

The Arc of Somerset County Quality Management Plan

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Quality Management at The Arc of Somerset County:

At The Arc of Somerset County, quality is the responsibility of all employees. The Quality Department has the role of providing our programs and employees with the information, resources, and training to continually assess quality and to provide opportunities as well as the tools needed for improvement.

The Arc of Somerset County strives to find new ways to achieve continuous quality improvement by offering programs and services that promote best practices in service delivery, employee training, IHP development, and risk management. A variety of tools are used to access, analyze and evaluate program quality. Among these tools are satisfaction surveys, Unusual Incident Report data, audit results, licensing inspections, Therap Services modules and external accreditations (CARF, ACA).

Recognizing the need to continually change the delivery of service based on the changing needs of the persons served, the Quality Department engages in researching and promoting current best practices and new initiatives in the area of supporting individuals with intellectual and developmental disabilities.

- IHP Coordinator present at IHP Meetings to ensure all plans are Person Centered
- Review and submit all Residential and Employment Service IHPs to DDD
- Review, submit, and track all Unusual Incident Reports (UIR), Follow-Up UIRs and Agency Investigations to DDD Reporting
 Offices (SRU, CIMU, OOL, or DDD) in accordance with the DHS Office of Integrity & Accountability Risk Management Systems
 Data Dash Board
- Review, track, and trend all GER's documented in Therap and provide Service Departments with monthly analysis and quality trend report of UIR's
- Conduct Agency Internal Investigations concerning Abuse, Neglect or Exploitation
- Development, deployment and analysis of various program and stakeholder satisfaction surveys and Training Class Evaluations
- Provide Departments with Licensing and Accreditation preparation
- Resolve OOL Licensing Deficiencies
- Develop and implement all Emergency Evacuation Plans and Risk Factors Agency Wide
- Review monthly Fire Alarm Reports to ensure compliance with standards
- Provide a curriculum & calendar of more than 20 unique trainings each month.
- CPR Trainer on staff, certified in both Adult and Child CPR (Camp & Children Services). Our passing rate is 100%
- Update policies and procedures for Agency and Service Department Operations Manuals
- Conduct Fiscal Audits of Residential & Employment Services
- Create a monthly Quality Newsletter with the emphasis on Person Centered Thinking and Therap Tips
- Responsible for overseeing the Agency's Strategic Plan, components, and quarterly and annual updates
- Oversee Therap Services Modules as Administrator/Moderator; train all staff in modules

- Introduce Therap Modules, develop agency launch which includes staff training, development, policy and comprehension
- Ensure compliance with the input of Pre-Service training data into the College of Direct Support

The agency strategic plan places great emphasis on quality and outcomes management that will lead to enhanced quality in all departments. This plan reflects the agencies commitment to the individuals served and the need to continue to work to enhance the quality of life for individuals with intellectual and developmental disabilities.

Quality Management Committee works to influence the quality of services across the organization. The committee members consist of Arc Directors and Executive level employees, family members, persons who receive services, Board members, and other stakeholders. This committee meets every other month.

The Quality Department and the Quality Management Committee's focus:

- Creation, critique, deploy and analyze Agency surveys for various stakeholders
- Assist in the preparation/planning for agency inspections/reviews for Service Departments as well as analysis of results
- Review of new training ideas and or updates to trainings
- Review of Strategic Plan and process

Strategic Plan 2010-2015

In May 2013, The Arc of Somerset County received a training grant from the NJ Department of Labor. Under this grant, a training plan was customized to review the current Strategic Plan. The plan is now three years old and needs to be updated to reflect changes and development in the agency as well as its environment. Critical to sustainability is finding alternative sources of revenues and that draws from the agency's ability to harness the power from the Board of Directors, the community and its internal recourses. Focus will be on the following topics:

- Fund-Raising for strategic priority of "Resource Development
- Board Development for strategic priority of "Partnerships/Shared Services
- Corporate Compliance for strategic priority of "Governance"

Time during these critical meetings have been spent as a working meeting on assessing current board membership, learning best practices in board member selection, on-boarding, defining roles and responsibilities, and board meeting facilitation. We can combine this with Fund-Raising which delves into different corporate development strategies, as well as the specifics of how to create a more effective fundraising action plan, how to talk to grant makers, among other topics. Finally Corporate Compliance topics may cover procedural assessment practices and tools, team-governance and internal survey model, enhancing corporate compliance planning, and maintaining consistent organization-wide compliance momentum. The six 4-hour sessions began in May and will continue through July 2013. Participants have been required to bring data, input and homework to the sessions. Deliverable services to be accomplished will be an updated Strategic Plan specific for The Arc of Somerset County, focus on any or all of above specific topics or as with Fund-raising, and simply learning some fresh concepts to actually having a written plan and running an event where our trainer provides on-going consulting advice.

Since its conception and launch, quarterly updates on progress are sent to the Director of Quality who oversees the progress of the strategies and objectives. The progress is updated and saved to both the company and Branchburg servers. The Board of Directors is provided with quarterly and an annual update. The plan is reviewed annually by the Executives, Department Directors and Board of

Directors. A full copy of the current plan is available on our agency's website. An updated plan, following our training with the NJ Department of Labor was launched on January 1, 2014.

Person-Centered Individual Habilitation Plans (IHP) are outcome focused and are the driving force for services offered to our Individuals. Each Individual Served in both Residential and Employment Service departments will have an IHP in accordance with NJSA 33:60-10, 11, 12 within thirty days of admission and on an annual basis. The IHP is the central mechanism for identifying and meeting consumers' wants and needs. The IHP provides a basis for review and planning of the most important aspects of each individual's life. The service and supports that are set in the IHP are based on an individual's expressed goals, preferences and choices. The plan will also support the exercise of rights. All IHP's are an integrated product of the collaboration and coordination among all interdisciplinary team members (IDT). The team will take a person-centered approach to information gathering, syntheses of information and planning. This means the individual is the first source of information. Various assessments will be used to better define skills and areas where support and/or assistance is needed. Individuals served will be supported to the fullest extent possible to coordinate the process of the IHP development. Revisions are necessary when there is a major change in a person's life or residential supports.

The IHP is reviewed monthly by the ADRS, via the Monthly IHP Progress Report, to assure proper and ongoing follow up. The IHP Tracking (via Therap – ISP Data section) is reviewed monthly as part of the Monthly Progress Report, for each individual, by the ADRS ensure proper and ongoing follow-up.

The Arc of Somerset County has a strong commitment to the IHP process and to ensure that IHP's are current, outcome based, and reflect the desires of the people we support. Due to the strong commitment to continuously improving the IHP process, The Arc of Somerset employs a full-time IHP Coordinator to monitor and oversee the quality of the IHP.

Ongoing internal and external satisfaction surveys - Assessing Stakeholder Satisfaction

The Arc of Somerset County conducts 17 Satisfaction Surveys and Training Evaluations at the conclusion of each of our training opportunities. Customer satisfaction is priority at The Arc of Somerset County and we continually strive to assess and gather information regarding the services we provide to improve on quality and develop strategies to increase best practices. Through these surveys the following is accomplished:

- 1) surveys help articulate Person Served and families' choice, involvement and self-direction
- 2) identification and formulation of action steps in specific program areas
- 3) action steps formulated into measurable objectives
- 4) objectives implemented within the program and support departments

The Quality Management Committee is directly involved in this process. Survey's are created in committee, analyzed for content and relevance and approved prior to deployment. A number of the committee's key recommendations that were implemented include:

- The removal of neutral response options from all surveys in order to have participants make a decision on their response
- ✓ Remove demographics from the Residential Family and Friends Survey
- ✓ Due to a low response rate the previous year involving the participation in The Arc of Somerset County Employee Survey; surveys were submitted and collected in departmental meetings
- Surveys were shortened by eliminating extraneous questions to improve response rate and increase focus on cultural areas
- ✓ Person Served Survey was 100% created by the Individuals we serve

Launched in 2013, an agency <u>Stakeholder Survey</u>, proving an opportunity for feedback while allowing the stakeholder to share their experience with us regarding our services. The survey link is available on our agency's website and newsletters.

Internal and External Satisfaction Surveys - Agency -wide

The chart demonstrates the types of internal and external satisfaction surveys that are completed at The Arc of Somerset County.

	Name of Survey	Department	Frequency
1	Camp Jotoni Camper Satisfaction Survey	Camp Jotoni	September
2	Funding / Stakeholder Survey	Residential Services and Employment Services	October
3	Family and Friends Satisfaction Survey	Residential Services and Employment Services	October
4	Customer Satisfaction Survey	Employment Services	October
5	Employer Satisfaction Survey	Employment Services	October
6	Person Served Satisfaction Surveys	Residential Services and Employment Services	October
7	Jerry Davis Center for Children and Families Day Care and Preschool Satisfaction Survey	Jerry Davis Center for Children and Families	October
8	Early Intervention Program Satisfaction Survey	Jerry Davis Center for Children and Families	October
9	After School and Saturday Respite Program Parent Satisfaction Survey	Jerry Davis Center for Children and Families	October
10	Parent and Child Together Program Satisfaction Survey	Parent and Child Together (PACT)	June
11	Arc of Somerset County Employee Satisfaction Survey	Quality Department	January
12	Board of Directors Survey	Executive Staff	May
13	Arc of Somerset County Training Evaluations	Quality and Clinical Services Department	Conclusion of every Arc of Somerset Training
14	Stakeholder Survey	Quality	Available on agency website 24/7 - Ongoing

Person Served Surveys have historically been created by the Residential and Employment Services Department. In 2008, the National Core Indicator (NCI) Survey was the tool that was deployed to conduct the level of satisfaction with the individuals we serve. The committee reviewed a number of anomalies that impacted the results using this tool including the fact that communication was the biggest challenge. Non-verbal individuals were surveyed however very little data could be obtained based on the nature of the NCI survey tool; the survey was too lengthy and involved a great deal of demographic data; many of our individuals have more of a receptive than expressive ability and did not have the opportunity/avenue to respond to the best of their ability.

Our individuals also were unhappy with the survey tool reporting that it was too long, questions were "stupid" as a majority of the questions centered on demographics for the interview to complete such as living arrangements as well as a pre-survey type questions to gather background information on the person. Some interviews lasted over three hours!

One thing was clear, the committee recognized that this was by far our most important survey of the year and we had to get it right. We knew that the survey had to be brief, we also discussed that perhaps we could use faces of emotion to indicate responses as indicators must exist, we thought it would be interesting to see what other tools were being used by other providing agencies. However, other providing agencies were not willing to share their tools because it was personal and formatted out of their own special needs. The answer was in front of us the entire time; we turned to our Self Advocate Committee and quite simply asked them if they would be interested in partnering with our committee in developing the Person Served Survey.

The Self Advocate Committee responded with enthusiasm, excitement, creativity and was thrilled with the challenge. The Self Advocates provided the committee with a tremendous amount of feedback. After reviewing the feedback from the Self Advocates, the committee then decided to ask the Self Advocates if they would like to create their own survey. The Self Advocates responded positively and the process began to move forward.

Once the Self Advocates developed their survey questions, we decided to ask another Person Served if he would be interested in developing the survey for the committee. The committee discussed previously to use universal pictures to indicate the answer options of Yes, No and I Do Not Know. The individual stated that he could surf the internet in search of the universal pictures and he agreed that he would develop two versions of the survey and one would include a pictorial version.

The Quality Management Committee reviewed the draft of the surveys and it was suggested that the survey be broken into two; one for residential and one for employment services. The reason for this is that many of our individuals only receive employment services from our agency and the residential questions were then broken down into the two groups. The Person Served who created the survey on the computer added additional pictures to enhance visualization during the interview process, such as including a picture of a church next to the worship question. Since 2009, this has become our process in developing the Person Served Survey.

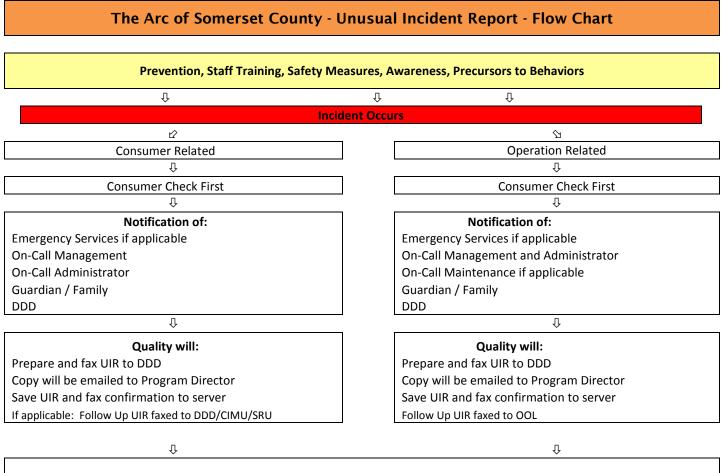
A complete listing of individuals from Residential and Employment Services is then downloaded from Therap Services, participants are randomly selected, and surveying teams established and the survey are deployed. The partnership with the Self Advocates does not end there. Following the closing of the survey, the results are presented to the Self Advocates in a Power-Point presentation and they advised us on how to distribute the results to the agency. Their suggestions were to upload the results to the agency website and to share the presentation with all Residential and Employment Service programs with the idea that the programs would show the results at a House/Floor Meeting. This has proved to be a successful partnership.

Since 2012, the survey was conducted by employees who knew the person best and we began to introduce Person Centered Thinking questions. As we continue as an agency, in our second year of practicing Person Centered Thinking, the comfort level during the process was evidentially reflected in the individual responses. When asked What's Important to You, we noted that overall the replies were not only well representative but most thoughtful which included the importance of the their families, having a relationship with friends, the importance of having a job, earning a salary, coming to work each day and ensuring a full day of active meaningful work for the day by keeping busy and completing specific job functions. We will continue to introduce Person Centered Thinking questions each year into our surveys as this not only a tool for capturing what is important to the individuals we serve, but for our employees as they are gaining a better understanding of the individual and their needs, wants and desires.

GER/UIR Meetings: In November 2011, the monthly GER (General Event Report) review was removed as a standard agenda item from the Quality Management Committee and a new monthly meeting was formed. The GER/UIR Meeting is comprised of all administrators from Residential Services, Employment Services, Associate Executive Director, Director of Clinical Services and Director of Quality. The meeting agenda is submitted to all members which lists any outstanding UIR's which require a Follow-Up UIR. Quality reviews the list individually, follow-up information is collected and Quality will then writes up and submits the Follow-Up UIR to the proper reporting DHS Office (DDD, CIMU, SRU or OOL) for closure. Quality is responsible for all UIR submission and tracking. Members of this committee

also receive monthly GER/UIR Grid data. This information is collected from Therap Services and tracked on a collection data chart. The information is then transferred to an annual excel file for the department that illustrates, by program, any and all GER's and UIR's for the time period. This data helps departments analyze and develop action steps to address any issues.

Process for review of General Event Reports (GERS) and Unusual Incident Reports (UIRS) for analysis of trends and remediation:



Follow-Up Measures: Staff Training; IDT Meeting; Clinical Support Referral; Environmental Assessment; Behavioral Assessment

Incident Reporting Processes are in place to continue on the agency's endeavor of achieving quality. The Arc of Somerset County implemented the use of Therap Services which includes an incident reporting application. Agency staff uses Therap to create internal General Event Reports. This system assists the agency's DDD-mandated incident reporting coordinator to monitor all reports and follow-up action taken on incidents and the corresponding documentation. Each incident is reviewed by appropriate levels of supervisory staff that make follow-up recommendations, as necessary. All GER reports are reviewed monthly by the Quality Department.

Therap maintains copies of all of the incidents and allows The Arc of Somerset County employees the capability of creating reports that show trends in the agency's incident reporting, such as an increase/decrease in medication errors or safety issues. Unusual Incidents are reported in accordance with DDD regulations (State of NJ Division Circular #14) and the agency's policy and procedure on Reporting Unusual Incidents.

Ongoing training and staff development that is focused on maintaining and improving work skill and quality services

Arc of Somerset County - Training Curriculum		
Agency Overview	Lifting and Transferring	
Arc Medication	Medication Challenge	
Arc Meds Recertification	Non Violent Crisis Prevention	
Consumer Health	Orientation – Privacy	
CPR Initial and Recertification	Orientation – Sensitivity	
Crisis Prevention	OSHA Initial and Recertification	
Danielle's Law	Overview of Developmental Disabilities	
DDD Medication	Person Centered Thinking	
Defensive Driving	Preventing Abuse and Neglect	
First Aid Initial and Recertification	Support Guidelines	
HR Requirements	Therap Modules – eMARS; GERs; Health Tracking;	
IHP Training / IHP Refresher	Unusual Incident Reporting	
Introduction to Therap Services	Wheelchair Securement	

The Arc of Somerset provides a varied training curriculum through the joint efforts provided by the Quality Department Trainers as well as staff from Clinical Services. The pre-service modules are mandatory trainings for all Arc of Somerset County employees and include: Overview of Developmental Disabilities, Preventing Abuse and Neglect, First Aid; CPR and DDD Medication. Employees working in service departments must have current American Red Cross CPR Certification status or they are not permitted to work with any of our Persons Served. This is a mandatory requirement. The Agency Trainer is an active member of New Jersey Training Network and is approved by DDD to conduct the pre-service training class to all employees.