

# Shadowfax

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Title	Quality Assurance Policy
Policy Number	ORG.1020.000.000
Initiating Authority	Policy Committee
Approved By	Compliance Committee 11-3-21
Origin Date	October 13, 2021
Revision Date	
Effective Date	December 1, 2021
Next Review Date	June 2022
Associated Policies	ORG.1011.000.000 Quality Management
Associated Procedures	
Associated Documents	

## I. POLICY STATEMENT

Shadowfax is committed to providing high quality care to individuals in our programs. In pursuit of continuous improvement, Shadowfax will evaluate organizational performance to identify and act on opportunities to improve service delivery, customer/individuals' satisfaction, and compliance with our policies procedures, federal, and state regulations.

## II. PURPOSE

This policy describes methods Shadowfax will use to measure, evaluate, and improve performance against set standards.

## III. SCOPE

This policy applies to all Shadowfax services and programs.

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## IV. GENERAL

This policy is based on the standards set by PA Code Title 55 Chapter 6100, 6400, 2380 and 52, statues and regulations, 2390, PA code 6, Chapter 11 and Older Adult Daily Living Center.

Shadowfax believes in using the Plan-Do-Check-Act (PDCA) model for continuous improvement. The PDCA model is a repetitive, disciplined approach that plans for process change, evaluates it, and then uses the results to implement and/or improve the changed processes.

The “Plan” component is the organization’s Quality Management Plan, see policy ORG.1011.000.000 Quality Management, which includes data-driven performance measures, improvement targets and strategies.

The “Do” component is the implementation, including education, of the Quality Management Plan. – Implementing the QM Plan

The “Check” component includes measurement and analysis, including the Quality Assurance checks outlined in this policy.

The “Act” component includes taking the results of Quality Assurance and other analysis to confirm practices that are working, inform and educate all involved, and identify opportunities to improve that are included in the next Quality Management plan iteration.

## V. POLICY

Shadowfax will use several methods to measure and analyze the organization’s performance.

### Quality Assessment and Improvement (QA & I) Process

The PA Office of Developmental Programs (ODP) manages a quality assessment and inspection process to help entities ensure they are complying with 55 Pa. Code Chapter 51 or Chapter 6100 regulations, federal and state requirements, and provider

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Note: The term “Individual” is synonymous with resident, client, patient, consumer, or participant.

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agreements. Shadowfax's Quality Management department has responsibility to conduct Shadowfax's QA & I process according to the timelines set out by the ODP. Shadowfax must maintain a QA & I contact with the ODP. The Quality Management department lead, the Quality Assurance Specialist, is the QA & I contact for Shadowfax.

The QA & I process runs on a three-year cycle, with an on-site review in the first year and then two years of self-assessments. As part of this process, Shadowfax will conduct an annual self-assessment of its performance using the ODP QA & I tool. The results of the self-assessment will be shared with the Compliance Committee and used by the Quality Management Team as input to build quality improvement plans for Shadowfax. Any areas identified during the self-assessment will be remediated within 30 days.

## Home Visits

Shadowfax will create and maintain procedures for unannounced visits to homes in the Residential (RES) program as follows:

- Visits must be made on a monthly basis, at a minimum
- Visits must be made by the CEO, Quality Coordinator, and other senior staff
- Visits must be made at different times of the day and night, and different days of the week.
- Visits include observation of operations and delivery of care in the homes
- Visits include interacting with individuals supported in the home to ensure the individuals are properly supported and are satisfied with the support and care they are receiving.
- Results of visits will be forwarded to the Quality Department for analysis and resulting action plans. The Quality Department prepares reports on the home visit results and shares them with the Compliance Committee on a monthly basis.

In addition, members of the Quality Department will do quarterly visits of the RES homes and combine those results with the senior staff results into specific action plans for improvement.

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## Other Quality Assurance Procedures

All Shadowfax departments will create and maintain their own additional procedures for quality assurance and communicate those processes to the Quality Management department, for example, things such as medication checks, paperwork and signature inspections, risk assessments, safety checks, etc.

## VI. **OVERSIGHT**

Shadowfax's Compliance Committee or their designee(s) (the "Approved By") shall be in charge of the administration of this Policy. The Approved By responsibilities include:

1. Identifying the action steps to come into compliance and directives to maintain compliance and implement the action steps.
2. Periodically reviewing this Policy and monitoring compliance to it.
3. Training responsible parties on their obligations under the Policy.

## Revision History

Name	Date	Reason for Changes	Version