix B: Corrective Actions and Plan to Prevent Recurrence form

