QUALITY ASSESSMENT AND improvement:

ENTITY Comprehensive Report

*Guidance*

Pennsylvania Office of Developmental Programs

[INSERT ENTITY NAME]

*[INSERT DATE OF REPORT]*

*Cycle 2, Year 2 (C2Y2)*

**GUIDANCE NOTES:**

* The purpose of this document is to assist reviewers in writing Comprehensive Reports. It should be used in conjunction with the Comprehensive Report TEMPLATE.
* The Comprehensive Report Template and Guidance are used by AE staff for the review of Providers, ODP Regional Coordinators for the review of SCOs and AEs, and the Bureau of Supports for Autism and Special Populations (BSASP) for AAW SCOs and AAW-only Providers. Keep in mind that language is aligned to assist all offices/ authors.
* Throughout the TEMPLATE, brackets are used where the reviewing office should update information (remove all brackets in the final version of the Comprehensive Report).
  + The author can use the “Find and Replace” function in Microsoft Word to Replace “[INSERT ENTITY NAME]” with the name of the Provider/SCO/ AE being reviewed and “[INSERT REVIEWING OFFICE(S) NAME]” with the AE/ ODP/ BSASP Office completing the review and report.
  + Directions for how to use this function can be found here: <https://support.office.com/en-us/article/find-and-replace-text-c6728c16-469e-43cd-afe4-7708c6c779b7>
    - Be mindful that the exact text to be found/ replaced should be entered, including spaces. For example, type “[INSERT ENTITY NAME]” in the ‘Find what’ box and “ABC Provider” in the ‘Replace with’ box.
* The date of the report on the title page should be the date that the report is sent to an entity.
* The report should not contain identification of any individual person, be it service recipients, Reviewers or entity staff. Only refer to Reviewing Office or entity staff by titles or roles.
  + ***Never* refer to service recipients by name, initials, or MCI number.**
* Language should be clear and concise. Objective information should be shared, and the report should be free of bias and opinion. Remember the audience includes individuals and families.
* When using an acronym, define it the first time it is mentioned, then use the acronym throughout the report, i.e., Individual Service Plan (ISP), Service Note (SN), etc.
* Do not include information or questions that were not applicable to the entity. All reports should contain the same headings in this template, unless there is a note that it can be deleted if not applicable.
* Most sections are outlined as bullets for ease of reading, but can be modified into paragraphs, especially when the content is limited.
* Information should not be repeated in multiple sections (except for the Summary at the end). Throughout the report, topics can be grouped under the appropriate heading. For example, for an entity that scored 100% on all staff training questions, this can be summarized by something like “All staff at [entity] completed required trainings, including…” then summarize highlights, such as additional training opportunities; this information can be included under one bullet even though there are multiple staff training questions.

## Introduction

*Do not edit this section in the template. It should remain the same for all reports.*

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. ODP’s vision is to continuously improve an effective system of accessible services and supports that are flexible, innovative, and person-centered. The Quality Assessment and Improvement (QA&I) process is one of the tools that ODP uses to evaluate the current system of supports and identify ways to improve it for all individuals.

The ODP 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 individuals’ experience with services and supports. The QA&I process integrates Everyday Lives Values in Action, recommendations from ODP’s Information Sharing Advisory Committee (ISAC), and performance measures from the Intellectual Disability/ Autism (ID/A) Waivers (Person/Family Directed Support (P/FDS), Community Living, and Consolidated), and the Adult Autism Waiver (AAW).

The QA&I process is accomplished using a combination of self-assessment, individual interviews, Managing Employer (ME) interviews, and full reviews. Documents reviewed during this process include, but are not limited to, entity policies and procedures, protocols, staff training records, individual service notes and records, progress notes, and information from HCSIS such as the Individual Service Plan (ISP), individual monitoring tools, and incident reports. The purpose of the QA&I Comprehensive Report is to provide a summary of the findings from the self-assessment, interviews, full review, and remediation as applicable. Each entity is then able to utilize the data to continuously improve quality for all individuals receiving services and supports.

## Summary of Entity

**[\*\*\*INCLUDE ONLY THE RELEVANT PARAGRAPH(S) OUTLINED BELOW AND REMOVE HEADINGS IN BRACKETS- including this one\*\*\*]**

**[ID/A ENTITY REVIEW COMPLETED:]**

[INSERT ENTITY NAME] offers ID/A services to Pennsylvanians with developmental disabilities in [INSERT CATCHMENT AREA- include assigned AE, check SSD, or ask the entity what counties they work with beyond the assigned AE]. [INSERT ENTITY NAME] delivers the following services to about [NUMBER OF INDIVIDUALS RECEIVING SERVICES] individuals in [INSERT ASSIGNED AE COUNTY]: [INSERT SERVICE NAMES HERE, based on service authorizations report from HCSIS]. [INSERT ENTITY NAME] is also qualified to provide: [INSERT ADDITIONAL SERVICE NAMES, AS APPLICABLE, THAT THE ENTITY QUALIFIED FOR BUT IS NOT PROVIDING YET- delete sentence if n/a]. [INSERT ENTITY NAME] is also qualified to provide AAW services; individuals served under this waiver are not included in this report [Will receive info from BSASP- REMOVE this sentence if not applicable]. The organization’s mission is to [INSERT MISSION].

**[ID/A ENTITY WITH NO AUTHORIZATIONS:]**

[INSERT ENTITY NAME] is qualified to provide ID/A services to Pennsylvanians with developmental disabilities in [INSERT CATCHMENT AREA- include assigned AE, check SSD, or ask the entity what counties they plan work with beyond the assigned AE]. [INSERT ENTITY NAME] is qualified to provide the following services: [INSERT SERVICE NAMES HERE]. [INSERT ENTITY NAME] [is a new entity and] has not yet began serving individuals. The organization’s mission is to [INSERT MISSION].

**[BSASP ENTITY REVIEW COMPLETED:]**

[INSERT ENTITY NAME] offers AAW services to Pennsylvanians with autism in [INSERT COUNTIES WHERE ENTITY PROVIDES SERVICES] counties. [INSERT ENTITY NAME] delivers the following services to [INSERT NUMBER OF INDIVIDUALS RECEIVING SERVICES] individuals: [INSERT SERVICE NAMES HERE]. [INSERT ENTITY NAME] is also qualified to provide: [INSERT ADDITIONAL SERVICE NAMES HERE, AS APPLICABLE, THAT THE ENTITY QUALIFIED FOR BUT IS NOT PROVIDING YET- delete sentence if n/a]. The organization’s mission is to [INSERT MISSION].

**[BSASP ENTITY WITH NO AUTHORIZATIONS:]**

[INSERT ENTITY NAME] is qualified to provide AAW services to Pennsylvanians with autism in [INSERT COUNTIES WHERE ENTITY INTENDS TO PROVIDE SERVICES] counties. [INSERT ENTITY NAME] is qualified to provide the following services: [INSERT SERVICE NAMES HERE]. [INSERT ENTITY NAME] [is a new entity and] has not yet began serving individuals. The organization’s mission is to [INSERT MISSION].

Note that there are separate prompts for ID/A and AAW entities with and without authorizations above. For most Comprehensive Reports, only one of these paragraphs will be included. The heading in brackets should be removed. Use the provided sentence structures above and modify information in [brackets]. Remove information that is not applicable (i.e., if the ID/A entity does not serve individuals under AAW, remove that sentence). At the end of the paragraph, include:

Any additional information about the entity that is important to highlight related to the QA&I process. Reviewers should ask the entity being reviewed for information about their agency throughout the review. This information can be included in this section as a collaboration between the information received and information found through research of the reviewing entity.

Note that sometimes this information may fit better under a different heading, such as QA&I Summary when discussing the conference, Data Analysis of Review- Focus Areas, or Data Analysis of Review- areas of positive performance. Decide where it fits best, but do not include the same information under multiple sections.

## QA&I Summary

Use the provided sentence structures below and modify information in [brackets].

The Cycle 2, Year 2 QA&I process began for [ENTITY NAME] with the submission of the annual QA&I self-assessment on [INSERT DATE].

* This is the date the entity submitted their QuestionPro Entry. Additional information about the self-assessment will be documented below.

[INSERT REVIEWING OFFICE(S) NAME] conducted the full review for the time period of [INSERT DATE RANGE FOR REVIEW PERIOD]. A sample of [INSERT NUMBER] individual records were reviewed as part of the QA&I process, including the completion of [INSERT NUMBER] individual interviews. [If applicable, include the number of staff interviews completed.] **OR** [INSERT ENTITY NAME] [is a new entity and] has not yet began serving individuals. Policies, procedures, and staff training records were reviewed.

* Note the modified statement if the entity is new and/or does not have authorizations.

[INSERT REVIEWING OFFICE(S) NAME] held the conference with the [ONLY INSERT JOB TITLES] from [INSERT ENTITY NAME] on [INSERT CONFERENCE DATE]. The conference included an overview of the QA&I process steps and timelines and a discussion about the full review process and logistics. There was also an opportunity for the entity to share an organizational overview.

* Briefly summarize what was observed and discussed during the conference, if not included in the entity summary or other sections. Include information that stands out from the discussion, such as agency promising practices, setting, overall participation in the process.
* Briefly summarize what was discussed during the conference, if not included in the entity summary or other sections.

## Interviews with a sample of individuals receiving services

* Remove heading if the entity is not serving anyone, no interviews were completed, or the individual interview data is not available at the time the report is being developed.
* Insert bullets summarizing results of individual interviews. Include objective report of interviews, i.e., do not write “Individuals are happy,” instead write “Individuals report they are happy and were smiling throughout the interview.”
* Include trends regarding quality of services, especially regarding focus areas.

## Data Analysis of Review

The results of the QA&I review for [INSERT ENTITY NAME] are summarized below.

The review indicated the following areas of positive performance:

* Insert bullets summarizing what the entity does to ensure Everyday Lives recommendations are being implemented.
* Insert bullets of review areas where the entity is doing well. Do not include question number, but rather a summary of answers that were compliant. Use the question text and comments for questions that were scored Yes/ 100% to guide this section. Can exclude focus areas described above. Include any additional information from discussions and comments that stands out.
  + Include 1 bullet per topic area and summarize positive performance: i.e., summarize training results under 1 bullet, Service Notes 1 bullet, ISPs documentation 1 bullet, etc.
  + Include relevant positive practices, such as information discovered from exploratory questions or what makes them unique, if not already mentioned in the Summary of Entity or QA&I Summary.

[INSERT REVIEWING OFFICE(s) NAME] discovered the following health and safety concerns and worked with [INSERT ENTITY NAME] to immediately make corrections:

* Insert bullets of areas regarding health and safety that were corrected during the full review.
* It is especially relevant to include health and safety information that required immediate remediation. Examples may include unreported incidents being entered, immediate actions taken to ensure the health and safety of an individual is not compromised, etc.
* Other areas of noncompliance that are not related to health and safety but were remediated during the full review should be included in the areas for improvement below.
* If no areas related to health and safety were discovered and immediately corrected, remove heading, and consider adding sentence to the Summary Results at the end of the report, i.e.: No areas discovered during the review process required immediate correction to ensure the health and safety of individuals served.

The following areas were identified as needing improvement during the review:

* If all questions were Yes/100%, delete heading and add comment in Summary Results
* Insert bullets summarizing areas of that were marked “No” or below 100%. Identify questions that required corrective action. Specify if and where PPRs for quality improvement were needed. Do not include question number, but rather a summary of results. Use the question text and, where appropriate, add comments about why something was not compliant/ what was missing to guide this section. Consider how many applicable records, i.e. (20/22 records or 0/22 records). Summarize both corrective action and PPR needed, where appropriate.
* Include 1 bullet per topic area and summarize areas for improvement: i.e., summarize training results under 1 bullet, Service Notes 1 bullet, ISPs documentation 1 bullet, etc.
* Health and safety issues that were described as immediately remediated in the section above should not be mentioned again here.
* Author may choose to include corrective actions and PPRs the entity identified/ implemented in this section. If they are not included here, they should be in the “Remediation, Improvement, and Quality Management Plan (QMP)” section below.

[INSERT ENTITY NAME]’s annual self-assessment review results indicate the following:

* Insert bullets summarizing the self-assessment. Include the following:
* Note whether the self-assessment was completed on time. If not, provide a brief summary of DCAP actions.
* Did the entity include the sample as outlined in the QAI Process document?
* What were the results of the self-assessment and how did they compare to full review results? Include brief summary of focus areas. Did the entity identify any questions as noncompliant? If so, describe. Did they report completion of corrective actions and/or PPRs- was there evidence during the full review of improvement since identifying in the self-assessment?

## Remediation, Improvement, and Quality Management Plan (QMP)

* If there were no areas requiring remediation, delete heading and add comment in Summary Results, i.e. All areas reviewed during the full review were 100% compliant and no remediation or improvement strategies were required.
* Briefly describe the follow-up process, including Remediation, CAP, and QMP. Describe the general timeline for them to remediate all necessary questions (i.e., don’t need all dates, but address if the entity’s responses were timely or not). Describe the technical assistance throughout the process, as applicable.
* If not already mentioned above, briefly describe remediation actions completed. Briefly describe PPRs and if they have been implemented. Do not re-write the CAP here. An example could be "ABC Provider corrective actions included staff trainings, updating policies, and updating staff documentation templates. The provider updated their Quality Management Plan to include tracking of quality service notes as a Plan to Prevent Recurrent (PPR). All staff were trained on updated policies.”
* Describe if a DCAP was needed and briefly outline that process. If applicable, describe any outstanding corrective actions.
* Note if the Reviewing Office recommended updating the QMP- Did the entity already update the QMP, or did they identify this in their PPRs? If QMP updates were made/ recommended, summarize those areas/ recommendations/ updates.
* If the entity has not completed all remediation and CAP documentation by the deadline for the reviewer to submit the Comprehensive Report (March 31), note the ongoing actions required by both offices.
* consider sample structures of sentences below, remove/edit as appropriate
  + [INSERT ENTITY NAME] completed all remediation within the designated timeframe. Corrective actions included [briefly give a few examples]
  + [INSERT ENTITY NAME] completed most remediation actions within the designated timeframe. [INSERT REVIEWING OFFICE(S) NAME] provided technical assistance and an extension of the deadline. All remediation was completed and approved at this time and included [briefly give a few examples]
  + A Corrective Action Plan (CAP) was issued for [INSERT ENTITY NAME] to identify Plans to Prevent Recurrence (PPRs) for questions with a score of 86% or lower (or if less than 10 records, 2 or more noncompliant records). [INSERT ENTITY NAME] PPRs included [briefly give a few examples; describe if they have been implemented at this time, ongoing actions, QMP updates, etc.]
  + [INSERT ENTITY NAME] did not complete remediation of all issues of noncompliance and a Directed Corrective Action Plan (DCAP) was issued. They required intensive technical assistance from [INSERT REVIEWING OFFICE(S) NAME]. All remediation was approved within [#] days from the conference. Corrective actions completed include [briefly give a few examples]. PPRs identified in the DCAP include [briefly give a few examples; describe if they have been implemented at this time, ongoing actions, QMP updates, etc.].

## Summary of [INSERT ENTITY NAME] C2Y2 QA&I Results

In a brief paragraph, summarize the entity’s overall performance as indicated by the review and follow-up. Briefly highlight each section above in 1-2 sentences each. This is the only section that is likely to repeat information already mentioned, in order to summarize the report.

## Appendices

Include these separate documents in the email to the entity and State Office:

Appendix A: [INSERT ENTITY NAME] QA&I Review Spreadsheet

Appendix B: [INSERT ENTITY NAME] Corrective Action Plan (CAP)

* If there was no CAP, write “Appendix B: No Corrective Action Plan (CAP)”

Appendix C: [INSERT ENTITY NAME] Individual Interview Report

* If an individual does not want information shared, be sure to remove them from the report before sharing with the entity