Living Alternatives for the Developmentally Disabled, Inc.

L.A.D.D., Inc.

Quality Improvement Plan 2018

MISSION

We Make The Difference!

VISION

Always striving to enhance the quality of life for all we serve!

VALUES
WE VALUE P.E.O.P.L.E

PEOPLE: SEE PEOPLE AS A "WHOLE PERSON" FIRST

ENVIRONMENT: BUILD AN ENVIRONMENT OF H.O.P.E., TRUST AND HEALTHY RELATIONSHIPS

OPPORTUNITIES: CREATE OPPORTUNITIES FOR GROWTH AND MAKING G.O.O.D. DECISIONS

PROVIDE: PROVIDE GENTLE INTERACTIONS TO SHOW YOU C.A.R.E.

LEARN: LEARN TO APPRECIATE DIFFERENCES IN A TEAM AND TREAT ALL PEOPLE WITH DIGNITY AND RESPECT.

EMPOWER: EMPOWER BY USING S.O.U.L. AND POSITIVE, OPEN COMMUNICATION.

QUALITY IMPROVEMENT PLAN PURPOSE

To insure that L.A.D.D, Inc. continuously improves the quality of our services while always keeping the focus on our Mission, Vision and Values.

QUALITY MANAGEMENT METHOD

To insure all programs provide quality support services; L.A.D.D., Inc. develops and implements an approved Quality Improvement Plan that is focused on outcomes in the four categories of effectiveness, efficiency, access and satisfaction. The Quality Improvement Plan is developed, reviewed and updated during the strategic planning process by LADD Directors and trained to all management and employees.

QUALITY IMPROVEMENT PLAN

- **Quality Improvement Goals and Action Items**

The QI Plan contains goals, indicators and performance measures that align with the LADD Mission, Vision and Values as well as the Strategic Plan. The measures are monitored using routine data collection and review of processes. These processes are used to evaluate overall project performance on an on-going basis and to determine that risks were accessed prior to beginning the project, quality reviews were held, outcomes were tested, and satisfaction is monitored.

- **Quality Assurance Processes, Quality Control Measures and Quality Criteria**
    - Quality assurance activities focus on the processes being used to manage and deliver the solution to evaluate overall performance on a regular basis. Quality assurance is a method to insure that business activities will satisfy the quality standards and will define and record quality reviews, test performance, and stakeholder acceptance.
    - Quality control activities are performed continually to verify that supports are of high quality and meet quality standards set by L.A.D.D, Inc. Quality assurance also helps uncover causes of unsatisfactory results, establishes lessons learned to avoid similar issues in the future and tests to insure corrective action has been successful.
    - Team members agree on the accepted Quality criteria that will be used to evaluate final deliverable results before the results are formally approved. The Quality Improvement Plan consists of the procedure, expectations, monitoring period, report period and responsible parties.

QUALITY IMPROVEMENT GOALS AND ACTION ITEMS

Goal	Focus Areas (Performance Targets)	Interventions/Strategies (Objectives), How will LADD get there?	Performance Measures (Indicators) How will LADD know the goal was achieved?
1. Increase retention of employees. **Efficiency** Measured Quarterly by the QA Department using available data from other Departments.	Happy Employees Long Term Employees Reduced Turn Over Rate SP Goal #2	a. Continue with Management/Staff proactive contact. b. Organize and complete Staff Appreciation event in East and West. c. Assist Program Managers to develop team building activities at the program level related to the MVV. d. Ongoing training with Management on applying the MVV to employees and Above The Line Training. e. Train highly capable management team using an organized, systematic training curriculum.	1. Decrease staff conflict. 2. Increase staff moral. 3. Decrease staff turnover rate. 4. Decrease the number of staff no call no shows. 5. Decrease the number of staff who are late for their shift. 6. Increase the number of staff who report their job as satisfying. 7. Increase the number of staff who report satisfaction with Management response.
2. Increase recruitment of a diverse and skilled workforce. **Efficiency** Measured Quarterly by the QA Department using available data from other Departments.	Happy Employees Long Term Employees Trained Employees Skilled Employees SP Goal #2	a. Update the look of the Join our Team portion of the website b. Improve the ease of access to complete applications. c. Collect data on visits to the website and number of applications completed d. Participate in local job fairs, reporting on number of visits to booth. e. Complete advertising in professional media sites ie. Linkedin. Indeed, M-Live. h. Promote benefit package, and advancement opportunities on the website and at community events. i. Continue to utilize the Corporate Giving Program to promote community service and LADD's commitment.	1. Increase the amount of traffic to the website. 2. Increase the number of applicants. 3. Increase LADD's visibility in the community. 4. Increase LADD's positive public image. 5. Increase the promotion of people supported successes. 6. Increase the number of candidates hired to work with children.

3. Insure supports are HCBS compliant.
 	
Access
 	
Measured Quarterly by the QA Department using available data from other Departments.
	Inclusion
	A Place they know is their Home & choose LADD service
	Contributing citizen in their community
	Privacy
	Personal choice & Self-Directed
	Monitor Modifications
	
	SP Goal #1, 4
		a. Utilize the referral system to accommodate emergency and routine referrals.
		b. Utilize the Welcome Packet and PCP Packet to include features like improved Personal Profile, improved releases and authorizations.
		c. Utilize system by which the people supported play a critical role in selecting the staff who support them.
		  i. Update hiring policy to support person supported role in interview.
		  ii. Update release/authorization to support person supported role in interview.
		  iii. Develop interview questions and training for the person supported to use.
		  iv. Provide training to the staff to assist the person supported in the hiring process.
		d. Improve the People Supported website for ongoing training and self-directed supports.
		e. Review and revise policies to enhance a self-directed structure.
			1. Review direct support services to meet HCBS standards.
			2. Increase the number of people who have achieved greater independence in their life.
			3. Increase the number of people who have achieved greater control of their life.
			4. Provide opportunities to assist people to choose their living arrangements and services.

4. Increase the use of technology. **Efficiency** Measured Quarterly by the QA Department using available data from other Departments.	Employees use Technology People Served use Technology SP Goal #3	a. Implement an EHR. b. Train and implement EHR. c. Continue to convert existing systems to electronic formats i.e. Electronic Occupancy Logs. d. Continue to utilize communications via electronic formats i.e. Twitter. e. Utilize quick training factoids using electronic formats i.e. Twitter and Pop ups. g. Develop website/resources for people served/families.	1. Increase the number of people supported who are enrolled in an EHR. 2. Increase the number of internal systems that are managed electronically. 3. Increase the number of employees who use technology to receive LADD communication. 4. Increase the number of people supported trainings available on line. 5. Increase the use of technology to reach employees for training and communication. 6. Increase the promotion of people supported success moving them towards Self-Determination.

5. Increase the use of data to improve the quality of supports provided.
 	
Effectiveness
 	
Measured Quarterly by the QA Department using available data from other Departments.
	Knowledgeable Employees
	Solution Focused Employees
	Data Driven Employees
	Track training/resource use for people served.
	
	SP Goal #5
		a. Complete training for management regarding data analysis.
		b. Complete training with management regarding development of recommendations using data analysis.
		c. Complete review and analysis of data at all levels of management.
		d. Develop training targeted at the identified areas.
		e. Provide training to staff in targeted areas/programs.
		f. Continue using IT ticket system.
		g. Continue using the Maintenance ticket system.
		h. Continue using complaint and investigation data to mitigate risk.
		i. Utilize comprehensive referral tracking system that includes:
		  i. movement of people to less restrictive environment.
		  ii. movement of people to the correct level of care.
		  iii. days between referral, initial contact, meeting/planning, receiving staff.
		j. Continue to utilize Environmental Safety Checklist and external
			1. Reduce the number behaviorally related IRs that result in police intervention.
			2. Reduce the number of physical interventions used.
			3. Reduce the number of medication errors resulting from staff error.
			4. Improve the environment in locations staffed by LADD and reduce risk to people and the organization.
			5. Improve the tracking of people across the continuum of care.

		safety survey data. k. Continue to use barrier analysis data. l. Utilize data tracking system regarding people events attendance.	
6. Increase access to high quality supports. **Access** Measured Quarterly by the QA Department using available data from other Departments.	Knowledgeable Stakeholders LADD Name Recognizable LADD Name = Quality SP Goal, 1, 4, 6	a. Further develop website dedicated to the people supported. b. Develop and implement training for the use of public transportation. e. Develop and implement a maintenance book/program for people to use in their home (instead of a LADD management run system, manager completes with the person). f. Utilize system to monitor referrals and entrance to service and provide data for goal #5. g. Utilize an Exit Tracking system to capture information relative to why people leave service and what their needs are after they leave. Provide data for goal #5 h. Utilize QoL Survey data. i. Create and/or maintain website sources for events, businesses and locations. j. Continue to attend and participate in community events. k. Form workgroup to identify and make contact with volunteer sites. l. Form workgroups to Increase connections with local business people. m. Continue fundraising and Corporate Giving opportunities. n. Connect with local health and fitness organizations to increase healthy living and inclusion. o. Coordinate with the people supported to purchase memberships at Costco/Sam's Club and health clubs. p. Develop shopping/menu planning and cooking program. q. Revise and train the policy relative to Death of an Individual. r. Revise and train the policy relative to Transportation. s. Revise and train the policy relative to Medications. t. Review the Emergency Guidebook to make sure it fully covers community emergencies.	1. Increase the number of people served by LADD. 2. Advocating for people to have goals to achieve greater independence in their life. 3. Increase the number of people who have achieved greater control of their life. 4. Reduce the number of vacancy days. 5. Increase opportunities for people supported to be involved in local community. 6. Increase awareness and the promotion of people supported as contributing citizens. 7. Provide opportunities to assist people to choose their living arrangements and services. 8. Increase participation in the LADD Healthy Living initiative to healthy living.

7. Increase satisfaction with services.
 	
Satisfaction
 	
Measured Annually by the QA Department using available data from other Departments.
	Satisfied Stakeholders
	LADD Name Recognizable
	LADD Name = Quality
	
	SP Goal #5
		a. Complete satisfaction surveys with stakeholders at least annually.
		b. Continue to make available and monitor feedback mechanisms.
		c. Complete Staff Appreciation.
		d. Complete QA Luncheons
		e. Complete Staff Council
		f. Update and train (Supervisors) a more complete process for identification and elimination of barriers to include:
		  i. Identification of barriers per CARF
		  ii. Recommended methods to remove barriers.
		  iii. Schedule for removal of barrier.
		  iv. Person responsible for removal.
			1. Increase positive survey results with stakeholders
			2. Improve feedback received during quality improvement meetings.
			3. Increase feedback from online suggestions and feedback mechanisms.

8. Increase regulatory compliance. **Effectiveness** Measured Quarterly by the QA Department using available data from other Departments.	Trained Employees Knowledgeable Employees	a. Complete HIPAA Risk Assessment recommendations. b. Complete HIPAA Compliance Plan and train to staff. c. Complete compliance risk assessment. d. Update Corporate Compliance Plan and train to staff. e. Complete Business Continuity Plan and train to staff.	1. Increase compliance with HIPAA standards. 2. Increase compliance with OIG standards for an effective compliance program. 3. Increase LADD readiness for the continuation of service provision.

QUALITY ASSURANCE PROCESSES, QUALITY CONTROL MEASURES AND QUALITY CRITERIA

Quality Control Procedure	Quality Criteria Expectations	Monitoring Schedule	Report	Supporting Data	Where/to Whom Indicators Apply	Responsible Party
Community Accessibility	Community Accessibility is monitored in daily documentation and monthly reports.	Monthly	Annually	Documentation in programs	All Programs	PCTS Managers QA Department
Guardian/ Family Contact	Guardians will be kept informed on information ranging from medical issues to daily information. L.A.D.D., Inc. will utilize the information given by guardians concerning the amount and way they wish to receive contact tab.	Quarterly	Annually	Communication Database	All Programs All Persons Supported	PCTS Managers Regional Directors QA Department
Tracking System Developed for Training	To ensure staff are highly trained in all areas necessary to perform their job according to contracts.	Monthly	Monthly	HR Database		Director of QI/Training Manager/Supervisor Director of Services
Adult Foster Care Agreement Tracking	A database will be used to monitor the expiration date, the date agreement was mailed to the guardian and the date the agreement was signed and returned by the guardian.	Annually	NA	RCA Database and		Finance Supervisor/West HR Manager/East
Records of Revised or Deleted Forms	Tracking to be completed via PPF system.	Monthly	NA	NA		Director of Business Steering Committee
Incident Reports	Incident reports will be monitored to look for patterns, trends, potential causes, unusual and critical incidents and follow up.	Monthly/ Quarterly	Quarterly	IR Database	Berrien County Cass County Oakland County Calhoun County Van Buren County	Area Supervisors QA Department Emergency Management Committee Steering Committee RCA Committee
Specific Goals for the Individuals	Goals and Objectives will be monitored to insure that the goals are measurable,	Monthly/ Quarterly	Monthly	Services	All Programs All Persons Supported	Managers CLS Regional Director

Served in the CLS Programs	personalized, and reported for progress.				Area Supervisors QA Department
Specific Goals for the Individuals Served in SIH and Licensed Programs	Goals and Objectives will be monitored to insure that the goals are measurable, personalized, and reported for progress.	Monthly/ Quarterly	Monthly	Services	All Programs All Persons Supported	Managers Supports Coordinator QA Department
Program Reviews	Program Reviews will be completed in each program by Directors one time a month. Program Reviews cover all shifts and all program types. A quality review once a month on every shift by program Managers.	Monthly	Monthly	QA Database		Managers Regional Directors QA Department
Review Strategic Plan	The Strategic Plan will be reviewed to insure that the company is progressing towards achieving the goals that have been set.	Monthly	Annually	Steering Committee Minutes File		Steering Committee
Review of Barriers	Barriers will be reviewed and evaluated and plans of action will be created to try and eliminate any identified barriers, such as, attitudinal, architectural, communication, transportation, environmental, cultural, employment, community integration and transportation.	Monthly/ Quarterly Annually	Annually	QA Database		PCTs Managers Area Supervisors Regional Directors Steering Committee QA Department
Environmental Checklist/ Monthly Safety Monitoring	Monthly Environmental Safety Checklist will be completed at each location.	Monthly/ Annually	Annually	QA Database	All Programs	Managers QA Department
Quality Assurance Department Reports	Directors will be informed of outcomes, trends, etc. including any data that is late, or of any goals that are not being met. The Steering Committee will review reports and the QI Plan quarterly.	Monthly	Monthly	File/Email		QA Deptartment Director of Services Steering Committee
Recipient Rights Complaints/ Root Cause Analysis (RCA)	Regional Directors will report to the Steering Committee via DOS any substantiated Recipient Rights Complaints for tracking of patterns and ways to insure incidents will not continue to occur. The completed RCA is reviewed by Steering and communicated across the organization for proactive resolution.	Monthly	Annually	RCA Database		Regional Directors Director of Services Steering Committee Emergency Management Committee QA Department
Person Centered Plan Dates	The dates of all Person Centered Plans will be tracked to insure completion of procedures and documentation as well as pre-planning.	Monthly/ Quarterly	NA	QA Database	All Programs All Persons Supported	Managers Area Supervisors QA Department

Compliance Audits/ Responding to Regulatory Agency audits and surveys	Audits will be reviewed and tracked for monitoring and patterns. Corrective action plans will address any finding with an appropriate response. The plan will be sent to the regulatory agency by the stated due date and records maintained by L.A.D.D., Inc.	Ongoing	Annually	Compliance Audit Database		Steering Committee Regional Directors Managers Director of Services
Annual Quality Assurance Audits	The QA Department, Area Supervisor and Managers will complete internal audits on an annual basis for each program.	Annually	Monthly	QA Database		Managers Area Supervisors QA Department
Requested Reports to RMHA'S Monthly summary of data SIL and Licensed, Day. H2015 ind. Data sent	Reports will be sent as requested.	Daily/ Monthly/ Quarterly	Quarterly Annually	Copies Maintained at the Regional Office		QA Department Regional Directors
Emergency Management Committee	The Emergency Management Committee will monitor all areas that deal with health and safety, and review the Strategic and Quality Improvement Plans. Will report to the Steering Committee findings.	Monthly	Monthly	Director of QA files EMC		Management
Billing Verification Review	Billing verification reviews will be completed to insure documentation is being completed correctly.	Annually	Quarterly			QA Department
Risk Management	Functions of the business will be reviewed to identify potential risks and plans to address high risk areas	Annually	Annually		All systems related to Services, QA, HR, IT and Compliance	IT Director Compliance Officer Steering Committee
Outcome Reports	All reports will be completed and included on the QI Plan.	Semi-annual/ Annual	Semi-annul/ Annual	Outcome Management Reports		Director of Business Steering Committee
Quality Assurance Committee	The QA Committee will continuously seek ways to improve the quality of the provided supports. The committee will include persons supported, guardians, staff, and Management.	Semi-Annual	Semi-annual	Minutes	Stakeholders	Regional Directors QA Department Steering Committee
Staff Council -	The Staff Council will continuously seek ways to improve the quality of the provided supports and the workplace. The committee will include staff, and Management.	Annual	Annual	Minutes	Employees	Regional Directors QA Department Steering Committee
Satisfaction Surveys	Surveys will be conducted to provide L.A.D.D., Inc. information on areas of success and areas requiring improvement.	Annual	Annually	Satisfaction and Survey Monkey	Stakeholders	QA Department Steering Committee

Person Centered Plan Survey	Surveys will be conducted to provide L.A.D.D., Inc. information on areas of success and areas requiring improvement.	Annual	Annually	QA Databases	All Programs All Persons Supported	QA Department Regional Directors Area Supervisors Managers
Company wide Annual Evaluations	All Performance Evaluations to be completed at the end of the calendar year of the year being completed.	Annual	Annually	HR Databases	All Management	HR Department Area Supervisors Regional Directors Directors
Employee Turnover Rate and New Hire Turnover at the one year mark.	The amount of employee turnover will be monitored.	Quarterly	Annually	See Annual Outcome Management Report		Director of HR Area Supervisors QA Department
Characteristics of the People We Serve	This information will be collected to aid in understanding or interpreting outcomes, to give an overview of the needs of the people supported, and may be incorporated into outcome measurement reports.	Annual	Annually	Person Served Database	All Programs All Persons Supported	QA Department Steering Committee
CCP and HIPAA Compliance	All compliance and HIPAA policies will be monitored for compliance.	On-going	NA	Annual QA Information Company QI Check sheet		Compliance Officer Steering Committee
Policy and Procedure Review	Policies and Procedures will be reviewed to insure that they are updated with company changes.	On-going	N/A	Annual QA Information Company QI Check sheet		Steering Committee Sub-Committees QA Department
Annual and Semi Annual Training	All required trainings will occur during Annual, Semi- Annual or a specialized training each year. Contracts will be reviewed to insure that all requirements are met with the RMHA as well as additional trainings set up that have an impact on the services we provide as noted on our Strategic Plan.	Annual/On-going	N/A	HR Database L.A.D.D., Inc. Training website.		Director QI/Training Training Supervisor

Additional quality control and review items are added ongoing throughout the year. Information is available in the Steering Committee minutes.